

General Circular Letter No: 02-17/2005

My No:-DMH/A/2004/15  
Ministry of Health  
Mental Health Unit  
"Suwasiripaya"  
385, Deans Road  
Colombo 10.  
1<sup>st</sup> February 2005



PDHS/DPDHS/Consultant Psychiatrists/  
Divisional Directors of Health Services/  
MOH/MS/DMO/MOMH

**Providing Psychosocial and Mental Health Support  
for Tsunami affected population**

The committee appointed by Her Excellency the President had assigned mental health professionals to the affected areas according to the human resources schedule in the accompanying document.

Please be kind enough to coordinate the activities at district/divisional levels to ensure that appropriate services are provided to those in need in the affected areas.

Following activities have been planned.

(1) A two day workshops for multisectoral groups at MOH level-

- Please coordinate this activity with the Regional Psychiatrists regarding the date place etc. telephone number annexed. MOH office may be suitable.
- Following resource participants to be invited.
  - Manager of Welfare Centres
  - Grama Niladhari
  - Family Health Workers
  - Child Protection Officer (CPO)
  - Teachers
  - General Practitioners
  - Traditional Leaders
  - Psychosocial Workers
  - Field Officers from NGO, INGO CB
  - Sumithrayo
  - Police, Army
  - Religious Leaders
- A per diem of Rs.400/= to be paid to each
- A file cover, pen and half sheets to be provided
- A vehicle to be hired for field visit
- A budget proposal by MOH areas to be submitted to WHO through Director Mental Health Services

(2) Service Provision in the area

- Please ensure that necessary transport is available for MO/MH, MOH to visit the camps/community. Hiring charges for vehicles could be paid by WHO.
- Ensure that necessary drugs are available in the clinic centers.

Your cooperation for improving mental health and Psychosocial activities is greatly appreciated.



**Dr. H.A.P.Kahandaliyanage**  
**Director General of Health Services**

**MINISTRY OF HEALTH**  
**POLICY ON PSYCHOSOCIAL AND MENTAL HEALTH ISSUES**  
**RELATED TO THE TSUNAMI DISASTER IN SRI LANKA**

Natural disasters take a heavy toll on the psychosocial and mental health of those affected and can significantly increase the risk of distress, psychological symptoms and mental disorders. Some level of mental distress and/or psychological reactions is expected and normal. Some 5 to 10% are likely to have a recognizable mental disorder. Appropriate, timely and culturally sensitive interventions are needed. The challenge is meeting those needs in a setting that traditionally has been inadequate in mental health resources.

The Ministry of Health has responded by putting together a plan for psychosocial and mental health issues in the wake of the tsunami disaster. This plan envisages actions that are multi-sectoral and interdisciplinary in nature. The dignity of those affected should be preserved in all actions at all levels of the implementation of the plan. As far as possible, those affected should be involved in decision-making on matters relating to their psychosocial wellbeing and mental health. All efforts directed towards psychosocial and mental health should conform to the following action plan.

#### **I. Primacy of Psychosocial Assistance**

The following social interventions are considered crucial,

- Providing a safe and secure environment
- Meeting the basic needs of those affected, such as food, water and shelter
- Helping those affected reunite and be in touch with relatives and friends
- Normalizing life as much as possible for those affected, even amid difficult circumstances

It needs to be emphasized that majority of affected people do not need any formal counseling, psychotherapy or medical treatment. Indeed, some forms of counseling like intrusive psychological debriefing can even be harmful.

#### **II. Training of Personnel**

Training of health care and other sectors workers on basic psychosocial and mental health aspects is important. This includes doctors, nurses, midwives, and relief/NGO personnel, social workers, administrative staff, religious leaders, police, probation and childcare officers, and education department staff.

The training is aimed at increasing the competence of service providers on issues impacting on psychosocial and mental health. The training should include how to sensitively approach affected people and how to implement appropriate interventions. The training should be ongoing, with provisions for supervision, follow up and preparedness for immediate assistance and to respond to future needs. Training should emphasize the needs of groups requiring special assistance.

#### **III. Strengthening the Health Care System to deliver Mental Health Care**

The health care system needs strengthening to provide adequate mental health care. This care should be based on the community mental health approach. Early identification and management of people having mental disorders and other issues impacting on mental wellbeing at primary care level and referral systems to appropriate care should be established. Full mental health services should be available and accessible at a district level.

Important Conditions for Assistance:

All assistance pertaining to psychosocial and mental health care should be coordinated by the Psychosocial and Mental Health Secretariat established by the Ministry of Health.

All interventions should be culturally sensitive to the Sri Lankan context. Caution must be exercised in applying interventions and trainings from other countries as these may not be appropriate or applicable to the Sri Lankan context.

All interventions should conform to scientifically valid principles. A useful document is the WHO document on Mental Health in Emergencies.

All external expertise is valued and appreciated. However, it should be channeled through the Psychosocial and Mental Health Secretariat at the Ministry of Health for appropriate utilization and maximum benefit. An Ethical Review Committee has been suggested to oversee projects related to psychosocial and mental health care.

## NATIONAL ACTION PLAN FOR PSYCHOSOCIAL AND MENTAL HEALTH ETHICS

### Research

Any research should confirm to the internationally accepted standards for:

1. Autonomy
2. Non-maleficence
3. Beneficence
4. Justice
5. Respect for local culture
6. Professional responsibility

The concerns on research on victims of the Tsunami include;

i) Vulnerable people: Their decision making capacity may be compromised and deprive them of asserting their autonomy. Certain categories are more likely to be misled or mistreated than others. Those include;

- Children
- Pregnant women
- Racial groups
- Economically disadvantaged groups

ii) Protection: There may be permissible level of risk to which these subjects could be exposed. Recalling traumatic events during conversation could have negative effects.

iii) Informed consent. This is fundamental to the protection of humans in research. Research is not necessarily therapeutic. Every precaution should be taken to ensure that principles of autonomy, non-maleficence, beneficence & justice are incorporated into the proposals. Protection should be offered to subjects of those with compromised capacity for free consent or those of a dependant status. Consent forms should be available in all three languages.

iv) Risk benefit analysis: The principal of non-maleficence, beneficence should again be applied. This research should certainly do no harm.

v) Justice in selection of subjects: The criteria for inclusion and exclusion of subjects should be clearly stated, giving reasons for such activity.

vi) Conflicts of interest: If the researches are employed or funded by any agency, this should be clearly stated, as should be the benefits to the subject, researcher, and the outcome of the research.

(This document should be considered as a facilitator of research rather than a barrier)

## Committee

The composition of the Ethical Review Committee should be wide. Representatives should include;

1. Legal professional (retired judge) – who could be the chairperson.
2. Psychiatrist – Two nominees from the Ceylon College of Psychiatrist.
3. Academics – 2 nominees, one of whom should have an interest in statistics.
4. Principal of a school.
5. College of Paediatricians / NCPA – 2
6. NGO – 2
7. SLMA – 1
8. Others
9. Convenor

### Form for application

Project title:

Investigators:

Name

Address

telephone

Principal

Others

**Proposed study:**

Introduction:

Study design:

Type of study:

Sample size:

Inclusion criteria (with reason):

Exclusion criteria (With reason):

Procedure in brief:

Benefits to participant, community (social & medical):

Risk to participant:

- Psychosocial
- Mental Health
- Economic
- Bias

Statistical analysis:

Conclusion of the study:

Confidentiality:

Conflicts of interest:

Budget:

Funding:

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I/ We declare this in the best of my / our knowledge, the information provided is correct.

Signature

Principal

, Name

Signature

Others



## HUMAN RESOURCE SCHEDULE FOR PSYCHOSOCIAL AND MENTAL HEALTH SUPPORT

| REGION     | PSYCHIATRIST   | MOH AREAS  | MO   | PSYCHOLOGISTS /<br>COUNSELORS               | HEB /<br>FHB            | NGOs  | TEACHERS  |
|------------|--|--|--|---|-------------------------|---|---|
| Colombo    | Dr.(Mrs.)N.Dolage<br>2765886, 071 3041239<br>Dr.(Mrs.)H.Perera<br>Dr.R.Weerasundara<br>2821412   | Moratuwa<br>Dehiwela<br>Mattakkuliya<br>Modara   | Dr.Indikefiya<br>Dr.de Silva<br>Dr.Riviraj                                     | Dr.Varuni Ganepola<br>071 2261011           | Dr.Sajeevani<br>2696606 | "ESCAPE"<br>Ranjan Rajasingham<br>4201434<br><br>"Sumithrayo"<br>Nalini Ellawala<br>2682535 | Regional Director of<br>Education<br>(Western Province)<br><br>2693894  |
|            | Dr.U.Peiris 071 2292494<br>Dr.L.Fernando<br>2933447<br>Prof.K.Kuruppuarachchi  | Ja - Ela<br>Wattala<br>Negambo   | MOMH,<br>Negombo   | Ms.Roshan Dammapala<br>077 6302858, 2552249 | Dr.Nirupa<br>2696606    |   |   |
| Kalutara   | Dr.(Mrs.)S.Wijetunga<br>Dr.(Mrs.)P.Ransinghe<br>(Thursday)   | Panandura<br>Beruwala<br>Kalutara  | MOMH,<br>Panandura   | Dr.Padmini Mendis<br>2587853                | Dr.Asha<br>2696606      |   |   |
| Galle      | Dr.G.Jayawardena<br>Dr.(Mrs.)C.Hewage<br>077 3032431<br>Dr.J.Mendis<br>(Monday) 071 4760795<br>Dr.(Mrs.)I.Karandawala                                  | Balapitiya<br>Bentota<br>Induruwa<br>Ambalngoda<br>Hikkaduwa<br>Rathgama<br>Unawatuna<br>Habaraduwa<br>Ahangama<br>Elpitiya<br>Galle | 2 MOMHs :<br>Balapitiya<br>& Elpitiya<br>6 MOHs                                | Ms.Harini Amarasooriya<br>077 7880737       | Dr.Nirupa<br>2696606    | "NEST"<br>Eric Samuel<br>2931680  | Regional Director of<br>Education<br>(Southern Province)<br>091 2234157 |
| Matara     | Dr.(Mrs.)G.de Silva<br>Dr.(Mrs.)B.Karunatilake<br>(Thursday) 2804480<br>Dr.N.Fernando<br>Dr.(Mrs.)U.Gunawardena<br>(Friday)                            | Devinuwara<br>Dikwella<br>Weligama<br>Matara   | 4 MOMHs<br>Needs more MOs<br>(Pre interns are<br>to be assigned<br>from Galle) | Dr.Dilanthi Weerasinghe<br>077 6535821      | Dr.Sajeevani<br>2696606 | "CPA"<br>N.M.Savery<br>2597245<br><br>"Ahimsa"<br>Monica Alfred<br>4406701                  |   |
| Hambantota | Dr.A.Jeyasekara<br>Dr.S.de Silva 077 3017072<br>Dr. A. Sumathipala<br>077 7378901<br>Dr.L.Fernando<br>2933447<br>Dr.H.Gambhaera<br>(Wednesday) 2791544 | Tangalle<br>Ambalantota<br>Hambantota<br>Tissamaharamaya   | 2 MOMHs<br>Needs more MOs  | Dr.Gamila Samarasinghe<br>077 7292909       | Dr.Asha<br>2696606      | "NEST"<br>Eric Samuel<br>2931680<br><br>"Sarvodaya"<br>Vinya Ariyaratne<br>2655255          |   |

## HUMAN RESOURCE SCHEDULE FOR PSYCHOSOCIAL AND MENTAL HEALTH SUPPORT (cont...)

| REGION      | PSYCHIATRIST  | MOH AREAS  | MO             | PSYCHOLOGISTS /<br>COUNSELORS   | HEB /<br>FHB          | NGO  | TEACHERS  |
|-------------|---|--|----------------|---|-----------------------|--|---|
| Ampara      | Dr.W.A.L.Wkramasinghe<br>081 2387317<br>Dr. Jayananda<br>Dr. A. Sumathipala<br>077 7378901<br>Dr.S.Pandunawala<br>Dr.(Mrs.)S.Aramibepola<br>071 4297899<br>3 Indian Psychiatrists | Kalmunai(North&South)<br>Damana<br>Lahugala<br>Akkaraipattu<br>Saindamaruthu<br>Ninthavur<br>Karaitivu<br>Poththuvil<br>Thirukkivil<br>Addalaichchenai<br>Alayadivembu<br>Sammanthurai |                | Ms.Sarala Ermanuel<br>5815712<br>Ms.Eshani Ruwanpura<br>077 3167745                 | Dr.Prasila<br>2696606 | "Sarvodaya"<br>Vinya Ariyaratne<br>2655255<br><br>"Senwelanaka Foundation"<br>Tamara Curits<br>024 2220490 | Regional Director of<br>Education<br>(Northern & Eastern<br>Provinces)<br>026 2222876 |
| Batticaloa  | Dr.Ganeshan<br>077 6063898<br>Dr.T.Gadambanathan<br>077 7357535, 4614216  | Batticaloa<br>Chenkaladi<br><br>Kattankudy<br>Valaichchenai<br>Eravur  | Needs more MOs | Ms.Gethsie Chanmugam<br>2580242   | Dr.Yogi<br>2696606    | "EHED"<br>Rev.Sylvester<br>065 2222125<br><br>"ESCO"<br>S.Spirtheon<br>065 2224728                         | Regional Director of<br>Education<br>(Northern & Eastern<br>Provinces)<br>026 2222876 |
| Trincomelee | Dr.T.Gadambanathan<br>077 7357535, 4614216<br>Dr.D.P.D.Wijesinghe   | Trincomelee<br>Kinniya<br>Muttur<br>Seruwila<br>Kuchchawelli<br>Echilampattu   | 1 MOMH         | Ms.Kusala Wettasinghe<br>077 6706848, 2816932<br>Mr.Ananda Galapatti<br>077 3017974 | Dr.Uthpala<br>2696606 |  |   |
| Jaffna      | Prof.D.Somasundaram<br>026 2212759<br>Dr.Sivayogan  | Chavakachcheri<br>Kayts<br>Kopay<br>Manipay<br>Pointpedro<br>Klinochchi<br>(Kandannalai<br>Poonakari<br>Pala)<br>Mullaitivu  |                | Dr.Champika Soyza<br><br>Mr.Francis Wikes<br>081 22324368                           | Dr.Yogi<br>2696606    | "Shanthiahm"<br>Chandrasekara Sarma<br>021 2223338<br><br>"Ahavoli"<br>Fr.Rajanayagam<br>021 2222856       |   |

### SERVICE PROVIDERS (for all the districts)

|                             |                                 |                                      |                      |
|-----------------------------|---------------------------------|--------------------------------------|----------------------|
| Managers of Welfare Centres | Child Right Protection Officers | Traditional Practitioners (Aurvedic) | Psychosocial Workers |
| Gramasevaka                 | Teachers                        | Field Officers:                      | Samurdhi Officers    |
| PHI                         | General Practitioners           | CBO                                  | Police/Army          |
| FHW                         | Paediatricians                  | NGO                                  | Religious Groups     |
| Child Protection Officers   | Psychologists                   | INGO                                 |                      |

**SUGGESTED MODULES FOR TRAINING / CAPACITY BUILDING OF  
SERVICE PROVIDERS IN PSYCHOSOCIAL AND MENTAL HEALTH**

**FORMAT:**

Combination of short lectures and small group discussions and role plays

**DAY 1:**

| Time               |   |
|--------------------|---|
| 8.30 – 9.00 am     | Registration and pre-workshop assessment  |
| 9.00 – 9.30 am     | Introduction of participants and overview   |
| 9.30 – 9.45 am     | Normal response to disaster (Lecture)   |
| 9.45 – 10.30 am    | Case study and small group discussion " <i>Thirty years old female lost husband and one child (one child surviving) Discuss the responses</i> " |
| 10.30 – 10.45 am   | Tea Break   |
| 10.45 – 11.00 am   | Children and disaster (Lecture)   |
| 11.00 – 11.45 am   | Case study and small group discussion " <i>Surviving child's response and dealing with the problems</i> "                                       |
| 11.45 – 12.00 noon | Problem solving using existing coping mechanisms  |
| 12.00 – 12.45 pm   | Small group discussion on problem solving with role plays   |
| 12.45 – 1.30 pm    | Lunch   |
| 1.30 – 4.30 pm     | Role play on further problems identified during the field visits  |

**DAY 2:**

| Time             |  |
|------------------|--|
| 9.00 – 9.45 am   | Small group discussion<br>Identification and prioritization of problems identified during the field visit  |
| 9.45 – 10.00 am  | Violence against women and children (Lecture)  |
| 10.00 – 10.45 am | Small group discussion on violence against women and children  |
| 10.45 – 11.00 am | Tea Break  |
| 11.00 – 12.30 pm | Presentation of group work identifying problems and plan of action   |
| 12.30 – 1.15 pm  | Lunch  |
| 1.15 – 1.45 pm   | Management of Psychosocial Sequalea and referral   |
| 1.45 – 2.45 pm   | Role play and small group discussion from example cases experienced by participants.<br><i>"Insomnia with recalling events / Somatisation<br/>Past history of psychiatric illness with hallucinations<br/>Male left without wife and family<br/>Female left without husband and family<br/>Single parent and children<br/>Children<br/>Adolescents and<br/>18 – 30 year age group , males and females"</i> |
| 2.45 – 3.15 pm   | Interactive session with case vignettes and review of learned material   |
| 3.15 – 3.30 pm   | Tea Break  |
| 3.30 – 4.30 pm   | Question and answer- from group to resource persons  |
| 4.30 pm -        | Post workshop assessment   |