

# 2012 Emory Global Health Case Competition

## “Opportunities and Minefields: CanAID’s Strategy for Sri Lanka”

The Emory Global Health Institute Case Writing Team



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**Emory Global Health Institute**

All characters, organizations, and plots described within the case are *fictional* and bear no direct reflection on existing organizations or individuals. The case topic and descriptions of circumstances in Sri Lanka, however, are accurate representations of what is available in the literature. The case scenario is complex and does not necessarily have a correct or perfect solution, and thus encourages a judicious balance of creative yet perceptive approaches.

The authors have provided informative facts and figures within the case and appendices to help teams. The data provided are derived from independent sources, may have been adapted for use in this case, and are clearly cited such that teams can verify or contest the findings within their recommendations, if it is pertinent to do so. Teams are responsible for justifying the accuracy and validity of all data and calculations that are used in their presentations, as well as defending their assertions in front of a panel of knowledgeable judges representing different stakeholders.

## I. Introduction

As the Canadian government's international aid agency, CanAID has a long and distinguished history of development assistance and is considered a key institution in promoting Canada's image globally. In recent years, CanAID has experienced pressures from many different levels. The government has increasingly called for a concerted focus on high-value projects with significant soft power (intangible) returns for the country. In addition, the public and media have openly criticized CanAID's bilateral relationships, especially those with countries where human rights abuses have taken place.

With the re-election of Prime Minister Stephen Harper in May 2011 and a newly-appointed agency director (Sofi Kannan, previously the head of the United Nations High Commission for Refugees [UNHCR] in East Africa)[1], CanAID has recently undertaken a sweeping re-evaluation of all of its initiatives. In the wake of all the criticisms, Sofi requested a full review of each of CanAID's country programs and how these meet the agency's overarching priority goals of improving the health and development of populations, increasing food security, and stimulating sustainable economic growth worldwide. The six-month evaluation process began on October 1<sup>st</sup>, 2011, with the expectation that each country-level director would present recommendations on April 2<sup>nd</sup>, 2012 in Ottawa.

CanAID's country director for Sri Lanka, Bruce Anderson, was cognizant that he was responsible for setting and justifying the agency's strategic priorities for Sri Lanka. He had been wary of the first report (compiled by a Colombo-based firm) that he had intended to use in his strategic planning process. The report appeared to convey data that were simply echoes of the Sri Lankan government's recent press statements, and these are widely believed to be defensive standpoints that are aimed at preserving the government's image. Bruce had worked in Sri Lanka for a long time and understood the country's complex history. Given his experiences, he felt uneasy about presenting data that underestimated the health and social disparities between the minority Tamils and majority Sinhalese. Also, since Canada is home to a large Sri Lankan Tamil populace which has consistently been vocally critical of the Sri Lankan government, he knew that CanAID's actions would have political ramifications for the Canadian government.

Bruce had therefore commissioned a new report from an independent, internationally-renowned firm that specializes in health and development technical assistance. Bruce has just received the report (evening of March 26<sup>th</sup>) and has a week before his presentation in Ottawa. Using this new situational assessment, Bruce and his staff are aiming to finalize their recommendations to CanAID through consultations with multi-disciplinary teams – the consultations are scheduled for Saturday, March 31<sup>st</sup>. With butterflies in his tummy, Bruce looks down at the new 22 page report and starts to read...

## II. Sri Lanka – At a Glance

Sri Lanka is an island republic located off the coast of India.

### Demographics [2]

- Population Size: 21,481,334; 14% Urban; Population Growth Rate: 0.913%
- Life Expectancy at Birth: 75.94 years
- Ethnicity: Sinhalese (73.8%); Sri Lankan Moor (7.2%); Indian Tamil (4.6%); Sri Lankan Tamils (3.9%)\*

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\* This census did not include data from the Northern and Eastern Provinces that were in conflict, and are dominated by Sri Lankan Tamils. The East-West Center estimates that Sri Lankan Tamils account for up to 9% of the population

- Religions: Buddhism (69.1%); Islam (7.6%); Hinduism (7.1%);<sup>†</sup> Christianity (6.2%) [3]
- National Languages: Sinhala (74%), Tamil (18%)

### Country Indicators

- GDP (purchasing power parity [PPP <sup>‡</sup>]): US\$ 115.1 billion
- GDP per capita (PPP): US\$ 5,600
- Maternal Mortality Rate: 39 deaths/100,000 live births
- Infant Mortality Rate: 9.47 deaths/1000 live births

### Government

Sri Lanka's government is democratically elected and has a president and parliament. President Mahinda Rajapakse was re-elected in January 2010 for a 6-year term with an 18% margin, though Sri Lankan Tamils in the Northern and Eastern regions reportedly had difficulty voting due to an inability to register and inaccessibility of polling places.[4] Much of the political power in Sri Lanka is currently held by the president's family. The president's brother serves as Defense secretary; another brother is a member of parliament; and another heads two ministries. Other family members are also involved in Sri Lanka's government, collectively controlling an estimated 70% of the country's budget.[4]

The 225 representatives in Sri Lanka's Parliament were most recently voted into six-year terms in April 2010. By party or alliance, they consist of the United People's Freedom Alliance (144 seats), United National Party (60 seats), Tamil National Alliance (14 seats), and the Democratic National Alliance (7 seats).[2]

## III. History of Conflicts

### Post-colonial History of Ethnic Conflict

Under British rule that began in 1815, Tamils and high-caste Sinhalese enjoyed high stature and were overrepresented in parliament, government service, and academia. Sri Lanka was granted independence from British control in 1948, after which a majority Sinhalese backlash resulted in decreased rights and status for the Tamil minority, including the institution of Sinhalese as the only national language in 1956 (although this was later reversed), decreased humanitarian aid to Tamil regions, and fears of Sinhalese colonization of the northern Tamil provinces.[3] After various attempts at reaching a political solution (e.g., power-sharing proposals and pacts) had failed, Tamils called for a separate state in the early 1970's. This also led to the rise of numerous political and militant Tamil separatist parties. One of these parties was the Liberation Tigers of Tamil Eelam (LTTE). Along with other separatist groups, the LTTE attacked police and rioted, and in 1983, they ambushed a Sri Lankan army patrol, killing 13 soldiers. Sinhalese rioting and violent reaction over the next few days led to the destruction of thousands of Tamil houses and businesses and more than 2,000 Tamil deaths, beginning the Sri Lankan Civil War and the flight of large numbers of Tamils to India and Western countries.

### Civil War

Since 1983, the LTTE and Sri Lankan government have fought successive wars for control of the Northern and Eastern provinces. Numerous ceasefire periods were used by the LTTE to recruit and re-arm troops, and multiple national and international peace efforts have failed. The LTTE has fought the

<sup>†</sup> Most Sinhalese are Buddhist and most Tamils are Hindu

<sup>‡</sup> Purchasing power parity is an adjusted estimate of gross domestic product (GDP) that accounts for the fact that a common basket of goods and services will have different costs across different countries.

army outright, but was also responsible for numerous assassinations and suicide bombings, leading the United States Federal Bureau of Investigation to call the group “one of the most dangerous and deadly extremist organizations in the world.”[3]

In 2002, after 19 continuous years of conflict, the Sri Lankan government and LTTE signed a Memorandum of Understanding and a permanent ceasefire agreement, leading to a period of relative calm. In 2004, however, internal conflicts emerged within the LTTE, leading to a split between the Northern and Eastern factions of the group, which then fought against each other.[3] In 2005, the ceasefire officially broke down and hostilities between government and LTTE forces resumed.

## **Major Events**

### 2004: Indian Ocean Tsunami

In December 2004, the deadliest tsunami in history struck the coast of Sri Lanka [5]. More than 30,000 casualties were reported, leaving many civilians homeless. The tsunami resulted in a breakdown of social structures and disruption of economic activity. Sri Lanka was not prepared to handle a natural disaster of this magnitude. Many internally displaced people from the Northern and Eastern regions ended up in relief camps in areas controlled by the LTTE, where they had difficulty accessing water, basic needs and sanitation.[6] Several health challenges emerged from the tsunami including contamination of the water supply, exposure to water-borne illnesses such as cholera, and increased risk of malaria due to stagnant water.[7] The tsunami also created an increasingly unstable environment that served as a catalyst for increased violence. Due to conflicts over the distribution of aid in LTTE-controlled regions, emergency response assistance was insufficient, and aid organizations were given little access to displaced persons.[6]

### 2006: Renewed Violence-Water Dispute

In 2006, violence erupted again. The triggers for the conflict included: the detainment, shooting, and killing of five Tamil high school students by government forces; the massacre of six Sinhalese rice farmers; as well as the killing of thirteen Tamil civilians in northern Sri Lanka. In reaction to these and other incidents, the LTTE closed the sluice gates of the Mavil Aru reservoir, cutting off the water supply to 15,000 villages in government-controlled areas. After several unsuccessful negotiation attempts, the Sri Lankan Air Force attacked the LTTE, allowing ground troops to re-open the reservoir gates.[8] Government attacks on the rebel forces surrounding the reservoir continued even after the gates were opened.

### 2009: Vanni Beach Shellings

Between September 2008 through May 2009, it has been reported that the Sri Lankan military advanced into the predominantly Tamil Vanni region, “using large-scale and widespread shelling, causing large numbers of civilian deaths.”[9] It is estimated that 330,000 civilians were trapped before the advancing military, many of them in designated ‘No-Fire Zones.’ The military shelled these zones, reportedly with full knowledge that they were packed with civilian refugees.[9] A review panel assembled by the UN have found credible allegations that hospitals in ‘No-Fire Zones’ were systematically targeted, and that Red Cross evacuation ships and UN food supply lines were also attacked. Although hotly contested, the panel estimates that anywhere between 20,000-40,000 civilians died as a result of the shelling on beaches.

The Sri Lankan civil war ended in May 2009 when the Sri Lankan Government's troops captured the last of the LTTE-held coastline and killed the LTTE leader, Velupillai Prabhakaran.

#### IV. Social Costs of Conflicts

##### Sri Lankans Displaced

Over the years, continued violence and tension in Northern and Eastern regions has led to the displacement of large numbers of citizens both within Sri Lanka and to other countries. Thousands of people became Internally Displaced Persons (IDP) or refugees (status definitions, [Exhibit A](#)). Initially, middle class families emigrated, and were followed by poorer families who sold most of their possessions in order to flee the country. The most complete IDP data comes from the UNHCR's own collection efforts, which count the volume of people that UNHCR has served each year since 1993 ([Exhibit B](#)).<sup>[10]</sup> These statistics, while not perfect, are considered the most accurate and impartial. UNHCR estimates that fighting drove more than 800,000 Tamils from their homes, prompting the UNHCR to identify them in 2004 as the largest asylum-seeking group worldwide.<sup>[11, 12]</sup> In the final year of the Civil War alone (2009), there were an estimated 300,000 people displaced (including 50,000 children), many of whom were detained against their will in camps in the Vavuniya District.<sup>[13]</sup>

There are limited data regarding the exact number of refugees that have left Sri Lanka. It is estimated that 2,561,917 Sri Lankans were granted refugee status in various countries between 1990 and 2010 ([Exhibit C](#)). Thousands more were not granted refugee status and remained asylum seekers ([Exhibit A](#)).

##### Sri Lankan Refugees in Canada

Canada is a major destination for Sri Lankan refugees ([Exhibit D](#)).<sup>[10]</sup> Sri Lankans are the sixth-largest immigrant group entering Canada.<sup>[14]</sup> Of these, it is reported that one-sixth of incoming Sri Lankans are Sinhalese. The latest Canadian census data available (2006) documented 103,625 Sri Lankans in Canada.<sup>[15]</sup> Sri Lankan populations in Canada primarily reside in large cities (e.g., Toronto, Montreal).

Canada's Sri Lankan Tamil population is considered the largest outside of Sri Lanka.<sup>[16, 17]</sup> Tamil Canadians are relatively wealthy and a number of prominent Tamils are recognized in Canada, including the author Shyam Selvadurai and Indira Samaresekera, president of the University of Alberta.<sup>[18, 19]</sup> Toronto is said to be "the city with the largest number of Sri Lankan Tamils in the world." There are still questions regarding accuracy of the data as some Tamil refugees reportedly do not self-identify as Tamil.

##### Refugees and IDPs Returning to Sri Lanka

At the end of the civil war in 2009, the government of Sri Lanka announced plans to resettle 80% of IDPs by the end of the year.<sup>[20]</sup> By the end of August 2011, almost 395,000 IDPs had returned to their homes, with only around 7,500 still living in camps.<sup>[21]</sup> It is expected that by the end of 2012, all IDPs will be returned to their homes. However, there are also reports that the government is using the opportunity to screen people and identify suspected LTTE cadres, separate them from family members, and hold them in 'rehabilitation centers.'<sup>[22, 23]</sup> It is estimated that 11,000 suspected LTTE continue to be held in separate rehabilitation sites, to which humanitarian agencies such as the International Committee of the Red Cross (ICRC) have no access.

As of November 2011, UNHCR had documented that Sri Lankan refugees were distributed across 65 countries, with the largest numbers residing in India, France, Canada, Germany, United Kingdom, Switzerland, Malaysia, Australia, United States, and Italy.[24, 25] It is expected that improved security in Sri Lanka will spur voluntary repatriation of many of these refugees. Refugees themselves have reported the desire to return and reunite with family and friends and reclaim their land. In 2010, there were large increases in facilitated repatriation and spontaneous returns of refugees to northern parts of Sri Lanka.[23] However, refugees face a number of challenges on returning to Sri Lanka, including earning a living and finding shelter.[24] Residential zones and agricultural land in the North and East must still be cleared of mines to be habitable. In addition, those that remained in-country are faced with political, physical, and psychosocial complexities with the return of refugees and IDPs.

After the end of the war, some host countries have not been receptive to Sri Lankan asylum seekers and have forcedly returned them to Sri Lanka.[26] Human rights agencies caution that forced repatriation may result in human rights violations, and there have been anecdotal reports of suspected Tamil Tigers being tortured upon return.[27] The UNHCR encourages protection of asylum seekers, though the agency's guidelines from 2010 still state that, "in light of the improved security situation since the end of Sri Lanka's conflict in May 2009, claims by asylum seekers from that country should be considered on their individual merits rather than on a group basis." [25]

### **Psychosocial Issues**

There are a number of social issues that emanate from post-conflict situations like this one. Many have been displaced multiple times, lost their homes and communities, their livelihoods, family, and friends. Many have sustained serious physical injuries and mental distress. Children were forcibly recruited by the LTTE as child soldiers. Additionally, even after the conflict ended, the Sri Lankan government has continued to identify and target those suspected of working with the LTTE. This has led to a low level of social trust.[22] In the North and East, there are now many women-headed households (widows) and there is a continued military presence. This has led to reports of intimidation, sexual violence, and makes gestures of public mourning or grief very difficult.[28]

Psychological disturbances like post-traumatic stress disorder (PTSD), anxiety, and depression have been noted among adult and child victims of the conflict.[29] In 2009, 92% of children surveyed out of 420 randomly-selected fifth-grade school children from the Northern and Eastern Provinces of Sri Lanka reported that they had experienced severely traumatizing events such as witnessing combat, bombing, shelling, or the death of a loved one.[30] On top of the trauma caused by conflict, the experience of the 2004 tsunami and its lingering effects, and few outlets to express grief and mourning, also contribute significantly to the distress and PTSD experienced.[31]

## **V. Post-conflict Perspectives from the UN and Sri Lankan Government**

In June 2010, UN Secretary General Ban Ki-Moon appointed a panel of experts to investigate allegations of war crimes committed by both the Sri Lankan Government and LTTE forces during the last year of the civil war. The panel's mission was to analyze information gathered by a variety of sources to decide whether there were enough credible allegations to hold the government responsible for failing to investigate human rights violations and war crimes.[9]

The UN panel's findings contradict the Sri Lankan government's position. The government maintains that it had engaged in "humanitarian rescue operations" with "zero civilian casualties."

However, the UN's report candidly cites that the Sri Lankan army purposefully shelled in designated 'No-Fire Zones' on the Vanni beaches, causing thousands of civilian casualties.

The Sri Lankan government has rejected the UN report, questioning whether the report had been influenced by the LTTE. However, to appease the international community, Sri Lankan President Mahinda Rajapaksa appointed the Lessons Learnt and Reconciliation Commission (LLRC) in May 2010, to investigate the events of the civil war between February 2002 and May 2009. Shortly after this announcement, in a speech given in June 2010, President Mahinda Rajapaksa insisted that Sri Lankan soldiers did not kill a single civilian, and said that "our troops carried a gun in one hand and a copy of the human rights charter in the other." [32]

In addition to the LLRC, the Sri Lankan government's reconciliation efforts have included: resettling IDPs, providing amnesty and job training to former LTTE cadres, clearing LTTE landmines, and rehabilitating child soldiers who had been kidnapped by the LTTE. However, there are opposing views about reconciliation in Sri Lanka ([Exhibit E](#)). Articles from Sri Lankan newspapers and government press releases tell of Sri Lanka's reconciliation successes, while international reports accuse the government of oppression, human rights violations, and the repression of civil rights. The LLRC report that was released in November 2011 acknowledges instances of civilian abuses by renegade soldiers and recommended further investigation into these events, but this admission was overshadowed by the report's numerous accounts of LTTE international humanitarian law violations. [23, 33] The report suggests that Sri Lanka should develop a committee of 19 Sinhalese and 12 Tamil leaders to modify the country's constitution and implement reconciliation recommendations made by the LLRC, yet Tamil leaders are currently resistant to this idea. [34]

Meanwhile, international reaction to the LLRC's December 2011 public release has been guarded, with some applauding the work of the LLRC, and others conveying a sense that the investigation of war crimes has not been thorough enough ([Exhibit F](#)). However, the pressure and calls for international investigations has made the Sri Lankan government very averse to international criticism or intrusion. Also, the Chinese government has provided increased financing for projects resulting in improved Colombo-Beijing relations, [35] and Western countries are having to rethink about how to engage with the Sri Lankan government.

## VI. Health Challenges

In 2001, national expenditures for health made up 1.6% of GNP and 4.9% of Sri Lanka's national budget. State facilities are characterized by overcrowding and inefficiencies. This is compounded by the fact that much of the country's health infrastructure (i.e., hospitals, health centers, distribution channels) were damaged during conflicts, leading to shortages of equipment and medicines. There is also a shortage of trained professionals, and together, these factors are prompting a shift toward the private sector for outpatient care for those who can afford such services. Moreover, the health system is complex, and includes Ayurvedic, Siddha, Unani, and homeopathic fields of medicine, in addition to Western and public health programs, which has contributed to some of the country's difficulties in coordinating care provision and maintaining standards of care. [36]

Despite the long-running Civil War, the country's national health profile appears to be a picture of success. In 2009, Sri Lanka's life expectancy at birth—71 years—exceeded both regional and global averages. [37] The same can be said of the national under-five and maternal mortality rates, where Sri Lanka reports averages four and six times lower than regional averages, respectively. Moreover, the country has demonstrated significant improvements in access to improved drinking water and

sanitation facilities, particularly for its large rural population. In 2009, more than 80% of Sri Lanka's population had access to improved water<sup>††</sup> and improved sanitation facilities<sup>\*\*</sup>, an increase from approximately 60% in 1990. Nonetheless, inefficient cleaning of drains and sitting water in public places has continued to fuel reports of water-borne diseases, including Dengue fever,<sup>§</sup> throughout the country. There were as many as 28,140 reported cases of Dengue in 2011, of which there were 185 deaths.[38] Such reports reflect the failure of these regions with weak public infrastructure to keep pace with national health advancements in Sri Lanka.

The international aid community has cautioned that Sri Lanka's strong national averages for health indicators may obscure an internal public health and human rights catastrophe. Accurate data from war zones—namely the Tamil populated Northern and Eastern provinces—is missing from many surveys performed during the armed conflict and is only partially addressed in most studies that have been conducted since the war ended (Exhibits G, H, I). The surveys also overlook those who were internally displaced by the conflict, of whom many remained displaced when the conflict ended in May 2009.[39]

Data from earlier in the decade suggests significant health disparities between the Northern and Eastern provinces and the rest of the nation.[40] Disparities are most notable in three health indicators: infant mortality, maternal mortality, and under-nutrition. The infant mortality rate in 2000 was approximately 11.2 per 1,000 births nationally and 14.7 per 1,000 births in the Northern and Eastern provinces (in Killinochchi, a major northern city, it was as high as 27.8 per 1,000 births)[Exhibit G]. Maternal mortality disparities are even more striking: nationally, in 2000, the rate was 14 per 1,000 births, while the Northern and Eastern provinces recorded 81 per 1,000 births (158 per 1,000 births in Killinochchi). Finally, the percentage of children who were underweight nationally was approximately 29.4%, but was 46.2% in the Northern and Eastern provinces, reaching as high as 53.2% in Killinochchi.

There are also disparities in access to basic amenities. In 2001, 73% of the country reported access to improved sanitation facilities,<sup>\*\*</sup> compared to 48% in the Northern and Eastern provinces. The same can be said of access to safe drinking water<sup>††</sup> that dipped as low as 23.5% in the capital of the Northern province during the conflict in 2003.[41]

## VII. CanAID's efforts in Sri Lanka

In post-conflict Sri Lanka, CanAID has thus far worked to promote equitable and sustainable economic growth (through increasing skills for employment, supporting agriculture and businesses, improving the business climate, and increasing women's access to economic assets and employment); emphasize the importance of human rights and democratic governance; and reduce poverty. It is estimated that CanAID invested just over CAN\$ 18million in Sri Lanka in the 2009-2010 financial year on emergency relief including materials, food-aid, reconstruction and rehabilitation, disaster preparedness, and coordination plus support services.

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<sup>§</sup> Dengue fever is a mosquito-borne disease that has been propagated by standing water in dirty drains in many regions of the country, particularly the Western Province

<sup>\*\*</sup> The UNICEF Joint Monitoring Program for Water Supply and Sanitation defines improved sanitation as any facility that hygienically separates human excreta from contact.

<sup>††</sup> The United Nations Educational, Scientific, and Cultural Organization defines safe water as “water that is safe for drinking and bathing including treated surface water and untreated but uncontaminated water such as springs, sanitary wells, and protected boreholes.”



CanAID and its partners currently support several projects in Sri Lanka (Exhibit J):

1. a National Languages Project helps minority groups access services, such as healthcare, police protection, and education in their own language;
2. aid in rebuilding post-conflict areas, specifically through:
  - a. restoring infrastructure and services (partnership with ICRC)
  - b. improving access to basic amenities at refugee camps and upon resettlement (partnering with UNHCR);[42] and
  - c. rebuilding agricultural livelihoods in northern Sri Lanka (working with the Food and Agricultural Organization).

CanAID sets its priorities in three-year increments and this is also relevant given the 2015 targets for the Millennium Development Goals will be reviewed at this time. There are pressures on the agency to ensure that its efforts achieve tangible returns and reach the populations for whom they are intended. In particular, CanAID's initiatives in Sri Lanka have been criticized by Sri Lankan diaspora who claim that in the past, and specifically after the 2004 tsunami, aid did not reach the North and East of the country, which are the most deprived areas. CanAID has argued that its funding and resources are not conveyed to projects in Sri Lanka through the government. However, relations with the government have implications for the implementation (e.g., ministerial clearances) and effectiveness of the programs undertaken.[43]

## VIII. Summary

As he finished reading the independently-compiled report which provides a historical landscape of the issues, Bruce thought about the challenges that lay ahead for CanAID in managing its relationships and operations in Sri Lanka. His recommendations to CanAID's senior leadership would need to address the deficits and needs of the people in Sri Lanka while also balancing the political ramifications of the organization's strategy for engagement in Sri Lanka. He realized that public statements about this politically-charged situation would be scrutinized, and this would be especially challenging given the residual concerns about the accuracy of the available health and development indicators. Acknowledging that there would have to be tradeoffs, Bruce felt overwhelmed by the country's complex history, the number of stakeholder groups, and the decision rights and authority afforded to those involved. Frustrated by the task, Bruce decided to wait and discuss the alternatives that the multi-disciplinary consultant teams might offer in the meetings on Saturday morning. He would have to be forthright and interrogate the options presented to him to finally arrive at a set of recommendations that are innovative, effective, and diplomatically-plausible.

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## X. Exhibits

### Exhibit A: Definitions of various displaced person statuses [44]

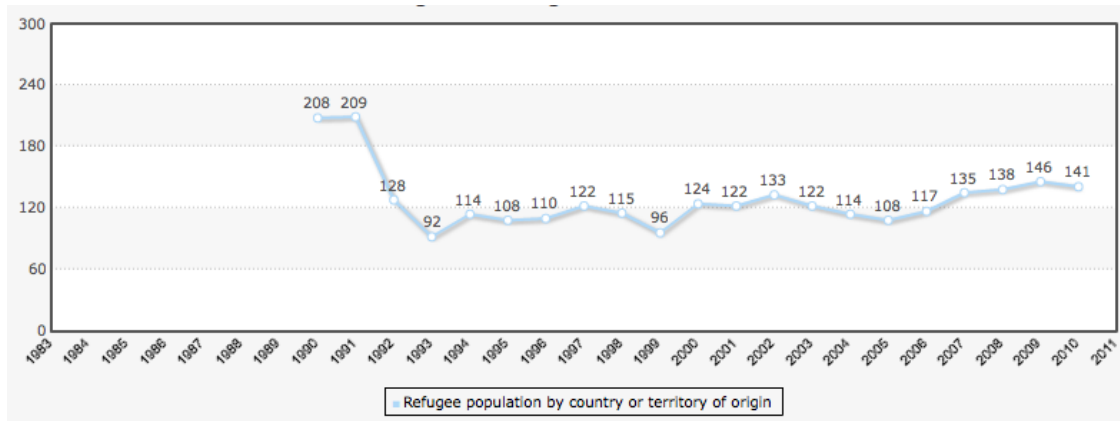
Term	Definition
<b>IDP (Internally Displaced Person)</b>	An individual who has been forced or obliged to flee from the individual's home or place of habitual residence, "...in particular, as a result of or in order to avoid the effects of armed conflicts, situations of generalized violence, violations of human rights or natural or human-made disasters, and who have not crossed an internationally recognized State border" (according to the Guiding Principles on Internal Displacement).
<b>Refugee*</b> <b>*Article 1A(2) of the 1951 Convention</b>	A refugee is any person who, "...owing to well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group or political opinion, is outside the country of his [or her] nationality and is unable or, owing to such fear, is unwilling to avail him [or her]self of the protection of that country; or who, not having a nationality and being outside the country of his [or her] former habitual residence as a result of such events, is unable or, owing to such fear, is unwilling to return to it."
<b>Asylum Seeker</b>	An individual who is seeking international protection. In countries with individualized procedures, an asylum-seeker is someone whose claim has not yet been finally decided on by the country in which the claim is submitted. <i>Not every asylum-seeker will ultimately be recognized as a refugee, but every refugee was initially an asylum-seeker.</i>
<b>Voluntary Repatriation</b>	Return to the country of origin based on the refugee's free and informed decision. Voluntary repatriation is one of the three durable solutions and may be organized (when it takes place under the auspices of the concerned governments and/or UNHCR) or spontaneous (the refugees return by their own means with no involvement of UNHCR and governments).

**Exhibit B: Categories of people assisted by UNHCR that originated from Sri Lanka**

Year	IDPs protected or assisted by UNHCR	Returned IDPs	Total population of concern	Asylum Seekers	Repatriated Refugees from Canada	Category by Origin Refugees	Category by Origin Returned Refugees
1993	29,400						
1994	9,090						
1995	200,000						
1996	200,000						
1997	200,000	0					
1998	603,025	30,490					
1999	612,518	0					
2000	706,514	0	837,201	6,509		124,160	16
2001	731,838	0	860,873	6,601		122,420	14
2002	462,826	269,012	871,447	4,931		133,239	1,439
2003	386,104	76,722	592,821	2,962	31	122,010	5,023
2004	351,884	34,220	513,319	3,125		115,050	10,040
2005	324,699	27,185	466,961	4,238		108,139	2,700
2006	469,165	89,405	683,213	7,301	4	116,966	375
2007	459,567	158,600	761,099	5,980		134,948	2,000
2008	504,800	20,800	672,148	7,057		137,745	1,739
2009	434,900	94,600	684,276	7,566	0	145,712	1,489
2010	273,772	161,128	589,599	8,563		141,063	5,062
<b>Total</b>	<b>6,960,102</b>	<b>962,162</b>	<b>7,532,957</b>	<b>64,833</b>	<b>35</b>	<b>1,400,452</b>	<b>29,897</b>

*Source: United Nations High Commission for Refugees Statistical Online Population Database*

**Exhibit C: Annual number of refugees leaving Sri Lanka (thousands, 1983-2011)**



Source: World Bank World Development Indicators & Global Development Finance Database

**Exhibit D: Numbers of refugees in Canada originating from Sri Lanka by year**

Year	Refugees
1994	21,501
1995	17,975
1996	14,868
1997	11,793
1998	10,218
1999	Data Unavailable
2000	10,591
2001	13,161
2002	12,873
2003	12,563
2004	12,062
2005	11,076
2006	8,877
2007	21,279
2008	20,442
2009	19,143
2010	19,967
<b>TOTAL</b>	<b>236,389</b>

Source: United Nations High Commission for Refugees Statistical Online Population Database

**Exhibit E: Selected headlines that illustrate tensions between the international community and Sri Lanka's government**

Date	Headline	Source
5/17/2010	"Sri Lanka: President appoints Lessons Learnt and Reconciliation Commission."	<i>Reliefweb</i> [45]
6/21/2010	"Sri Lanka furious as UN names war crimes panel."	<i>Gulf Times</i> [32]
10/27/2011	"Visiting US Congressmen See 'Tremendous' Progress and 'Positive' Developments in Sri Lanka."	<i>Sri Lankan Embassy in US: Press Release</i> [46]
11/9/2011	"Sri Lanka says it blocked 5 news websites because they insulted key political leaders."	<i>The Washington Post</i> [47]
11/11/2011	"Sri Lanka's Ambassador to the US Promotes Sri Lanka's Reconciliation and Development During Houston Visit."	<i>Sri Lankan Embassy in US: Press Release</i> [48]
11/16/2011	"Sri Lanka: Still struggling to find reconciliation."	<i>BBC News</i> [49]
11/28/2011	"Post-conflict SL, an example to global community."	<i>The Island</i> [50]
12/23/2011	"Sri Lankan commission says military didn't intentionally target civilians in civil war."	<i>The Washington Post</i> [51]
2/26/2012	"New wave of abductions and dead bodies in Sri Lanka."	<i>GroundViews</i> [52]
2/29/2012	"Denial in Sri Lanka."	<i>The Boston Globe</i> [53]



## **Exhibit F: International Reactions to the Lessons Learnt and Reconciliation (LLRC) Report**

### **Catherine Ashton, Spokesperson for Foreign Affairs and Security Policy of the European Union:**

“...the report and the suggestions are being studied in-depth. The European Union has expressed confidence that the government will take follow up action with regard to the recommendations made in the report and reconciliation.” The Spokesperson said that the EU is prepared to hold continuous discussions with the Sri Lankan government as well as the Secretary General in this connection.[54]

### **Bruce Levy, Canada’s High Commissioner to Sri Lanka:**

“The final report of the LLRC released on December 16 is a potentially important contribution to Sri Lanka’s much-needed political reconciliation. The Commission can be commended for making substantive recommendations in many sensitive and far-reaching areas.”[55]

### **Canadian Tamil Congress:**

“The Canadian Tamil Congress acknowledges the release of the LLRC report but has identified severe shortcomings in its findings. The LLRC conclusions contradict an extensive UN Panel of Experts report which outlined credible allegations that “most civilian casualties in the final phases of the war were caused by government shelling” during the final months of the armed conflict. It further alleged that the government had shelled civilians in no-fire zones and targeted hospitals in an aggressive manner. While the report acknowledges the shelling of a hospital however, it does not make a conclusion as to who was responsible for the shelling and the considerable civilian casualties resulting from it. It merely dismisses the shelling by stating that the witnesses were unable to specify which party was responsible. However, the LLRC did recommend five incidents of shelling in which government forces were implicated, for further investigation.”[56]

### **United States Department of State Spokeswoman, Victoria Nuland:**

“...the Sri Lankan commission had made substantive recommendations on issues including reconciliation, devolution of power, demilitarization and disappearances.” But she said, “it lacked a comprehensive plan to act on them and left open questions about accountability for alleged rights violations.”[57]

**Exhibit G: Health Data for Sri Lanka 2007: Vital Statistics by District**

Location	Crude Birth Rate		Crude Death Rate		Maternal Mortality Rate	Infant Mortality Rate	Neonatal Mortality Rate		Perinatal Mortality Rate	
	Per 1,000 population				Per 100,000 live births	Per 1,000 Live births				
	2005	2007	2005	2007	2002	2003	2001	2002	2000	2001
Colombo	27.2	23.3	8.2	8.4	11.5	15.2	12.5	11.1	9.8	9.3
Gampaha	13.8	13.8	5.5	4.9	11.5	6.0	3.9	4.4	3.3	3.6
Kalutara	15.3	15.1	5.9	5.9	6.2	4.0	2.8	2.2	3.3	2.3
Kandy	22.4	21.3	6.6	6.9	10.2	15.3	14.0	12.0	11.7	11.4
Matale	16.7	20.2	5.0	5.5	..	10.4	6.1	5.0	5.9	5.8
Nuwara Eliya	14.5	15.8	5.1	5.0	52.1	15.6	13.7	10.8	10.1	9.6
Galle	18.1	20.2	9.2	7.1	10.5	10.9	10.1	8.1	6.3	7.5
Matara	18.0	18.1	7.2	5.8	13.9	8.3	5.4	5.2	10.7	4.8
Hambantota	14.1	16.4	9.3	4.6	14.8	7.0	4.7	2.8	2.1	3.3
Jaffna	17.2	14.4	6.8	6.4	39.9	4.4	2.3	3.3	1.5	2.0
Killinochchi	19.8	29.4	4.5	4.1	..	1.2	2.6	1.4	4.3	1.9
Mannar	20.8	17.0	3.3	3.6	..	2.6	5.7	12.0	2.4	6.9
Vavuniya	23.9	18.1	4.6	5.8	..	6.8	5.6	9.8	1.2	5.3
Mullaitivu	13.9	21.4	26.1	3.4	..	1.7	11.6	1.4	6.4	11.2
Batticaloa	20.6	23.2	8.2	4.5	..	19.6	15.2	11.6	10.8	12.3
Ampara	21.4	24.8	11.0	4.3	17.4	6.3	3.1	3.4	2.0	1.8
Trincomalee	21.7	23.9	4.7	4.4	..	2.5	1.0	1.4	0.6	0.7
Kurunegala	18.4	17.4	6.2	6.2	20.0	14.0	10.9	9.7	12.6	8.1
Puttalam	17.3	20.5	4.5	4.7	21.1	5.9	5.1	4.5	5.5	4.2
Anuradhapura	19.3	20.7	5.1	5.5	19.2	19.4	18.0	14.2	10.1	13.0
Polonnaruwa	20.0	19.2	4.6	4.5	13.8	19.5	10.1	14.2	4.4	7.4
Badulla	21.8	22.4	5.6	5.5	27.5	9.9	17.4	12.9	11.0	14.0
Moneragala	15.1	15.8	3.4	3.3	14.5	2.0	1.9	0.9	0.5	0.9
Ratnapura	18.3	18.7	5.2	5.3	30.6	13.2	10.3	11.5	10.1	8.0
Kegalle	11.5	15.4	5.8	5.9	..	7.0	7.5	8.1	9.7	6.2
<b>Sri Lanka</b>	<b>18.8</b>	<b>19.0</b>	<b>6.6</b>	<b>5.8</b>	<b>14.3</b>	<b>11.2</b>	<b>9.5</b>	<b>8.4</b>	<b>7.8</b>	<b>7.5</b>

Source: Sri Lanka Annual Health Statistics, 2007

**Exhibit H: Health Data for Sri Lanka 2007: Distribution of Housing Sanitation Facilities Across Regions and Cities, 2001 (Excludes: Northern and Eastern Provinces)**

Location	Total	Water Seal	Pour Flush	Pit	Bucket	Other	Not using a toilet	Not stated
<b>Western Province</b>								
Colombo	100.0	78.0	16.7	1.6	0.5	0.1	0.2	2.9
Gampaha	100.0	78.2	13.1	5.2	0.1	0.2	0.8	2.4
Kalutara	100.0	77.6	13.5	4.2	0.0	0.5	2.1	2.1
<b>Central Province</b>								
Kandy	100.0	65.9	17.5	12.2	0.1	0.5	1.9	2.0
Matale	100.0	49.7	15.6	30.1	0.0	0.4	2.8	1.4
Nuwara Eliya	100.0	41.4	24.3	14.2	1.9	2.3	11.6	4.4
<b>Southern Province</b>								
Galle	100.0	73.7	13.2	7.5	0.6	0.9	2.8	1.3
Matara	100.0	81.7	6.2	8.6	0.1	0.4	1.4	1.6
Hambantota	100.0	56.5	8.7	29.9	0.1	0.7	2.5	1.6
<b>North Western Province</b>								
Kurunegala	100.0	69.1	10.2	10.9	0.4	1.7	6.0	1.7
Puttalam	100.0	65.9	11.7	3.3	0.9	2.1	13.7	2.4
<b>North Central Province</b>								
Anuradhapura	100.0	48.4	13.5	21.4	0.4	2.5	11.2	2.6
Polonnaruwa	100.0	56.3	11.1	25.0	0.1	0.8	5.0	1.7
<b>Uva Province</b>								
Badulla	100.0	55.1	20.9	16.3	0.4	1.6	3.2	2.5
Moneragala	100.0	44.1	9.0	35.5	0.0	2.0	6.5	2.8
<b>Sabaragamuwa Province</b>								
Ratnapura	100.0	66.4	8.2	20.1	0.1	1.1	3.1	1.0
Kegalle	100.0	63.2	16.0	15.4	0.1	0.6	2.4	2.3
<b>Sri Lanka</b>	<b>100.0</b>	<b>66.5</b>	<b>13.6</b>	<b>12.0</b>	<b>0.4</b>	<b>1.0</b>	<b>4.3</b>	<b>2.2</b>

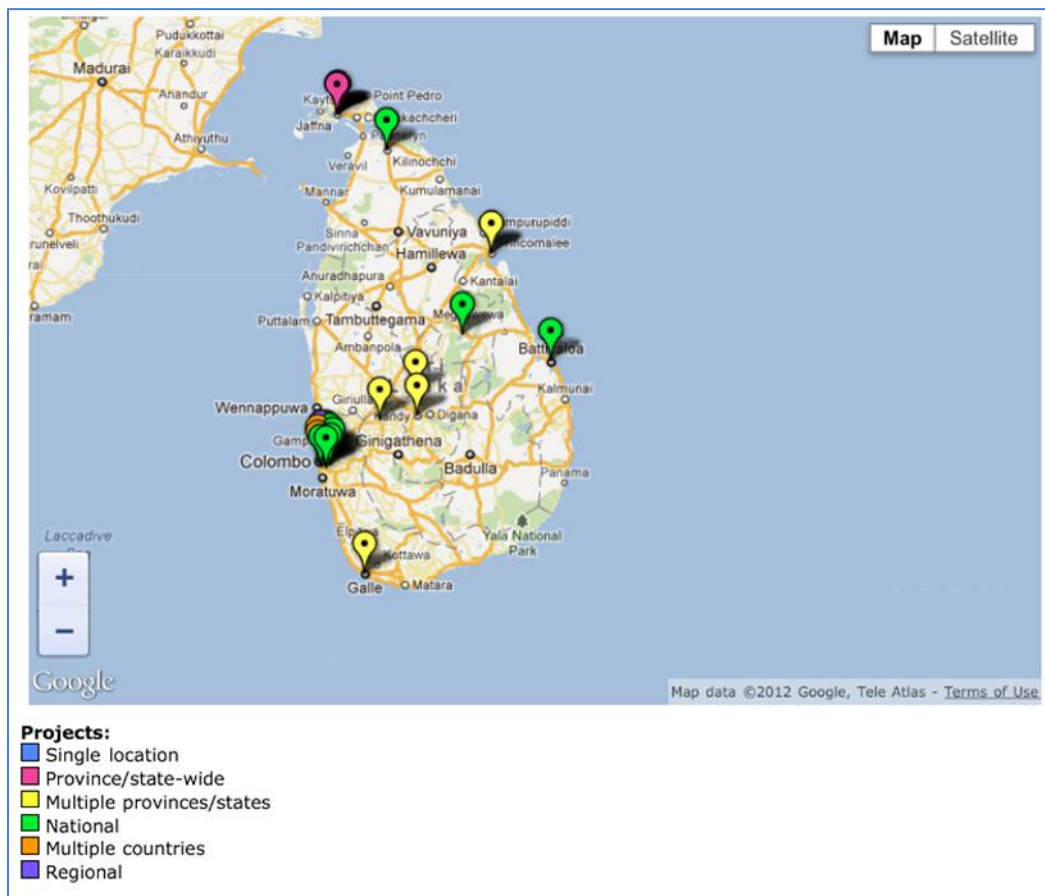
Source: Sri Lanka Annual Health Statistics, 2007

**Exhibit I: Health Data for Sri Lanka 2007: Distribution of Source of Drinking Water Across Regions and Cities, 2001 (Excludes: Northern and Eastern Provinces)**

Location	Inside Premises		Outside Premises		Unprotected well	Tube Well	Bowser	River / Tank / Stream etc.
	Protected Well	Tap	Protected Well	Tap				
<b>Western Province</b>								
Colombo	25.0	42.5	6.2	21.2	1.2	0.9	0.0	0.4
Gampaha	47.6	14.7	14.0	9.2	6.7	5.3	0.1	0.1
Kalutara	38.2	12.9	25.4	5.4	11.5	2.4	0.0	2.1
<b>Central Province</b>								
Kandy	13.6	22.4	20.8	17.4	8.9	8.1	0.3	5.4
Matale	15.2	11.2	27.6	10.2	13.6	14.8	0.2	5.4
Nuwara Eliya	5.8	20.4	8.6	31.1	6.9	2.9	0.0	18.1
<b>Southern Province</b>								
Galle	34.7	11.6	25.1	7.7	14.0	2.7	0.0	2.5
Matara	30.5	19.8	17.8	9.3	12.0	0.8	--	4.8
Hambantota	16.1	16.2	32.0	11.6	9.1	7.8	2.1	3.6
<b>North Western Province</b>								
Kurunegala	42.6	1.7	34.7	2.4	11.6	4.5	0.0	0.9
Puttalam	35.2	5.9	30.6	5.3	4.5	14.1	1.4	0.2
<b>North Central Province</b>								
Anuradhapura	23.7	7.0	37.4	2.6	37.4	12.8	0.0	1.3
Polonnaruwa	28.1	3.5	26.1	7.4	26.1	11.6	0.0	3.8
<b>Uva Province</b>								
Badulla	10.9	17.8	18.0	18.8	8.0	3.1	0.0	15.7
Moneragala	17.8	7.2	25.5	7.2	25.5	6.9	0.0	13.2
<b>Sabaragamuwa Province</b>								
Ratnapura	11.8	12.0	19.3	14.6	19.3	0.6	0.0	22.6
Kegalle	24.9	9.1	26.9	8.6	26.9	0.3	0.0	9.5
<b>Sri Lanka</b>	<b>28.3</b>	<b>15.7</b>	<b>21.8</b>	<b>11.2</b>	<b>9.8</b>	<b>4.8</b>	<b>0.2</b>	<b>5.2</b>

Source: Sri Lanka Annual Health Statistics, 2007

## Exhibit J: Map of current CanAID-funded projects



From <http://www.acdi-cida.gc.ca/acdi-cida/ACDI-CIDA.nsf/eng/CAR-1011103029-K24>

## XI. Acknowledgements

The Emory Global Health Case Competition Planning Committee gratefully acknowledges the dedication and contributions of each of the Writing Team members.

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The Case Writing Team also recognizes valuable inputs and expert reviews from:

Jeff Koplan, Ashwini Vasanthakumar, Jonathan Grund, and Amy Webb Girard.

The Emory Global Health Case Competition gratefully acknowledges support from the following organizations:



The Pendleton Consulting Group

Raymond Mikulich Charitable Fund