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Child and family welfare in Sri Lanka

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Ву			
Gamina Wijetunge &			
Dahaya Wisetunga			

We, the representatives of Sri Lanka, Daya Wijesekera and I, Gamini Wijetunga, consider it a great privilege to present this paper at the Seminar attended by all you scholarly friends who have come from all over the world.

Democratic Socialist Republic of Sri Lanka is a small island situated in the Indian Ocean, separated from the South Eastern tip of India by the Palk Strait. The island is 25,000 square miles in extent.

HISTORY:

The Sinhalese are said to be descendants of an Aryan Prince and his followers who arrived in the Island about 543 B.C. Also our nation was closely linked by religion to the Indian Sub Continent since Indian Emperor Asoka's religious mission which re-kindled Buddhism among people. Then in the third century B.C. Sri Lanka became a Buddhist country and every aspect of Sri Lankan life (be it social, political, economic, cultural, architecture, education and literature) was nurtured in the cradle of Buddhism. As our civilizations were based in the river valleys our economy was based on agriculture. Thus at those ancient times our country was known as the granary of the East.

In 1505 Portuguese traders landed in Sri Lanka and established themselves in certain coastal parts of the Island. Their main aim was to get the maximum economic exploitation from our country.

Like many other newly independent nations Sri Lanka also was a victim of Western Colonialism over four centuries. The aim of the Western imperialists who invaded our country was economic exploitation. This was the beginning of a system of administration which facilitated the collection of revenue and administration of populace. It was started since Portuguese invasion. Dutch and British rulers are highly benefitted by that system and they have developed it systematically and scientifically. Therefore our agro-economy was suddenly changed into a plantation economy. As a consequence of this the people of the land were reduced to be either wage-earners from the Colonial government and government-patronised private enterprise or to be passive degenerating communities which had to be satisfied with a subsidised economy.

During the latter half of 19th Century certain reforms in educational, administrative and welfare institutions were imposed by the British Colonisers. These were merely a advantage for them,

revival of nationalism which continued to this century with greater vigour and in different forms. Soon after the second World War, as many other colonies, Sri Lanka was also culminating the political freedom. In 1948 Sri Lanka regained independence. This gave the people an opportunity to participate in electing their rulers through universal franchise. For the first time, in 1972, we changed our Constitution ourselves. In 1977 it acquired the largest democratic majority in the Asia. It has a parliamentary system of Democratic Socialist with an elected President as the Head of State. There are 166 electorates, with 168 members of Parliament.

POPULATION, ETHICITY AND RELIGION:

The population of Sri Lanka is over 14.5 million, only 20 per cent of which live in urban areas. About 70 per cent of the population is found in the Wet Zone, where most of the cultivated land and majority of country's industries are found.

Sri Lanka has multi-racial, multi-religious population who exist in peace and harmony.

The ethnic distribution is as follows:-

Sinhala - low country	42.8%
Sinhala - Kandyan	29.2%
Sinhala and Tamils	11.2%
Indian Tamils	9.3%
Loors	6.5%
Burghers, Malays & others	1.0%

Distribution by religion is as follows:-

Buddhists	67.4%
Hindus	17.62%
Christians	7.16%
Mýslims	7.76%
Others	0.06%

The official language of Sri Lanka is Sinhala. English is accepted as a recognised language and is taught as a second language in all primary and secondary schools.

EDUCATION AND LITERACY:

The level of literacy is relatively high at 85% when compared with other developing countries. Primary education was made compulsory in 1901. Since 1945 education was made free from kindergarten to University. This year (1980) the State provided text books free of charge up to Grade IX.

Mearly 60 per cent of the total population is under 24 years of age and these have higher educational levels. Provision of adequate, suitable employment to these educated pouths is one of the urgent problems of the country. Today nearly one million persons comprising nearly 20 per cent of the total labour force are unemployed. This number increases every year. So the present government has initiated several programmes which have vital employ ent generating components in them such as the accelerated Nahaveli Project, the Greater Colombo Economic Commission and the Free Trade Zone.

DELOGRAPHIC FEACURES:

The first proper census was conducted in 1871 and then repeated at regular intervals of 10 years. The last census in 1971 showed a population of 12.7 million and the estimated population for 1980 is 14.5 million.

The overall density of population is 558 per square mile, but the distribution is not even. About 70 per cent is concentrated in the more developed districts of the country in the West Zone and in the South Western and Central Parts of the Island, which is only 23 per cent of the total land.

FERTILITY AND MORTALITY:

There has been a marked decline in both fertility and mortality beginning with a steep drop in mortality from 21 per 1,000 in 1945 to 14 per 1,000 in 1947 and 6.5 per 1,000 in 1978. The total fertility rate for 1971 was 4.22 and 3.35 in 1947. In 1978 the birth rate was 23.4 per 1,000.

INFANT MORTALITY AND MATERNAL MORTALITY:

The sharp decline in infant mortality since 1946 is attributed mainly to improved creative facilities and provision of better midwifery and maternal and child welfare services. The infant mortality rate in 1976 was 43.7.

Maternal mortality rate has shown a continuous downward trend and remained stable at about 1.2 per 1,000 since 1971. The main reason for this is the improved maternal and child health services and also the rise in age at marriage which was 23.3 years in 1973, when women are more physically mature. A tendency towards smaller family size could also be a contributory factor to this decline.

Life expectancy at birth rate has increased from 36.4 (males) and 34.2 (females) in 1900 to 64.2 (males and 66.7 (females) in 1971. Birth

rate is 28.7 and death rate is 6.5 in 1979. In 1978 there were 5.4 million children in Sri Lanka under 15 years of age. Of these nearly 380,000 were under 1 year of age. There were 3.1 million pupils and 133,250 teachers in government schools in 1979.

CHILD/FAMILY WELFARE IN SRI LANKA:

The present government, which came into office in 1977, created a new Constitution. The Constitution of the Democratic Socialist Republic of Sri Lanka defines its attitude towards family and child care as follows:-

- I. "The State shall promote with special care the interests of children and youth, so as to ensure their full development, physical, mental, moral, religious and social and to protect them from exploitation and discrimination"
- II. "The State shall recognize and protect the family as the basic unit of society.

To fulfil these aims and objectives Sri Lanka Government has designed a inter-related programme which functions under each Ministry. Ministry of Social Services, Ministry of Education and Ministry of Health are three major Ministries which are directly involved with child care and communication. Children make up a substantial proportion of the population and are a prime factor in the country's development. It is logical that children's programmes have special and an important place in the policy planning of each Ministry. So the child care programmes are divided into three major Sections: (1) Social Services; (2) Edgication; (3) Health. The other Ministries, like Ministry of Justice, Education Publications, Cultural, Sports, are doing their role in their specific areas. In addition to these, there are several non-governmental organisations. Among these organisations, J.Y.C. Secretariat which was formed on behalf of the International Year of Child and Sarvodaya - a large voluntary organisation functioning from the grass root level - are very important. Also the United Nations Children's Fund and a large number of foreign gunded child care organisations are assisting the government in preventive child care, nutrition, education and child care.

IMPLEMENTATION OF CHILD/FAMILY CARE POLICY:

The Ministry of Social Services is responsible for the formulation and implementation of child-family care policy. The numerous child/family care projects are implemented by:

- (1) Department of Probation and Child Care Services;
- (2) Department of Education

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- (3) Department of Health;
- (4) Sri Lanka School of Social Work.

Out of these, Department of Probation and Child Care Services is very important. The goals of this department are:-

- (1) The correction of deviant behaviour and promotion of law abiding citizenship in the client population.
- (2) The creation of opportunities for the healthy growth and development of disadvantaged and dependant children.
- (3) Elimination of causes of family dysfunction among vulnerable groups in society and restoration of their potential capacity for normal family functioning.

For the achievement of its goals, the Department has established several services under separate program es and projects. These activities of the department could be broadly classified into two categories: - Correctional Services and Services for Dependent Children.

INSTITUTIONS FOR CHILD CARE:

The importance of providing children deprived of basic needs as a result of family disorganization has led to the establishment of alternative forms of care, among which the non-governmental organizations, children's homes, play a very significant role.

These homes/established under the provisions of the Orphanage Ordinance.

HEALTH:

The Health Services in Sri Lanka are given free by the State and include both Western and traditional (ayurveda) health services. The private sector also supplies medical care to a small porportion of the population. The administration of the medical services in the country is decentralized. Public health or preventive work is done by the medical officers of Health, with the Public Health Inspectors, Public Health Murses and the Public Health Midwives working as a team. The curative services are based on a hierarchical systems of institutions covering both rural and urban areas.

The family health programmes try to look after health of every family family in Sri Lanka. They think of the mother, the father, and the children as a unit. They want them to feel that they, as a family, are working towards good health. Family Health bureau which is functioning under the Ministry of Health operates these programmes. Family health programmes cover particular aspects of the health of families. They are: Care of mothers, care of babies and children, immunization, environmental health, nutrition, health education and

and family planning. Out of the many different aspects of health, the programme considers these the most important in Sri Lanka at the moment.

Ministry of Health and Family Health Bureau will concentrate on the School Health Programmes which seeks to protect school children against diseases. The role of the School Health Services are -

- Medical inspection
- control of communicable diseases
- Health Education
- Supervision of School sanitation
- Correction of Defects.

On the other hand, the concept of child care may sound superfluous to the majority of Sri Lankans. The majority of Sri Lankans still live in the rural areas still seeped in the ruralistic culture. The traditions hold that Sri Lankan family is a 'nucleaus' unit where not only the father, mother and children form it, but it comprises grand-fathers, grand-mothers, aunts and uncles, nephews and nieces and cousins. Therefore any communication on child-care passes through this line handed over from grand parents. There

As a matter of fact this nucleaus family acts as a tune-in school for the future child-bearers and child-rearers. This wa is why children are considered a blessing in our paint part of the world - and blessed are the healthy-happy children.

Thank you.