

YOUTH IN TRANSITIONAL SOCIETIES:

The search for health, safety and personal security

RESEARCH TEAM

Carol Amaratunga, University of Ottawa, Canada

Linda Waverley, Research for International Tobacco Control, International Development Research Centre

Sarath Amarasinghe, University of Ruhuna, Sri Lanka

Myrtle Perera, Marga Institute, Sri Lanka

Louise Lemyre, University of Ottawa, Canada

Andrea Martinez, Institute for Women's Studies, University of Ottawa, Canada

Lorraine Greaves, BC Centre of Excellence for Women's Health

Madine Vanderplaat, Gorsebook Institute, Saint Mary's University, Canada

Peter Tugwell, Institute of Population Health, University of Ottawa, Canada

Neil Andersson, CIET Canada, Ottawa

Rawwida Baksh, Gender Affairs Division, Commonwealth Secretariat, UK



RESEARCH PARTNERSHIPS CAN PLAY A VALUABLE ROLE IN THE FACE OF DISASTER

Young people in post-conflict societies face numerous challenges related to health, safety and personal security. The adoption of risk-taking behaviours and their effects on health are of particular concern, especially as youth health and well-being are critical to reconstruction and rehabilitation efforts. This pilot project, the product of a long collaboration between Canadian and Sri Lankan partners, investigated the complex interplay among the determinants of health and risk-taking behaviours of Sri Lankan youth. The 2004 Asian tsunami significantly affected the project, but the initial research and partnerships have resulted in the development of new collaborations to aid post-tsunami reconstruction.

Background

Since the 1980s, a bitter civil war has ravaged Sri Lanka and destroyed much of its social and economic infrastructure. Tens of thousands of young men and women have lost their lives in the violence, and many thousands have been displaced. In late 2002, a ceasefire raised hopes of a lasting peace settlement, encouraging rebuilding efforts towards a sustainable civil society. Particularly in the eastern and southern regions of Sri Lanka, this task has been complicated by the devastation wrought by the 2004 Asian Tsunami.

There are also a number of threats to the country's population health, including tobacco and alcohol consumption, the recent spread of HIV/AIDS, and the long-term effects of the conflict on youth. Despite rapid progress in health care delivery, impressive health gains and rising life expectancy, Sri Lanka - like many developing countries - now confronts the challenge of managing both communicable and non-communicable diseases due to demographic transitions and changing lifestyles. The country also faces the challenges of rehabilitation and post-conflict reconstruction. This includes inevitable social change as the country emerges from conflict and as a large youth population attempts to connect with and re-enter civil society.

YOUTH IN TRANSITIONAL SOCIETIES:

The search for health, safety and personal security

There is concern that many of Sri Lanka's growing health burdens are related to preventable behaviours, such as tobacco use and unsafe sexual practices. Among youth, the overall smoking prevalence rate is almost 10% and alcohol consumption is also high. The most recent UNAIDS and World Health Organization data estimate that between 1200 and 6900 people under 49 years of age are living with HIV/AIDS, but it is assumed, following the tsunami and given the vulnerability of women and youth, that the actual number of unreported and unknown cases may be considerably higher, and is likely to rise.

This research partnership was motivated by the belief that a country's social and civil development is intrinsically linked to crucial health behaviours. In Sri Lanka, the present generation of youth face multiple challenges as they search for personal security and sustainable livelihoods. This pilot project aimed to understand the complex interplay among the determinants of health and risk-taking behaviours of young women and men, to identify how to engage young people in the processes of reconstruction and rehabilitation, and to support the creation of collaborative research linkages between Canada and Sri Lanka.

This research partnership was motivated by the belief that a country's social and civil development is intrinsically linked to crucial health behaviours

The partnership

The partners in this project came to the table with a shared interest in research as a tool for social justice and equity, and for many, a long history of collaboration. The seeds were first sown more than 25 years ago, through work on rural and coastal women's health undertaken by the Canadian team leader and co-principal investigator, Carol Amarantunga, and including the International Development Research Centre (IDRC), the Canadian International Development Agency (CIDA), Sri Lankan NGOs, universities and the Government of Sri Lanka. In 2003, Dr Amarantunga invited colleagues from the Sri Lanka Marga Institute, the University of Ruhuna, Research for International Tobacco Control (RITC) of IDRC, the Commonwealth Secretariat and academic partners from other Canadian universities to develop research and program linkages on youth risk behaviours.

The pilot project arose from these long-standing relationships and was funded through a CIHR Global Health Research Pilot Project Grant in 2004. From the beginning, the project stressed the importance of mutually beneficial partnerships and appropriate work and resource sharing. The project budget was designed in an open and transparent way to ensure that the lion's share of the funding would support Sri Lankan research capacity, including graduate students and trainees.

The research

The project was set in Hambantota, Matara and Galle, in the Southern province of Ruhuna, Sri Lanka. This region, due to high unemployment and chronic poverty, faces challenges in shaking off the tenacious grip of youth unrest, unemployment and violence. The coastal areas were also severely damaged by the tsunami and thousands of people lost their lives and property. Although a hinterland province, people in the south of Sri Lanka are anxious to re-establish the locale as a centre of civil society and learning—a position of prominence the region held two millennia ago.

In a 2002 CIDA-funded study on the feasibility of a new harbour, public consultations with over 200 community members generated important new questions about the process of change, and how a rapid infusion of western industrialization into the predominantly rural South would impact the population's health and well-being. Community leaders voiced concern about the impact of globalization on youth, the loss of traditional values and the adoption of risk-taking behaviours.

This pilot project aimed to understand the interplay among the determinants of health and to assess how these factors affect decision making. The study also aimed explicitly to listen to the voices of youth and to identify how to best engage youth in rebuilding civil society.

Focus group discussions were used to identify the factors influencing risk behaviours among Sri Lankan youth, in particular tobacco use, unsafe sex, alcoholism and drug addictions. While there are a wide range of factors contributing to increased tobacco use and unsafe sexual practices among Sri Lankan youth, two potential linkages stand out: the global tourist industry, which provides affordable and easy access to tobacco and sexual contact respectively; and environmental factors, notably the 2004 Tsunami, which devastated coastal economies, delimited employment opportunities, and increased stress in an already economically depressed area.

The team also undertook a series of literature reviews examining risk factors related to tobacco use, sexual health, social identity, conflict societies, health and gender. Collectively, the resulting reports highlight the gaps in knowledge that currently exist about the determinants of health of young people in post-conflict Sri Lanka and provide a foundation for further study. They also serve to highlight that significant shifts may be occurring in Sri Lankan society following the 2004 Tsunami.

Outcomes

The final report of the pilot project, "A Profile of Globalization and Youth Risk Behaviours in Sri Lanka," was prepared in the summer of 2006 and a series of peer-reviewed journal articles are planned. In addition, the Sri Lankan NGO partner, the Marga Institute, will be publishing a special issue of the Marga Journal featuring a series of articles on the pilot project, including additional items on youth risk behaviours and sustainable livelihoods for youth.

Team members made conference presentations over the course of the project year. In December 2004, a week before the Tsunami, the University of Ruhuna convened an international Sri Lanka studies conference attracting 80 international scholars from South and Southeast Asia. One of the key themes was youth risk behaviours and Dr Amaratunga was invited to serve as the chief guest and keynote speaker at the opening. Team members Dr Sarath Amarasinghe and Myrtle Perera presented preliminary research and findings from the pilot project and met with a number of key agencies in Sri Lanka involved in youth risk behaviours and tobacco control. Other knowledge translation activities included dialogue with youth, decision and policy makers in the Government of Sri Lanka, international development agencies and Sri Lankan and Canadian NGOs concerned with tobacco and drug use/abuse.

The project has also achieved significant partnership and capacity building. A genuine, long-term linkage between the University of Ottawa and the University of Ruhuna has been fostered. Training, exchange and mentoring opportunities for research partners, investigators and research assistants between the University of Ottawa, CIET Canada, the Marga Institute and the University of Ruhuna partners were also extremely beneficial. Discussions are underway with the medical faculties at the University of Ruhuna and the University of Ottawa to create ongoing e-learning linkages, including potential student elective interchanges and post-doctoral fellowships. Two University of Ruhuna medical school faculty members were invited to Ottawa in August 2006 to participate in an international e-learning conference.

The project has also created a foundation for involving new researchers and young people in research which affects them directly

Importantly, the project has established a collaborative, transdisciplinary research environment for a planned research project that will address youth risk behaviours in post-tsunami reconstruction and recovery. A much greater understanding and appreciation of the ecohealth approach-articulating the interplay among economic, environmental and social factors on health-was gained through this project, particularly following the tsunami. The project has also created a foundation for involving new researchers and young people in research which affects them directly, especially in the planning and delivery of the focus groups, surveys and policy dissemination.

Dr Amaratunga also co-chaired and convened four national tsunami recovery and reconstruction forums in Canada, in association with the Ocean Management Research Network of Canada and the Canadian Society for International Health. These workshops brought together over 200 researchers, policy makers and NGOs to address the need for

research as a tool in planning and policy development for the medium- and long-term impacts of the tsunami. Policy recommendations from the forums were sent to the Prime Minister of Canada's Office, senior officials in government, and NGOs, to help inform Canada's support to tsunami-affected nations.

Challenges and successes

Successful participation in international research is affected by several factors: the quality of interpersonal relationships, the availability of team members to participate in meetings, costs for international travel, and the degree to which team members are able to manage and balance multiple priorities. While communications and team maintenance were excellent with Sri Lankan partners, the project lacked sufficient resources for in-person workshops and regular face-to-face meetings for the large Canadian research team. The scope and size of the project team was perhaps too ambitious: a smaller core team may have been more suitable for this pilot.

The greatest challenge to the project was an external event, unforeseeable and completely catastrophic in its impact

However, the greatest challenge to the project was an external event, unforeseeable and completely catastrophic in its impact. On December 26, 2004, a massive earthquake off the coast of Indonesia triggered a series of disastrous tsunami waves that repeatedly struck the shores of many countries bordering the Indian Ocean. The tsunami wrapped around hundreds of kilometres of the coastline of Sri Lanka. Official estimates for Sri Lanka list more than 31,000 tsunami-related deaths, more than 5,000 missing persons, and more than 1,000,000 coastal residents affected or displaced.

The community infrastructure in the project study area was severely damaged and thousands of people in neighbouring communities lost their lives and property. The University of Ruhuna medical school residence, local clinics and hospitals were impacted, and university staff members, particularly those who resided in coastal towns of Hambantota, Matara and Galle, were greatly affected. Many key project partners were assigned by their employers to work on tsunami relief and reconstruction work.

The tsunami disrupted the project fieldwork and delayed the focus groups, as many coastal residents are now living as displaced persons in temporary shelters and encampments. A one-year extension to the project helped to recover some of the time lost during and after the tsunami, and facilitated completion of most of the fieldwork. A follow-up visit in March 2006 to the tsunami-affected areas revealed that the recovery process will take many years to complete.

YOUTH IN TRANSITIONAL SOCIETIES:

The search for health, safety and personal security

The success of this initiative in overcoming the challenges of geography and natural disaster was due in large part to an excellent team of researchers, some of whom have worked together for years, and who have built strong relationships based on trust, work and resource-sharing, and appreciation for the challenges of cross-cultural research. The time, generosity and in-kind contributions of many key partners, particularly RITC-IDRC and CIET Canada, were integral. A transparent budget process, which involved the consultation of overseas partners, and sufficient CIHR resources to undertake fieldwork in Sri Lanka and to enable Sri Lankan NGO and academic partners to visit Canada for project planning meetings, were also key factors to our success.

Future work

Every pilot project ends with more research questions than it initially raises. The tsunami created an infinitely more complex context for this pilot project, but it also provided the team with an opportunity to raise new research questions. This resulted in the identification of a number of fruitful avenues for future collaboration, including policy development,

program design and proposal development for future research, particularly with respect to medium- to long-term tsunami recovery.

Originally, the team intended to develop a comparative framework for the design and conduct of future research, such as the advancement to multi-site cross-national studies in other post-conflict regions. In view of the tsunami, the team will consider the development of a gender-sensitive comparative study within Sri Lanka itself, particularly to assess the impact of post-traumatic stress on youth in several communities. The Marga Institute and University of Ruhuna have agreed to continue their linkage with the Canadian partners and have expressed interest in building upon the work to date to develop a larger, multi-year proposal to better understand the psychosocial impacts of the tsunami and implications for medium- to long-term recovery. To this effect, exploratory discussions have already been convened with the University of Ruhuna, Marga Institute, UNDP Tsunami Recovery Unit, the Canadian High Commission and CIDA.

Further reading

Amaratunga, C. and H. Smith Fowler. "Social and political aspects of tsunami response, recovery, and preparedness planning: A transdisciplinary approach from Canada." In *Tsunami in the Indian Ocean*, edited by T. Murty and U. Aswathanarayana. Ottawa, ON: Taylor & Francis Group, forthcoming.

Amaratunga, C., H. Smith Fowler, M. Sawada, L. Jones, and K. McLaren. "Report on the National Tsunami Forum From Aid to Capacity Development: Fostering research alliances for medium to long term tsunami rehabilitation and reconstruction." National Forum Final Report, Ottawa, ON, April 21-22, 2005. <http://www.omrn.org>.

Madhavi, M. A. and M. Wickramasinghe. *Gender Dimensions in Disaster Management: A Guide for South Asia*. ITDG Publishing, 2005.

Perera, S. *Political Violence in Sri Lanka: Dynamics, Consequences and Issues of Democratisation*. Colombo, Sri Lanka: Centre for Women's Research, 1998.

Baksh-Soodeen, R. and L. Etchart, eds. "Women and Men in Partnership for Post-Conflict Reconstruction." Report of the Sierra Leone National Consultation, Freetown, Sierra Leone, 21-24 May, 2001. London, UK: Commonwealth Secretariat, 2002.

References

- ¹ UNAIDS/WHO Global HIV/AIDS Online Database. "UNAIDS/WHO Epidemiological Fact Sheet – 2004 Update." <http://www.who.int/globalatlas/default.asp> (Accessed 27/04/06)