Strengthening Selected Drug Demand Reduction Programmes in Sri Lanka,
AD/SRL/99/C71

Thematic area: Prevention and reduction of drug abuse
Region: Sri Lanka
Project budget: US$ 287,000
Project duration: 3 years
Executing agency: World Health Organization
Associated agency: Narcotics and Dangerous Drugs Control Board (NDDCB), Sri Lanka, UNODC
Type of evaluation: Terminal Evaluation
Date of evaluation: February - March 2003

Project description

Sri Lanka is experiencing an increase in the use of illicit drugs over the last 3 decades. Since 1987, the NDDCB had implemented 3 projects related to drug abuse demand reduction. The current project attempted to strengthen the existing Drug Abuse Monitoring System, to improve outreach prevention for high risk groups, to and improve quality of treatment service. The major activities included expansion of data from the DAMS system to include hospital data, strengthening of the prisoner diversion system, establishment of outreach and drop in centers,

Findings and conclusions of the evaluation team

Concept and design

The evaluation team was of the opinion that the objectives were congruent with national objectives and priorities, and with UNODC priorities. The objectives looked at strengthening gains from previous projects. Achievement indicators were adequately planned.

Project Implementation and Management

Roles and responsibilities of implementing partners were clearly defined. Project management was effective. However, the attempts at extending the DAMS to the hospital system was ineffective, and the contractual obligations towards this activity were not satisfactorily fulfilled.

Project Results

Objective 1- expansion of DAMS
Output 1 of expansion of the DAMS to cover hospitals was partially achieved.
Output 2 of expansion of the DAMS to cover the data from the Prisoner Diversion Scheme was
achieved
Output 3 of expansion of DAMS to include data from outreach and drop-in centers was partially achieved

Objective 2 – Improvement of Outreach Prevention for High Risk Groups
Output 1 of establishing and functioning of 5 drop in centers was partially achieved. The evaluation team noted with concern that 3 of the centers had been closed down due to financial constraints.

Objective 3. Improvement of Quality of Treatment Services
Output 1. Enhancement and Expansion of Quality Assurance Programme to include NGO supported treatment centers
This was partially achieved. However, a change in strategy in NGO involvement was noted.
Output 2 of expanding the prisoner diversion scheme to cover 600-800 prisoners was achieved

Recommendations and lessons learned

A great deal of autonomy was given to the NDDCB in project implementation and this is vital for development of in-country potential in programme development and execution. Several changes in the action plan were noted, but these need to be properly reflected and justified. Also the response from the Health Sector and the non-governmental sector to achieve some to the objectives has been unsatisfactory. Ways of involving these important sectors should be further evolved. Despite expenditure on software, the qualitative analysis of the DAMS has not been undertaken, nor has a secondary data analysis been done to get a deeper understanding of the situation.
Specific recommendations made by the evaluation team include the following:

1. Through the Ministry of Health, ensuring data collection on substance use through the hospital record system
2. Gathering information from the private health sector and involving this sector in training in drug demand reduction
3. Engagement of the NGO treatment centers
4. Linkages with community organizations working in prevention of other public health problems including STD/HIV/AIDS
5. Intersectoral training
6. Detailed analysis, including qualitative analysis of the DAMS
7. Expansion of the open community approach

Follow-up

To be filled by the project management team