

GBVIMS Factsheet, Q3 2024

Cox's Bazar

July-September 2024



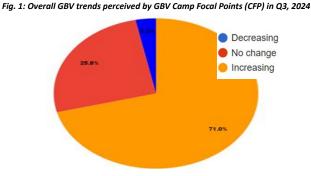
Methodology & Data sources:

The mixed-method analysis presented here is the result of GBVIMS data analysis, triangulated with Focus Group Discussions (FGDs), Key Informant Interviews (KIIs) and Perception Surveys with GBV field actors, Camp Focal Points (GBV CFP) and various stakeholders in the camps and host communities. For 2024 Q3, GBVSS conducted Focus Group Discussions (FGD) and Key Informant Interviews (KII) with service providers across 33 camps. Data sources: (i) GBVIMS analysis: GBVIMS incident recorders from 16 data gathering organizations (DGOs), (ii) GBV Perception survey: Key informant survey responses from GBV Camp Focal Points across 33 camps, (iii) GBV risk monitoring FGD/KIIs (with GBV CFP and case workers): Service provider FGD discussions & KIIs from actors across 33 camps



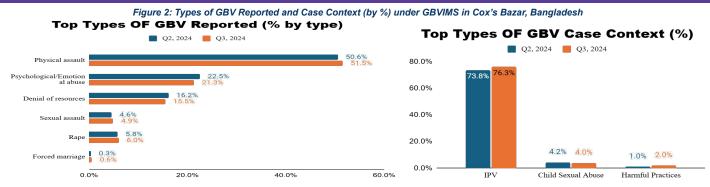
KEY INSIGHTS

- In Q3 2024, overall reported GBV incidents decreased by 0.93% compared to Q2 2024.
- •0.6% increase of Sexual Violence in comparison to Q2 2024
- Of all reported rape incidents, **46%** were reported within 72 hours of the incident. Survivors who consented to CMR referral, **96.21%** were **referred and treated within the critical 72-hour window** in Q3 2024
- **85.6%** of the survivors are Married; **8.4%** Single; **3.6%** divorced and **2.3%** are widowed.
- Perpetrators Age: 26-40 years old 64.5%; 41-60 years old 18.3%; 18-25 years old – 15.1%.
- Perpetrators numbers: 1 perpetrator: 85.6%; 2 perpetrators: 8.2%; 3 perpetrators: 3%; more than 3 perpetrators: 3.2%.

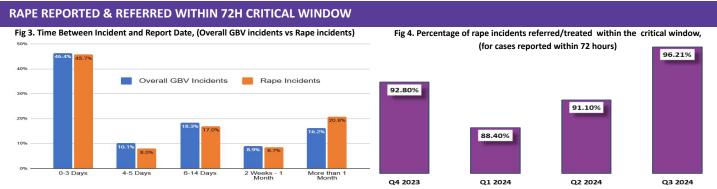


Partners attributed the decrease in reporting to barriers related to restricted mobility within the camp, which resulted from heightened insecurity.

GBV INCIDENTS IN Q3 2024: most commonly reported types and context in GBVIMS



By types of GBV incidents, the most commonly reported types in Q3 2024 are **physical assault, psychological/emotional abuse**, and **denial of resources**. The increase in the percentage of sexual violence (comprising rape and sexual assault) can be attributed to increased reporting. Regardless of the classifications above, in terms of the context of all reported incidents in Q3 2024, intimate partner violence (IPV) is the most common, followed by child sexual abuse and harmful traditional practices. GBV CFPs reported an observed increase in IPV across most camps, associated with various forms of violence, including sustained physical assaults, marital rapes, and denial of resources.



Of the reported rape cases, 46% occurred within 72 hours of reporting. A significant 96% of these cases were referred for clinical management of rape (CMR) services within the critical window, while 4% did not receive services within the timeline. The heightened risks, insecurity, ongoing violence and fear of GBV incidents deterred the 4% of individuals from seeking services promptly, especially women and girls who felt unsafe due to the increased presence of the armed groups in the camps.



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SAFETY PERCEPTIONS and TIME & LOCATIONS OF REPORTED GBV INCIDENTS

Fig 5. Women and girls' safety perception scale on camp security due to the recent security situation changes in Q3 2024, according to GBV Camp Focal Points, by % of camps (1 = very safe, 5 = very unsafe)

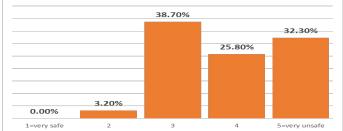
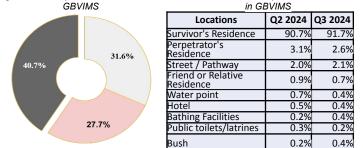
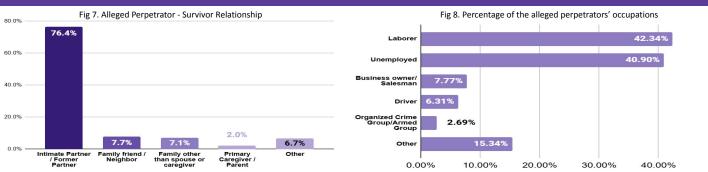


Fig 6. Time of reported GBV incidents in Table 1. Locations of reported GBV incidents



Regarding the perception of safety and security among women and girls in the camps, GBV CFPs from over **58.1%** of the surveyed camps indicated that women and girls feel significantly unsafe or very unsafe in Q3 2024. Survivor and perpetrator residences continue to be the most frequently reported incident locations. From the focus group discussions (FGDs) and key informant interviews (KIIs), public hubs (such as streets, pathways, and marketplaces) were flagged as areas of concern due to threats, eve teasing, and bullying. Additionally, public latrines, water points, and bathing areas pose risks of peeping, videotaping, harassment, and blackmail. Major concerns include a lack of lighting, the threat of organized groups, and fear of harassment.

ALLEGED PERPETRATOR'S OCCUPATION



Perpetrators who are either unemployed or daily wage earners represent the highest proportion among all parameters in this context. The occupation of perpetrators is closely related to the lack of income-generating opportunities and services. Furthermore, focus group discussions (FGDs) indicated that the absence of livelihood opportunities contributes to substance abuse, as well as poverty and food ration shortages, resulting in increased intimate partner violence and other forms of gender-based violence (GBV).



REFERRALS SERVICE PROVISION AND GAPS

1. Rohingya volunteers in the camps who receive stipends for regular/ ad-hoc supports are counted as "labor" so unemployed here refers to those that are not volunteers

The GBVIMS factsheet is a quarterly product produced by the GBV Sub-Sector, Cox's Bazar. For any queries, please reach out to the GBV Sub-Sector team with the contact information below: GBV Sub-Sector Coordinator: Annie Waweru <u>waweru@unfpa.org;</u> GBV Sub-Sector Information Manager: Yamuna Shrestha <u>vshrestha@unfpa.org</u> Rohingya Response Webpage: <u>https://rohingvaresponse.org/sectors/coxs-bazar/protection/gender-based-violence/</u>



The GBVIMS statistics shared are from reported incident and cases and is in no way representative of the total incidence or prevalence of Gender-Based Violence (GBV) in Cox's Bazar, Bangladesh. These statistical trends are generated exclusively by GBV service providers (16 out of 57 total partners in GBV sub-sector) using the GBV Information Management System (GBVIMS) for data collection in the implementation of GBV response activities in a limited number of locations across Cox's Bazar and with the informed consent of survivors. Qualitative information has been provided through use of interviews with key informants in order to triangulate IMS statistics. This data should not be used for direct follow-up with survivors or the afore-mentioned organizations for additional case follow-up. The following information should not be shared outside your organization/agency/sector. Failure to comply with the above would result in revoking pre-approved data sharing/ or refusal of future requests for data.