CASE STUDY 1: A legacy of cyclones: Bangladesh
1. Executive summary

The International Federation of Red Cross and Red Crescent Societies (IFRC) is advancing the development of policy research to support advocacy and action for enhanced response to and prevention of gender-based violence (GBV) in disasters. To further this objective, the IFRC commissioned a global study on GBV in disasters in 2015, including nine case studies across the Asia-Pacific, Africa, Latin America and Caribbean and Europe regions. Bangladesh was selected as a case study due to the strong expression of interest from the Bangladesh Red Crescent Society (BDRCS) and the country's vulnerability to cyclical disasters including cyclones, floods, landslides and river erosion. The research was carried out from 30 July to 12 August, 2015 and adopted a participatory methodology informed by a desk-based literature review of over 40 documents, 17 key informant interviews (KII) and 7 focus group discussions (FGD). KIIIs and FGDs were held with significant stakeholders at the national level and affected populations living in an urban slum in Dhaka. A field mission was undertaken to Noakhali, a low-lying cyclone prone district, to assess the availability of a multi-sectorial response for GBV survivors, and interview affected populations that regularly utilise the cyclone shelters. Limitations include the time allocated for this case study and the narrow geographical scope covered compared with the high population and disaster risks across Bangladesh.

Key findings:

Overall, there are low levels of awareness on gender needs and GBV risks and patterns among key disaster responders, including the government and Bangladesh Red Crescent Society (BDRCS) staff. A persistent lack of data, whether it is official record keeping by public authorities or information on traditional arbitration (preferred by communities dealing with GBV cases), makes it difficult to draw conclusive findings on GBV risks and patterns in disasters across Bangladesh. Within the IFRC Secretariat in Bangladesh and the National Society, there is a variation in the level of awareness among internal staff, including gender appropriate responses during disaster preparedness and response. For example, the hygiene parcels given during relief distributions include some feminine hygiene items such as sanitary napkins, washing powder, a bucket and soap. However, there is room for improvement in ensuring that other important items such as saris and petticoats are also included. Similarly, whilst cash grants are usually given to disaster affected women during the recovery period, it was recognized after the recent Cyclone Roanu, that pregnant and lactating mothers should be specially targeted for such cash grants. There is a greater need for organization wide awareness
on specific GBV prevention and response related issues. Affected communities at the district level and in urban Dhaka slums also have low levels of rights awareness related to GBV, perhaps due to limited service availability.

There is significant variation across national, district, sub-district and union levels in terms of availability of and access to multi-sectorial response services for GBV survivors. This results in a generalized understanding of GBV vulnerability across key stakeholders, where women and children are presented as most vulnerable by interviewees. An understanding of how boys, men and minority groups, such as lesbian, gay, bisexual, transgendered and intersex (LGBTI), are affected, is almost entirely absent.

Safety and security are primary concerns of disaster-affected populations in Bangladesh, whether they live in an urban slum or a cyclone shelter setting. Specific issues mentioned by focus group participants include the lack of toilets, lighting, clean birthing facilities and transport to cyclone shelters. An increase in urban migration after disasters in order to fulfill livelihood needs was also expressed, including the majority of male FGD participants citing the obligatory need to migrate for seasonal work, due to large loss of assets, and a smaller number of women being forced to migrate to urban centers to either work in garment factories or for seasonal sex work.

**Recommendations**

**To all actors**

- **Implement and mainstream the IFRC Minimum Standard Commitments to Gender and Diversity in Emergency Programming through all phases of disaster preparedness, risk reduction and response** from BDRCS, government and other partners including human resource policy and practice.

- **Emphasize** preparedness as key in preventing known patterns of GBV in disasters (for example the design and maintenance of emergency shelters and mapping service providers so that rapid referral information can be provided to community members; and donors can provide service providers with money to re-equip their service delivery in the days following a disaster).
Ensure all assessments include an appropriately qualified protection/GBV specialist from the government or civil society;

Implement IASC and/or Red Cross Red Crescent Movement recognized monitoring and evaluation indicators on GBV in disaster settings.

Launch a Primary Prevention of and Response to GBV programming approach to change the narrative on GBV, data and disasters and to stress the fact that men and boys can also be at risk. This should be led in partnership by the BDRCS, and may provide recommendations to actors such as Action Aid, the Ministry of Women and Children’s Affairs (MOWCA), the Department of Disaster Management and the national gender networks.

Strengthen local capacity to prevent and respond to GBV during and after disasters by specifically investing in training of disaster responders at all levels.

Revise the 2010 Standing Orders on Disasters (SODs) to better integrate gender and GBV concerns including clarifying roles, responsibilities and accountabilities across government ministries at headquarter and field level. Specifically, use SGBV and Child protection cluster to implement section 4.2.17 on MOWCA’s role during disaster preparedness and response, especially in connection to GBV mainstreaming and women and children’s protection.

Ensure safety for women and girls on the way to, from and within cyclone shelters.

Safeguard access of all groups to relief items and cyclone shelters during disasters. Especially vulnerable minority groups, such as the Rohingya, sex workers, the Mahtas, Dalits and Mund should not be discriminated against and excluded from basic services after disasters. This reduces GBV risks for vulnerable minority groups.

To government actors

Invest in dedicated capacity building on GBV and strengthened working relationships at the national and field level in particular with key government counterparts including Ministry of Health, Social Welfare, Women and Children Affairs and Department of Disaster Management (DDM).

Partner with development actors on mapping and capacity building for holistic multi-sectorial response services.