# Worksheet: Collecting Community information and Developing Referral Lists

The following worksheet helps project staff prepare a referral list. A referral list should be readily available to all project staff so that they understand what gender-based violence (GBV) resources are available in the project community and are prepared if GBV emerges or is disclosed as an issue during project activities. Remember, local partners addressing GBV may already have a referral list you can use.

This tool was adapted from the IASC[*How to support survivors of gender-based violence when a GBV actor is not available in your area: A step-by-step pocket guide for humanitarian practitioners*](https://gbvguidelines.org/wp/wp-content/uploads/2018/03/GBV_PocketGuide021718.pdf)*.*

**Instructions:**

* Determine the **geographic area** to be included in the referral network. Where do most of your project participants live? How far can they travel to seek support? If the project covers multiple areas, each site may need a different directory to ensure that the services are geographically accessible to women and other at-risk groups.
* Identify local **organizations with GBV expertise that project staff can consult** for advice, if needed. These may include local women’s organizations, the government’s “gender desk,” or other projects with a GBV focus. This may also include organizations related to addressing key issues, such as sexual exploitation, abuse, and harassment. These are likely the same organizations you will consult with to identify referrals for GBV survivors.
* Identify community-based resources that can **provide direct support for women and other vulnerable groups who experience GBV**, being sure to consider all groups.
* **Formal support systems** includesocial welfare resources, such as safe places to stay; counselors for psychological support; health facilities or personnel in case medical treatment is necessary; police for official reports, if court involvement is needed; and other services provided by other organizations in the community that engage in the prevention of and response to GBV, including other non-governmental organizations and community organizations working in areas related to GBV.
* **Informal resources** includesocial networks; community groups (especially existing women’s groups); trusted individuals (people who have been champions to speak out about positive male norms and the unacceptability of GBV); and religious and community leaders. Informal resources are context-dependent. Efforts to reach out to women’s organizations and key community informants can provide important insights into the informal networks, community groups, and key individuals that survivors can reach out to for assistance.
* **For each resource**, be sure to include the name of the organization, the support it provides, its location, how it can be contacted, and a key point of contact (position title and name) if available. Be sure to include the date when the sheet was developed or updated.
* Fill in the information sheet for referrals in your area and keep it in an easily accessible place.

**1) Organizations/contacts with GBV expertise**

| Organization | Details about support provided | |
| --- | --- | --- |
|  | **Type of support/ services offered** |  |
| **Best contact person** |  |
| **Contact information** |  |
|  | **Type of support/ services offered** |  |
| **Best contact person** |  |
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|  | **Type of support/ services offered** |  |
| **Best contact person** |  |
| **Contact information** |  |
|  | **Type of support/ services offered** |  |
| **Best contact person** |  |
| **Contact information** |  |

**2) *Formal* support systems**

| Organization | Details about support provided | |
| --- | --- | --- |
|  | **Type of support/ services offered** |  |
| **Best contact person** |  |
| **Contact information** |  |
|  | **Type of support/ services offered** |  |
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|  | **Type of support/ services offered** |  |
| **Best contact person** |  |
| **Contact information** |  |

**3) *Informal* resources**

| Organization | Details about support provided | |
| --- | --- | --- |
|  | **Type of support/ services offered** |  |
| **Best contact person** |  |
| **Contact information** |  |
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