Since NP upcaled its programming in the South Mosul region in February 2022, NP has observed a high level of unmet needs and protection concerns in local communities. Security duty bearers and government bodies are unresponsive to crucial issues such as GBV, lack of social cohesion, and others community needs such as trash collection. Services and support for GBV, mental health and psychosocial support (MHPSS), health, education, livelihoods, and infrastructure are all lacking.

While there are INGOs and national NGOs in the region, their projects are limited in scope. Government service provision is small or non-existent. The Community Police (CP), the institution responsible for responding to incidents of GBV, and the local police have no women officers in South Mosul to lower the barriers for women to seek out assistance from security duty bearers. Further complicating the situation is the downsizing and closing of NGO service providers in the region. From February to June 2022, five NGOs closed their projects in South Mosul, leaving only NP and 3 other NGOs with a permanent presence in the area.

Despite the existing NGO presence in South Mosul prior to NP’s upscaling, there was no active coordination mechanism between the NGOs in the region and no formalized referral pathway. Partners had limited knowledge of each other’s work and only referred a small number of cases to each other informally through personal contacts.

To address these gaps, NP started meeting with all the NGO providers in South Mosul in February 2022 and mapped their presence, services offered, and target populations, as well as exchanged contact details for focal points. To build on this effort, NP brought all the NGOs in South Mosul together and established the South Mosul NGO coordination group with a regular monthly meeting and an active WhatsApp group to discuss challenges, share updates on services available, and discuss potential joint advocacy initiatives. The first meeting of the coordination group provided the space for all the partners to learn of each other’s services and project participants and NP introduced a standardized referral form.

In order to further address the service gaps in the area, NP made numerous trips into Mosul City between February and June to map service providers and attempt to open a referral pathway between Mosul City and South Mosul. NP visited upwards of 10 NGOs, collected information about their services and target populations, clarified whether they would accept referrals from South Mosul, and agreed on referral procedures. NP then passed this information to its partners in the South Mosul Coordination group. Enthusiasm from partners was growing as some Mosul based NGOs that remotely cover South Mosul also joined the new coordination mechanism.

NP’s efforts are bearing fruit. NP identified a case of a 9-year-old boy in need of a prosthetic leg in South Mosul through its community network. NP referred the case to a partner’s office in Mosul who responded promptly. The boy received a prosthetic leg and physiotherapy sessions in order to learn to use his new prosthesis. The boy and his father visited NP’s office afterwards to thank the team for their efforts as the boy was now playing with friends and attending school with less difficulty than before.

NP will continue to refer cases like this in the future as it identifies them in South Mosul, but, over time, as NP works to facilitate the creation of community protection and peace teams in South Mosul, relationships to service providers and responsibility for referrals will be handed over to them after trainings in case identification, confidentiality, and referrals are conducted. This should facilitate greater and safer access to services as the protection teams will be deeply embedded in their communities.