SOUTH SUDAN | CAMP COORDINATION AND CAMP MANAGEMENT (CCCM) CLUSTER

SITE PROFILE | **Mangalla IDP Camp** | **October 2022**

SOUTH SUDAN CCCM CLUSTER
SUPPORTING DISPLACED COMMUNITIES
www.cccmcluster.org

Context

Established in 2020 as result of large-scale displacement caused by flooding in Jonglei state, there are currently 38,658 of IDPs in Mangalla IDP camp. UNHCR is camp manager in partnership with a local NGO Rural community Empowerment Network (RCEN), implementing CCCM activities and coordinating the provision of humanitarian services. Currently, displaced persons are residing in IDP sites in zone 1,2 and 3.

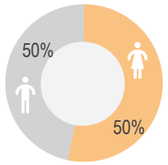
Quarterly Highlights

1. Monitor service provision in the site and flag any duplication or gaps in service provision.
2. Continue to monitor movement of IDPs
3. Coordinate with the partners to minimize service gaps

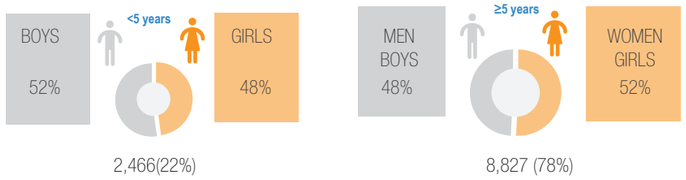
Site demography

Total IDPs

38,658
(5,232 HHs)
total IDPs living inside Mangalla IDP Camp



Age and sex disaggregated data



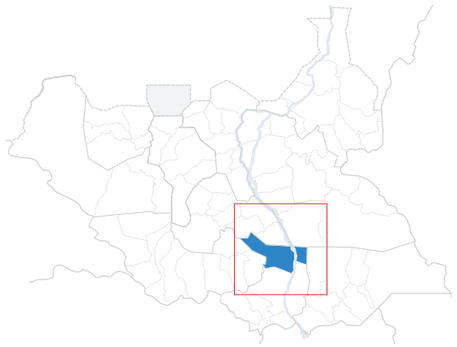
Population count by sector as of April 2022

Site overview

Site location

Latitude: **5.076⁰**
Longitude: **31.856⁰**

Established in: **June 2020**



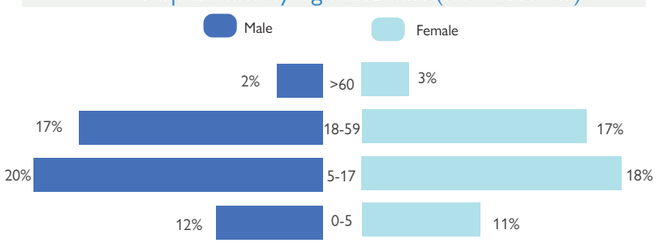
Sector overview

Sector	Indicator	Target	Achieved		Implementing Agencies
CCCM	Land area per person	30m²	**30 m²**	●	UNHCR, RCEN
Shelter/NFI	% of IDPs covered with non-food items	100%	**31%**	●	PAH, HDC
	Average floor area/person	>3.5m²	**3.5**	●	PAH, HDC
WASH	Water availability (liters per person per day)	>15	**< 5**	●	TERM(The Rescue Mission), PAH
	# people per water tap	<250	**-**	○	TERM(The Rescue Mission), PAH
	# people per latrine	<20	**>20**	●	TERM(The Rescue Mission), PAH
	# people per shower	<100	**>100**	●	TERM(The Rescue Mission), PAH
Education	Teacher to students ratio	50:01:00	**46:01:00**	●	CEF, WVI
	% of enrollment in primary school	100%	**100%**	●	CEF, WVI
Food/Livelihood	% of household receiving food ration	100%	**80%**	●	World Vision
Health	Mortality below 5 years of age	<2	**<2%**	●	HLSS, BCSS, SSHC, CAHA, Care
	Mortality above 5 years of age	<2	**<2%**	●	HLSS, BCSS, SSHC, CAHA, Care
Nutrition	% of SAM prevalence below 5 years of age (by MUAC)	<2%	**2%**	●	ART, WVI
	% of GAM prevalence below 5 years of age (by MUAC)	<10%	**10%**	●	ART, WVI
Protection	% and # of children under 5 provided with birth registration notification	100% of <5	**-**	○	PAH, HI, CH, CCC, WVI, HDC
	% of newly identified Unaccompanied or Separated children registered for Family Tracing and Reunification	100%	**-**	○	PAH, HI, CH, CCC, WVI, HDC

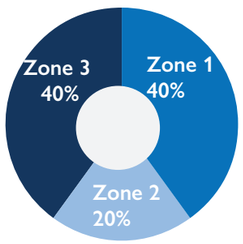
● Target reached ● Target more than 50% reached ● Target less than 50% reached ○ Unknown

Flow monitoring

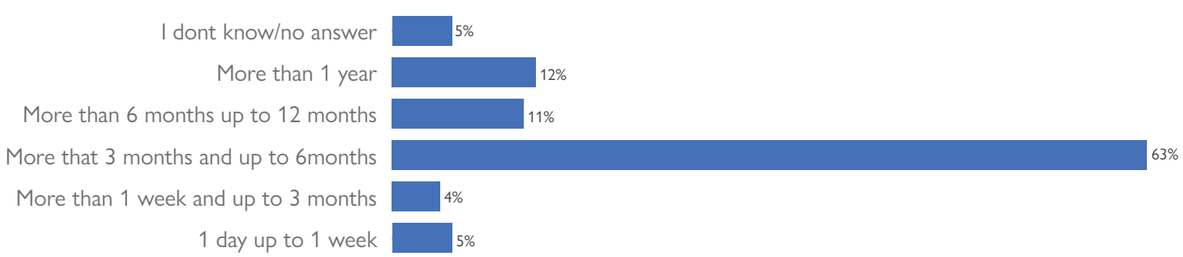
Population by age and sex (new arrivals)



Population distribution by Zones

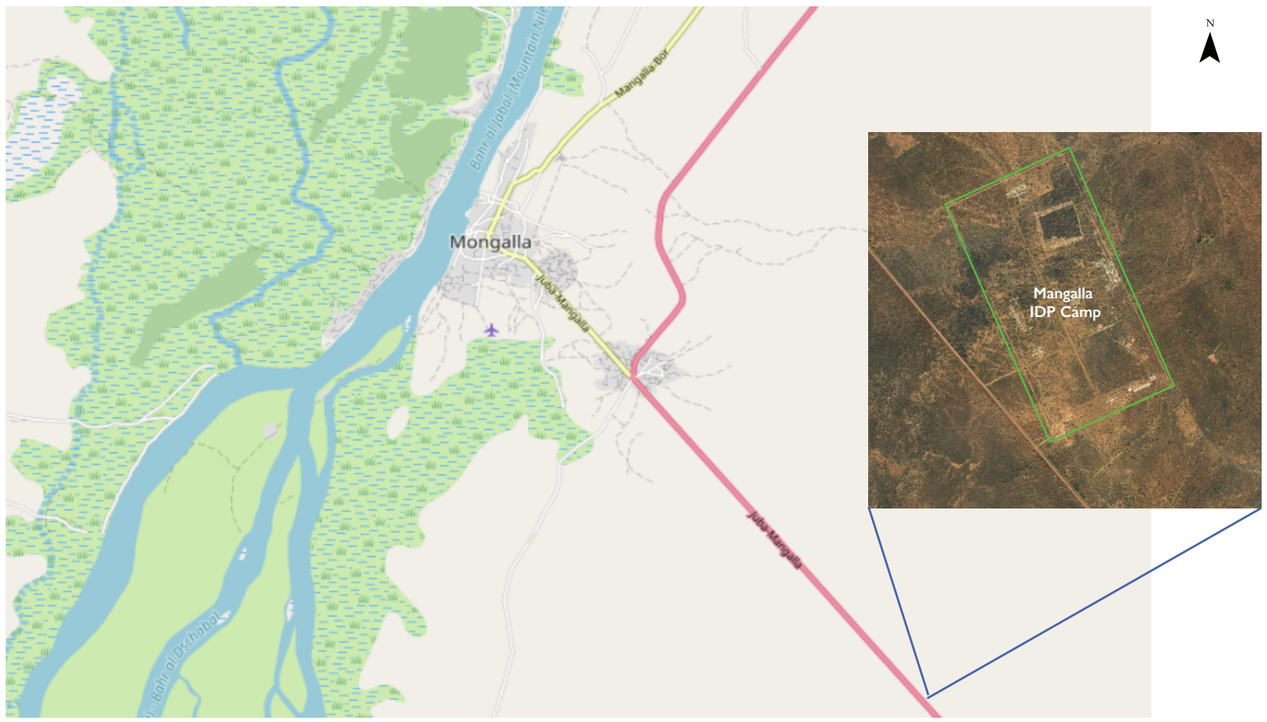


Intended duration of stay (new arrivals)



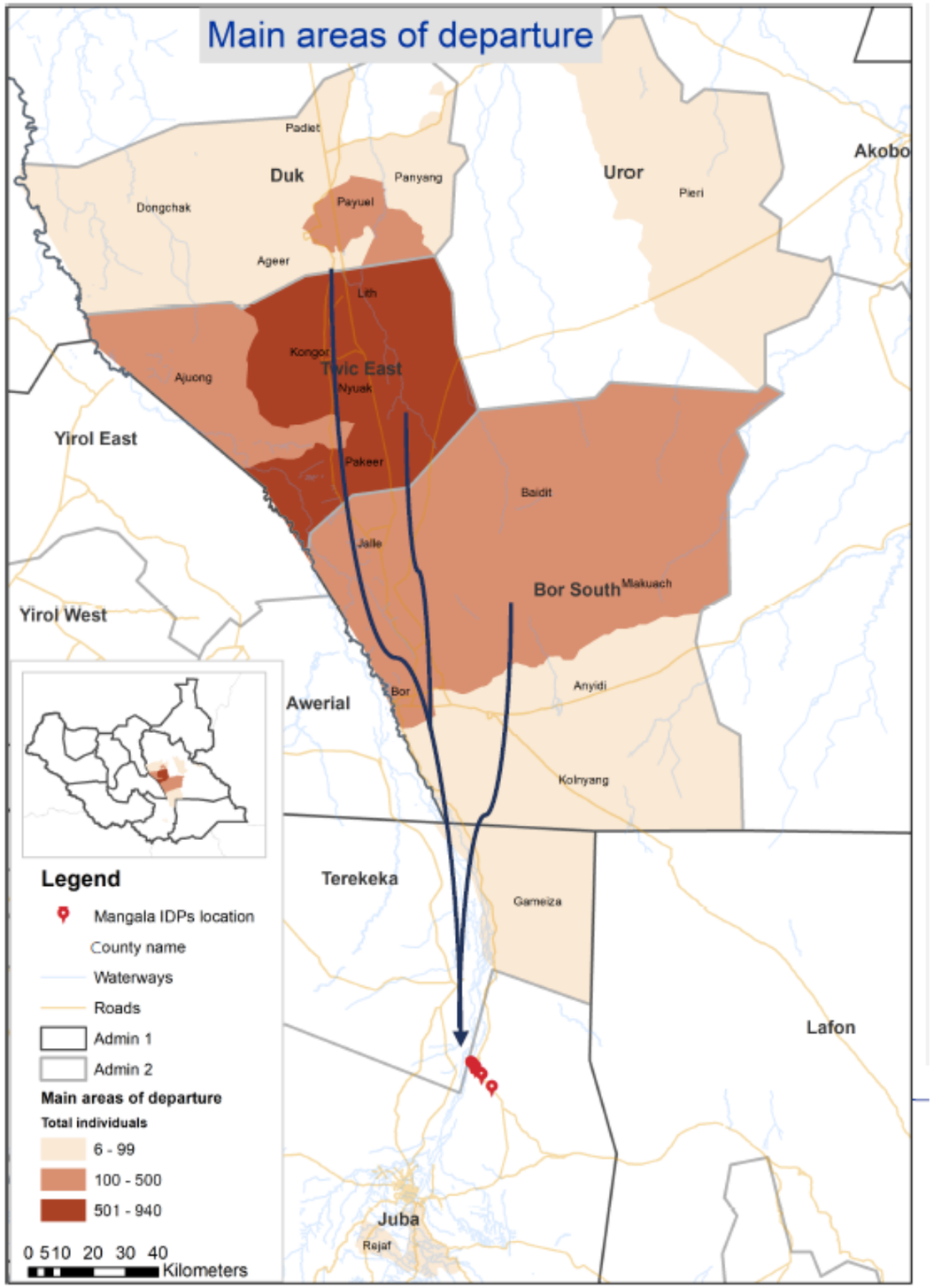
For more details and methodology, please visit DTM website:- https://reliefweb.int/report/south-sudan/dtm-south-sudan-mangala-rapid-flow-monitoring-september-october-2020

Overview map of Mangalla IDP Camp



Data Source: Flow monitoring data IOM-DTM (April 2022), Population data:UNHCR Headcount April 2022, Indicators- UNHCR & partners, October 2022

Mangalla IDP Camp

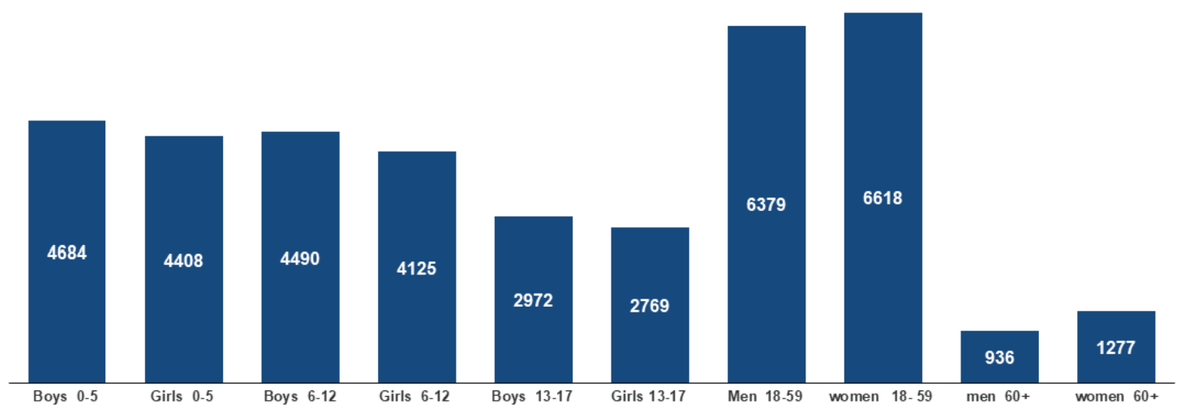


For more information please email southsudandtm@iom.int. More resources are available at displacement.iom.int/south-sudan

Mangalla IDP Camp Service provision status

Cluster	Partners	Service Provision Gaps
FSL	WVI	General food distribution last took place in November 2021, leaving the IDPs in dire need of food assistance.
Nutrition	WVI, ART	Only ART are supporting malnourished children with supplementary feeding, and they have limited resources and capacity.
Protection	PAH, HI, CH, CCC, WVI, HDC	Partners remain key to implementing protection activities but with limited to resources continue to affect the activities and, GBV as a key component of protection remain unimplemented in the camp.
WASH	RM, PAH	Water/Sanitation: Most of the households lack pit latrine, this is a high risk among the IDP population couple with the reason session approaching.
SNFI	HDC, PAH	Shelter and NFIs: The current distribution of NFIs only targeted newly arrived IDP population in the camp and who are looking for settlement at IDPs site, 2020 NFIs distributed have warned out and these exposed the entire population at high risks especial the PSN, widow and child-headed family.
Education	CEF, WVI	Education: Lack of support for teachers' incentives continue to affect education activities in Mangalla IDPs and contributed to irregular reporting to the teacher
Health	HLSS, BCSS, SSHC, CAHA, Care	Facilities are not sufficient and shortage of medical staff, essential drugs The health partners reported a high prevalence of Malaria within the camp and acute respiratory diseases among other, with a lack of cold refrigerator to keep the vaccines and drugs at the optimal temperature this affect the storage of vaccines and other drugs that require a cold chain system, HIV cases reported remain high in Mangalla and most patients lack treatment and other services.

Mangalla IDP Sites population by age group October 2022



Source: data source CCCM
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