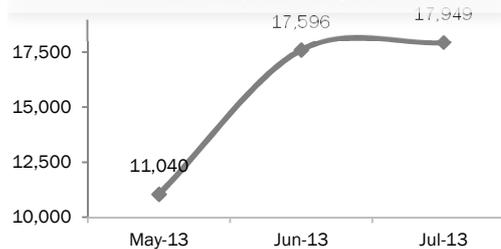




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Population Snapshot
Cumulative Population by Month


Nbr of Household	4,447
Avg Household size	4.0
% of Children (<18)	58%
% Women & Children	81%
Refugee Registration:	

Biometric verification completed in March 2013 in Jamam

Geographic Snapshot

Jamam Camp is located in Maban County, Upper Nile State

GPS Coordinates
 Long 33.575038
 Lat 10.092072

Distance from Border 55 km (Old Guffa direction)

Size of Camp Area 754 hectares

m²/Person 428

Age & Gender of Registered Refugees

Age (Years)	Male (50%)	Female (50%)
0-4	2,025	1,961
5-11	2,150	2,189
12-17	1,058	1,166
18-59	2,873	3,714
60+	468	345

Contextual Background
Kaya Refugee population has been relocated from Jamam camp during May and June 2013

Area of Origin Sudan, Blue Nile State (mainly from Bau area)
Ethnicity Ingassana, Magaya, Jumjum, Mufu, Mayak, Darfuris
Main Occupation Predominant is agriculture (around 70%), nomadic pastoralist and, for Ingassana, artisanal gold mining

Meetings Calendar

MON	11:00 Education @UNHCR Bunj
TUE	10:00 Committee Meeting (with Refugees Rep) 11:30 Kaya Coordination Meeting 16:00 Logistic @UNHCR Bunj
WED	11:00 Nutrition @UNHCR (biweekly) 14:30 WASH Coord @Solidarite Gendrassa
THU	14:30 Security @UNHCR Bunj 15:00 Coordination Meeting @UNHCR Bunj (biweekly)
FRI	10:00 Health and Outbreak Coord Meeting @UNHCR (biweekly)

Administrative Structure
Upper Nile State Authorities

Governor: M. Simon Kun
 Deputy Governor: M. John Ivo
 RRC Director Malakal: M. Peter Pal

Local Authorities

County Commissioner: Hafez Bagar Lanka
 RRC Coordinator Maban: M. Alex Balla
 RRC Refugee Coordinator: M. Yohannes Luul

Operational Refugees Committees

Camp Committee	13 members (15% F)	Night Watch	22 members (0% F)
Women Committee	22 members (100% F)	Joint Committees	22 members (27% F)
Youth Committee	22 members (50% F)		

Highlights

Police Officers in Kaya have been unsuccessful in preventing military personnel entering the camp; a concern which violates the maintenance of the civilian character of the camp. UNHCR has begun discussing and guiding health partners, on a consensual strategy to address the feeding requirements of orphaned infants who have no access to breastfeeding. The strategy takes into account the global IYCF (Infant feeding in emergencies) policies. UNHCR camp management NGO partner, ACTED has assembled over 1,000 Phase One Shelter units using timber, bamboo, binding wire and nails for distribution to refugees in before seasonal rains intensify.

Kaya Monthly Updates

Protection

Protection has been following up on a reported case of severe ill-treatment in detention with authorities. UNHCR further facilitated a meeting between the four men that were ill-treated (2 refugees, 2 host community members), their leaders and the NGO for which the men were working. The four men and their Sheikhs held the NGO responsible for injuries which the victims sustained in detention. The NGO regretted the incident and clarified that they did not intend to expose the security guards to any harm and offered medical treatment if necessary.

SGBV	SGBV Referral System		Referral pathway has been revised: health, psychosocial and material (based on individual needs) support activated. Partners and UNHCR are meeting biweekly to ensure individual case management and follow up of identified cases.			
	# Reported cases	15	# Cases receiving support	9		
	# Refugees Trained in GBV	44				
Child protection	# of Child Friendly Spaces	4	Monthly Average Attendance	n/a		
	% Girls attending	n/a				
	UM-SC Mechanism	FTR Mechanism established				
	# UM-SC identified & documented	37	# Foster care arrang.	3		
	# Positive FTR	1				



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Education

Minimum Sectoral Data	Value	Standard	% F	Minimum Sectoral Data	Value	Standard
% of Refugees Enrolled in Primary School*	67.6%	100%	66%	Number of Students per Teacher	57	40
% Average Monthly Attendance	95%	n/a	96.3%	% of Female Teachers	46%	50%

Distribution of learning, sewing kits was carried out to students.

*Crude Enrollement Rate taking into account also students older than 13 years

Water and sanitation

Minimum Sectoral Data	Value	Standard	Minimum Sectoral Data	Value	Standard
Avg water available (litres/person/day)	18.1	>=20	Crude Toilet Coverage	16	<=20
Nbr of persons per usable water taps	157	<80	% of families with family shared latrines*	99.7%	n/a
Water collected at HH level (litres/person/day)	n/a	>=20	% of PoC receiving >=450g soap/person/month	100%	100%



Photo Credit: UNHCR/P. Rulashe

Backfilling of main water pipeline has finally been completed (from pumping station to storage tanks). The water trucking remains for the distribution of water inside the camp. The water access indicators are below the UNHCR standards, especially in the number of taps per person. The completion of the water system is already 4 weeks behind schedules. On the sanitation side, the indicators are good. Oxfam need to scale up HP during the rainy season to reduce the risks of water borne diseases.

*Family latrines are shared among 4 families, based on a average household size of 5 members, to respect the standard of 20 persons per drop-hole

Health/Nutrition

Minimum Sectoral Data	Value	Standard	Minimum Sectoral Data	Value	Standard	Minimum Sectoral Data	Value	Standard
CMR/10,000/day	0.16	<1	# Persons/Health Facility	8,975	<10,000	% of U5 GAM	12.7%	<10%
U5 MR/10,000/day	0.50	<2	Health Facility Utilisation	2.8	1-4	% of U5 SAM	3.8	<2%

The crude and under five mortality kept also within the emergency threshold. UNHCR in partnership with MSF-H and IMC provided primary health services to refugees and the one health post opened and started provide health services in order improve access health services. The additional services namely immunization, ANC and outreach health and nutrition promotion have started. The most common cause of OPD consultations are LRTI, URTI, AWD and malaria. The trend of HepE outbreak is stable. Blanket mosquito nets distribution with health promotion and demonstration on use has been done.

Both blanket and targeted Supplementary Feeding Programmes for children under five years, pregnant and lactating women continued in Kaya. Outpatient therapeutic care also provided to SAM cases in Kaya through IMC. World Breastfeeding activities were completed.

General Food Distribution

Date of last distribution	1st July	Length of ration	30 days	Next planned distribution	31 July - 1 August
Avg Kcal/person/day provided	2,109	Planned beneficiaries	16,626	Served beneficiaries	16,388