Rapid Response Fund

Approval

Project Code	RRF No. Uganda 2026
Project Name	Emergency Response to Hunger Crisis in Karamoja

The ACT Secretariat has approved the use of **USD 130,000** from its Global Rapid Response Fund (GRRF26).

Reporting Deadlines	
SitRep *(one month after approval)*	01 September 2026
Final Reports (narrative and financial)	31.12.2026
Audit Report *(for projects >USD50,000)*	30.01.2027

For further information please contact:

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Approved By the RRF review Panel

22.07.2026

Rapid Response Fund

Project Proposal

Do you have an EPRP	Yes
When was the last update?	1 Jul 2026
Assessment for this response?	On- going

Please submit this form to the Humanitarian Coordinators in your region	Date submitted to ACT Secretariat
	24 Jul 2026

Section 1 Project Data

Project Information

Project Name	Emergency Response to Hunger Crisis in Karamoja
Project Code	*RRF No. Uganda 2026*
Country Forum	ACT Uganda Forum
ACT Requesting Member	Church of Uganda (CoU) Rural Action-Based Community Organization (RACOBAO)
Name of person leading the project	Rev. Agaba Andrew
Job Title	Director- HCT
Email	hctdirectorate@churchofuganda.org
Location(s) of project (city / province)	Kaboong and Napak Districts, Karamoja Subregion, Uganda
Project start date (dd/mm/yyyy)	1 Aug 2026
Project end date (dd/mm/yyyy)	31 Oct 2026

Which sectors your response activities most relate to

(please indicate number of planned beneficiaries per organisation in each sector where you plan to give assistance)

Sectors	Church of Uganda		Rural Action Community Based Organisation (RACOBAO)		**Member 3** *(please write the name of your organisation)*	
	Male	**Female**	**Male**	**Female**	**Male**	**Female**
Cash/ Vouchers						
Food	3150	7,350	1470	3,430		
Health						
Household items						
Livelihood						
Psychosocial	3150	7,350	1,470	3,430		
Shelter						
WASH						

Section 2 Project Description

2.1 Context

1. CHS Commitment 1. Summarize the crisis event and how it is likely to develop over the duration of the project *(extend rows 43, 44 and 45 if more space is needed)*

Karamoja Sub-region is facing a slow onset humanitarian emergency driven by prolonged drought, erratic and poorly distributed rainfall, and extended dry spells during the 2026 first agricultural season (Season I). Although rains in March 2026 supported initial planting, rainfall significantly declined from late April through June 2026, leading to widespread crop failure, deteriorating pasture and water sources, livestock stress, and rapidly worsening food insecurity across districts the region. Basing on the secondary data available , Karamoja entire subregion is facing acute hunger with 8 out of the 9 districts affected mainly; Abim, Kaabong, Karenga, Moroto, Amudat, Kotido, Napak and Nakapiripit and 16 people have so far been confirmed dead and 432,000 Households in region requiring immediate food assistance.

2. CHS Commitment 1,2,3,4. Explain the impact of the crisis specific to the people you want to help. Why did you choose to give aid to them and what makes them vulnerable?

The prolonged drought has severely affected rural households in the Karamoja sub-region, where livelihoods depend almost entirely on rain-fed agriculture and livestock production. Consecutive crop failures have exhausted household food supplies, while livestock the primary asset for many families are weakening due to inadequate pasture and water. At the same time, sharp increases in food prices have made basic commodities unaffordable, and declining agricultural production has significantly reduced household incomes. As humanitarian needs continue to rise, vulnerable groups, including children, pregnant and lactating women, older persons, and people with disabilities, face increased risks of acute malnutrition, disease, harmful coping strategies, and long-term poverty. Without timely humanitarian assistance, the situation is likely to worsen, leading to high mortality rates, severe food insecurity and higher levels of malnutrition across the entire region. The combined effects of crop losses, reduced income, limited access to water, and escalating food prices have increased the risk of malnutrition, particularly among children under five, pregnant and breastfeeding women, older persons, and people living with disabilities and chronic illnesses. Children below 5 years have been strongly affected; there has been reports of likely increment in malnutrition cases. Child-headed families, orphans and disabled children are the most affected. The women in general who are the bread winners due to customary expectations, have been left vulnerable with most affected compounding vulnerability especially for pregnant and lactating mothers. According to the reviewed District assessments reports, the issues of sexual and reproductive health have been identified under protection and health highlighting the risks of pregnant women vulnerability with high chances of giving birth to premature babies and breastfeeding mothers do not having breast milk because of poor or no feeding and the infants exposed to high chances of malnutrition. The increase of death for patients with HIV/AIDS and Tuberculosis and other underlying conditions is likely to increase because of the nature of their treatment where the ARVs cannot be taken on an empty stomach and they need to feed well before they take the medications. This has led to slow recovery process for patients with Tuberculosis and sometimes death for both HIV and TB patients. Assistance is prioritized for such households that have been disproportionately affected by the drought and have the least capacity to recover on their own.

3. CHS Commitment 9. Explain the availability of funding each of your organisation can access for this crisis.

The Church of Uganda has issued an urgent appeal to all churches and Christians to contribute both in kind and in cash to support the affected population. However, it's uncertain how much can realistically be raised and given the urgency of providing lifesaving assistance. The Church of Uganda, on behalf of the ACT Uganda Forum, is prioritizing fundraising through external partners. The forum has recommended that Church of Uganda and RACOBAO seeks broader support from ACT Alliance through the Rapid Response Funds to provide urgent food assistance and PSS.

2.2 Activity Summary

1. CHS Commitment 1, 2, 4. Explain your proposed project and why you have selected this particular response to the crisis and the length of time needed to respond. *If multiple members are responding, please explain the role of each member in the coordinated response as indicated in your EPRP Contingency Plan.*

As a result of the initial assessment conducted through secondary data, facilitated by the secondary data from ACT national members, the Church of Uganda and RACOBAO, the project support will meet the identified gaps/needs of the most affected persons, with a strong focus on supporting women, children, and the elderly for a period of three months (August- October).

The assessment identified an urgent humanitarian gap in food security and psychosocial support. The lack of these needs may affect the survival, dignity, and protection of the affected population.

The project aims to reach 1,500 households (CoU) and 700 Households (Racobao), each with an average of 7 persons.

Total number of persons reached = 2,200 HH X 7 = 15,400 persons.

The same households targeted for food distribution will receive psychosocial support.

The food items that will be distributed are as follows:

1. 25 kg Maize flour X 1,500 HH
2. 10 kg beans X 2,200 HH.
3. 2 pkts salt (200 gms each) X 2,200 HH.
4. 2 kg Silver Fish (for 800 HH with under-five children)

2. CHS Commitment 2. Explain how you will start your activities promptly. *Project implementation should start within two weeks. The project should be a maximum of 6 months.*

1. The national members will start the implementation promptly by leveraging the Church of Uganda local structure to support the prompt support of the affected households.
2. Through the same structures, the members are attending local coordination meetings with the local district government and other stakeholders, and this will facilitate a quick process to identify and select the 2,300 beneficiaries. A more detailed needs assessment will be conducted by the two members to identify needs and register beneficiaries using disaggregated data.
3. A service provider mapping was already done by one member during the Sebei response in December 2025; considering that this is the same region, that same report will be used by the 2 national members to identify suitable service providers to quicken the procurement processes, and this will be done within 21 working days.
4. Upon receipt of GO FOR RRF from ACT Alliance, the 2 national members have already started orientation activities, including an inception meeting on how they will collaborate within the forum but also outside the forum, designing data tools and familiarising themselves with CHS ahead of field orientation for the local volunteers that will support the distribution exercise.

3. CHS Commitment 6. How are you co-ordinating and with whom? *Coordination ensures complementarity of interventions within forum members and other humanitarian actors to maximise the use of our resources and will address all unmet needs*

At the Local level, Church of Uganda staff at the diocese level will coordinate with local District government structures for the entire project process through attending coordination meetings. The 2 members will also identify the volunteers through the humanitarian response networks like REDCROSS and HINGO. A discussion with HINGO has already started through the ACT Forum International embers who are part of this network. A clearance distribution from the Office of the Prime Minister has already been secured through Church of Uganda following the launch of their local appeal and this will enable all members to move smoothly during implementation.

4. CHS Commitment 3, 9. Where are you planning to procure your goods or services? Please tick boxes that apply. *Goods and services procured locally supports and revitalises economic activity either as livelihood for people or income for small businesses.*

Locally or within the affected areas	xx	Nationally	XX	Regionally or neighbouring countries		Internationally	

Do you have a procurement policy? What factors did you consider when you made this decision?

The Church of Uganda follows a formal procurement policy managed by an eight-member Procurement Committee, with each member representing a key sector of the Church's operations. All procurement transactions exceeding USD 1,400 are reviewed and approved by this committee to ensure adherence to established standards of transparency, accountability, effectiveness, and efficiency. The procurement process considers both prequalified and non-prequalified service providers, evaluating them based on their capacity to deliver on time, their previous experience in providing similar goods or services, and the competitiveness of their costs in relation to the available budget.
Church of Uganda and RACOBAO will prioritize local procurement as the first option, aiming to support local markets and shorten delivery timeframes. Identification of suitable local suppliers will be incorporated into the initial assessment. In cases where competent local suppliers cannot be identified or where required items are unavailable locally, the procurement will be expanded to national-level suppliers to ensure the timely delivery of quality goods and services. This flexible approach ensures that the procurement process remains responsive to market conditions while upholding the integrity and efficiency required for emergency response.
On the other hand, RACOBAO has a procurement policy as well. Procurement for the food assistance that will be provided will be prioritized for local purchases except when they cannot be identified in the local markets. A market survey will be conducted to verify which items can be bought at local and national level basing on availability and capacity to deliver.

2.3 Description of Target Population

1. CHS Commitment 1, 9. How do you calculate the participants of this project? *For example, food and hygiene kits given to 2500 families, and 1 family = x beneficiaries.*

Food will be given to15,400 Households with Church of Uganda targeting 1,500 and RACOBAO targeting 700 where 1 HH=7 beneficiaries.
In Karamoja region, an average household has between 6-7 members.
Each household will receive 25 kg of maize flour, 10 kg of beans, 2packets of salt and 2kgs of silver fish and 2kgs of soya porridge for those with Children below 5 years. This has been determined by the government food ratios that were previously given to the beneficiaries. Averagely, we estimate of 5 out of 10 Households will have a Child below 5 years. So, basing on target we will target to reach 400 and 350 Children with additional supplements (2kgs of Soya porridge and 2kgs of Silver fish) for CoU and RACOBAO respectively. These numbers will be identified during registration time. Psycho-social support will be done through peer groups and dialogues, family counselling and home visits. The faith leaders will be involved to carry put this activity together with the identified psycho- social counsellors if the cases are severe. Monthly sessions will be conducted for peer support and home visits will be done weekly by faith leaders.

3. CHS Commitment 4. Explain how the target population is involved in the planning of your proposed intervention? How will they be involved in the implementation and the rest of the project cycle?

Church of Uganda and RACOBAO will work with District Local Government structures to identify the most vulnerable households who have not benefited from the government distribution. Emphasis will be placed on the elderly, women, children, and other Persons with Special needs. The target population will be actively involved throughout the planning, implementation, and

1. Overall project cycle to ensure that the intervention addresses their needs, strengthens community ownership, and their feedback is considered. Feedback provided will guide the selection of the most vulnerable beneficiaries and the preferred support provided, and this process will be led by community leaders, facilitated by staff and volunteers from COU and RACOBAO.

Community members will be involved during detailed information collection at the assessment stage to collect quantitative and qualitative information.

During the needs assessment exercise, they will be asked to share their most pressing needs during the crisis, and project interventions will work towards addressing them. Feedback sessions will be organised among served communities, so as to establish the level of satisfaction among the served communities. Monitoring- Communities will be involved in the monitoring process by requesting their feedback and collecting responses through suggestion boxes and during community meetings. At the end of the project, during the joint forum monitoring, members shall engage community members to review the project and provide lessons learned sessions to evaluate what worked well and what needs improvement.

2.4 Expected Results

1. What will this project's success look like based on your time frame? *Please write your activities milestones including dates.*

As a short-term response, within 3 months, the immediate major success milestones will be a reduction in the number of families facing severe food shortages and a reduction in the number of deaths caused by starvation, a reduced likelihood of malnutrition among children, pregnant and lactating mothers, and strengthened capacity and coordination among local actors and between the national members themselves. During project implementation, success will also be measured by the beneficiaries of the project and provide feedback.

2. What are the factors that may stop you from achieving the targets of this project? How will you manage them?

1. Road accessibility, which may lead to difficulty in reaching affected households.

To mitigate this, the project will, at an early stage, establish alternative routes and coordinate with local authorities to prioritize road clearance.

Prepositioning relief items closer to affected communities will also reduce travel delays and any other road inconveniences.

2. Delays in procurement or supply of relief Items may slow the distribution of relief items.

This will be managed by engaging multiple suppliers to supply different items, and also engaging local suppliers and closely monitoring procurement timelines through the procurement committee.

3. Insufficient community engagement or resistance resulting in misunderstandings, disputes, or exclusion of vulnerable households from assistance.

This will be managed through engaging community leaders from the planning stage to the end of the project. To prevent this, CoU and RACOBAO will engage communities in the identification and selection of beneficiaries, establish feedback mechanisms, and hold regular community meetings to ensure transparency and participation.

4.Budget overruns and funding shortfalls will reduce the scale of the assistance or incomplete project implementation.

Once funding is secured, the project will prioritize critical activities and continue exploring local fundraising for both

2.5 Monitoring, Accountability & Learning

1. CHS Commitment 7. Describe how you will monitor the project. What monitoring tools and process will you use? How will you gather lessons from the project?

Both the Church of Uganda and RACOBAO will engage their Monitoring and Evaluation teams to develop data tools for pre and post-distribution activities. The activities will be designed and integrated into a joint monitoring plan for RACOBAO, COU & ACT Forum.

The ACT Uganda Forum coordinator will support and identify an international member who will give input in the monitoring plan.
All monitoring reports will be shared with the forum through the ACT Uganda Forum coordinator.
The Project will document lessons learnt at each stage of implementation, and these will be shared through learning

2. CHS Commitment 8. Does your organisation have a Code of Conduct? Have all staff and volunteers signed the Code of Conduct? *We may ask you to submit copies of the signed Code of Conduct. You can use ACT Alliance's Code of Conduct if your organisation does not have one.*

The Church of Uganda is currently in the process of developing a code of conduct for its staff and volunteers; for now, the Church of Uganda human resource policy guides the staff, volunteers, and interns on the Code of conduct while executing duties on behalf of the Church of Uganda. It has also trained some staff on the code of conduct. However, the Church of Uganda will use the ACT code of conduct and have all staff involved in this activity sign the Code of Conduct. On the other hand, RACOBAO has a staff code of conduct, and all staff sign it at the point of entry.

3. How will you ensure you and all stakeholders will be accountable to the affected population. How will you share information. How will you collect and use feedback and complaints? CHS 4 and 5

The 2 national members in this response will conduct joint inception meetings involving key stakeholders at the start of the project.
The involvement of District local governments, faith leaders, ACT National members, and Prime Ministers is the first step for accountability. Reports will be shared with all the relevant stakeholders.
Church of Uganda will lead the communication interventions through sharing information on social media pages to update the progress of activities and share the successes registered. Information will be shared through field reports, progress reports, pictures, and short videos.
In liaison with the Forum Coordinator, ACT communications will support with documentation of processes and achievements in line with ACT communication guidelines. In terms of feedback, we will ask the beneficiaries after the distribution exercise what they think about the process, items, and targeted people, if it met their expectations, and upheld the principle of fairness and equity; this will be done during the post-distribution exercise.
Feedback forms will also be shared with the district leadership to give feedback. Posters with complaint numbers will be printed and displayed during the distribution. Community feedback meetings will be arranged during and after project implementation to gather complaints that might have occurred during project implementation

4. Lessons learnt from previous RRF that will be applied to this response

From previous similar responses Church of Uganda found that by using local structures, to predetermine the lists of the most affected, and collating beneficiary numbers, that the local authorities veriy will quicken the distribution excercis and this saves time to respond efficiently and effectively within short timelines.

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Rapid Response Fund

Consolidated Budget and Financial Report

Project Code RRF 19/2026 Response to Food Insecurity in Uganda
Project Name Emergency Response to Hunger Crisis in Karamoja

Budget Exchange rate (local currency to 1 USD) 0.000268000
Exchange rate for revised budget (local currency to 1 USD)
Please use exchange rate from this site: http://www.floatrates.com/historical-exchange-

		Approved Budget				Reported Expenses				Unspent Amount	Burn Rate
		COU	RACOBAO	Member 3	Total Budget	COU	RACOBAO	Member 3	Total Expenditure		
1	**Total Project Staff Costs**	**5,488**	**2,975**	**-**	**8,463**	**-**	**-**	**-**	-	8,463	0%
2	**Project Activities**	**56,012**	**35,121**	**-**	**91,133**	**-**	**-**	**-**	-	91,133	0%
2.1	Cash/Vouchers	-	-	-	**-**	-	-	-	-	-	0%
2.2	Food/Nutrition	54,806	34,049	-	**88,855**	-	-	-	-	88,855	0%
2.3	Household items	-	-	-	**-**	-	-	-	-	-	0%
2.4	Water, Sanitation, and Hygiene (WASH)	-	-	-	**-**	-	-	-	-	-	0%
2.5	Shelter	-	-	-	**-**	-	-	-	-	-	0%
2.6	Disaster Risk Reduction (Max 10% of the budget)	-	-	-	**-**	-	-	-	-	-	0%
2.7	Mental Health and Psychosocial Support	1,206	1,072	-	**2,278**	-	-	-	-	2,278	0%
2.8		-	-	-	**-**	-	-	-	-	-	0%
2.9		-	-	-	**-**	-	-	-	-	-	0%
2.10		-	-	-	**-**	-	-	-	-	-	0%
3	**Project Implementation**	**2,064**	**1,903**	**-**	**3,966**	**-**	**-**	**-**	-	3,966	0%
4	**Quality and Accountability**	**5,655**	**1,956**	**-**	**7,611**	**-**	**-**	**-**	-	7,611	0%
5	**Logistics**	**3,509**	**3,499**	**-**	**7,008**	**-**	**-**	**-**	-	7,008	0%
6	**Assets and Equipment**	**-**	**-**	**-**	**-**	**-**	**-**	**-**	-	-	0%
Direct Costs		**72,727**	**45,455**	**-**	**118,182**	**-**	**-**	**-**	**-**	**118,182**	0%
Overhead Costs		**7,273**	**4,545**	**-**	**11,818**	**-**	**-**	**-**	-	11,818	0%
Total Budget		**80,000**	**50,000**	**-**	**130,000**	**-**	**-**	**-**	**-**	**130,000**	0%