

Alert note

Regional Response to DRC and Sudan Conflict in Uganda, DRC, and Burundi.

6th August 2026

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Forum: DRC, Uganda, Burundi, and Tanzania

Type of emergency: Response to DRC, Sudan, and South Sudan Conflict

Date of emergency (if rapid onset):

Funding Survey

If the forum indicates a plan to launch an appeal, we request funding members to please fill out this [survey form](#), which will help the **Emergency Steering Committee** assess the funding environment for this response. Please respond to this survey *within 24 hours of Alert publication*.

1. The nature of the emergency

Since March 2026, armed clashes between AFC/M23 in DRC have intensified across several territories, resulting in widespread displacement, destruction of livelihoods, and increased pressure on already vulnerable host communities. The growing use of airstrikes and drones has heightened the unpredictability of hostilities, placing civilians at greater risk and triggering repeated displacement ([Relief Web](#)).

According to [UNHCR](#), Uganda faces a large-scale, complex, and protracted refugee displacement crisis driven by armed conflict and insecurity in Sudan and the Eastern Democratic Republic of the Congo (DRC). The Sudan crisis began in April 2023 following the outbreak of conflict between the Sudanese Armed Forces (SAF) and the Rapid Support Forces (RSF).

Since 5 December 2025, more than [100,000 Congolese refugees](#) have fled to Burundi following the escalation of conflict between the AFC/M23 armed group and the Government of the Democratic Republic of Congo (DRC) in South Kivu and are settled along the Burundi–DRC border ([Reuters](#)).

As of 31 May 2026, Tanzania continues to receive Congolese refugees through the NMC Reception Centre in Kigoma, who are subsequently transferred to Nyarugusu Refugee Camp, which currently hosts approximately 88,277 refugees ([UNHCR](#)).

2. The impact and scale of the emergency

DRC

Based on the ACT Alliance DRC Forum's initial assessment, this is a large-scale humanitarian emergency. The ongoing armed conflict in eastern Democratic Republic of Congo (DRC), particularly in North and South Kivu, continues to escalate. The most affected areas include Uvira, Fizi, Mwenga (Itombwe Highlands), Kalehe, Masisi, Rutshuru, Nyiragongo, Walikale, Lubero, and Kabare in North and South Kivu. The conflict has also spread into neighbouring provinces, including Maniema, Ituri, and Tanganyika, indicating a growing regional humanitarian crisis. The Kiwanja–Rwindi–Kanyabayonga road remains particularly insecure, disrupting population movements and humanitarian operations.

The affected people are facing widespread displacement, destruction of livelihoods, severe protection concerns, and increasing humanitarian needs. Humanitarian access continues to deteriorate due to active hostilities, insecurity along key transport routes, and attacks on civilians.

According to UNOCHA (June 2026), approximately 3.42 million people are internally displaced (IDPs) across North and South Kivu, and approximately 3.98 million returnees are living in precarious conditions after

returning to damaged communities. South Kivu hosts around 1.59 million IDPs and 1.66 million returnees. North Kivu hosts approximately 1.83 million IDPs and 2.32 million returnees([UNHCR](#)).

The affected population includes women, men, children, older persons, persons with disabilities, pregnant and lactating women, and other vulnerable groups. Many displaced families are living with host communities or in overcrowded informal settlements with limited access to basic services, including acute shortages of food, safe drinking water, shelter, healthcare, education, and protection services. Women and children are at heightened risk of gender-based violence, exploitation, and other protection concerns, while poor sanitation and overcrowded living conditions increase the risk of communicable disease outbreaks, including Ebola virus.

Uganda

Based on the Forum's initial assessment and available humanitarian data, the Sudan and DRC crises constitute a large-scale regional humanitarian emergency. The scale of displacement, the number of people affected, the duration of the crises, and the increasing pressure on refugee-hosting systems exceed the coping capacity of affected households and place considerable strain on humanitarian response mechanisms. The emergency affects both refugee populations and host communities and requires continued international humanitarian assistance to address escalating needs.

Refugees from these areas are hosted in Kirya Ndongo Refugee Settlement and Nakivale Refugee Settlement, two of Uganda's largest refugee-hosting settlements.

As of June 2026, Uganda hosted 95,579 Sudanese refugees, approximately 85% of whom resided in Kirya Ndongo Refugee Settlement, while Nakivale hosted more than 220,000 Congolese refugees, primarily from North and South Kivu ([OPM](#) & [UNHCR](#), 2026). The affected population consists primarily of women and children, alongside significant numbers of older persons, persons with disabilities, survivors of violence, and individuals with specific protection needs. Continued arrivals have increased pressure on already overstretched education, health, WASH, protection, and livelihood services, while also increasing competition for land and natural resources within refugee-hosting areas.

The humanitarian impact of the crises extends well beyond displacement. Livelihood opportunities are limited, and many households depend on casual labour, small-scale agriculture, or humanitarian assistance to survive (LWF Uganda et al., 2026). Education has also been severely affected, with many refugee children experiencing prolonged interruptions to learning due to displacement, language barriers, limited school capacity, and inability to afford school-related costs. Protection concerns have intensified as households face increasing economic hardship and reduced access to services.

In the short term, affected populations face heightened risks of food insecurity, inadequate shelter, poor access to education, protection incidents, psychosocial distress, and constrained access to essential services. Humanitarian funding shortages continue to limit the availability of assistance while needs continue to grow ([WFP](#), 2025; [OPM](#) & [UNHCR](#), 2024). In the longer term, prolonged displacement is likely to deepen poverty, increase dependence on humanitarian assistance, erode household resilience, and reduce opportunities for sustainable livelihoods. Children who remain out of school face increased risks of child labour, early marriage, exploitation, and long-term loss of educational and economic opportunities.

Burundi

In Burundi, based on the current situation, the response is classified as a medium-scale emergency. Busuma Refugee Camp, located in Kayongozi Zone, Ruyigi Commune, Buhumuza Province in eastern Burundi, serves as the main reception site for Congolese refugees arriving from the DRC. The camp currently hosts approximately 45,636 refugees in 11,097 households, including 60% children, 52% women

and girls, as well as older persons, persons with disabilities, and people living with chronic illnesses, all of whom face heightened humanitarian vulnerabilities.

In the short term, the crisis has significantly increased humanitarian needs, including emergency food assistance, shelter, health services, WASH, protection, and nutrition support. Continued insecurity and restricted humanitarian access are limiting the delivery of life-saving assistance. In the longer term, repeated displacement, destruction of productive assets, interruption of education, erosion of livelihoods, and prolonged dependence on humanitarian assistance are expected to deepen poverty, weaken community resilience, and delay recovery. Without a sustained ceasefire and increased humanitarian support, the crisis is likely to continue expanding, placing additional strain on host communities and humanitarian response systems.

Tanzania

The ongoing refugee influx from the Democratic Republic of the Congo (DRC) has resulted in a large-scale and protracted humanitarian emergency in western Tanzania. Nyarugusu Refugee Camp currently hosts approximately 88,277 Congolese refugees, all of whom continue to depend on humanitarian assistance for their basic needs ([Relief Web](#)). In addition, the NMC Reception Centre in Kigoma receives an average of seventy newly arrived refugees each month, who require immediate life-saving assistance before being transferred to the camp.

The rapid needs assessment identified critical gaps in access to safe water, sanitation, shelter, household non-food items, food security, protection services, mental health and psychosocial support (MHPSS), and healthcare. Household sanitation coverage remains at only 64%, while existing water supply systems, shelters, and community infrastructure require urgent expansion and rehabilitation to meet increasing demand.

1. Local and national capacity

In **DRC**, affected communities are relying primarily on local coping mechanisms. Relatives, host families, and local communities are accommodating many internally displaced persons (IDPs), while schools, churches, and other public facilities are serving as temporary reception sites. Communities continue to share limited food and household resources through collective support, although these coping mechanisms are increasingly overstretched as displacement continues.

In **Uganda**, Refugee households are using various coping mechanisms to meet basic needs amid declining assistance and limited livelihood opportunities. Several community-based structures support the refugee response, including Refugee Welfare Committees, community leaders, women, and youth groups, VSLAs, community health workers, protection committees, faith-based institutions, and refugee-led organizations. These structures facilitate community mobilization, information sharing, identification of vulnerable households, referrals, conflict resolution, and accountability.

Local churches, community-based organizations, civil society groups, and faith-based organizations are providing emergency assistance where possible.

The Government of the Democratic Republic of Congo, through provincial and local authorities, is working with humanitarian partners to coordinate the response to displaced and returnee populations. However, insecurity, limited resources, and access constraints continue to hamper effective implementation of emergency response plans and the delivery of essential services in the affected areas.

DRC national organizations are also engaged in early warning, humanitarian assistance, human rights advocacy, and community mediation to reduce conflict-related risks. National and international humanitarian organizations, together with ACT Alliance members and other faith-based organizations, are

providing life-saving assistance; however, humanitarian needs continue to outpace available resources, leaving significant gaps in assistance.

The Government of Uganda leads the refugee response through the Office of the Prime Minister (OPM) under the Refugees Act (2006) and the Uganda Country Refugee Response Plan ([UCRRP](#)). The government oversees refugee registration, settlement management, protection services, and emergency preparedness in partnership with humanitarian actors. Uganda also implements the National Policy for Disaster Preparedness and Management, which guides responses to emergencies, disease outbreaks, and refugee influxes. During the 2026 Ebola outbreak, authorities strengthened border screening, surveillance, and preparedness measures, demonstrating the continued implementation of national contingency and response mechanisms (OPM & UNHCR, 2024; UNHCR, 2026).

In Burundi, despite ongoing support from the Government of Burundi, UN agencies, and humanitarian partners, the humanitarian situation remains critical. Refugees continue to face inadequate shelter, limited access to safe water and sanitation, food insecurity, and increasing pressure on peaceful coexistence with host communities, underscoring the need for sustained humanitarian assistance.

Tanzania

Tanzania has an established refugee coordination mechanism led by UNHCR, complemented by the Government of Tanzania through the Ministry of Home Affairs (Refugee Services Department). Coordination is undertaken through regular inter-agency sector working groups (similar to clusters), covering areas such as Protection, WASH, Health, Nutrition, Shelter/NFI, Food Security, Education, Livelihoods, and CCCM/Camp Management, with participation from UN agencies, international and national NGOs, and government counterparts.

For the Congolese refugee influx, the response is coordinated through these existing refugee coordination structures rather than activating the humanitarian cluster system. Tanzania generally uses the Refugee Coordination Model (RCM), led by UNHCR in support of the Government, instead of the Inter-Agency Standing Committee (IASC) cluster system, which is typically activated for broader humanitarian emergencies at the request of the government.

In DRC, Humanitarian coordination is being led by the **UN Office for the Coordination of Humanitarian Affairs (UNOCHA)** through the established humanitarian coordination architecture and sector/cluster system.

In Uganda, the response is being delivered through a partnership of government institutions, UN agencies, international NGOs, national NGOs, and faith-based organisations. UNHCR leads refugee protection and coordination, while agencies such as WFP, UNICEF, WHO, FAO, UN Women, and IOM provide support across food security, health, education, protection, livelihoods, and WASH sectors. ACT Alliance members, including LWF, Church of Uganda, FCA, HEKS/EPER, CWS, and DCA, are implementing interventions in Nakivale and Kirya Ndongo focused on livelihoods, education, protection, psychosocial support, WASH, and resilience building. However, significant funding constraints continue to limit the scale of assistance and leave substantial unmet needs across sectors (LWF Uganda et al., 2026; OPM & UNHCR, 2024; WFP, 2025).

Uganda operates a well-established Refugee Coordination Model (RCM) jointly led by OPM and UNHCR. Rather than a traditional cluster system, the refugee response is coordinated through sector working groups covering Protection, Food Security and Livelihoods, Health and Nutrition, Education, WASH, Shelter, Environment and Energy, and Accountability to Affected Populations.

2. Key needs and gaps

DRC

The members of the DRC Forum have conducted a needs assessment to identify and collate the needs of the displaced and returnees and have identified the following gaps: food and Nutrition, Non-food items, WASH, Protection, education, and access to health care.

Uganda

The needs assessment identified significant humanitarian needs across the food security, livelihoods, education, protection, health, shelter, and WASH sectors in both Nakivale and Kirya Ndongo refugee settlements. Food security remains the most urgent need due to reductions in food assistance and increasing household vulnerability, with 36% of households in Kirya Ndongo and 53% in Nakivale classified as food insecure (MoH et al., 2025). Education systems are overstretched, with classroom-to-pupil ratios of 119:1 in Kirya Ndongo and 84:1 in Nakivale, far exceeding Uganda's Basic Requirements and Minimum Standards of 53:1 (Ministry of Education and Sports, 2023). Protection concerns continue to worsen, particularly among women, children, persons with disabilities, and survivors of violence. In the WASH sector, only 72% of households reported access to a household latrine and only 18% had handwashing facilities, indicating substantial gaps against Sphere standards for sanitation and hygiene. Shelter needs remain significant, particularly in Kirya Ndongo, where households reported urgent requirements for roofing materials and shelter repairs. Overall, Kirya Ndongo faces heightened education, shelter, and protection challenges among Sudanese refugees, while Nakivale experiences higher levels of food insecurity and livelihood-related needs among Congolese refugees affected by ongoing conflict and displacement (LWF Uganda et al., 2026; OPM & UNHCR, 2024).

The identified needs are being addressed through a multi-sectoral response led by the Government of Uganda through the Office of the Prime Minister (OPM). ACT Alliance members, including LWF Uganda, Church of Uganda, Finn Church Aid (FCA), HEKS/EPER, Church World Service, and DCA through TPO, are implementing interventions focused on food security, livelihoods, protection, education, cash assistance, psychosocial support, and WASH. Livelihood programming has increasingly focused on vocational skills development, business grants, agricultural support, and cash assistance to promote self-reliance. However, available resources remain insufficient, and many humanitarian actors have been forced to scale down their activities due to global funding reductions, leaving substantial unmet needs in all sectors (OPM & UNHCR, 2024; WFP, 2025; LWF Uganda et al., 2026).

Burundi

In Burundi, the refugees lack shelter, clothing, clean water, food, hygiene kits (including toilets), healthcare, dignity kits, livelihoods, GBV, and problems of trauma and social conflict.

Humanitarian agencies operating in the camp are struggling to meet the growing needs due to limited financial and material resources. At the beginning, UNHCR emphasized that emergency status for this crisis would soon come to an end after six months and declared that, as there would be no new refugees arriving, June 2026 would mark the end of the emergency status. <https://www.msf.org/humanitarian-situation-refugees-burundi-alarming>.

A joint needs assessment conducted by CNEB and WLF, together with consultations with refugees, local authorities, and community leaders, identified four priority response areas: (1) WASH, (2) Social Cohesion and Peacebuilding, (3) Shelter, and (4) Food Assistance.

Tanzania

Overall, the assessment concludes that while humanitarian actors continue to provide essential services, existing capacities and resources are overstretched, leaving substantial gaps in life-saving assistance. Additional support is urgently required to reinforce essential services, improve living conditions, reduce public health risks, and protect the dignity and well-being of vulnerable refugee populations.

The key humanitarian needs and gaps include Water, Sanitation and Hygiene (WASH), Shelter and Household Well-being, Food Security and Nutrition, Mental Health and Psychosocial Support (MHPSS), and Community-Based Protection Services (CBPS). Health and Ebola Virus Disease (EVD) Preparedness.

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covering areas such as Protection, WASH, Health, Nutrition, Shelter/NFI, Food Security, Education, Livelihoods, and CCCM/Camp Management, with participation from UN agencies, international and national NGOs, and government counterparts.

For the Congolese refugee influx, the response is coordinated through these existing refugee coordination structures rather than activating the humanitarian cluster system. Tanzania uses the Refugee Coordination Model (RCM), led by UNHCR in support of the Government, instead of the Inter-Agency Standing Committee (IASC) cluster system, which is typically activated for broader humanitarian emergencies at the request of the government.

Please indicate whether you are considering:

	Indicate your intention with an X below
Rapid Response Fund (<i>intended for small and medium scale emergencies</i>)	
Appeal (<i>intended for large-scale emergencies</i>)	X

3. Forum Capacity and members' intention to respond.

ACT Member	Geographical focus	Sectors of expertise and experience
DRC Forum		
EELCo and ECC	EELCO- South Kivu. ECC- North Kivu.	ECC- Non-Food Items, Livelihoods. EELCO- CASH, Livelihoods
Christian Aid DRC	North and South Kivu	Fund managers, providing technical support for national members involved in the Appeal.
ACT Member Uganda Forum	Geographical focus	Sectors of expertise and experience
Lutheran World Federation (LWF)	Nakivale & Kirya Ndongo	WASH and MHPSS
Finn Church Aid (FCA)	Nakivale & Kirya Ndongo	Education
Church World Service (CWS)	Nakivale	Agriculture and Livelihoods
HEKS/EPER	Nakivale	Shelter and Livelihoods
Church of Uganda (CoU)	Nakivale & Kirya Ndongo	Protection
DanChurchAid (DCA)	Nakivale	Energy and Environment
ACT Burundi Forum		
Christian AID	Busuma refugee camp	Peacebuilding and conflict resolution, protection, Shelter, Gender justice, Climate adaptation and resilience, Governance and rights
CORDAID	Busuma refugee camp	Cash and voucher, WASH, Health and Protection including MHPSS
CNEB	Busuma refugee camp	Peace building, GBV, trauma healing, economic empowerment.
LWF Burundi	Busuma refugee camp	Food, WASH, Health and Protection
ACT Tanzania Forum		
TCRS	Kigoma region, Kasulu district	WASH, Mental Health and Psychosocial Support (MHPSS) and Community-Based Psychosocial Support (CBPS) and Shelter

4. Potential responses

In DRC, EELCO and ECC national members both operate in the most affected areas, namely North and South Kivu. These two national organizations will receive technical and financial oversight support from Christian Aid, an international member of DRC Forum, which has previously provided such support to the organizations involved in the CEA241 Appeal.

The DRC ACT Forum members have the capacity to respond in different sectors like CASH, shelter, WASH, livelihoods, among others, and plan to have a joint response to this crisis. There is a need for financial assistance and support to enable them to respond to the gaps as identified.

In Uganda, the proposed response will address the priority needs identified through the Rapid Needs Assessment in Nakivale and Kirya Ndongo refugee settlements, namely food security and livelihoods, education, protection, mental health and psychosocial support (MHPSS), WASH, and environmental sustainability. The ACT Uganda Forum plans to implement an integrated, community-based response that combines life-sustaining assistance with resilience-building interventions.

The Forum intends to target approximately 120,000 vulnerable individuals (24,000 households) across Nakivale and Kirya Ndongo refugee settlements. To implement this response effectively, ACT Uganda Forum members will require financial resources, technical support, and strengthened coordination mechanisms.

In Burundi, based on the priorities expressed by refugees, local authorities, and community leaders, the ACT Alliance Burundi Forum wishes to provide an integrated response focusing on WASH, Social Cohesion and Peacebuilding, Shelter, and Food Assistance. These interventions will contribute to improving living conditions, protecting the dignity of affected populations, reducing public health risks, preventing tensions between refugees and host communities, and strengthening resilience through community participation and inclusive programming. A coordinated intervention in these priority sectors will not only address urgent humanitarian needs but also promote peaceful coexistence, social inclusion, and sustainable recovery.

In Tanzania, the response will target approximately **15,000 of the most vulnerable refugees**, including newly arrived Congolese refugees and vulnerable households already residing in Nyarugusu Refugee Camp. Priority will be given to female-headed households, children under five, pregnant and lactating women, older persons, persons with disabilities, unaccompanied and separated children, and survivors of gender-based violence. The proposed response will focus on the following priority sectors:

Water, Sanitation and Hygiene (WASH): Shelter and Infrastructure, Food Security and Nutrition, Protection, Mental Health and Psychosocial Support (MHPSS), and Health and Ebola Virus Disease (EVD) Preparedness