

Key Messages

An alarming number of cases and deaths resulting from dengue fever have been reported in several parts of Yemen, while measles outbreaks are being investigated in Sa'adah and Al Jawf.

The health care system is on the verge of collapse due to persistent shortages of fuel and supplies, and ongoing insecurity. The breakdown in water, sanitation and health systems poses a significant risk that communicable diseases will further spread.

All parties to the conflict must do all they can to facilitate delivery of basic life-saving assistance to prevent a major outbreak of communicable diseases and to provide those affected with the care they need.

Dengue in the Southern Governorates

The Government Health Office of Aden Governorate reported on 9 June over 4,080 cases of clinically diagnosed dengue fever between 1 April and 4 June, including 113 deaths. This included over 1,380 female and nearly 2,700 male cases. Over 37 per cent of them were children under 15 years. Of the 133 death, 64 were male and 49 were female.

Dengue is endemic in Yemen and health care providers have reported increasing cases over the past few weeks. Since the escalation of the conflict in March 2015, the World Health Organization (WHO) has reported a total of over 3,020 cases of dengue in the southern governorates and is currently testing samples to confirm. In addition to over 100 cases reported in Aden, nearly 650 cases have been reported in Hadramaut, over 480 in Lahj, 220 in Shabwa and 50 in Taizz. The situation is thought to be particularly acute in Al Hudaydah where over 1,520 cases were reported.

Basic treatment for dengue fever is hydration. However, many in Aden are unable to access this basic treatment leading to higher than normal fatality rates. In addition to facing shortages of clean water, insecurity is preventing affected people from reaching clinical support.

Lack of basic sanitation services and limited access to safe water have also contributed to increased incidence of malaria, viral haemorrhagic fever (VHF) and acute watery diarrhea, according to health partners. Many internally displaced families throughout the country are living in public facilities without sufficient water or sanitation services, while many host family homes are now housing up to four families. Water is being stored in open containers, increasing prevalence of mosquitos spreading dengue and malaria. Insecurity has prevented implementation of vector control measures such as spraying in Aden. This is now being implemented in Hadramaut and Al Hudaydah. Over the summer months, the crisis in water and sanitation systems will potentially contribute to higher incidences of these diseases and to outbreaks of additional diseases such as cholera or dysentery.

Measles and Rubella in the Northern Governorates

Possible measles outbreaks are currently being investigated in Al Jawf and Sa'adah governorates (40 and almost 300, respectively). Over 365 cases of measles and over 90 cases of rubella have been diagnosed in Yemen over the past year. Health partners consider the breakdown in health services, including decrease in immunization coverage, closure of health facilities, and difficulty in accessing health services, since the escalation of the conflict as possible contributing factors. Nearly 90 per cent of diagnosed measles cases were unvaccinated and an additional 8 per cent were under-vaccinated (had only received one dose).

Precarious Public Health Situation

The capacity of the health care system to respond to outbreaks has been severely limited since the escalation of the conflict. Access to health care has been drastically reduced, as have health care providers' surveillance and early response capacity.

Since the escalation of the conflict there have been nine incidents of violence against health staff and assistant workers in health facilities and care workers and 65 incidents against health care facilities. Limitations on imports have reduced the supply of essential medicines in pharmacies and to health care providers.

The situation is particularly acute in heavily conflict affected governorates such as Aden, Sa'adah and Al Jawf due to ongoing insecurity and access issues. Ambulance service in most of the areas is nonfunctional due to fuel shortages and security threats to health workers and many affected people are unable to access health facilities. Twelve health care facilities have been damaged as a result of the conflict in Sa'adah and 11 in Taizz. Health providers have expressed particular concern regarding the state of public health in Taizz where there are heavy clashes in residential areas and the delivery of life-saving medicines is a serious challenge. In Sa'adah residents report particular difficulty accessing health care facilities due to ongoing insecurity, In Aden, eight health care facilities have been damaged or are inoperable. Ongoing shelling and clashes in some districts, as well as acute shortages of fuel and essential medicines have contributed to major gaps in health services. If further outbreaks should occur, the health system would face significant challenges in responding rapidly.

Across Yemen, an estimated 15.2 million people, that is about 58 per cent of the population, now require assistance to obtain most basic healthcare.

For further information, please see:

<http://www.humanitarianresponse.info/operations/yemen>,
<http://www.unocha.org/yemen>

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