

## Regional Situation Report – Hurricane Season 2025

### Hurricane Melissa

Sitrep No. 6,

18 December 2025

Data as of 17 December 2025, 11:00 EST (UTC-05:00). Information in this document is subject to change.

### Highlights

Country	Deaths	Missing	Displaced	Sheltered	Damaged Health Facilities	Data as of
TOTAL	88	25↓	2,669↓	2,987 ↓	785	(varies)
Jamaica	45	12 ↓		968 ↓	134	16 Dec
Haiti	43	13		0	9	17 Dec
Cuba	0		2,669 ↓	2,019	642	17 Dec

**Notes:** Definitions of “displaced” and “sheltered” may vary by country; totals are approximate.

The Pan American Health Organization (PAHO) is providing ongoing support to the countries facing disruption of their health systems, including damaged health care facilities, and increased vulnerability to health risks following the passage of Hurricane Melissa in the Caribbean in the final days of October 2025, making landfall in Jamaica on 28 October as a *Category 5 storm* (1). The **PAHO/WHO** Regional Incident Management Support Team (IMST) remains activated and continues to coordinate closely with Ministries of Health and other partners for the health response in Jamaica, Cuba, and Haiti.

In Cuba, 2,669 people remain displaced, a >30% decrease over the last 2 weeks, with ongoing efforts to restore basic health services in affected provinces (1-6).

- **Coordination:** In *Jamaica*, PAHO continues to co-chair Health Cluster meetings, with 41 partners active and ongoing support for EMTs, MHPSS, WASH, and infrastructure rehabilitation. In *Haiti*, In *Haiti*, PAHO continues to coordinate with authorities to strengthen surveillance and response to the ongoing cholera outbreak. In *Cuba*, PAHO completed field visits in Holguín, Guantánamo, and Santiago de Cuba to support recovery efforts.
- **Surveillance:** In *Jamaica*, PAHO provided technical support to strengthen leptospirosis surveillance, including lab reagents, system overhauls, and digitized case detection tools, alongside a webinar on outbreak control strategies. In *Haiti*, PAHO supports pathogen characterization for influenza, RSV, cholera, and dengue, and interpretation of arbovirus surveillance protocols. In *Cuba*, PAHO continues to assist with arbovirus surveillance and vector control, procuring reagents for sequencing severe chikungunya cases.

- **Community Protection:** In *Jamaica*, PAHO is recruiting assessors to complete WASH assessments in 97 remaining health facilities. Support was also provided for transporting health counsellors to deliver Psychological First Aid and MHPSS to healthcare workers.
  - **Clinical Care:** In *Jamaica*, PAHO delivered roofing materials to seven damaged health facilities, including Cornwall Regional Hospital, with repairs ongoing in collaboration with MSF. Technical support was provided for mold remediation training for 160 health workers, and EMT deployment continues under MOHW coordination through CICOM, alongside field visits and operational planning for field hospitals. In *Cuba*, PAHO is working with health authorities to review chikungunya clinical management protocols for adult and pediatric patients, with a technical exchange mission planned for February.
- Logistics / Countermeasures:** In *Jamaica*, Essential health emergency items have been procured and delivered to major hospitals, along with the final batch of roofing materials for seven damaged facilities. In *Cuba*, PAHO is coordinating delivery of 20 pneumonia kits, four IEHKs, and two power generators (45 kVA), with shipments expected this month.

## Executive Summary

**Jamaica:** Electricity supply has been restored to 83% of the affected population, 97% of major hospitals, and 76% of NWC water pumps and telecom sites. 90 shelters remain active across seven parishes, housing 968 people, with reported issues including limited water, accumulated solid waste, and sanitary defects. Environmental Health teams continue surveillance in food safety, water quality, vector control, wastewater, and solid waste management (3, 7).

- **Key health systems update:** Restoration efforts have reached 88.9% of affected health facilities, with 305 of 343 facilities providing partial or full services. All major hospitals have regained power supply, though some still rely on trucked water. Surge capacity through Emergency Medical Teams (EMTs) and field hospitals remains active for 30–45 days, with possible extensions. International EMTs have reported 11,270 consultations, 411 surgeries, and 359 admissions. The Ministry of Health and Wellness (MOHW), supported by PAHO, is implementing the Health Hurricane Melissa Response Programme (HHRP) to restore services and strengthen resilience. Ten healthcare facilities in the five most affected parishes have been prioritized for repair; assessments and costing have been completed for four facilities with six pending (2, 4, 8).
- **Surveillance Status:** 91 suspected, probable, or confirmed cases of leptospirosis were reported, including 30 laboratory-confirmed and 12 related deaths (7 confirmed by RT-PCR). While case numbers declined in the past two weeks, positivity rates have risen, prompting review of reporting and sample processing procedures. Vector indices have increased due to expanded mosquito breeding sites linked to water storage needs; cleanup and larvicidal activities are ongoing. Respiratory surveillance reports ILI and SARI trends below alert thresholds, with isolated detections of RSV (n=4), COVID-19 (n=3), and influenza A (H3N2) and B (Victoria lineage) (n= 2 each) between EW 44–49 (3, 4).

**Haiti:** There are no changes to the number of affected populations and health systems reported (1).

- **Surveillance Status:** Specimen transport challenges for laboratory confirmation remain, with PAHO providing ongoing support to strengthen surveillance and response (1, 4).

**Cuba:** Over 215,000 homes were damaged by Hurricane Melissa, affecting approximately 645,000 people. As of 10 December, 2,669 people remained displaced. Nearly 500,000 people rely on tanker water deliveries due to ongoing disruptions in water supply; water safety remains a primary concern (1, 5, 6).

- **Key health systems update:** Basic and vital health services have been restored across affected eastern provinces since 26 November, though some facilities continue to face roof damage and leaks. Medical services remain operational despite these challenges (1, 4).
  - **Surveillance status:** Arbovirus transmission persists but has decreased following intensified vector control efforts. Chikungunya cases dropped by 20% in EW 50, though circulation of the ECSA lineage continues; 63 cases required intensive care, including 47 serious and 16 critical cases, most under 18 years of age. Dengue transmission remains active, with 25,995 suspected and 351 confirmed cases as of EW 48; national incidence rose to 15.25 per 100,000 in EW 50, with Las Tunas, Guantánamo, and Pinar del Río reporting the highest rates. Circulating serotypes include DENV-2, DENV-3, and DENV-4. Persistent rain and flooding complicate vector control, while house-to-house investigations and larvicidal activities continue (1, 4).
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## Jamaica

45  
Deaths

12  
Missing

968  
Sheltered

### Jamaica - Affected areas

The five most affected parishes by Hurricane Melissa are Saint Elizabeth, Trelawny, Saint James, Hanover, and Westmoreland (1). Ongoing efforts have restored electricity supply to 83% of the affected population, 97% of major hospitals, and 76% of National Water Commission (NWC) water pumps and Telecom sites. Power supply in Saint Mary and Portland has been almost fully restored, following restoration in Kingston and Saint Andrew, Saint Catherine, and Saint Thomas. Clarendon, Manchester, and Saint Ann are ahead of restoration targets, with 80% of their population having restored services. As of 16 December 2025, about 17% of the population remains without power supply (9). About 69,000 people are still without NWC water supply (10). Telecommunications restoration efforts have similarly progressed, with 95-98% of pre-hurricane mobile traffic operational (11).

### Jamaica - Affected population

As of 14 December 2025, 12 persons were reported as missing representing a decrease since the PAHO Regional Situation Report – Hurricane Melissa, Sitrep No. 5, and reported deaths remained at 45 (1, 7). Additionally, as of 8 December 2025, approximately 215,000 buildings had been damaged, with about 90,000 households displaced (3). The entire population of Jamaica (2.8 million people) was exposed to Hurricane Melissa, with more than 1.5 million people impacted by housing damage, power, and water outages, including an estimated 2,619 healthcare workers (1).

As of 12 December 2025, 90 shelters remained active across seven parishes (of 881 total shelters), housing 968 people (**Table 1**). Westmoreland, Saint Elizabeth, and Saint James parishes report the highest number of active shelters and sheltered people. Key issues reported in shelters include limited or absent water supply, accumulated solid waste, and sanitary defects. Some rainwater harvesting systems at shelters in Hanover report inadequate residual chlorine levels (3, 7).

**Table 1. Active shelters and occupancy by Parish. Jamaica, as of 14 December 2025 (7)**

Parish	Active Shelter	Total Occupancy	Last updated
<b>Westmoreland</b>	30	509	8 Dec. 2025
<b>Saint Elizabeth</b>	22	167	11 Dec. 2025
<b>Saint James</b>	23	128	11 Dec. 2025
<b>Trelawny</b>	7	121	9 Dec. 2025
<b>Hanover</b>	5	29	11 Dec. 2025
<b>Saint Ann</b>	2	12	11 Dec. 2025
<b>Manchester</b>	1	2	8 Dec. 2025
<b>Total</b>	90	968	14 Dec 2025

Environmental Health teams remain active, conducting surveillance in food safety, water quality, vector control, wastewater, and solid waste management (1). Multiple communities in Westmoreland, Trelawny, and Saint James were found unsatisfactory for solid waste management (3).

## Jamaica - Health systems impact

As of 12 December 2025, health service restoration efforts have reached 88.9% of affected facilities. 305 (of 343 total) facilities provide services, partial or full, while the remaining 38 facilities remain non-operational or not fully assessed (2).

All major hospitals have had their power supply restored, while a few continue to rely on trucked water from the NWC (3). There is continued inter-regional patient transfers related to the health facility limitations (7).

Field teams have been incorporated into the National Surveillance System as Sentinel sites, and teams have been integrated into existing service delivery systems in the respective locales. A reporting tool based on the PAHO/WHO Minimum Data Sets (MDS) for the International Aid Community was finalized for utilization by supporting teams and reflects the reporting requirements of the National Surveillance System (3). The MOHW is utilizing the surge capacity in Emergency Medical Teams (EMTs) and field hospitals while permanent infrastructure is restored. These capacities are in place for a prescribed period ranging from 30 to 45 days, with options for extension to an additional 14 to 30 days (2, 3). As of 12 December, all deployed international EMTs reported 11,270 consultations, 411 surgeries, and 359 admissions (7).

The MOHW is implementing the health centre repair programme outlined under the Health Hurricane Melissa Response Programme (HHRP); the plan's objective are to restore health services to the population in the most affected areas, build back better and to mitigate the outbreak of any disease within the population post hurricane; it is structured under 3 phases – Phase 1: Relief, Phase 2- Rehabilitation, and Phase 3 – Reconstruction (8). As part of the repair of health centers outlined, Parish Managers with the support of PAHO have identified and prioritized 10 healthcare facilities among the five most affected Parishes. The assessments and costing of repairs have been completed for four of the prioritized healthcare facilities, two in Saint Elizabeth Parish and two in Trelawny Parish; a remaining six facilities are programmed to undergo the same assessments and costing (4, 8).

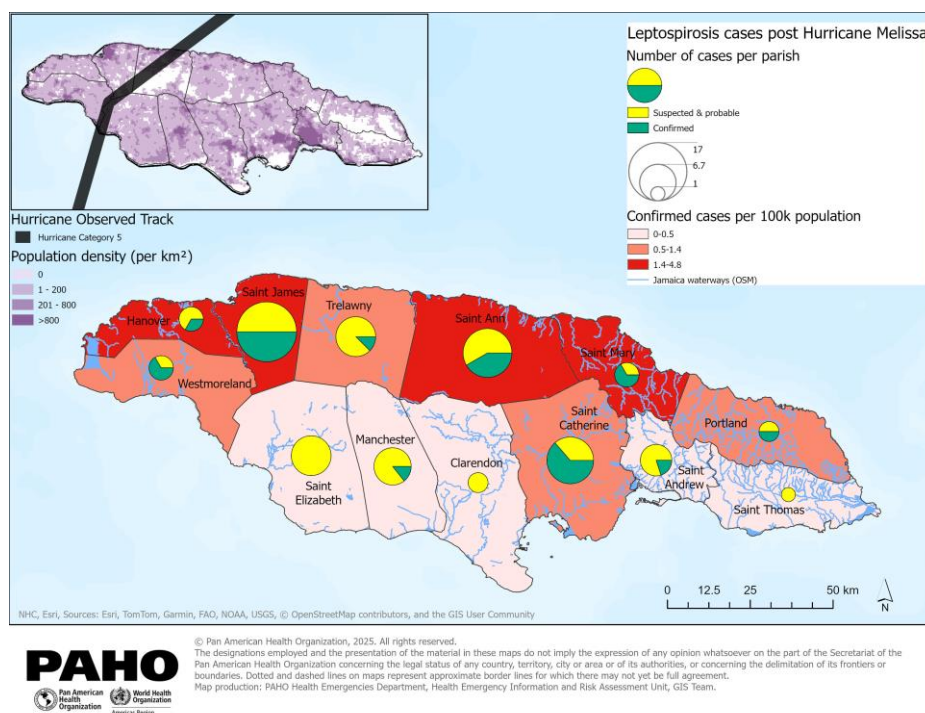
The PAHO dashboard on Jamaica Primary Health Care Centres in Affected Parishes: Impact & Status (Hurricane Melissa 2025), remains available from: [dashboard link](#) (12).

## Jamaica - Epidemiological updates

Jamaica has detected a marked increase in leptospirosis consistent with post-flood transmission patterns. As of 10 December 2025, the country reported 91 suspected, probable, or confirmed cases post-Hurricane Melissa, of which 30 were laboratory-confirmed. Twelve related deaths have been documented, including seven confirmed by RT-PCR. The rise in cases began shortly after the flooding, with most confirmed infections occurring in the post-Melissa period. The highest number of cases was reported in Saint James (n= 18), Saint Ann (n= 12), and Saint Catherine (n= 11) (**Map1**). Reported numbers of cases have been on a decreasing trend in the last two weeks. However, a corresponding rise in case

positivity has been observed during the same period, cautioning review of existing case reporting, sample collection and sample processing procedures (3, 4).

**Map 1. Leptospirosis cases post Hurricane Melissa, Jamaica, as of 10 December 2025 (3)**



As of 4 December 2025, Jamaica reported 500 suspected cases of dengue, with no confirmed cases in 2025. Two suspected dengue-related deaths were reported, although neither was laboratory confirmed. Dengue activity for 2025 has been low, according to weekly and monthly reports (3).

There is an increase in vector monitoring indices, attributed to the increase in the number of mosquito breeding sites due to the rise in need for water storage as well as water holding receptacles following the passing of Hurricane Melissa. As cleanup and larvicidal activities continue, these indicators are expected to improve (3).

Respiratory surveillance for influenza-like illness (ILI) at sentinel sites reports clinic visits and hospital admissions for severe acute respiratory illness (SARI) were below alert and epidemic thresholds. Between epidemiological week (EW) 44 and EW 49, four cases of respiratory syncytial virus (RSV) and three cases of COVID-19 were reported. There have been two cases of influenza A (H3N2) and two cases of influenza B (Victoria lineage) reported during the same period (1, 4).

Surveillance data also indicate two tetanus cases reported after the hurricane, one of which was clinically diagnosed and resulted in death. The other case is under investigation (3).

Syndromic surveillance indicates that epidemic thresholds were exceeded in EW 48, for fever, accidents, and violence in the <5-year age group, and for fever in the >5-year age group (3).



## Jamaica - Country response *(1-3, 8-10, 13-15)*

- The **National Emergency Operations Center (NEOC)** remains activated at level 3.
- **Partner mapping:** The Health Cluster, jointly coordinated by the Ministry of Health and Wellness (MOHW) and PAHO, response capacities and partner mapping dashboard reflects 41 partners organizations (including non-governmental organizations, civil society actors, UN Agencies, and donors) actively carrying out support operations across the most affected parishes in Jamaica, and is available from: <https://shiny.paho-phe.org/melissa-partners/>.
- **Physical distribution to a voucher system transition** of post-Hurricane Melissa relief efforts by early 2026, as disclosed by the Office of the Prime Minister (OPM) Permanent Secretary during the 10 December 2025 sitting of the Public Administration and Appropriations Committee of Parliament.
- **Technology Recovery Task Force** established to restore and modernize critical services.
- Post Melissa **Health Promotion and Protection Plan** was finalized and is being implemented.
- **Health Hurricane Melissa Response Programme** established and structured under 3 phases – Phase 1: Relief, Phase 2- Rehabilitation, and Phase 3 - Reconstruction. Implementation of phase 1 – relief is ongoing. Parish managers with PAHO support have identified ten priority healthcare facilities, and assessments and costing of repairs completed for four of the prioritized healthcare facilities.
- **Electricity supply restoration:** As of 16 December 2025, about 83% of the affected population had their power supply restored, along with 97% of major hospitals, and 75% of Telecom sites and NWC water pumps.
- **Mobile telecommunications restoration:** About 98% of Flow and 93% of Digicel networks' pre-hurricane mobile traffic have been restored, along with 83% of fixed network services. Efforts are being made to continue satellite-based internet services beyond December.
- **Nutrition:** Nutrition services in the affected area, including assessments of children and pregnant women, are being provided through field clinics and shelter visits. Home visits for high-risk babies are difficult because of the dislocation caused by the hurricane.
- **Vector control measures.** As of 11 December 2025, 1,347 communities have been assessed for mosquito control, and 713 communities have undergone fogging operations.
- **Leptospirosis surveillance:** Enhanced clinical and syndromic surveillance for leptospirosis continues to be implemented across all health centres, hospitals, tourist establishments, and shelters.
- **Healthcare Workers:** Staff Welfare Plan has been implemented across the physical, psychological, financial, and environmental domains, providing immediate relief support, accommodation support, and linking healthcare workers to care and support services.
  - Special efforts are being undertaken to assist affected healthcare workers in replacing important or essential documents in the aftermath of the hurricane.
  - Distribution of care packages to healthcare workers and staff, renovation of existing staff quarters to increase capacity, temporary daycare facilities for staff, are some of the initiatives for staff welfare being planned and implemented.
- **Mental Health and Psychosocial Support (MHPSS):** The NEW LIFE 24/7 helpline (888-NEW-LIFE) remains operational to receive hurricane-related calls.

## PAHO Response (1, 2, 4, 12, 14)

Since the PAHO Regional Situation Report – Hurricane Melissa, Sitrep No. 5 publication (*PAHORSR5*), these additional and continued response actions have taken place:

### Coordination:

- PAHO continues to co-chair with the MOHW the Health Cluster Coordination meeting. The 11th meeting was held on 9 December 2025. The MOHW Environmental Health Team presented post Hurricane Melissa response priorities and implications. 41 partners on the Partners Platform (<https://shiny.paho-phe.org/melissa-partners/>) are currently active as teams complete their deployments. The dashboard is also accessible on the PAHO website.
- PAHO continues to co-facilitate the four health sub-clusters: Health Services/EMTs, MHPSS; Infrastructure Rehabilitation and WASH health facilities which is integrated into the overarching WASH Cluster for the response led by UNICEFPAHO, MOHW, and the University Hospital of the West Indies continue to roll out Psychological First Aid (PFA) and broader MHPSS surge activities.
- PAHO's Regional Response Team continue to support in-country incident management, EMT coordination, epidemiologic surveillance and laboratory, and logistics.
- Ongoing provision of technical guidance to the MOHW; maintaining dialogue with the Health Disaster Coordinator (HDC) and technical support in critical areas including surveillance, community protection, clinical care, and logistics.

### Surveillance:

- PAHO organized the Webinar on Leptospirosis – Epidemiological surveillance, control, and prevention in the context of outbreaks held on 17 December 2025, including PAHO and partner presentations with the objective to review and update strategies for leptospirosis detection, prevention, and control during outbreak response, focusing on epidemiological surveillance, laboratory detection (including diagnostic algorithms), infection prevention and control, and rodent control.
- PAHO is supporting the MOHW in strengthening the lab logistics system, overhauling the surveillance information system, hiring field epidemiologists and lab personnel, and increasing sample transport capacity.
  - PAHO has provided reagents to the national laboratory to support confirmation of leptospirosis, and is supporting MOHW in evaluating the health information system to identify gaps, strengthen data quality, and improve timely leptospirosis reporting.
  - PAHO is coordinating the alignment of Lab-Epi forms and IDs to facilitate linking lab results with clinical data and outcomes.
  - Supporting MOHW assessment of specimen transportation processes for timely, safe, and reliable delivery to the national laboratory for confirmatory testing.
- PAHO continues to provide targeted technical cooperation to the MOHW to strengthen routine and emergency surveillance. PAHO is also assisting with the enhancement of data-capture and analytical tools to enable digitized case detection, follow-up, and targeted public health investigations, including for leptospirosis and other priority post-disaster health risks.



## Community protection:

- PAHO is recruiting assessors to complete WASH assessments in health facilities; following the recruitment phase, the assessments of the WASH situation in 97 remaining health facilities is expected to be carried out.
- Support was provided to transport health counsellors to visit Health Care workers and offer PFA and MHPSS.

## Clinical care:

- PAHO has delivered the final batch of roofing materials to seven damaged health facilities, including Cornwall Regional Hospital; roof repairs, including hiring contractors, overseeing logistics and supervising of on-site repairs, are ongoing in collaboration with MSF.
- PAHO provided technical support for training sessions held on 17 December on mold remediation in health care facilities, where 160 people were trained.
- PAHO enabled dashboard on [Jamaica Health Facilities: Impact & Status \(Hurricane Melissa\)](#), remains active.
- PAHO continues to support the MOHW with the deployment of Emergency Medical Teams (EMT) and its coordination through the Medical Coordination and Information Cells (CICOM). Additionally, PAHO is carrying out field visits and a sub-cluster was set up to discuss operational details on field hospitals and EMTs.
- PAHO is working closely with Team Rubicon during field assessments in Westmoreland, with a particular focus on Savanna-la-Mar Hospital and nearby health facilities. Joint teams visited the hospital to review service availability, patient flow, and critical gaps in infrastructure, WASH, supplies, and staffing.

## Logistics / Countermeasures:

- Procurement and delivery of essential health emergency items to ensure continuity of health services; items list is set out in the PAHO Jamaica Situation Report #22, available from: <https://www.paho.org/en/documents/situation-report-no-22-jamaica-hurricane-melissa-29-nov-5-dec-2025>.
- Final batch of roofing materials delivered to seven damaged health facilities.
- Ongoing purchase of 9,750 mosquito nets and 10,000 drum covers to be distributed within MOHW health facilities.

## Gaps and challenges <sup>(1, 2, 4)</sup>

- Challenges in timely delivery of specimens to the laboratory for leptospirosis confirmation within the recommended optimal period of 4–5 days (or up to 7 days). As of 17 December, many of the specimens tested were reported to have arrived outside the optimal window for PCR testing – all confirmed cases were tested after optimal window. Discussions are ongoing to address this challenge, including the incorporation of ELISA for convalescent samples (>7 days post-onset).
- Surge capacity: The MOHW continues to rely on temporary surge capacity while permanent infrastructure is being restored. However, with an imminent demobilization window as many EMTs approach their end dates, there is a significant risk to maintaining this capacity—making continued

EMT support, alongside a smooth transition back to national systems, imperative. Primary care delivery remains strained in the five most affected parishes with continued primary care facilities remaining non-functional, especially in SRHA and WRHA, causing heavy dependence on mobile clinics and emergency outreach.

- Human resource gaps and challenges: Holiday period affecting availability of some contractors for rehabilitation processes, as well as continued impact of displacement among healthcare worker.
- Continued extensive infrastructural losses requiring rebuilding, re-equipping, temporary service relocation, and large-scale debris removal. Severe damage to health infrastructure and biomedical equipment: water intrusion and wind damage impacted biomedical devices, records, and critical equipment, resulting in major service disruptions across the Southern Regional Health Authority (SRHA) and Western Regional Health Authority (WRHA). Recovery efforts ongoing.
- Unsafe water supply and sanitation in reported among health facilities, including reliance on tankers, and wastewater treatment systems remain non-functional in multiple parishes.

## Haiti

43	13	0
Deaths	Missing	Sheltered

### Haiti - Affected population / health systems

As of 11 November, at least 43 deaths and 13 missing persons had been reported in Haiti in relation to Hurricane Melissa, with no changes reported as of 17 December; likewise, no further changes to previously reported affected health systems have been reported (1).

### Haiti - Epidemiological update

As reported in the PAHO Regional Situation Report – Hurricane Melissa, Sitrep No. 5, Haiti faces a persistent cholera outbreak that began in January 2025 and remains a public health concern. As of EW 47 of 2025, there were 4,191 suspected cases, 241 confirmed cases, 2,594 hospitalizations, and 77 deaths (including 43 at the community level) reported (1). PAHO continues to provide support to address challenges, including those related to specimen transport for laboratory confirmation (4).

## Haiti - Country response <sup>(1, 4)</sup>

- The Government of Haiti declared a three-month state of emergency (3 November 2025 – 3 February 2026) in six departments to accelerate assistance, reinforce security, and restore essential services.
- The government of Haiti is prioritizing prevention and awareness campaigns in communities to limit the spread of cholera, in light of the ongoing outbreak. National laboratory has requested PAHO support.

## PAHO Response <sup>(1, 4)</sup>

Since the PAHO Regional Situation Report – Hurricane Melissa, Sitrep No. 5 publication, these response actions have taken place:

### Coordination:

- Continued coordination with UN security structures and national authorities to facilitate safe access for outbreak investigation teams and specimen transport from high-risk communes.

### Surveillance:

- Supporting national laboratory in response to request for support to continue the characterization of epidemic pathogens, including influenza, respiratory syncytial virus (RSV), cholera, and dengue.
- Support was provided for the interpretation of arbovirus surveillance protocols, including the triplex PCR assay.

## Gaps and challenges <sup>(1)</sup>

- Fragile health and humanitarian context in Haiti exacerbated by Hurricane Melissa; need increased surveillance and WASH interventions in internally displaced persons (IDP) sites and shelters. Security constraints restrict access to several high-incidence communes, limiting early detection, outbreak investigation, and rapid response missions.
- Laboratory confirmation for cholera faces challenges related to delays in specimen transport to the National de Santé Publique (LNSP) as departmental laboratories lack diagnostic capacity and specimens must be transported by air, except for the metropolitan area of Ouest.

## Cuba

0	0	2,669	2,019
Deaths	Injured	Displaced	Sheltered

### Cuba- Affected areas

Since the PAHO Regional Situation Report – Hurricane Melissa, Sitrep No. 5 publication (1), damage and recovery efforts remain concentrated in the eastern provinces of Cuba (5). All affected provinces, Santiago de Cuba, Granma, Holguín, Guantánamo, and Las Tunas, have transitioned into the recovery phase (1).

Efforts to restore electrical services are ongoing. The Ministry of Energy and Mines reported that the last of six 220KV high-voltage electrical towers knocked down by the hurricane had been restored and returned to service on 11 December, reconnecting the Granma province to the National Electric System (16, 17).

### Cuba - Affected population

Over 215,000 homes were damaged by Hurricane Melissa, affecting approximately 645,000 people (5). As of 10 December 2025, 2,669 people remained displaced (5). As of 2 December, there were 2,019 persons reported as being in shelters (1).

As of 10 December, nearly 500,000 people are reliant on tanker deliveries of water, due to ongoing disruption of water supply services (5). Water safety remains a primary concern. Power outages and network damage have limited the availability of safe drinking water, and emergency purification plans are unable to meet needs of all affected populations (6).

### Cuba - Epidemiological updates

Vector control efforts have intensified in outdoor areas and arbovirus transmission has decreased, with no deaths reported in recent days (4). Between epidemiological week (EW) 49 and EW 50, there was a 21.1% (n= 5,855) decrease in the number of individuals seeking medical attention for unspecified fever. In EW 50, Cuba reported 42 cases in intensive care units (ICU), 30 serious cases, and 12 critical cases with unspecified fever. Persistent rain and flooding has cooled temperatures and enabled the proliferation of vector populations, complicating vector control efforts in the country (4).

As reported in PAHO Regional Situation Report – Hurricane Melissa, Sitrep No. 5, Cuba reports ongoing transmission of chikungunya across 15 provinces, 113 municipalities, and 199 health areas, with 38,342 cumulative cases as of epidemiological week (EW) 48 of 2025. In EW 50, chikungunya cases had decreased by 20% and were concentrated in the provinces of Matanzas, La Habana, Camagüey, Cienfuegos, and Pinar del Río. There has also been a decrease in the number of cases requiring intensive care (n= 63) in EW 50. Of these, 47 were serious cases, including 32 cases under 18 years of age, and 16 cases were in critical condition, including 15 cases among the age group under 18 years of age (4). Circulation of the East/Central/South African (ECSA) lineage has been confirmed (1). Vector control

activities and active house-to-house epidemiological investigations are being conducted by health authorities and students (4).

Dengue transmission also continues, with 25,995 suspected cases and 351 confirmed cases reported as of epidemiological week 48 (1). The national incidence rate for dengue in EW 50 is 15.25 per 100,000 population, representing a 3.6% increase from EW 49. Cases have decreased in some areas of the country, but Las Tunas (58.35 per 100,000 population), Guantánamo (37.64 per 100,000 population), Pinar del Río (23.82 per 100,000 population), Mayabeque (21.97 per 100,000 population), Ciego de Ávila (18.05 per 100,000 population), La Habana (18.04 per 100,000 population), and Santiago de Cuba (16.59 per 100,000 population) maintain incidence rates above the national incidence rate (4). The circulating serotypes include DENV-2, DENV-3, and DENV-4 (1).

## Cuba - Health systems impact

Basic and vital services have been restored in all affected eastern provinces as of 26 November 2025 (1). Some healthcare facilities, including pharmacies and maternal homes, continue to deal with roof damage, roof leaks, and challenges with tarp coverage; however, medical services have been maintained (4).

## Cuba - Country response (1, 18, 19)

- **Infrastructure response:** National authorities and emergency brigades continue to remove debris, reopen roads, and restore electrical services.
- **Psychosocial support:** A National Mental Health Brigade comprised of psychologists, psychiatrists, and social workers has been working across the Granma Province for the past month to provide psychosocial support and support recovery in 21 affected communities.
- **Health awareness campaigns:** Healthcare workers, professors, and fifth-year medical students are conducting disease research and disseminating health education messaging to affected communities.
- **Disease surveillance:** Health authorities have increased surveillance for arboviral diseases among individuals in high-risk groups, including pregnant women, newborns, infants, individuals over age 65, and individuals with comorbidities.
- **Vector control:** MINSAP is intensifying vector control measures (fumigation, focal treatment, and adulticide) to prevent increases in arbovirus transmission.

## PAHO Response (1, 4)

Since the PAHO Regional Situation Report – Hurricane Melissa, Sitrep No. 5 publication, these additional response actions have taken place:

### Coordination:

- PAHO has completed field visits in the Holguín, Guantánamo, and Santiago de Cuba provinces.

## Surveillance:

- PAHO continues to support surveillance, vector control, and risk communication for the arbovirus situation in Cuba, with particular focus on the chikungunya situation and reagents have been procured to support sequencing of severe chikungunya cases.

## Clinical care:

- PAHO participated in a meeting with Cuban counterparts to discuss clinical management and laboratory surveillance of chikungunya.
- PAHO is working with the Ministry of Health to review protocols and interventions related to chikungunya care of adult and pediatric patients; a technical exchange mission is expected to occur in February for this matter, as well as classification of confirmed cases and laboratory control.

## Logistics / Countermeasures:

- PAHO is coordinating the delivery of a shipment with 20 pneumonia kits and 4 IEHKs to Cuba anticipated to be finalized within the week; additionally, a shipment with two power generators and 45 kVA is anticipated to arrive in Cuba later in January.

## Gaps and challenges <sup>(5, 6)</sup>

- Access to safe drinking water is a critical concern, with 500,000 people reliant on water tankers for safe drinking water due to disrupted water supply services. Poor water quality increases the risk of arboviral transmission, waterborne illnesses, and hygiene-related infections.
- Transmission of arboviral diseases, primarily dengue, Oropouche, and chikungunya, has surged in the eastern provinces and the Matanzas province. The outbreak has been exacerbated by heavy rainfall, disruption to supply chains and essential services, lack of vector control equipment, low community awareness, and limited training on early case detection, highlighting the need for heightened vector control efforts.
- Slow reconstruction timelines and housing shortages that pre-date the passage of Hurricane Melissa leave people vulnerable to the ongoing arbovirus outbreak and future severe weather events.



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**For more information:** <https://www.paho.org/en/hurricane-melissa>

**For previous PAHO Regional Situation Reports:**

[PAHO Sitrep No.5 \(4 DEC 2025\)](#)  
[PAHO Sitrep No.4 \(20 NOV 2025\)](#)  
[PAHO Sitrep No. 3 \(13 NOV 2025\)](#)  
[PAHO Sitrep No.2 \(7 NOV 2025\)](#)  
[PAHO Sitrep No. 1 \(30 OCT 2025\)](#)