UNITED NATIONS POPULATION FUND

HURRICANE MELISSA

FLASH UPDATE

25 — 30 October, 2025

Highlights

- **Category 5 impact:** Hurricane Melissa made landfall in southwestern Jamaica on 28 October with winds exceeding 220 km/h before striking southeastern Cuba on 29 October, causing catastrophic flooding, landslides, and widespread infrastructure damage across Jamaica, Haiti, Cuba, and the Dominican Republic.
- **Widespread disruption:** Over 4 million people are affected, including 6,000 displaced in Jamaica and 750,000 evacuated in Cuba. Power, communications, and transport remain severely disrupted across multiple islands.
- **Women and girls most at risk:** Health and protection systems are severely disrupted, leaving women, adolescent girls, and newborns without access to essential sexual and reproductive health (SRH) and gender-based violence (GBV) services.
- **UNFPA mobilized:** Country offices and partners are conducting rapid assessments, deploying SRH/GBV mobile teams, and starting to distribute prepositioned SRH and dignity kits while supporting the humanitarian coordination system and preparing contributions to the Flash Appeal.

4.1 million	1.4 million	58.9K	1.86 million	814K
Total people affected [1]	Women of reproductive age[2]	Estimated pregnant women [2]	People targeted w/ SRH services	People targeted w/ GBV programmes

[1] Add source. https://erccportal.jrc.ec.europa.eu/ECHO-Products/Echo-Flash#/echo-flash-items/29901 https://erccportal.jrc.ec.europa.eu/ECHO-Products/Echo-Flash#/echo-flash-items/29908

[2] Estimated figures are based on the Minimum Initial Services Package (MISP) for Sexual and Reproductive Health in Humanitarian Settings calculator.

Situation Overview

Hurricane Melissa's passage through the Caribbean has caused catastrophic flooding, destruction of infrastructure, and large-scale displacement. More than 30 deaths have been reported, with an additional 20 people missing. Essential services — including health, protection, and water systems — remain severely disrupted. Over 5 million people have been affected, and education is fully suspended.

The breakdown of essential infrastructure has left large segments of the population — especially women, adolescent girls, and newborns — without access to life-saving maternal, sexual and reproductive health, and protection services. In western Jamaica and eastern Cuba, hospitals and maternity wards have suffered flooding, power outages, and severe staff shortages. In Haiti, 69 health facilities have sustained damage, with movement restrictions, fuel shortages, and cold-chain disruptions further impeding care. Across the subregion, only 32 emergency obstetric and neonatal care facilities remain partially functional.

An estimated 4,200 births, 525 obstetric surgeries, and 240 post-abortion care cases will require urgent support in the coming weeks. The absence of lighting and overcrowding in temporary shelters heightens gender-based violence risks. Significant needs are expected for GBV prevention and response, particularly to ensure the safety, dignity, and psychosocial well-being of women and girls in affected communities. In small island and fragile Caribbean contexts, where health and protection systems are already stretched by recurrent climate shocks and limited infrastructure, such simultaneous service disruptions can have disproportionate and life-threatening impacts on women, girls, and newborns.

All UNFPA personnel across the four affected countries have been accounted for. However, as conditions remain volatile daily headcounts, security advisories, and business continuity measures are in place to ensure staff safety and operational continuity.

UNFPA Response

UNFPA is coordinating with national governments, UN partners, and civil society to restore access to SRH and GBV services, integrate gender and protection considerations into national response plans, and ensure women, girls, and youth remain at the centre of recovery efforts. Key achievements include:

- Rapid assessments and deployment of mobile SRH/GBV teams in Cuba, Haiti and Jamaica.
- Initiation of the distribution of over 5,000 SRH and dignity kits across four countries.
- Continuity of EmONC, family planning, and GBV referral services maintained where access allows.
- Dispatching of essential reproductive health equipment and supplies to affected countries, including emergency obstetric and reproductive health kits, solar-powered refrigerators to preserve life-saving medicines, and high-performance tents with solar lighting to support temporary maternity units and women-friendly spaces.

- Portable power banks and solar panels are also being provided to ensure continuity of operations and safety for frontline staff and implementing partners amid ongoing power outages.

Cuba

- Support to government-led efforts for rapid needs assessments in affected provinces, including data collection on the impact on women, girls, and health facilities.
- Planning efforts have started under the leadership of the UN Resident Coordinator, in coordination with UN agencies, with particular focus on the health and shelter sectors.
- Redirection of SRH commodities (IUDs, implants, contraceptives) to affected provinces and procuring 500 dignity kits.
- Support to provincial health authorities to restore family planning and maternal health services and collect data on women's and adolescents' needs.

Dominican Republic

- Coordination of needs assessment jointly with the UN Country Team and government counterparts to inform early response planning and ensure inclusion of SRH and GBV priorities.
- 350 dignity kits and 500 maternity kits prepositioned to support SRH and GBV service continuity.
- Coordination with government counterparts to strengthen protection services for women and youth and integrate GBV prevention into community outreach.

Haiti

- Ongoing distribution of 4,000 dignity kits and 600 "mama kits", with prepositioned reproductive health supplies covering 4,200 deliveries, 525 obstetric surgeries, 180 rape cases, and 240 post-abortion complications.
- Support to integrated mobile SRH/GBV clinics and hotlines with partners (Kay Fanm, CDS, FOSREF, World Relief) and local health authorities.
- Strengthening of referral pathways and ensuring access to clinical management of rape kits and essential RH commodities for midwives and health staff in affected departments.

Jamaica

- Joint assessments with PAHO and UNICEF; preparation of 1,000 dignity kits and support to GBV risk mitigation in shelters.
- Support to the Ministry of Health and Bureau of Gender Affairs to re-establish safe delivery points and integrate SRH and protection into shelter management.
- Prioritization of care for 11,000 expected deliveries and 1,700 obstetric emergencies over the next three months, while addressing unmet family planning needs for 180,000 women and continuity of ART for 5,000 people living with HIV.

Regional coordination

- Humanitarian supplies—including IARH kits, essential equipment, and solar-powered solutions—are being dispatched from the global prepositioned stock.
- Emergency experts in SRH, GBV, coordination, logistics, and crisis communications are being deployed to reinforce national and regional response capacity.
- An initial allocation of emergency funding has been approved to scale up life-saving interventions and sustain operations.
- Regional emergency procedures have been activated for three Country Offices, enabling rapid mobilization of resources and technical support.
- The Humanitarian Response Division (HRD) has been mobilized to support regional operations and UNFPA's contribution to the Flash Appeal for women, girls, and youth.
- UNFPA is producing the Common Operational Dataset on Population Statistics (COD-PS) to ensure sex- and age-disaggregated data inform coordinated response planning.

For more information

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