



An International Medical Corps staff member distributes tarps to a local partner.

A new public health concern has emerged in the United States: a rapidly spreading measles outbreak. Although measles was eliminated in the US in 2000,¹ West Texas first reported a case of measles at the end of January in Gaines County.² As of May 9, the spread had increased to 709 cases across 29 counties in Texas alone.³

Since January, the virus has spread across 31 states, with more than 1,000 confirmed cases and three deaths (two children and one adult).^{4, 5} Despite the increasing threat, across the country there is shortage of measles, mumps and rubella (MMR) vaccines. This is especially true in Texas, where pharmacies and medical offices are reporting vaccine shortages despite high patient demand.⁶

Federally qualified health centers (FQHCs) often serve as critical first responders in their communities, which often include vulnerable populations such as low-income families and children, the elderly and those with existing chronic conditions. FQHCs play a vital role in addressing the spread of infectious diseases, including measles, within communities. However, many health centers have also been heavily affected by various extreme weather events or disasters in the past year, significantly reducing their capacity, resources and staffing, which has limited their ability to respond effectively to emergencies.

International Medical Corps' Response

International Medical Corps recognizes the heightened risk that the outbreak poses to vulnerable populations and has developed guidance to support FQHCs and other partners in their preparedness and response efforts. This guidance document provides an overview of the measles virus, outlines key prevention strategies and offers actionable response plans to help protect communities.

In response to the outbreak, International Medical Corps is partnering with the Texas Association of Community Health Centers and other local entities to support FQHCs in East Texas, building upon the support and partnerships we established during our response to Hurricane Beryl. International Medical Corps is working with local health facilities to strengthen capacity for both public health outreach and emergency preparedness. With the dual threats of measles and the upcoming hurricane season, we are ensuring that these facilities are equipped with resources to respond quickly and effectively. International Medical Corps currently is working with one FQHC network with seven clinics and outreach sites based in the Houston area to prepare for the spread of measles.

FAST FACTS

- Hurricane Beryl and severe weather events have caused operational and financial strain on federally qualified health centers (FQHCs), leading to disruptions in patient care.
- A resurgence of measles in the United States was first reported in Gaines County, Texas, in late January.
- Since then, the virus has spread to 30 states, resulting in 935 confirmed cases and three deaths as of May 1.

OUR RESPONSE

- International Medical Corps has partnered with a FQHC based in Houston, Texas, to support critical needs for preparedness and response.
- International Medical Corps continues to coordinate closely with local, state and regional agencies, including the Primary Care Association, Texas Association of Community Health Centers and health centers serving low-income and other vulnerable groups.

¹ <https://www.cdc.gov/measles/about/history.html>

² <https://www.slideshare.net/slideshow/ysph-vmoc-special-report-measles-outbreak-southwest-us-5-3-2025-pptx/278697197>

³ <https://www.dshs.texas.gov/news-alerts/measles-outbreak-2025>

⁴ <https://www.cdc.gov/measles/data-research/index.html>

⁵ <https://www.cdc.gov/mmwr/volumes/74/wr/mm7414a1.htm>

⁶ <https://www.theguardian.com/us-news/2025/mar/08/texas-mmr-vaccine-measles-outbreak>

Though there have been no reported measles cases in Houston to date, a neighboring county has confirmed cases, indicating the growing threat that measles might spread. To support the FQHCs' efforts to prepare for increased patient needs, we are providing funding for essential resources, including personal protective equipment such as N-95 and surgical masks, access to testing (including cost coverage for co-pays and titers), measles testing and medical supplies (test tubes, swabs etc.), MMR vaccinations, emergency response "go bags" and targeted public awareness campaigns. These resources will make it easier to proactively conduct testing and to increase knowledge and vaccine coverage in the community. This particular FQHC network was severely impacted by Hurricane Beryl, forcing the temporary closure of six centers due to infrastructure damage, which resulted in significant financial loss. These financial constraints have made it difficult for the health center to invest in preparedness efforts and public health outreach related to the measles outbreak. International Medical Corps is prepared to scale up support as the situation evolves.

International Medical Corps in the US and Territories

International Medical Corps has been an emergency responder in the United States and Caribbean since 2005, when we partnered with local community clinics overwhelmed by Hurricane Katrina. In the US, International Medical Corps works with national, state and local partners and agencies to deploy emergency response teams in response to disasters and address the significant challenges that face domestic healthcare services. In 2024 alone, International Medical Corps responded to six hurricanes across Florida, Georgia, North Carolina, Puerto Rico, South Carolina, Tennessee and Texas; and launched a month-long comprehensive response to the Los Angeles wildfires in early 2025.

In the last seven years, International Medical Corps has engaged and supported a partner network of more than 275 hospitals, clinics, health and health-related facilities, and non-profit organizations across 18 states and territories in the United States, delivering health resources, services and training to more than 6 million patients and providers. We support local entities not only during disaster response but also in non-emergency times through training opportunities that strengthen healthcare systems and enhance preparedness.