

Western Sahara

Capital City : "Laayoune"

Official Language: "Arabic"

Monetary Unit: "Algerian dinar, Sahrawi peseta, Moroccan dirham, Mauritanian ouguiya"

General Information

The information on these pages should be used to research health risks and to inform the pre-travel consultation.

Due to COVID-19, travel advice is subject to rapid change. Countries may change entry requirements and close their borders at very short notice. Travellers must ensure they check current [Foreign, Commonwealth & Development Office \(FCDO\) travel advice](#) in addition to the [FCDO specific country page](#) (where available) which provides additional information on travel restrictions and entry requirements in addition to safety and security advice.

Travellers should ideally arrange an appointment with their health professional at least four to six weeks before travel. However, even if time is short, an appointment is still worthwhile. This appointment provides an opportunity to assess health risks taking into account a number of factors including destination, medical history, and planned activities. For those with pre-existing health problems, an earlier appointment is recommended.

All travellers should ensure they have [adequate travel health insurance](#).

A list of useful resources including advice on how to reduce the risk of certain health problems is available below.

Resources

- [Food and water hygiene](#)
- [Insect and tick bite avoidance](#)
- [Personal safety](#)
- [Sexually transmitted infections](#)
- [Sun protection](#)

Vaccine Recommendations

Details of vaccination recommendations and requirements are provided below.

All Travellers

Travellers should be up to date with routine vaccination courses and boosters as [recommended in the UK](#). These vaccinations include for example [measles-mumps-rubella \(MMR\)](#) vaccine and diphtheria-tetanus-polio vaccine.

Country specific diphtheria recommendations are not provided here. Diphtheria tetanus and polio

are combined in a single vaccine in the UK. Therefore, when a tetanus booster is recommended for travellers, diphtheria vaccine is also given. Should there be an outbreak of diphtheria in a country, diphtheria vaccination guidance will be provided.

Those who may be at increased risk of an infectious disease due to their work, lifestyle choice, or certain underlying health problems should be up to date with additional recommended vaccines. See the individual chapters of the 'Green Book' [Immunisation against infectious disease](#) for further details.

Certificate Requirements

- There is **no risk of yellow fever** in Western Sahara.
- This country has not stated its yellow fever vaccination certificate requirements.

Most Travellers

The vaccines in this section are recommended for most travellers visiting this country. Information on these vaccines can be found by clicking on the blue arrow. Vaccines are listed alphabetically.

Hepatitis A

Hepatitis A is a viral infection transmitted through contaminated food and water or by direct contact with an infectious person. Symptoms are often mild or absent in young children, but the disease becomes more serious with advancing age. Recovery can vary from weeks to months. Following hepatitis A illness, immunity is lifelong.

Those at increased risk include travellers visiting friends and relatives, long stay travellers, and those visiting areas of poor sanitation.

Prevention

All travellers should take care with personal, food and water hygiene.

Hepatitis A vaccination

As hepatitis A vaccine is well tolerated and affords long-lasting protection, it is recommended for all previously unvaccinated travellers.

[Hepatitis A in brief](#)

Tetanus

Tetanus is caused by a toxin released from *Clostridium tetani* and occurs worldwide. Tetanus bacteria are present in soil and manure and may be introduced through open wounds such as a puncture wound, burn or scratch.

Prevention

Travellers should thoroughly clean all wounds and seek appropriate medical attention.

Tetanus vaccination

- Travellers should have completed a primary vaccination course according to the UK schedule.
- If travelling to a country where medical facilities may be limited, a booster dose of a tetanus-containing vaccine is recommended if the last dose was more than ten years ago even if five doses of vaccine have been given previously.

Country specific information on medical facilities may be found in the 'health' section of the [FCDO foreign travel advice](#) website.

[Tetanus in brief](#)

Typhoid

Typhoid is a bacterial infection transmitted through contaminated food and water. Previous typhoid illness may only partially protect against re-infection.

Vaccination is recommended for most travellers, particularly travellers visiting friends and relatives, those in contact with an infected person, young children, frequent or long-stay travellers visiting areas where sanitation and food hygiene are likely to be poor, and laboratory personnel who may handle the bacteria for their work.

Prevention

All travellers should take care with personal, food and water hygiene.

Typhoid vaccination

- Oral and injectable typhoid vaccinations are available.

[Typhoid in brief](#)

Some Travellers

The vaccines in this section are recommended for some travellers visiting this country. Information on when these vaccines should be considered can be found by clicking on the arrow. Vaccines are listed alphabetically.

Hepatitis B

Hepatitis B is a viral infection; it is transmitted by exposure to infected blood or body fluids. This mostly occurs during sexual contact or as a result of blood-to-blood contact (for example from contaminated equipment during medical and dental procedures, tattooing or body piercing procedures, and sharing of intravenous needles). Mothers with the virus can also transmit the infection to their baby during childbirth.

Hepatitis B in Western Sahara

2% or more of the population are known or thought to be persistently infected with the hepatitis B virus (intermediate/high prevalence).

Prevention

Travellers should avoid contact with blood or body fluids. This includes:

- avoiding unprotected sexual intercourse.
- avoiding tattooing, piercing, public shaving, and acupuncture (unless sterile equipment is used).
- not sharing needles or other injection equipment.
- following universal precautions if working in a medical/dental/high risk setting.

A sterile medical equipment kit may be helpful when travelling to resource poor areas.

Hepatitis B vaccination

Vaccination could be considered for all travellers, and is recommended for those whose activities or medical history put them at increased risk including:

- those who may have unprotected sex.
- those who may be exposed to contaminated needles through injecting drug use.
- those who may be exposed to blood or body fluids through their work (e.g. health workers).
- those who may be exposed to contaminated needles as a result of having medical or dental care e.g. those with pre-existing medical conditions and those travelling for medical care abroad including those intending to receive renal dialysis overseas.
- long-stay travellers.
- those who are participating in contact sports.
- families adopting children from this country.

[Hepatitis B in brief](#)

Rabies

Rabies is a viral infection which is usually transmitted following contact with the saliva of an infected animal most often via a bite, scratch or lick to an open wound or mucous membrane (such as on the eye, nose or mouth). Although many different animals can transmit the virus, most cases follow a bite or scratch from an infected dog. In some parts of the world, bats are an important source of infection.

Rabies symptoms can take some time to develop, but when they do, the condition is almost always fatal.

The risk of exposure is increased by certain activities and length of stay (see below). Children are at

increased risk as they are less likely to avoid contact with animals and to report a bite, scratch or lick.

Rabies in Western Sahara

Rabies is considered to be a risk in this country. Bats may also carry rabies-like viruses.

Prevention

- Travellers should avoid contact with all animals. Rabies is preventable with prompt post-exposure management.
- Following a possible exposure, wounds should be thoroughly cleansed and an urgent local medical assessment sought, even if the wound appears trivial.
- Post-exposure treatment and advice should be in accordance with [national guidelines](#).

Rabies vaccination

A full course of pre-exposure vaccines simplifies and shortens the course of post-exposure treatment and removes the need for rabies immunoglobulin which is in short supply world-wide.

Pre-exposure vaccinations are recommended for travellers whose activities put them at increased risk including:

- those at risk due to their work (e.g. laboratory staff working with the virus, those working with animals or health workers who may be caring for infected patients).
- those travelling to areas where access to post-exposure treatment and medical care is limited.
- those planning higher risk activities such as running or cycling.
- long-stay travellers (more than one month).

[Rabies in brief](#)

Tuberculosis (TB)

TB is a bacterial infection transmitted most commonly by inhaling respiratory droplets from an infectious person. This is usually following prolonged or frequent close contact.

Tuberculosis in Western Sahara

The average annual incidence of TB is presumed to be greater than or equal to 40 cases per 100,000 population ([further details](#)).

Prevention

Travellers should avoid close contact with individuals known to have infectious pulmonary (lung) TB.

Those at risk during their work (such as healthcare workers) should take appropriate infection control precautions.

Tuberculosis (BCG) vaccination

According to current national guidance, BCG vaccine should be recommended for those at increased risk of developing severe disease and/or of exposure to TB infection e.g. when the average annual incidence of TB is greater than or equal to 40 cases per 100,000 population. See Public Health England's Immunisation against infectious disease, [the 'Green Book'](#).

For travellers, BCG vaccine is also recommended for:

- unvaccinated, children under 16 years of age, who are going to live for more than 3 months in this country. A tuberculin skin test is required prior to vaccination for all children from 6 years of age and may be recommended for some younger children.
- unvaccinated, tuberculin skin test negative individuals under 35 years of age at risk due to their work such as healthcare workers, prison staff and vets. Healthcare workers may be vaccinated over the age of 35 years following a careful risk assessment.

There are specific contraindications associated with the BCG vaccine and health professionals must be trained to administer this vaccine intradermally (just under the top layer of skin).

Following administration, no further vaccines should be administered in the same limb for 3 months.

The BCG vaccine is given once only, booster doses are not recommended.

[Tuberculosis in brief](#)

Malaria

- There is no risk of malaria in Western Sahara.
- Bite avoidance is recommended in all areas.

Other Risks

There are some risks that are relevant to all travellers regardless of destination. These may for example include road traffic and other accidents, diseases transmitted by contaminated food and water, sexually transmitted infections, or health issues related to the heat or cold.

Some additional risks (which may be present in all or part of this country) are mentioned below and are presented alphabetically. Select risk to expand information.

Biting insects or ticks

Insect or tick bites can cause irritation and infections of the skin at the site of a bite.

Diseases in Western Sahara

In some areas of the Western Sahara certain insects or ticks may be present.

Prevention

- All travellers should avoid insect and tick bites day and night.

Further information is available in the [insect and tick bite avoidance factsheet](#).

Influenza

Seasonal influenza is a viral infection of the respiratory tract and spreads easily from person to person via respiratory droplets when coughing and sneezing. Symptoms appear rapidly and include fever, muscle aches, headache, malaise (feeling unwell), cough, sore throat and a runny nose. In healthy individuals, symptoms improve without treatment within two to seven days. Severe illness is more common in those aged 65 years or over, those under 2 years of age, or those who have underlying medical conditions that increase their risk for complications of influenza.

Seasonal influenza in Western Sahara

Seasonal influenza occurs throughout the world. In the northern hemisphere (including the UK), most influenza occurs from as early as October through to March. In the southern hemisphere, influenza mostly occurs between April and September. In the tropics, influenza can occur throughout the year.

Prevention

All travellers should:

- Avoid close contact with symptomatic individuals
- Avoid crowded conditions where possible
- Wash their hands frequently
- Practise 'cough hygiene': sneezing or coughing into a tissue and promptly discarding it safely, and washing their hands
- Avoid travel if unwell with influenza-like symptoms
- A vaccine is available in certain circumstances (see below)*

***In the UK, seasonal influenza vaccine is offered routinely each year to those at higher risk of developing of severe disease following influenza infection, and certain additional groups such as healthcare workers and children as part of the UK national schedule (see [information on vaccination](#)). For those who do not fall into these groups, vaccination may be available privately.**

If individuals at higher risk of severe disease following influenza infection are travelling to a country when influenza is likely to be circulating they should ensure they received a flu vaccination in the previous 12 months.

The vaccine used in the UK protects against the strains predicted to occur during the winter months of the northern hemisphere. It is not possible to obtain vaccine for the southern hemisphere in the UK, but the vaccine used during the UK influenza season should still provide important protection against strains likely to occur during the southern hemisphere influenza season, and in the tropics.

Avian influenza

Avian influenza viruses can rarely infect and cause disease in humans. Such cases are usually associated with close exposure to infected bird or animal populations. Where appropriate, information on these will be available in the outbreaks and news sections of the relevant country pages. Seasonal influenza vaccines will not provide protection against avian influenza.

[Avian influenza in brief](#)

Outdoor air quality

Poor air quality is a significant public health problem in many parts of the world. Exposure to high levels of air pollution over short time periods (e.g. minutes/hours/days) and longer time periods (e.g. years) is linked to many different acute and chronic health problems. These effects are mainly on the respiratory (lungs and airways) and cardiovascular (heart function and blood circulation) systems.

Current information on world air quality is available from the [world air quality index project](#).

Prevention

Travellers with health problems that might make them more vulnerable to the effects of air pollution who are travelling to areas of high pollution should:

- discuss their travel plans with their doctor, and carry adequate supplies of their regular medication
- take sensible precautions to minimise their exposure to high levels of air pollution
- check local air quality data and amend their activities accordingly
- take notice of any health advisories published by the local Ministry of Health and Department for Environment, and follow the guidance provided.

It is unclear if face masks are beneficial at reducing exposure and may make breathing more difficult for those with pre-existing lung conditions. Those who choose to use one should make sure that the mask fits well and know how to wear it properly.

[Outdoor air quality in brief](#)

Covid-19

COVID-19 disease is caused by the coronavirus SARS-CoV2. The main symptoms of COVID-19 are a new continuous cough, a high temperature, and a loss of, or change in, normal sense of taste or smell. Symptoms range from mild to life-threatening. Older people and [those with underlying health problems](#) are more likely to develop severe disease.

COVID-19 is spread through close contact with people who have the virus. It is mainly transmitted from person to person by breathing in droplets produced when someone infected with the virus breathes, speaks, coughs or sneezes. It is also spread by touching the infected droplets on surfaces, then touching the eyes, nose or mouth.

COVID-19 vaccines provide high levels of protection against severe illness, hospitalisation, or dying from the virus. Vaccination against COVID-19 reduces, but does not eliminate the risk of infection, so social distancing and personal and respiratory hygiene remain important interventions, particularly during overseas travel.

Travellers should always check the UK Foreign, Commonwealth & Development Office (FCDO) travel advice and their [country-specific pages](#) for the latest COVID-19 travel advisories which may include information on travel restrictions, quarantine, COVID-19 testing or vaccination requirements. This includes considering the recommendations and requirements for any transit countries.

Travellers should be aware that COVID-19 case numbers in individual countries/areas can increase rapidly, and healthcare capacity and country requirements can change at short notice.

Covid-19 In Western Sahara

Most countries worldwide present a risk of exposure to COVID-19. The risk of COVID-19, public health policy, and travel advice or restrictions may change quickly, therefore travellers should ensure they have access to up to date information on COVID-19 and be prepared for rapid changes in guidance both before and during travel.

All travellers should check the FCDO travel advice and carefully consider their personal situation and risks of COVID-19 before travel to this country. This is particularly important in those at higher risk from COVID-19 who may wish to seek medical advice before travel.

Individuals entering or returning to the UK may be required to follow additional [UK border measures](#).

Prevention

If travelling to this country, travellers should:

- Consider the risk at all destinations including any transit countries, and the risk during travel itself.
- Check with the airline/tour operator about preventive measures in place to reduce risk during travel.
- Follow the latest guidance on social distancing and face coverings, including any local requirements and maintain good hand, respiratory, and personal hygiene at all times. This may be particularly important if staying with friends and family.
- Ensure they are up to date with their COVID-19 vaccination courses and boosters as recommended in the UK vaccination programme.

See [guidance on factors to consider when assessing the risk of COVID-19 for travellers](#).

If travellers develop COVID-19 symptoms while abroad, they should:

- Follow local guidelines on self-isolation, testing and avoiding travel.
- Contact their travel insurance provider.
- Seek medical advice if needed.

[COVID-19 in brief](#)

[Latest News](#)

[Latest Outbreaks](#)