

Yemen

Research conducted in 01/11/2025

Dementia management in Yemen is defined by many gaps — there are no standardised diagnostic or care pathways, no specialised services like memory clinics or geriatric wards, and little training for healthcare professionals in dementia care. The collapse of the health care system in light of the Yemeni Civil War has shifted the entire burden of care onto families, who receive no financial assistance, social protection, or respite support from the state. However, the work of non-profit organizations, such as the Yemen Foundation Against ALZ Dementia (YFAAD) provide a beacon of hope for people living with dementia, their families and caregivers in Yemen, and demonstrate that, even with little resources, much could be achieved in supporting those suffering from the illness and raising awareness about the issues they face, especially in a unique, conflict-ridden context.

Highlights

Health system **Non - universal, mixed funding (mixed provision)**

ADI member association(s): **Yemen Foundation against ALZ Dementia (YFAAD)**

National dementia plan: **No national dementia strategy in place.**

Dementia plan funding: **No plan**

Dementia prevalence rate: **225.7**

Dementia incidence rate: **39.9**

Population: **41773878**

Median age: **18**

Health expenditure (% of GDP): **6**

Diagnosis

Yemen's decade-long conflict has devastated healthcare, leaving only half of facilities functional and severe shortages of physicians, beds, and medical supplies. specialised dementia services are largely absent, with few trained healthcare workers and minimal cognitive screening, neuroimaging, or genetic testing available. Most care is unaffordable, relying on out-of-pocket payments, while NGOs like YFAAD provide limited support. Rural populations face significant access barriers, long wait times, and scarce specialist care, resulting in most dementia cases going undiagnosed. An estimated 51-56,000 Yemenis have dementia, though most remain undiagnosed due to systemic, financial, and infrastructural barriers.

Diagnosis pathway

Over a decade of conflict has devastated Yemen's healthcare system, leaving only half of facilities functional and severe shortages of physicians, hospital beds, and medical supplies. specialised dementia services are nearly absent, with limited trained staff, scarce specialists, and expensive neuroimaging, such as CT and MRI. Estimates indicate 51-56,000 dementia patients, with economic costs of \$32-61 million, though most cases remain undiagnosed due to systemic and infrastructural challenges.

Yemen has been under an armed conflict for over a decade, which prompted a humanitarian and health crisis. Approximately 17.8 million people need health assistance, while only about 51% of health facilities are functioning, with only 10 hospital beds and 5 physicians per 100 thousand people. Limited access to healthcare, lack of salaries for health staff, damage to health facilities, and difficulties in importing medicines and medical supplies exacerbate the situation. Even before the Civil War, Yemen relied on external funding and assistance to maintain healthcare services provision, and a majority of funding for the system came from out of pocket payments.

In Yemen, there is a pronounced absence of specialised services for dementia care and treatment, and a majority of healthcare workers have limited training or access to resources in order to timely diagnose patients living with Alzheimer's disease or related dementias, or provide appropriate treatment or care. Prolonged violence and instability have impeded the establishment of formal dementia care infrastructure. What is more, obtaining a reliable image of dementia prevalence in Yemen is difficult, and a majority of dementia cases in the country are undiagnosed. A recent study estimates that there are between 51 and 56 thousand people living with dementia in Yemen (2021), while the total economic expenses from dementia care ranges between 32 and 61 million USD (2021).

Around 18% of districts that form the Yemeni health system do not have doctors, while most health personnel have not received salaries in over 2 years. The outbreak of the Yemeni Civil War led to a deterioration in working conditions, causing an exodus of medical professionals from the country. Access to primary care physicians, the first point of contact towards a dementia diagnosis, remains difficult for many Yemenis, particularly those outside urban areas, with high costs of transport being a major barrier. Even if able to access a primary care physician, a majority of Yemenis are unable to afford a consultation, considering that its costs are primarily covered out of pocket. If able to afford one, they could be referred to a neurologist or a geriatric specialist for further evaluation. However, that is

contingent on the ability of a primary care physician to conduct basic cognitive screening, which is often limited. Gaining access to specialists is even more difficult, and there is no reliable information on their number in Yemen. In 2006, there were 198 psychiatric nurses and 45 psychiatrists and neurologists, a rate of 1 psychiatrist or neurologist per half a million people. What is more, the conduct of comprehensive neuropsychological batteries is rare in Yemen, as many specialists lack adequate training in performing them. Conducting any kind of cognitive screening is further complicated by low levels of literacy in Yemen, with only around 65% of the population considered literate. While a number of public and private health care institutions in Yemen make diagnostic imaging equipment, such as computed tomography (CT) and magnetic resonance imaging (MRI) scanners, available, their number in Yemen is limited. In addition, these services are prohibitively expensive for a majority of Yemenis, complicating efforts at appropriately diagnosing dementia.

References

- <https://thedocs.worldbank.org/en/doc/8aca65c4db5338cd3a408c0d4a147123-0280012021/original/Yemen-Health-Policy-Note-Sep2021.pdf>
- <https://data.worldbank.org/indicator/SH.XPD.CHEX.GD.ZS>
- <https://www.nature.com/articles/s44400-025-00009-z>
- https://www.cambridge.org/core/services/aop-cambridge-core/content/view/C609F7D51D0CCEDEBD205D58880AB9E4/S2056472423005173a.pdf/prevalence_and_economic_burden_of_dementia_in_the
- <https://yemen.un.org/en/294509-undp-yemen-second-chance-learning-importance-adult-literacy-yemen>
- <https://applications.emro.who.int/docs/9789292742546-eng.pdf>
- <https://pmc.ncbi.nlm.nih.gov/articles/PMC6734841/>

Wait times

Status: Long wait time

Only half of Yemen's health facilities function, with rural areas severely underserved. Armed conflict, staff shortages, and long wait times further limit access, while specialised care remains scarce and unaffordable. Many are thus unable to meet basic healthcare or even daily living needs.

Only 51% of health facilities in Yemen are functional, and disparities in accessing them are significant, with little coverage in rural areas. In addition, armed violence across the country further complicates access to health facilities, with Yemenis near frontlines often being unable to access their closest health facilities. Even if facing no barriers to physical access, the shortage of healthcare workers in public health care facilities forces people to face very long waiting times in contrast to receiving limited specialised treatment. Not only is accessing specialised treatment and care difficult in Yemen, it is also unaffordable for most Yemenis, with over half of them unable to secure basic foodstuffs due to the humanitarian crisis.

References

- <https://pmc.ncbi.nlm.nih.gov/articles/PMC7561303/>
- <https://thedocs.worldbank.org/en/doc/8aca65c4db5338cd3a408c0d4a147123-0280012021/original/Yemen-Health-Policy-Note-Sep2021.pdf>

Diagnosis cost

Status: Not covered

Most Yemenis cannot afford Alzheimer's diagnosis, as healthcare expenses rely heavily on out-of-pocket payments. Primary care, specialist visits, and imaging are expensive and accessible only to the wealthy, while NGOs such as YFAAD provide limited support. Armed conflict severely restricts the ability to expand access to dementia diagnostic services nationwide.

Diagnosing Alzheimer's disease and related dementias is unaffordable for a majority of Yemenis, as most health care expenses, both in the public and private sectors, are borne by patients directly, through out-of-pocket payments. Even basic consultations with primary care physicians and specialists can be prohibitively expensive, while paying for diagnostic imaging services is viable for only the wealthiest, in practice. A very limited portion of the population has the means necessary to diagnose (and treat) Alzheimer's disease and related dementias. Efforts by non-governmental organizations (NGOs), such as the Yemen Foundation Against ALZ Dementia (YFAAD) to raise awareness of dementia have facilitated access to diagnostic services for some Yemenis, but the organization has rather limited capabilities in expanding access to them on a grander scale, primarily because of the consequences of the armed conflict.

References

- <https://data.worldbank.org/indicator/SH.XPD.CHEX.GD.ZS>

Cognitive tests

Status: Not available

Information on the use of cognitive screening tests in Yemen is limited. Many primary care physicians in the country lack adequate training in order to perform cognitive screening tests on people who show symptoms of dementia, with a rather low number of dementia diagnoses serving as evidence for this. Some limited evidence points towards the validation and use of the Arabic version of the Mini-Mental State Examination (MMSE) in Yemen.

References

- <https://pubmed.ncbi.nlm.nih.gov/articles/PMC6734841/>
- <https://yemen.un.org/en/294509-undp-yemen-second-chance-learning-importance-adult-literacy-yemen>
- <https://pubmed.ncbi.nlm.nih.gov/articles/PMC5359131/>

Imaging tests

Status: Rarely used

Diagnostic imaging services are limited in Yemen, and only offered in a handful of health facilities. Among those offering them are the Al Yemen Assaeed Hospital, Yashfeen Consultant Hospital, Al Razi Scan centre, and the Modern German Hospital in Sana'a, the Marib General Hospital Authority in Marib, or the Prince Mohammed bin Salman Hospital in Aden. Most of these institutions are privately owned, and access to diagnostic imaging in public hospitals is limited. The functionality of diagnostic imaging is also impacted by armed conflict, as adequate maintenance of the equipment is complicated by international sanctions. Unsurprisingly, access to diagnostic imaging is prohibitively expensive for a majority of Yemenis. There is a functional nuclear medicine department in Sana'a featuring a positron emission tomography (PET) scanner, but it caters primarily to oncology. In addition, as

of 2016, there were only 17 nuclear medicine specialists present in Yemen.

References

- <http://www.yshyemen.com/section-item.php?lang=en&sec=12>
- <https://ych-yemen.com/en/departments/5>
- <https://www.alraziscan.net/index.php/en/>
- <https://www.mg-hospital.com/eng/medical-services/medical-sections/radiology-diagnostic-centre.html>
- <https://www.spa.gov.sa/en/N2365450>
- <https://www.spa.gov.sa/en/N2392474>
- https://www.researchgate.net/publication/359482209_Oncology_services_in_Yemen_CancerInTheArabWorld#pf156
- <https://www.sciencedirect.com/science/article/pii/S0001299816000064>

Genetic tests

There is little information on the availability of tests such as apolipoprotein E (APOE) genotype investigation in Yemen.

Biomarker tests

Status: Rarely used

There is little information on the availability of cerebrospinal fluid (CSF) testing designed to detect β -amyloid and phosphorylated tau (p-tau) protein deposits in Yemen. No medical literature directly refers to the conduct of such tests in the country.

Treatment & care

Dementia care in Yemen is extremely limited, with few specialised hospitals, scarce palliative services, and minimal community support, largely provided by YFAAD. Treatment is largely unaffordable due to medication shortages and out-of-pocket costs, contributing to an estimated economic burden of \$32-61 million (2021). Families rely heavily on NGOs for caregiver guidance and support.

Specialized facilities and services

Dementia care in Yemen is highly limited, with few hospitals in urban areas offering specialised neurology services. Al Thawrah Modern General Hospital and Al Yemen Assaeed Hospital in Sana'a provide treatment and diagnostic imaging, while Aden's Neuropsychiatric Teaching Hospital functions below capacity due to funding and staff shortages. Palliative care units are rare, with few accessible to dementia patients. Community support is nearly nonexistent, with YFAAD providing limited online channels and ad hoc events, leaving most patients and caregivers without organised assistance.

There are few hospitals providing specialised services for people living with dementia in Yemen. A limited number of private and public hospitals, largely concentrated in urban areas, have dedicated neurology centres.

(1) Al Thawrah Modern General Hospital in Sana'a is the largest public hospital in Yemen, specializing in many medical fields, including neurology. It is a tertiary referral hospital with advanced healthcare services, including a nuclear medicine centre, and, as such, is equipped to provide treatment and care to people living with dementia. Despite this, like most institutions in Yemen, Al Thawra Modern General Hospital suffers from shortages of necessary medicines and medical devices.

(2) Al Yemen Assaeed Hospital, in Sana'a, is a private hospital which maintains a centre for Neurosurgery and Spine on its premises, employing qualified neurological specialists. Moreover, the hospital offers diagnostic imaging services, meaning that it is one of the rare institutions in Yemen which has the ability to provide comprehensive diagnostic, treatment and care services to people living with dementia.

(3) The Neuropsychiatric Teaching Hospital in Aden is the oldest psychiatric hospital on the Arabian Peninsula, specializing in treating mental illnesses. A recent report notes that the hospital is operating at only 20% of its capacity, primarily due to lack of funding, shortages of medical supplies and staff, and issues with equipment maintenance.

While there is a great need for palliative care in Yemen, particularly once the consequences of armed conflict are taken into consideration, the number of facilities providing palliative care in the country is low. Yemen faces a vast unmet need for palliative care to prevent and relieve moderate and severe suffering that is highly prevalent among people living with serious illnesses. A recent study, conducted in the largest tertiary hospitals in Sana'a, outlines the state of palliative care units in the city, with a majority of nurses holding negative attitudes on the current state of palliative care provision in Yemen. In addition, it remains unclear whether people living with dementia were among the beneficiaries of palliative care units in these hospitals.

When it comes to long term care facilities or nursing homes, demand far outweighs the supply in Yemen. Getting a place in a nursing home is a practical impossibility in Yemen, and only those in private or foundational ownership continue to operate, with the government being reluctant to commit funding towards expanding their operation.

Apart from the fora provided by the Yemen Foundation Against ALZ Dementia (YFAAD), there is no evidence of organised community care provision for people living with dementia, their families and caregivers. Events are organised on an ad hoc basis, with most support provided through online channels.

Approved medication

Generic Name	Trade Name	Used for
Donepezil	Aricept, Aricept ODT, Adlarity, Eranz, Memac, Alzepil, Davia, Donecept, Donep, Donepex, Donesyn, Dopezil, Yasnal, Memorit, Pezale, Redumas, Zolpezil, Namzaric*	Donepezil is indicated for the symptomatic treatment of mild to moderately severe Alzheimer's dementia. Official UK medicine details (MHRA SPC) link
Galantamine	Razadyne, Razadyne ER, Reminyl, Reminyl XL, Nivalin, Lycoremine, Galsya	Galantamine is indicated for the symptomatic treatment of mild to moderately severe dementia of the Alzheimer type. Official UK medicine details (MHRA SPC) link
Memantine	Namenda, Namenda XR, Ebixa, Memory, Axura, Akatinol, Maruxa, Nemdatine, Namzaric*	Treatment of adult patients with moderate to severe Alzheimer's disease. Official UK medicine details (MHRA SPC) link

*Namzaric = combination of Donepezil and Memantine

** MHRA: Medicines and Healthcare products Regulatory Agency - UK medicines regulator;

SPC: Summary of Product Characteristics - detailed product information

Treatment cost

Limited data suggest Alzheimer's care in Yemen is constrained by scarce medications and high patient-paid costs. Most Yemenis cannot afford treatment, contributing to a total dementia-related economic burden of \$32-61 million, including \$14.7 million in direct expenses (2021).

Little information is available on the cost of treating and caring for people living with Alzheimer's disease in Yemen. However, it is likely that Yemen is facing shortages of approved medication for treating Alzheimer's disease, considering that, in general, medical supplies are in short stock. Even when available, it is likely that medication for treating Alzheimer's disease is unaffordable for most Yemenis, considering that a majority of treatment costs in Yemen are paid out-of-pocket. As mentioned, expenses range between 32 and 61 million USD (2021), out of which direct costs are estimated to be 14,726,594 USD.

References

<https://yemen.un.org/en/294509-undp-yemen-second-chance-learning-importance-adult-literacy-yemen>

Caregiver support

Little to no resources are available for caregiver support in Yemen, and most families caring for people living with dementia (or hired carers) have to rely on NGOs for support. The Yemen Foundation Against ALZ Dementia (YFAAD) offers consultations to carers, organises gatherings where they can meet and exchange experiences, and also maintains a WhatsApp group for the same purpose.

Policy

Yemen lacks a dedicated national dementia strategy, though some government plans address broader mental health and healthcare improvements. The National Mental Health Strategy (2022-2026) and the National Quality of Health Care Strategy (2025-2030) provide guidance, but neither explicitly references Alzheimer's or dementia. Armed conflict, weak implementation, minimal professional training, and limited specialised services force families to provide care without state assistance, financial support, or respite, leaving dementia largely unaddressed in a system weakened by war and cultural under-recognition.

National dementia plan

Although Yemen lacks a dedicated dementia plan, government strategies provide relevant guidance for mental health and general care. The 2022-2026 National Mental Health Strategy emphasises accessible, evidence-based mental health and psychosocial support, while the 2025-2030 National Quality of Health Care Strategy focuses on systemic healthcare improvements. Implementation is hindered by ongoing conflict, and dementia is not explicitly mentioned in either plan, reflecting cultural attitudes that often do not recognise these conditions as distinct mental health issues.

Yemen currently lacks a national dementia strategy or plan. However, a number of government strategies which outline objectives related to mental health care and general care services are in place, and could be of relevance for people living with dementia. Among these, the most relevant are the National Mental Health Strategy (2022 to 2026) — setting out protocols for tackling mental health issues faced by many Yemenis (including people living with dementia) — and the National Quality of Health Care Strategy (2025 to 2030) — meant to serve as a roadmap for healthcare improvement.

The National Mental Health Strategy (2022 to 2026) aims to enable comprehensive access to high quality curative and preventive services in the field of mental health and psychosocial support (MHPSS) through scientific evidence-based and multidisciplinary practices, ensuring the engagement of the community, sustainability of care, and preservation of the rights of people living with mental illnesses within the local culture. While the goals set out in the Strategy are ambitious, efforts at achieving them continue to be hampered by armed conflict. In addition, while the Strategy broadly focuses on mental health issues, there is no explicit reference to dementia or Alzheimer's disease, reflective of underlying cultural attitudes towards the illnesses, which tend to lack recognition as distinct mental health issues in the wider region.

References

- https://www.cambridge.org/core/services/aop-cambridge-core/content/view/C609F7D51D0CCEDEBD205D58880AB9E4/S2056472423005173a.pdf/prevalence_and_economic_burden_of_dementia_in_the

Upcoming plans

There is no evidence that a national dementia strategy or plan will be produced by competent Yemeni authorities soon. While the Yemen Foundation Against ALZ Dementia (YFAAD) advocates for greater engagement on the matter from the authorities, they currently lack the resources for creating a comprehensive dementia management system in a conflict-ridden society.

Policy gaps

Legal barriers

Dementia management in Yemen is defined by a profound policy vacuum, where the most significant gap is the complete absence of a national dementia strategy, leaving the condition unrecognized as a public health priority. This foundational void leads to a cascade of critical issues — there are no standardized diagnostic or care pathways, no specialized services like memory clinics or geriatric wards, and little training for healthcare professionals in dementia care. These interconnected gaps create a landscape of near total neglect, making a formal, supportive response to dementia impossible within the current context of conflict and systemic collapse.

Cultural barriers

The collapse of the health care system in light of the Yemeni Civil War has shifted the entire care onto families, who receive no financial assistance, social protection, or respite support from the state.

Research

Yemen has no active dementia research, clinical trials, or patient registries, and universities like Sana'a, Hadhramout, and Aden focus on general medical education, while YFAAD prioritises awareness and basic support over scientific studies.

Selected academic institutions

[Sana'a University \(Faculty of Medicine and Health Sciences\)](#) [Hadhramout University \(Medicine and Health Sciences Faculty\)](#) [Aden University \(Faculty of Medicine\)](#)

Clinical trials and registries

There are no active or past clinical trials related to dementia or Alzheimer's disease registered in Yemen. Global clinical trial databases, such as ClinicalTrials.gov, contain no records of any such studies being conducted in the country (as of 2025).

Furthermore, there are no formal patient registries for dementia in Yemen. There is no foundational data to understand the prevalence, incidence, or characteristics of dementia within the Yemeni population.

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References

- <https://clinicaltrials.gov/search?locStr=Yemen&country=YE&cond=Alzheimer%27s%20Disease>

Selected innovative methods

There is no evidence of dementia research being actively conducted in Yemen. The primary advocate for people living with dementia in the country, the Yemen Foundation against Alzheimer's Disease and Dementia (YFAAD), focuses on awareness and basic support rather than scientific research, as the latter is quite resource intensive, especially in an environment lacking such resources.

Support

Dementia support in Yemen is primarily coordinated by YFAAD, which provides awareness events, caregiver consultations, training, and referrals, supported by universities, NGOs, and pharmaceutical partners. Additional assistance comes from PCF centres in Ibb and Taiz for women's psychosocial care and LMMPO for older adults' welfare. Dedicated media outlets are lacking and YFAAD's online resources have limited reach due to costly internet access.

Organizations are listed for informational purposes based on publicly available sources. Inclusion does not necessarily indicate affiliation with or endorsement by Alzheimer's Disease International (ADI).

Selected national associations, patient family associations, NGOs:

[Yemen Foundation Against ALZ Dementia \(YFAAD\)](#)

Selected initiatives

Dementia support in Yemen is primarily coordinated by YFAAD, offering public awareness, caregiver consultations, training sessions, emotional support gatherings, and referrals to specialists, usually through WhatsApp. Their initiatives are supported by universities, NGOs, and pharmaceutical partners. Additional support comes from the Psychiatric Care Developmental Foundation in Ibb and Taiz, which focuses on psychosocial care for women, and HelpAge International's LMMPO, which advocates for older adults' welfare, including food security and income.

Yemen Foundation Against ALZ Dementia (YFAAD)

Yemen Foundation Against ALZ Dementia (YFAAD) is a national non-profit association which organises and supports activities related to the institution of a management system for Alzheimer's disease and related dementias in Yemen. Some of their activities include the organization of (1) outreach and public awareness events, (2) carer trainings, (3) support events for and meetings with carers, (4) counselling sessions, as well as the provision of (1) integrated care plans for families of people living with dementia, (2) referral services to other medical specialists, and the creation of bridges between medical professionals and families seeking support for their members living with Alzheimer's disease. In its work, YFAAD is supported by Yemeni institutions of higher learning, international pharmaceutical companies and NGOs.

Caregiving training course

Support initiatives catering to people living with dementia, their families and care partners are primarily organised through the Yemen Foundation Against ALZ Dementia (YFAAD) umbrella. Most prominently, the YFAAD offered a caregiving training course, primarily intended for medical professionals. However, the frequency at which training is organised by the YFAAD is unclear.

Awareness-raising events

In addition, the YFAAD organised a number of awareness-raising events across Yemeni institutions of higher

learning, health facilities and pharmaceutical companies. While these take place throughout the year, a majority of them are clustered around World Alzheimer's Month, in September. Attendances at such events tend to be between 20 to 100 people.

Consultations

To support caregivers, the YFAAD offers consultations to them, and organises gatherings where they can meet and exchange experiences. They organise another type of gatherings for caregivers, which they title "emotional venting gatherings". The YFAAD also organised a WhatsApp group for care partners, to keep a channel of communication open between them in a time of exceptional difficulty for Yemen. Seemingly, much of the information about YFAAD events, as well as consultations on matters pertaining to caring for people living with dementia, occur through WhatsApp.

The Psychiatric Care Developmental Foundation (PCF)

The Psychiatric Care Developmental Foundation (PCF) has been running two mental health and psychosocial support (MHPSS) centres in Ibb and Taiz Governorates, while cooperating with two other health institutions, Al Thawrah General Hospital in Sana'a and the Neuropsychiatric Teaching Hospital in Aden. These centres primarily provide support to women and girls, through services such as psychiatric consultations and related examinations, providing psychotropic medications, in-patient admission, advanced individual psychological support, rehabilitative services, provision of psychological first aid, structured group-based support activities, family or carer psychosocial support, facilitation of community reintegration of beneficiaries etc.

HelpAge International

HelpAge International, through its Yemeni partner organization, the Life Makers Meeting Place organization (LMMPO) organised dialogue sessions with relevant stakeholders in the Hadramaut Governorate, during which challenges faced by older people in Yemen were discussed, with a pronounced focus on income security and food access. While LMMPO is an organization which broadly advocates for the rights of older people, their efforts are a crucial lifeline for a demographic that includes a majority of people living with dementia in Yemen.

References

- <http://www.yshyemen.com/section-item.php?lang=en&sec=12>
- <https://www.alzyemen.org/?fid=80&lang=en>
- <https://www.alzyemen.org/?sid=24&lang=en>
- <https://www.alzyemen.org/?fid=86&lang=en>
- <https://www.alzyemen.org/?sid=25&lang=en>
- Available on +967777009090

Dedicated media outlets

Currently, there are no dedicated media outlets for people living with dementia, their families and care partners. However, the Yemen Foundation Against ALZ Dementia (YFAAD) maintains a number of resources on Alzheimer's disease and related dementias. They are quite active on their Facebook page, informing the public of their activities, and occasionally sharing content on dementia, its causes and consequences. On their website, one can also find informative resources on these matters, both in English and Arabic. However, these resources are rather

limited, and considering that Internet access in Yemen is expensive and difficult, it is unlikely that their reach is significant.

References

- <http://facebook.com/AlzheimerYemen/>
- <https://www.alzyemen.org/?sid=22&lang=en>
- <https://www.wilsoncentre.org/article/we-can-get-modern-internet-yemen-lets-not-waste-time>