Position on Health Situation in Venezuela (GF/B37/2)

Our Delegation visited Venezuela and witnessed the economic despair and lack of basic necessities. There were long queues for food on the street, absence of food and running water in hospitals, doctors trading food for toilet paper, broken X-ray machines in TB reference labs, people living with HIV and TB with no medications, pharmacies with empty shelves. What we saw was a collapsed economy and health system with HIV, TB, and malaria on the rise. Venezuela resembled a low-income country, vulnerable to increased rates in the epidemics and with no international aid.

In 2016, Venezuela was a High-income country and later downgraded to Upper middle-income. Venezuela, has the same income classification as China, the world's second largest economy. However, Venezuela is the world's second worst performing economy. According to the IMF, they have an estimated inflation of around 1600% which will go as high as 2800% in 2018. For the second consecutive year, there was negative economic growth at -8%. This situation exposes the fallacy of World Bank country classifications by income which do not reflect the well-being or health status of the majority of the population in a particular country. Venezuela presents one dramatic example of why dependence on World Bank classifications is harmful to the Fund’s mission.

It is easy to attribute the disaster in Venezuela to its own government, but the global community cannot turn its back on the people of Venezuela affected by AIDS, TB and Malaria. Reports from the Network of Positive People of Venezuela and from the movement of medical doctors, nurses, researchers and activists living in Venezuela, Observatorio Ciudadano de la Salud en Venezuela (Citizen’s Observatory of Health Conditions of Venezuela) point to the dire and urgent need for assistance. We trust their findings and find them alarming and worth sharing with The Global Fund and Partners.

Our presence in Rwanda reminds us of our collective responsibility as an international community and the potential implications of delaying or failing to act. Former UN Secretary General, Kofi Annan (2004) reminds us; “If the international community had acted promptly and with determination… If the United Nations, government officials, the international media and other observers had paid more attention to the gathering signs of disaster, and taken timely action, it might have been averted.”

Let us learn from our mistakes. The people of Venezuela, living with and affected by the three diseases are in need of our support. Our internal bureaucracy and self-imposed restrictions should not be the barrier to providing emergency help to people in extreme need. We urge the Board to decide rapidly on the options we have to help them.