38TH GLOBAL FUND BOARD MEETING
IMPLEMENTER GROUP STATEMENT

CALL FOR A HUMANITARIAN RESPONSE TO AIDS, TUBERCULOSIS AND MALARIA IN VENEZUELA

There is an unprecedented humanitarian and health emergency in Venezuela\(^1\). The nature of the crisis has limited access to official information, especially to the most updated information on communicable diseases and the situation of the health system, hindering efforts for effective relief. Urgent efforts are being made by different key organisations and stakeholders in order to obtain unofficial, but reliable information to compel urgent global action.

Shortages of medicines are widespread. In March 2017, the 2016 National Hospital Survey published by the Venezuelan Health Observatory (OVS) and Médicos por la Salud found severe shortages of basic medicines in 76% of the hospitals surveyed, with rapidly growing year on year shortages. In June 2017, CODEVIDA (a coalition of Venezuelan NGOs) that document medicine stock-outs reported that approximately 70% of the drugs on the World Health Organisation’s (WHO) list of essential medicines have been absent from pharmacy shelves for several months.

“The devastation we are facing is being perpetuated in part by the arbitrary rules and regulations that shape global health aid,” said Mr Alberto Nieves, a person living with HIV from Venezuela.

According to UNAIDS, Venezuela has 120,000 people living with HIV\(^2\), but only 7% (8,500 people living with HIV) have undetectable viral loads. Venezuela thus joins Gabon, Madagascar, Afghanistan and Pakistan\(^3\) as the bottom-ranking 5 countries on HIV viral suppression. Hence, these countries are faced with a massive consequence of being left behind in terms of HIV epidemic control.

With a population of 31 million, Venezuela represents 3.2% of the total population of the Americas, and accounts for a registered 43.6% of all malaria cases in the region according to the Pan American Health Organisation (PAHO)\(^4\). For more than 50 years, Venezuela had eliminated malaria, but in the last 3 years, the increase of confirmed malaria cases has increased by 205%\(^5\).

The economic collapse of Venezuela has made accessing food and life-saving commodities difficult and impossible for most. By 2017, Gross Domestic Product (GDP) plummeted by 12%\(^5\), making it the worst performing economy in the world. The inflation rate for Venezuela for 2018 forecasted by the International Monetary Fund (IMF) is 2,350%\(^6\). This has been met with stunning indifference from the global community.

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\(^2\) UNAIDS, People living with HIV http://aidsinfo.unaids.org/

\(^3\) UNAIDS, Treatment cascade (90-90-90) People living with HIV who have suppressed viral load http://aidsinfo.unaids.org/


\(^5\) IMF, Data Mapper. Real GDP growth, annual percent change for 2017. World Economic Outlook 2017 http://www.imf.org/external/datamapper/NGDP_RPCH@WEO/OEMDC/ADVEC/WEOWORLD/COG

\(^6\) IMF, Data Mapper. Inflation rate, average consumer prices. Annual percentage change estimates for 2018. World Economic Outlook October 2017 http://www.imf.org/external/datamapper/PCPITCH@WEO/WEOWORLD/VEN
During the 37th Global Fund Board Meeting in Kigali, Rwanda in May 2017, the Board approved a decision point acknowledging the health crisis in Venezuela and the resurgence of the diseases. The decision point stressed that “Venezuela is currently not eligible for Global Fund financing, and calls for a coordinated regional response to the health crisis in Venezuela and that addresses the impact on the region incorporating relevant partners, donors and financiers. Under such circumstances, in the context of a regional response, the Global Fund will continue to engage and, if possible, support the regional response”.

Since then, not much has happened.

Before the start of the 38th Global Fund Board Meeting in November 2017, a Round Table on Venezuela was organised. PAHO reported that TB incidence is on the rise in Venezuela and mortality has been unchanged during the last 10 years, this situation may worsen due to the scarcity of basic TB diagnostics, scarcity of drugs, and the increased incidence in HIV/TB mortality. Through its Strategic Fund, PAHO has informed that it has been providing credits for procurement of HIV, TB and malaria commodities to Venezuela – the last at $2.3 million. However, it has been difficult to continue with credits given that the Venezuelan government has yet to repay PAHO several million dollars for credits obtained previously. While finalising this statement, Standard & Poors has declared the debt default of Venezuela at $60 billion, as it has failed to pay the $200 million interest. This will undoubtedly worsen the economic situation of Venezuela.

We will hold the international community accountable and responsible for the price of inaction by ignoring and not responding to this humanitarian crisis.

Thus, the Implementer Group calls upon:

- The Members of the Global Fund Partnership; especially donor constituencies to urgently follow the example set by Japan, and contribute funding through the existing procurement mechanism (i.e. the PAHO Strategic Fund). As by the end of 2017, all HIV, TB and malaria commodities will face stock-outs;
- The international Community to channel resources to Venezuelan Civil Society to enable them to continue monitoring the situation, and to also provide capacity for community responses through the distribution of medications and commodities;
- Governments receiving People Living with HIV from Venezuela who are seeking treatment, should for humanitarian reasons, provide them the necessary, as well as, quality services and treatment needed, and stop deporting them as this inevitably equates to a death sentence for these communities; and
- The Global Fund to continue exploring concrete mechanisms to support this unprecedented health crisis, as well as, developing a more proactive and effective approach to countries in crisis.