



Public letter from the Venezuelan Network of Positive People RVG+ and other Civil Society Organizations of Venezuela to the Board of Directors of the Global Fund to Fight AIDS, Tuberculosis and Malaria

After 7 months of waiting for a response, we consider the letter sent to Venezuelans with HIV by the Council President and the Executive Director of the Global Fund, Norbert Hauser and Mark Dybul to be unacceptable, unjust and without humanity.

Venezuela, January 31th, 2017

The Board of Directors of the Venezuelan Network of Positive People (RVG +)¹, other civil society organizations working with HIV, and the undersigned citizens of Venezuela, before the dramatic crisis of economic, health and food emergency that punishes our population, especially to the more than 200,000 people with HIV and AIDS, couples and their families, we inform the national and international public that on June 7, 2016 we sent a request for urgent humanitarian aid² to the Global Fund to Fight AIDS, Tuberculosis And Malaria, but after **seven (7) months**, that is, on January 20, 2017, we received an unfortunate and negative response³, on the grounds that it was due to bureaucratic reasons and administrative procedures.

Among other reasons, the Global Fund states that the OECD considers Venezuela a high-income and ineligible country for international aid. Previously, the Global Fund used the World Bank classification, but that international agency downgraded it in the past from the high income category, now surprisingly GF decided to use the OECD classification.

In previous years and under a different management, the Global Fund and its Board of Directors implemented flexible measures that adapted and allowed exceptions to offer special or extraordinary assistance to countries in critical situations, as was the case in Russia where, regardless of their classification income and given the Russian government's refusal to acknowledge the seriousness of the problem, Russian Civil Society received special grants, which allowed them to develop projects aimed at reducing harm and preventing new HIV infections among injecting drug users.

¹ <http://www.rvg.org.ve/>

² RVG+(2016). <http://www.accsi.org.ve/accsi/wp-content/uploads/Letter-to-the-GF-Board-from-Venezuela-June-07-2016.pdf> / Other at <http://www.accsi.org.ve/accsi/wp-content/uploads/Carta-de-Venezuela-al-Fondo-Mundial-07-junio-2016-versi%C3%B3n-espa%C3%B1ol.pdf>

³ Fondo Mundial (2017). http://www.accsi.org.ve/accsi/wp-content/uploads/RVG-Board-Members_Joint_2017.01.18.pdf

The Global Fund itself made adaptations to its regulations and standards so that other countries in crisis such as Sierra Leone, Liberia, Guinea, Ukraine, Nepal, Haiti and Ecuador, among others, received support through flexible measures and extraordinary aid given the dramatic and difficult circumstances.

Only from the comforts of the city of Geneva, Venezuela can be thought to be an oil country that it is submerged in abundance and wealth; this shows a total lack of knowledge of the Global Fund on the **Venezuelan crisis that is affecting fundamental citizens' rights of thousands and thousands of girls, boys, women and men with HIV and AIDS of all ages, lesbians, gays, bisexuals, trans people, intersex, heterosexuals, sex workers who also suffer from other health conditions such as all types of cancer, cardiovascular diseases, hemophilia, tuberculosis, malaria, diphtheria, diabetes, lupus, hypertension, among others. Most of these people are in poverty and hunger.**

The followings are some documents and public pronouncements of institutions of the Venezuelan State, Civil Society Organizations and international organizations that show the Venezuelan reality in recent years, both the Global Fund and the international arena must know:

- **The Presidency of the Bolivarian Republic of Venezuela decreed the State of Emergency and Economic Emergency**, in which it recognizes "the fall in the price of the oil barrel in 70%, which has directly affected the income of the Nation; provoking a sensible reduction of the financial availability that allows attending the most urgent needs of the Venezuelan people"⁴. This decline in foreign exchange earnings to \$ 5.291 billion, compared to the 43 billion that the country generally obtained from the export of oil. Recently, on January 13, 2017 this decree was approved and signed for the sixth time by the President of the Republic⁵.
- **The National Assembly**, exercising its legislative function and in order to guarantee the provisions of the Constitution of the Bolivarian Republic of Venezuela, **approved the Special Law to Address the Humanitarian Crisis in Health**, in response to " The lack of appropriate treatment, the deterioration or nonexistence of the medical equipment essential for the provision of medical care, as well as the shortage of medicines, both in hospitals and in private health centers. Health and specialized stores in the pharmaceutical area ... ". It states that in Venezuela, 65% of the medicines on the Essential Medicines List published by the World Health Organization cannot be acquired due to their inexistence, with the reality that almost 95% of those essential are unavailable in the country. Moreover, the hospital situation in the country is extremely precarious and many services have been paralyzed, both for lack of medical supplies and for insufficient basic services.

⁴Venezuela, Gaceta Oficial Extraordinaria (2016). <http://albaciudad.org/wp-content/uploads/2016/05/312792311-Gaceta-Oficial-Extraordinaria-N%C2%BA-6-227-pdf.pdf>

⁵<http://www.lapatilla.com/site/2017/01/18/en-gaceta-decreto-que-declara-estado-de-excepcion-y-emergencia-economica/>

- **The Venezuelan Society of Infectious Diseases (SVI)⁶, networks and NGOs that bring together people living with HIV and doctors who treat patients with HIV**, said in a public statement that "serious problems of supply of antiretroviral treatment (ARV) with intermittent absences of atazanavir, raltegravir, ritonavir, nevirapine, efavirenz, rilpivirine, tenofovir, emtricitabine and abacavir, which endanger the lives of HIV patients due to interruptions and unscheduled changes in the therapeutic regime." They particularly mentioned the absence of HIV treatment considered first-rate by the international guidelines, which prevents people with HIV from accessing the advances in medical science and technology available in the world; the lack of medicines for opportunistic infections associated with AIDS, lack of milk formulas for HIV-infected and HIV-affected children in their first year of life, and reagents for HIV diagnostic, control, and follow-up testing.
- **The report on the situation of access to antiretroviral drugs in Venezuela⁷** elaborated by ACCSI, presents the violation of the right to life, health, and access to the advances in science and technology of girls, boys, adolescents, youth, women and men with HIV and AIDS, as a result of the deficiencies of the public health system in terms of treatment, care and prevention in HIV, and of the notorious and public disobedience to the Constitutional Mandate of the Supreme Court of Justice dated July 1999⁸.
- **United Nations Secretary-General Ban Ki-moon publicly stated:**

"I am very concerned about the current situation, where basic needs cannot be covered, such as food, water, sanitation, clothing, are not available." This creates a humanitarian crisis in Venezuela. "The UN is ready to help, but the powers and regional agencies are already committed."⁹
- **The Inter-American Commission on Human Rights (IACHR)** urged the Venezuelan State "to adopt urgent public policy measures with a human rights approach, which consider the special conditions of vulnerable individuals, groups and communities such as children and girls, pregnant women, the elderly, and people with disabilities and chronic diseases, among others, and to meet the basic needs of the population to guarantee their rights to health and food in accordance with international standards."¹⁰

⁶ Sociedad Venezolana de Infectología (2016). <http://www.accsi.org.ve/noticias/comunicado-publico-ante-desabastecimiento-de-medicamentos-antirretrovirales-en-venezuela.html>

⁷ ACCSI (2016). <http://www.accsi.org.ve/accsi/wp-content/uploads/ACCSI-Informe-situaci%C3%B3n-acceso-a-antirretrovirales-en-Venezuela-para-3-mayo-2016.pdf>

⁸ CSJ (1999). <http://www.accsi.org.ve/accsi/wp-content/uploads/RecursodeAmparoVIH-contra-MINSALUD-Venezuela.pdf>

⁹ Diario La Nación (2016). <http://www.lanacion.com.ar/1926563-ban-ki-moon-en-venezuela-hay-una-crisis-humanitaria>

¹⁰ CIDH (2016). <http://www.oas.org/es/cidh/prensa/comunicados/2016/096.asp>

- **Two reports show the tragic situation of the right to health** of millions of citizens with different diseases and affected by the health crisis, carried out **by PROVEA and CODEVIDA and submitted to the UN Committee on Economic, Social and Cultural Rights¹¹ and to the Inter-American Commission on Human Rights IACHR.¹²**

In this sense:

We invite the Global Fund to send a delegation on a special mission to Venezuela to identify "in situ" the situation of economic emergency and food and sanitary crisis in which we live, as it has been done by other international organizations.

We urgently request the Board to reconsider this response given by the President of the Council and the Executive Director of the Global Fund, Norbert Hauser and Mark Dybul, respectively.

We urge agencies of the United Nations system and other international aid agencies to urgently address Venezuela's needs, based on the needs of the population and not on government institutions.

We demand the World Bank and the OECD to never spread the average data that leads to the false idea that Venezuela is a rich country.

We request the International Civil Society Organizations with health work to stand by our call and publicly speak before the Global Fund.

Finally, we demand the immediate resignations of the President of the Council and the Executive Director of the Global Fund, Norbert Hauser and Mark Dybul respectively, not only because of the refusal given with bureaucratic pretexts, but also because in leading an institution whose purpose is to fight disease, they lack the sensitivity and leadership to even try to seek some kind of response to a situation of humanitarian, health and food crisis the population of Venezuela is suffering.

Sincerely,

Board of Directors RVG+ Red Venezolana de Gente Positiva:

Estevan Colina
RVG+ Secretario General

Pablo Montilva
RVG+ Punto Focal Apure

Yannys Navarro y Mauro Olivares
RVG+ Punto Focal Bolívar

Carlos Henríquez
RVG+ Punto Focal Amazonas

Norah Blanco y Luis Figueroa
RVG+ Punto Focal Aragua

Eduardo Franco
RVG+ Punto Focal Carabobo

Mildred Bolívar y Ricardo Rojas
RVG+ Punto Focal Anzoátegui

Annyhec Pantoja
RVG+ Punto Focal Barinas

Ana Carvajal
RVG+ Punto Focal Delta Amacuro

¹¹ Presentado a la Comisión de DESC de NNUU.

<https://coalicionporlavida.wordpress.com/about/documentos/informes/pidesc/>

¹² Presentado a la CIDH. <https://coalicionporlavida.wordpress.com/about/documentos/informes/comision-interamericana-de-derechos-humanos/>

Arcadio Bracho RVG+ Punto Focal Falcón	Daniel Jerez RVG+ Punto Focal Guárico	Raiza Farnataro RVG+ Punto Focal Lara
Carlos Contreras RVG+ Punto Focal Mérida	Ángela Delgado y José Toro RVG+ Punto Focal Miranda	Juan Marcano RVG+ Punto Focal Nueva Esparta
Yannerys Coil y José Antonio Becerra RVG+ Punto Focal Portuguesa	Domingo Vivas, Marisol Martínez y Jhonny Parra RVG+ Punto Focal Táchira	María Almeida RVG+ Punto Focal Yaracuy
	José Bravo y María Ortega RVG+ Punto Focal Zulia	

Civil Society Organizations and citizens in Venezuela:

1. A.C. Impulso Vital Aragua, estado Aragua
2. A.C. MERESSERE Mérida Rescatando una Salud Sexual Reproductiva Responsable, estado Mérida
3. ADHAM Asociación de Derechos Humanos Amigos de Margarita, estado Nueva Esparta
4. ACCSI Acción Ciudadana Contra el SIDA, Caracas
5. Alejandro Suarez
6. AMAVIDA Asociación Civil Manantial de Vida Pro Defensa de los Derechos Humanos, estado Zulia
7. Ana Carvajal
8. Ana Oropeza
9. Angélica González
10. Antonia Luque
11. Anzoátegui Sin SIDA, estado Anzoátegui
12. Asociación Civil VIH/DAS, estado Guárico
13. ASOMUVI, estado Portuguesa
14. Cesar Calzadilla
15. Cesar Pareja
16. Coalición de Organizaciones con Servicio en VIH/SIDA del Interior del país COVIP
17. Enrique Navas
18. Evelin López
19. FAVID Fundación Arcoíris por la Vida, estado Miranda
20. Fundación Acción de Guayana por la Vida AGVID, estado Bolívar
21. Fundación Conciencia por la Vida, estado Lara
22. Fundación Reflejos de Venezuela, Caracas, Ana Margarita Rojas y Elena Hernaiz
23. FUNDAPEMA, estado Apure
24. FUNDASIDARTA Fundación SIDA Región Táchira, estado Táchira
25. Gran Familia de la Salud, estado Bolívar
26. Griselda Serrano
27. Héctor Rodríguez
28. ICW+ Consejo Internacional de Mujeres con VIH Capítulo Venezuela, María Ortega
29. ISAMAR, estado Sucre
30. Josefina Gamarra
31. Kenner Yanez
32. Livia González
33. Marlon Flores
34. MAVID Fundación Manos Amigas por la Vida, estado Carabobo
35. MERESSERE Mérida Rescatando una Salud Sexual Reproductiva Responsable, estado Mérida
36. Mitzay Carias
37. Proyecto de Vida, estado Portuguesa
38. Reynaldo Hernández
39. Wendy Martínez
40. Zaida Brito