



## Humanitarian Action Program

Context, achievements and challenges | June 2016 - May 2017

### Context

The call for humanitarian aid for Venezuela must be understood within the grave social, political and economic context in the country.

The erosion of the rule of law and of democracy itself has become severe since 2013, when the generalization of hunger and the lack of access to medicines and health services became evident in the midst of growing poverty.

With the intention of making this growing health crisis visible through actions within Venezuela and abroad, on March 31, 2016, **Codevida**, the Coalition of organizations for the rights to health and to life, of which **Acción Solidaria** is a founding member, organized a public assembly attended by more than a thousand affected persons. This event was covered by national and international media, generating support from people and organizations in different countries who mobilized to help mitigate the effects of the lack of treatment and medical supplies in Venezuela. Their contributions started to arrive in small batches around May and sparked the beginning of a humanitarian aid program, taking advantage of **Acción**

**Solidaria's** experience and infrastructure.

However, on May 16, 2016, the Decree of "State of Exception and Economic Emergency" was passed, under the pretext of a special plan to solve the social and economic crisis. National and international civil society organizations rejected this decree in June through communications and press conferences, indicating this new ruling constituted a rupture of the constitutional order, which allowed the President to govern without control and eliminated attributions of Parliament. Furthermore, the decree qualified any person or group opposing the Venezuelan government as "internal enemies".

This was a sign of the consolidation of a process that gave preeminence to the political conflict and confrontation in detriment of the visibilization of the worsening humanitarian situation, making the latter part of the negotiating pieces between political actors, and not a severe problem that merits attention by itself. For this reason, among the demands by the opposition as a result of a possible dialog with the government, the "opening of a humanitarian channel" was included, along with "recognizing the National Assembly and releasing the political prisoners". Human rights

organizations expressed their concerns stating that access to food and health care are basic human rights that should not be subject to political negotiations.

The last week of March 2017, the Constitutional Chamber of Venezuela's Supreme Court published sentences 155 and 156, through which they stripped the National Assembly of its functions and "ordered" the President to "take all civil, economic, military, criminal, administrative, judiciary and social measures necessary to prevent a state of commotion", including the revision and application of criminal legislation for acts of terrorism and treason. On March 31, Venezuela's Attorney General expressed that the resolutions "evidenced several flagrant violations to the constitutional order and the rule of law enshrined in the Constitution (...) which constitutes the rupture of the constitutional order."

Political sectors and civil society called for peaceful protest to request the resignation of the magistrates, as well as for the intervention of the Moral Republican Council, the only organ with the power to start the process to remove them. The rallies started in Caracas and many cities throughout the country on April 4th and have not stopped since then.

In spite of the context of criminalization of the right to peaceful protest, criminal and arbitrary use of force, extra judiciary executions, violations of personal integrity, arbitrary detentions, torture and cruel treatment, attacks against residential and commercial areas, health centers and schools, as well as of violations to the rights of free assembly and expression, the humanitarian action program carried out by **Acción Solidaria** and **Codevida** has been able to maneuver to keep the humanitarian crisis on the public eye and even respond, with limitations, to the defense of the rights to health and to life.

At the beginning, the program was able to receive donations of food, medicines and medical supplies through door-to-door services, regularly and without obstacles. However, the qualification of the crisis by civil society organizations as "humanitarian" started to be rejected by government officials, including President Maduro, the Vice-president, the Ombudsman, and some ambassadors, on the grounds that this would open the possibility of "foreign intervention". In August 2016, a shipment of 575 boxes of medicines addressed to Cáritas Venezuela and 6 boxes addressed to **Acción Solidaria** were confiscated.

Regardless of these limitations, **Accion Solidaria's** and **Codevida's** humanitarian program was able to consolidate a wide network of international support. By December 2016, 17 cities in 11 countries had sent donations. This number has grown to 21 cities in 13 countries by the end of May 2017.

## Accomplishments

### International support

*Acción Solidaria and Codevida have received humanitarian support from 21 cities in 13 countries.*

At the end of 2016, **Acción Solidaria** signed a Memorandum of Understanding with Direct Relief, from San Diego, California, one of



the best known organizations in humanitarian aid in the world.

**Action for Solidarity**, a 501 C 3 non-profit organization, registered in Miami in 1997, and the program **Una medicina para Venezuela**, created in Madrid in 2015 to help alleviate the Venezuelan crisis, have both helped collect donations from different cities and countries to send them to Acción Solidaria.

**Action for Solidarity** has been coordinating efforts to receive medicines, medical supplies, food and clothing, as well as financial resources, from Miami, Fort Lauderdale, Baton Rouge, Houston and New York; from Montreal and Toronto; and from Ciudad de México and Monterrey.

**Una Medicina para Venezuela** has collected food, medicines and medical supplies from Madrid, Tenerife and Barcelona, as well as from Rome, Paris, Berlin and Amsterdam.

Venezuelans living abroad and many other concerned individuals have collected and sent medicines and supplies from Santia-

go, Chile; Buenos Aires, Argentina; Bogotá, Colombia; Ciudad de Panamá y San José de Costa Rica.

### Coordinating aid at a national level

Supplies have been distributed among 10 public health institutions and 14 partner organizations, plus 26 indigenous communities in different cities and Venezuelan states.

Public institutions: Hospitals El Algodonal, JM de Los Ríos (national reference in child care), Los Magallanes de Catia, Periférico de Coche, Pérez Carreño, Pérez de León, and Hospital Vargas, in Caracas; as well as González Plaza Hospital, in Valencia, Carabobo state and CorpoSalud, Miranda state; the Tropical Medicine Institute (Venezuelan Central University) and El Peñón Mental Health Center.

Civil society organizations: Asociación Venezolana de Pacientes con Enfermedad Inflamatoria Intestinal (AVEPEII), Maternal-Child Nutritional Care Center in Antímano (CANIA), Dispensario Corazón de María, Organization of Students of the Nursing School (Venezuelan Central University), FundaLeukemia, Family Medicine Foundation, Zulia State, Peniel Foundation, Guárico state, FUNDANA, Fundaprocra, Centro Gumilla, Lara state, Instituto Corazón de Jesús, Prepara Familia, the Venezuelan Association of Christian Health Centers and the Social Network (RedSoc), with 100 members among which community-based organizations.

Indigenous communities: Warao (Delta Amacuro state), Yekwana, Pemón and Mapoyo (Bolívar state), Yanomami (Amazonas state), Chaima (Monagas state), Wayúu, Yukpa and Piapoko (Zulia), and Pumé (Apure state).

*Between June 2016 and May 2017, 5,840 direct medicine donations were registered at Acción Solidaria's Community Care and Prevention Center.*

### Priorities

Given the scarcity of medicines to treat complex chronic conditions, as well as oth-

ers that are vital to the preservation of good health such as pain killers and antibiotics, a special consultation was organized by **Codevida** and other allies with health specialists in public hospitals in order to create a list of priorities to treat adults as well as children.

## Challenges

In this context, the **Acción Solidaria's** and **Codevida's** Humanitarian Action Program are facing the following challenges:

- a. International "door-to-door" carriers' operations are limited to a handful of countries.
- b. Door-to-door services are limited and do not have the capacity to mobilize the large dimension of needs in terms of medicines, supplies and food.
- c. Since 2004, private national these carriers have a prohibition to transport medicines within Venezuela, by resolution of the Venezuelan Postal Service.
- d. Internal obstacles and corruption at road controls distributed throughout the country also make it difficult to move donations among cities and to small communities



even via volunteers in private vehicles.

e. There is a need for storage space to receive donations from abroad. However, storage of large quantities could be pointed out by the government as hoarding" or "smuggling", and smaller storage spaces do not allow the program to receive significant donations.

f. There's a need to have enough trained personnel and volunteers to monitor international donations offerings, transportation into Venezuela, classification and storage of inventory, direct care for people in need, and distribution to public and private institutions.

g. The Humanitarian Action program implies additional costs in personnel, transportation, storage, equipment and supplies.

h. The Program also implies risks since these kinds of activities could be criminalized given the denial by high-ranking government officials of the existence of a humanitarian crisis. It could also be deemed an act of "treason" and a call "foreign intervention against national sovereignty".

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