

RIGHT TO HEALTH

Report of state of BOLÍVAR



Bolívar is the state with the most extensive territory in Venezuela. It counts with a surface of 240.528 km² and it divides in 11 municipalities, where 2 million of people reside with a low density of 5,8 people/Km². The municipalities Heres and Caroní focus most people. The state's capital is Bolívar City, located in the Here's municipality, where the public institutions have its headquarters. The cities of Saint Félix and Puerto Ordaz constitute the Caroní's district and the units comprised Guyana City, in which are found the basic industries of the State that made this city the industrial and economic capital of the entity.



Like the rest of the country, the human rights in Bolívar present multiple and dramatic regression as product of a Complex Humanitarian Emergency that affects all the aspect of people's life in the state. In the right to help, most of the hospitals and health clinics of the sanitary public system located in Guayana City have loss its capacities to offer services and a grant quantity of private clinics in the city of Puerto Ordaz closed as result of the severe decline of the basics industries, whose workers were mainly destined for their services

Emergency by the lost of sanitarian capacities and damages to the health in the state Bolívar

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| <p>1. 63% of the public hospitals beds of Bolívar are inoperative, rising until more than 80% of the hospital's capacities deficit and, like other public and private centers, don't have the conditions to provide attention.</p> | <p>4. In 136% rise the deaths by Malaria in the state Bolívar, state with the higher number of cases in the all country, which have expanded to national level because of the mining displacements.</p> | <p>7. 320 people with chronic conditions of the state Bolívar do not have access to medicines and increased in 58% the number of people with chronic conditions that face danger to their life and health because they are receiving incomplete treatments.</p> |
| <p>2. The neonatal deaths raised in 39% during the first 7 months of 2018 in the Raúl Leoni's Hospital of San Félix of the Bolívar state due to the inadequate attention's conditions in this hospital center.</p> | <p>5. In Bolívar, where Malaria has a high incidence and prevalence in the population, the competent institutions don't issue statistics about the advance of the epidemics nor inform about how to prevent it.</p> | |
| <p>3. In 93% have been reduce the attention capacities of children's health because of the close of pediatrics' services in the hospital of the state Bolívar, 90% of which present malnutrition.</p> | <p>6. 900 people with chronic hematological chronic conditions of the state Bolívar have stopped of being attended and 212 are in risk of dying due to the lack of reagents to do donations of blood and blood products.</p> | <p>8. In the state Bolívar, the excess of mortality by totally preventable health causes (pneumonia, diarrheas, tuberculosis and birth complications) have been increasing in a significative way in year 2018.</p> |

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1. 63% of the public hospitals beds of Bolívar are inoperative, rising until more than 80% of the hospital's capacities deficit and, like other public and private centers, don't have the conditions to provide attention. According to the standard of 30 beds per 10.000 inhabitants, the deficit of hospital attention in Bolívar overcome the 80% in 2018 to diminished in 63% the number of operative beds: the Raúl Leoni's Hospital (Guaiparo), that attends to 70% of the city San Félix's population used to have 450 beds, of which only are found operative 150, what represent a reduction of 66,67% and the possibility of an eventual close due to the severe loss of adequate conditions of attention¹. The Uyapar's Hospital, situated in Puerto Ordaz, had of 250 beds, of which now a days are working 110, what is equivalent to the loss of 66%, additionally the pipelines of the public bathrooms were stolen, which have produce structural and sanitation damages; and cannot offer food to the hospitalized people, who must go out of the hospital to buy food, which do not comply with the diet's requirements and the prices are extremely elevated, even with an inserted intravascular catheter. Likewise, the Juan Germán Roscio's hospital, located in El Callao, counted with 30 beds, of which only 15 are available reducing its capacity in 50%. Nowadays, the health centers located in Guayana City work precariously, without air conditioner nor supplies. The Integral Diagnosis Centers (CDI Spanish acronym) also are found in a critically condition for the lack of medicines². Of 17 private clinics in this city, have vanished 7 and half of the health professionals that rendered their services migrated. At least 30 private clinics currently operational have close it intensive therapy services.

2. The neonatal deaths raised in 39% during the first 7 months of 2018 in the Raúl Leoni's Hospital of San Félix of the Bolívar state due to the inadequate attention's conditions in this hospital center. 87 deaths of newborns occurred in 2018 by causes associated with the absence of prenatal controls, maternal malnutrition and exhaustion of medicines and supplies. The health staff are forced to receive the newborns in improvise areas, due to the neonatology's service is close since March 2018 because of the shortage of medical gas, the breakdown of mechanical fans and the serious deterioration of the infrastructure. In this facility the births have diminished significantly because of the technical close of the maternal and obstetrical area, reason why the majority of pregnant women of high risk are send to other health centers. Besides, it doesn't count with X Ray, laboratory, arterial gas and special test, is deficient the availability of blood products, and the neonatal Intensive Care Unit was close, now using as a retainer for babies with health problems.

3. In 93% have been reduce the attention capacities of children's health because of the close of pediatrics' services in the hospital of the state Bolívar, 90% of which present malnutrition. The deterioration of the infrastructure of Raúl Leoni's Hospital forced to diminished in 52,23% the attention that was given in the Neonatology's Unit, going from 425 newborns attended in 2017 to 222 in 2018. The pediatric area "Menca de Leoni" of this hospital, with 180 beds, was close by sewage pollution, transferring the cases to the pediatric emergency's service of the Uyapar's Hospital where barely 12 beds work and, of 16 pediatric doctors only 4 are remaining. Until 45 children by day came to attend the hospital in 2018, 90% with malnutrition symptoms. Children's relatives report in October 2018 that an average of 4 kids by day died at the hospital for the lack of supplies³. Due to there is not another health facility available, the personnel had to place 3 children for bed and others in chairs and floors. The Intensive Treatment Unit of the Uyapar's Hospital in close. It was inaugurated in 1998, it counted with high technology equipment and trained several generations of specialize personnel.

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4. In 136% rise the deaths by Malaria in the state Bolívar, state with the higher number of cases in the all country, which have expanded to national level because of the mining displacements. The deaths by Malaria or Paludism have increased 136% Bolívar, going from 150 in 2017 to 51 only in the 3 first months of 2018. The state concentrated more than 80% of the cases in Venezuela since several years, which have expanded inside the jurisdiction of Sifontes, Caroní, Sucre and Cedeño municipalities, and towards the rest of the country cause of the intensification of the mining activities and the human displacements with the object of work in gold extraction and others minerals to subsist in light of the serious economic crisis at regional and national level. At the Raúl Leoni's Hospital from 16 to 18 people hospitalized with Paludism died because of the treatment's extreme shortage, to which can only have access through governmental organism. The medicines are delivered in the "Las Manoas" health center in the city of San Félix. In September 2018, health professionals denounced that the grant state of precariousness if the assistance center by the lack of equipment and supplies, the inoperativeness of the operating room and the insecure environment where it works⁴. Round the distribution of antimalarials treatment have being made a grant market of corruption. In them, the medicines are commercialized with exorbitant prices in foreign currency or in grams of gold⁵. In front of the shortage, the majority of people consumed the cinchona plant and others not effective natural medicines, even ingest creoline.

5. In Bolívar, where Malaria has a high incidence and prevalence in the population, the competent institutions don't issue statistics about the advance of the epidemics nor inform about how to prevent it. In Bolívar are not known the statistics about the advance of the Malaria or how to prevent it, being the state with the higher number of cases of the country and the epicenter of the epidemic. Frequently the labs services of the hospitals can't conduct the test of thick blood test⁶ because of the shortage of reagents and not enough medical staff to perform quick diagnosis. The equipment of the automatized labs has been withdrawing by the commercial houses due to structural flaws of the health centers and the labs, like the failure of payments for the reagent's minimum consumption. The government have paralyzed the fumigation plans in all of the country. The emergency services and hospital triage are interrupted regularly and the persons with Malaria are transferred to other facilities. Between 2017 and 2018, from 30 to 17 fall the number of indigenous people attended in the Attention Unit and Indigenous Orientation. In 2018, 13 indigenous persons died in a period of 8 months: 7 by Malaria and 4 women for complications during pregnancy. The floods of rivers in the months of June and July increased the stomach diseases, the skin injures and the risk of Paludism, affecting a grant majority of the indigenous children by consuming contaminated water of the rivers, in light of the absence of potable water in their communities.

6. 900 people with chronic hematological chronic conditions of the state Bolívar have stopped of being attended and 212 are in risk of dying due to the lack of reagents to do donations of blood and blood products. The deterioration of the infrastructure and the lack of supplies and reagents undermine the capacity of the Special Hematology Laboratory of the Raúl Leoni's Hospital for the diagnosis and control of 900 people with onco – hematology conditions, going from 1.000 to 102 people attended per month in 2018. A 212 people are in risk of dying for the lack of transfusions; between them 205 with Drepanocytes⁷ (90 children and teenagers and 115 adults); 6 with Immune Thrombocytopenia Purpura⁸ (3 kids and 2 adults) and a boy with Acute Lymphoblastic Leukemia⁹. The blood donors decreased from 1.000 to 60 per month in 2018, which is equivalent to 6% of the projected. The blood donations went down because of malnutrition, paludism and hepatitis. It had occurre cases of Malaria by transfusions. 480 people at the onco – hematology have had anemic crisis due to the absence of globular concentrate. Barely 34,5% of this people received attention in 2018 and the number has fallen cause there are not ways to diagnosis it. By example, the persons with Acute Lymphoblastic Leukemia aren't properly diagnosed in reason of there are not supplies to perform the spinal aspiration and the special hematological examination; and 4 died in 2018.

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7. 320 people with chronic conditions of the state Bolívar do not have access to medicines and increased in 58% the number of people with chronic conditions that face danger to their life and health because they are receiving incomplete treatments. The people do not receive all the chemotherapy because the room doesn't count with air conditioner. Its brock down three times in 2018 and finally it was stolen. 105 people with hemophilia do not have access to the Factor IX since 2015 and Factor VIII since 2016. Two people in this condition deceased in Guayana City in 2018 for no receiving this factor. The people with Pulmonary Arterial Hypertension neither has access to medicines, also the elevated cost of the oxygen bombs. In 2018 2 people died with this condition and 7 could die in Guayana City for the lack of treatment. In consequence of this serious situation, the consultancies by upsurge of this chronic conditions increased 58%, in comparison with 2017; likewise, it grown in 65% the numbers of people belatedly diagnosed. Because of the lack of medical attention, the people go to consultancy in an extreme situations, which is cause of depression, anxiety, stress, and even suicides intents.

8. In the state Bolívar, the excess of mortality by totally preventable health causes (pneumonia, diarrheas, tuberculosis and birth complications) have been increasing in a significative way in year 2018. During the first 3 months of 2018, 53 people died for pneumonia, increasing in 119% the mortality by this cause; 47 result dead because of diarrheas, what equals an increased the mortality in 255%; and 7 people died by tuberculosis, with an increasing of mortality in 280%. In the case of maternal mortality, the coercion, the threads, and the opacity in the information limits the access to reliable data about what happens at the hospitals of Guayana City. According with testimonies of health staff. The precarious maternal – infancy attention's conditions increase the risk of death and all the pregnant women can't be cared for. Many women have to do long walks to the hospitals for the lack of public transportation (for example, in the case of Uyapar's Hospital, it exits a distance of 1 kilometers from de closest bus stop) they go into labor in the surroundings areas of the hospitals centers, they are not admitted and if there are complications the death woman is not registered.

Data Sheet

This report on the Complex Humanitarian Emergency in the Right to Health in the state of Bolivar, responds to an interdisciplinary methodology that brought together multiple informed stakeholders to share, contrast and substantiate data on the scale, intensity and severity of health damage and the life of the population, as a consequence of the impacts of the emergency on the health capacities of the state. Participants included organizations of affected people, land professionals, researchers and academics, as well as organizations dedicated to the defense of the right to health, who held several work sessions in order to document the most relevant problems and events in recent years. In these sessions, a wealth of information was collected, including empirical data, scientific research, official statistics and available journalistic reports. The following organizations participated in the preparation of this national report: The Commission for Human Rights and Citizenship (CODEHCU Spanish acronym); the Venezuelan Association for Hemophilia (AVH) – Bolívar' Chapter; the Nurse Society of Caroní; Doctors United of Venezuela-Chapter Bolívar and the Foundation Full Lung. Codevida - Coalition of Organizations for the Rights to Health and Life and Civil Human Rights provided support in the construction and development of the methodology of the working groups.



References consulted

¹ Correo del Caroní: Advierten que posible cierre del hospital de Guaiparo solo agravaría la crisis del sector salud en Guayana. 02 de octubre de 2018. En: <http://www.correodelcaroni.com/index.php/editoriales/itemlist/tag/12%20de%20noviembre%20de%201970>

² Primicia: Luna pide atención para los CDI de Guayana. 07 de septiembre de 2018. En: <https://primicia.com.ve/luna-pide-atencionpara-los-cdi-de-guayana/>

³ Correo del Caroní: En solo un día murieron siete niños en el hospital de Puerto Ordaz por falta de insumos. 22 de octubre de 2018. En: <http://www.correodelcaroni.com/index.php/salud?start=5>

⁴ Primicia: Denuncian deterioro del ambulatorio Las Manos. 30 de septiembre de 2018. En: <https://primicia.com.ve/denunciadeterioro-del-ambulatorio-las-manoas/>

⁵ Correo del Caroní: Comunidad indígena de San Miguel de Betania protesta con cierre de la vía a Brasil por altos precios y déficit de alimentos. 16 de octubre de 2018. En: <http://www.correodelcaroni.com/index.php/ciudad/19-comunidad-indigena-de-san-miguelde-betania-protesta-con-cierre-de-la-via-a-brasil-por-altos-precios-y-deficit-de-alimentos>

⁶ Es un tipo de estudio que se realiza por microscopio para la observar parásitos en la sangre, como los que producen el paludismo

⁷ La Drepanocitosis es una condición hereditaria que causa anemia crónica y episodios frecuentes de isquemia. Afecta casi exclusivamente a individuos de raza negra.

⁸ La Púrpura Trombocitopénica Inmune se caracteriza por una disminución anormal de plaquetas en la sangre que ayudan a detener las hemorragias.

⁹ La Leucemia comprende distintos tipos de cáncer de la sangre. La Leucemia Linfoblástica Aguda (LLA) es uno de los cuatro tipos principales de leucemia, que consiste en un gran aumento anormal de los linfoblastos y los cuales no se transforman en linfocitos que defiendan a las personas de infecciones. Su aumento desplaza a las células normales de la médula ósea ocasionando que los glóbulos rojos, las plaquetas y los glóbulos blancos normales bajen, ocasionando anemia, sangrados e infecciones.