

COMPLEX HUMANITARIAN EMERGENCY IN VENEZUELA

Carabobo

**Report 2019/2021**

In the center-north of the country, Carabobo is the third most densely populated state in Venezuela, with an estimated population of 2,242,643 inhabitants¹. It is divided into 14 municipalities and its capital is the city of Valencia. The municipalities of Valencia, San Diego and Naguanagua comprise Gran Valencia, where 48% of the state's population resides. In the context of the Complex Humanitarian Emergency (CHE) affecting Venezuela since 2016, Carabobo presents, with its specificities, a pattern common to other states in relation to the violation of human rights.

The civil society organizations that participated in the preparation of this report and that make up the Interdisciplinary Group to Address the Complex Humanitarian Emergency² in Carabobo, identified as the most serious problems of the violation of rights in the CHE: food insecurity, the decay of the public health system, the severe deficiencies in access to basic services, the situation of poverty that reaches unprecedented limits and the persecution of teachers in educational institutions.

COMPLEX HUMANITARIAN EMERGENCY IN VENEZUELA

Carabobo



Report 2019/2021

People with kidney problems without regular access to dialysis on which they must survive due to the suspension of transplants 5 years ago

1. Deceases of people with renal problems are increasing in Carabobo. The state has nine dialysis units to attend about 750 people, but almost all of them are located in Valencia, which aggravates the difficulties of access, because most of the people must travel to this city with a high deficit of transportation and fuel. Although the governor's office has three buses for transportation, two of them were defective and sometimes they do not have gasoline. Filling a tank of gas can cost US\$20 and people must have dialysis at least three times a week, raising the cost to US\$80.
2. The infrastructure of the dialysis units has stopped receiving maintenance and only the one in Puerto Cabello is working at half speed. The osmosis plants are without maintenance, there are electrical failures and no generating plants or drinking water for their operation. In addition to this, medical and paramedical personnel are leaving to work elsewhere or to migrate out of the country. A single nurse should be attending between four or five people in the dialysis units, but attends up to eight or nine, and very few of them have nephrology specialists.
3. Civil society organizations working in the health sector receive constant calls requesting catheters to be used by people undergoing hemodialysis treatment. The Venezuelan Institute of Social Security (IVSS) in some cases has delivered expired catheters and surgeons use them under the warning that they are not responsible for their effectiveness. Many people must buy them at a price of US\$ 80 and US\$ 100. For the last five years, transplants in Venezuela have been paralyzed. People who require kidney transplants must survive through dialysis.
4. Between 200 and 250 people waiting for transplants have emigrated from the country due to the lack of immunosuppressants. In Carabobo there are two pharmacies that provide high-cost medications to transplant recipients. These drugs only arrive monthly and each time with greater delay. It has been seven months with a shortage of the immunosuppressant Azathioprine and three months without Mofetil. Thanks to the "Asociación de Amigos Trasplantados (ATV)" it had been possible to cover these

COMPLEX HUMANITARIAN EMERGENCY IN VENEZUELA

Carabobo



Report 2019/2021

emergencies in Carabobo and other states, but the paralyzation of transplants for the last five years is alarming.

5. The situation has worsened for people with oncological problems due to the lack of medicines and supplies from the IVSS and the Oncological Hospital Doctor Miguel Perez Carreño. At certain times the IVSS has delivered some expired medicines. There are also no medicines for palliative care. The Oncology Unit of the Carabobo Hospital is permanently closed³ and the radiotherapy units are still paralyzed. People must go to the private sector or to the Luis Razetti Oncology Institute in Caracas, where there is a waiting list of six to eight months.

People with oncological problems are absolutely helpless due to the lack of medicines and the closure of radiotherapy units in the state
6. In the public health centers, the serious deficiencies in the provision of supplies continue. Most of the centers have no supplies for surgical interventions and people are asked for long lists of materials. Batches of medicines arrive at the hospitals, but just as they enter, they quickly disappear without any knowledge of their destination or what is in the boxes. Poor quality equipment is acquired, repowered, and since they are not properly maintained, such equipment is damaged and disincorporated because the hospital does not have the resources to carry out repairs. There are no cleaning materials either.

Abandoned public hospitals infrastructure and health personnel's labor rights in permanent violation
7. Health personnel's labor rights are not guaranteed. Remuneration is insignificant for the cost of living, working conditions do not meet standards of efficiency and medical safety, and they are not protected against pandemic and other communicable diseases. A high percentage of the staff is on leave or taking accumulated vacation because the situation is intolerable. Staff report they are in such extreme conditions of precariousness to the extent that they prefer to resign. Although salaries are very low, there are parallel payrolls in dollars for doctors who are not governed by the same rules applied to the rest of the

COMPLEX HUMANITARIAN EMERGENCY IN VENEZUELA

Carabobo

Report 2019/2021



staff. These lists include the Community Integral Doctors, graduated from the Bolivarian universities.

People living with HIV are deprived of access to medical care, medicines, diagnostic tests and surgical interventions

8. Non-antiretroviral drugs for people with HIV have high deficits, free care is scarce, specialized medical personnel have not been reincorporated into the public health system services, and people only count on the Mavid Foundation⁴. Discrimination continues to be a common practice in services of the healthcare system despite being prohibited by the law for the promotion and protection of the right to equality of people with HIV and their families.
9. There is no place in the entire state of Carabobo where people with HIV can have free preoperative examinations. In public hospitals the lists of supplies for any surgical intervention for people with HIV are exaggerated, with costs that exceed US\$ 400. A pair of biosafety gloves costs US\$ 16 and usually 20 pairs are requested. Also, 16 to 20 surgical overalls are requested for the personnel, even if there are only three or four people in the operating room. This causes many people with HIV to stop going to the hospital when acute illnesses occur, arriving later with extreme deterioration of their health conditions.
10. Some medications for people with HIV cause renal disorders and there is no access to routine examinations. Out of 18 people with HIV who had kidney problems in Carabobo, 17 died because there are no dialysis machines for them. Only one survives and is dialyzed in Caracas. Diagnostic tests are inaccessible. In Carabobo there is only one specialist at the Central Hospital, which cannot cope with the number of diagnostic requests, although the Mavid Foundation provides support with rapid tests. The most affected population are young people and pregnant women who are victims of discrimination, many of whom are isolated and are not allowed to use the bathrooms of the health center.
11. Pregnant women with HIV do not receive supplies from the State for scheduled cesarean sections, from 2020 until today the civil association Amigos del *Hospital de Niños de Valencia* has attended at least 120 pregnant women who have received cesarean section kits because they did not have the resources to buy them⁵.

COMPLEX HUMANITARIAN EMERGENCY IN VENEZUELA

Carabobo



Report 2019/2021

Severe water and electricity deficits that are mutually influential, have common causes in the severe deterioration of

12. Electricity and potable water supply are the services with lowest access in the state of Carabobo. The deficit in electricity generation continues. Although there are periods in which the service improves, these are followed by weeks with persistent blackouts, besides voltage fluctuations. CORPOLEC workers argue that they do not have tools or spare parts and furthermore, they do not have safety materials to work with

13. Water does not arrive by gravity, but by pumping, through Regional System I and Regional System II, which serve the states of Carabobo and Aragua⁶. The latest data from the Venezuelan Public Services Observatory (OVSP) reveal that 48% of households in Carabobo receive water two to three days a week, 21% one day, 14% every 15 days and 14% every day. They also show that 83% of the water arrives cloudy and smelly. Only 17% of the population receives good quality water⁷.

14. Deep water wells have been dug, but without planning or consultation. The proliferation of wells affects the aquifers that provide water for the entire population. These wells do not meet the standard of being five to six kilometers away from each other and can be polluted with nearby septic tanks. In 2007, the National Executive decided to send the water from Lake Tacarigua or Valencia to the clean water reservoir, causing a serious water quality problem and water shortage. The water treatment plant was not designed for this type of water and it takes longer to process it, coupled with electrical failures that stop pumping.

15. The National Survey of Living Conditions (ENCOVI) determined that extreme poverty is 78% in the municipality of Carlos Arvelo, 73% in the municipality of Los Guayos, 71% in the municipality of Guara and 68% in the municipality of Valencia. Weight and height in children under five years old are a concern in these three municipalities for presenting indices below the expected standards⁸.

Extreme poverty causes malnutrition in children under 5 years old and many people only manage to eat in community kitchens

COMPLEX HUMANITARIAN EMERGENCY IN VENEZUELA

Carabobo



Report 2019/2021

16. Due to serious food insecurity, soup kitchens have been opened to serve 1,800 people, especially children and adolescents, people with special conditions and the elderly. They also work on gender and protection, food and nutrition, citizenship, breastfeeding and newborn care. Food baskets have also been delivered for the last eight months. In surveys conducted in the soup kitchens it was found that 38% of the people only eat what they receive in these spaces and need to continue to be attended, at least children under five years old.

17. Ninety percent of the schools have severely deteriorated infrastructure and scarce supply of materials, due to insufficient funding from the municipal, state, and national governments⁹. At least 80% of the schools do not receive permanent water service and when it arrives it is not fit for human consumption. The School Feeding Program (PAE) only covers between 10% and 15% of the schools. The food offered by the PAE has poor quality, no animal protein and only arrives once or twice a week.

18. In the state schools assigned to the Governor's Office, the following recurrently occurs: 1) Teachers' salaries are suspended without any justification¹⁰, even when they perform their work in a responsible manner; 2) They are not given their pay receipts, therefore not knowing if they are being paid all the labor benefits guaranteed by law, such as salaries, bonuses, premiums, etc., nor what the deductions are and to which concept they correspond. In the state schools, the Child Nutrition Program has not been provided for at least four years. The president of the transitory board of the Venezuelan Teachers Union of Carabobo has denounced cases of labor harassment before the Labor Inspectorate for mistreatment of teachers, especially in state schools and in some national and/or municipal schools¹¹. The lack of teachers is around 50% and student attendance is very low in all Carabobo schools.

Schools with severe problems of physical deterioration, scarce supplies and food for students and teachers with low salaries, mistreatment and unjustified dismissals

19. The return to on-site classes has not been massive due to infrastructure¹² and transportation problems, as well as the lack of resources of parents and representatives to pay for a meal or a ticket for their children. All the information gathered from teachers,

COMPLEX HUMANITARIAN EMERGENCY IN VENEZUELA

Carabobo

Report 2019/2021



representatives and/or teachers' unions agree that the biosecurity of the school community is not guaranteed¹³. The teachers' scarce financial resources does not allow them to return to the classrooms either¹⁴. The deficit of teachers is supplied by young people from *Chamba Juvenil* or by other people unqualified to teach¹⁵.

References

¹ UCAB. Insoencovi. <https://insoencovi.ucab.edu.ve/indicadores-demograficos/>

² Composed by the following organizations: Funcamama, Padres Organizados, Fundación MAVID, Médicos Unidos Carabobo, Amigos Trasplantados de Venezuela, and Casa de un nuevo pueblo.

³ El Carabobeño TV. "Pacientes denunciaron cierre de Unidad Oncológica en el Hospital Carabobo" https://youtu.be/H_eVqJGW0dY

⁴ Fundación Mavid Carabobo. @Fundacionmavid

⁵ <https://twitter.com/uamiuc/status/1307307807880945664?lang=es>

⁶ Iagua. "Hoy día el Lago de Valencia es un problema sanitario". <https://www.iagua.es/blogs/jesus-castillo/hoy-dia-lago-valencia-es-problema-sanitario>

⁷ Observatorio Venezolano de los Servicios Públicos. OVSP: 47,0% de los encuestados en doce ciudades almacena agua ante las constantes fallas en el suministro. <http://www.observatoriovosp.org/ovsp-470-de-los-encuestados-en-doce-ciudades-almacena-agua-ante-las-constantes-fallas-en-el-suministro/>

⁸ Encuesta Nacional de Condiciones de Vida – ENCOVI. <https://www.proyectoencovi.com/encovi-2021>

⁹ Informe21. "Denuncian que las escuelas de Carabobo tienen problemas con los servicios públicos". <https://informe21.com/actualidad/denuncian-que-las-escuelas-de-carabobo-tienen-problemas-con-los-servicios-publicos>

¹⁰ Carabobo es noticia. FVM denuncia suspensión de pago de 219 docentes en Carabobo.

<https://caraboboesnoticia.com/fvm-denuncia-suspension-de-pago-de-219-docentes-en-carabobo/>

¹¹ Valencia Hoy. Luis Guillermo Padrón: Autoridades educativas de Carabobo aplican despidos indirectos contra docentes. <https://valenciahoyblog.wordpress.com/2021/02/03/luis-guillermo-padron-autoridades-educativas-de-carabobo-aplican-despidos-indirectos-contradocentes/>

COMPLEX HUMANITARIAN EMERGENCY IN VENEZUELA

Carabobo

Report 2019/2021



¹² Punto de Corte. Carabobo | Sinvemaca: Las 342 escuelas estatales no están aptas para recibir estudiantes.

<https://puntodecorte.net/carabobo-sinvemaca-342-escuelas-estadales/>

¹³ Crónica Uno. Suma Carabobo: Maestros no cuentan con ropa, calzado ni equipos de bioseguridad para iniciar clases. <https://cronica.uno/suma-carabobo-maestros-no-cuentan-con-ropa-calzado-ni-equipos-de-bioseguridad-para-iniciar-clases/>

¹⁴ Valencia Post. 70% de los educadores carabobeños aún no retorna a las aulas de clases.

<https://vlnpost.com/2022/01/12/70-de-los-educadores-carabobenos-aun-no-retorna-a-las-aulas-de-clases/>

¹⁵ SandyAveledo.com. Poca asistencia de docentes y estudiantes, deterioro de la infraestructura, falta de servicios y dotación, caracterizaron el regreso a clases. <https://sandyaveledo.com/adelba-taffin-poca-asistencia-de-docentes-y-estudiantes-deterioro-de-la-infraestructura-falta-de-servicios-y-dotacion-caracterizaron-el-regreso-a-clases/>