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GLOBAL FUND BOARD'S IMPLEMENTER GROUP CALLS ON DONOR COUNTRIES TO PROVIDE AID TO THE PEOPLE OF VENEZUELA

The Implementer Group has called on 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 Strategic Fund of the Pan American Health Organization (PAHO) – to provide aid to the people affected by the unprecedented humanitarian and health emergency in Venezuela.

The Implementer Group also called on the Global Fund to continue exploring concrete mechanisms to support efforts to address this unprecedented health crisis, and to develop a more proactive and effective approach to countries in crisis.

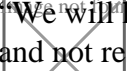
The Implementer Group issued a statement to this effect during the Global Fund Board meeting in Geneva on 14-15 November.

The Implementer Group is made up of representatives of the 10 implementing constituencies of the Board – Eastern and Southern Africa; West and Central Africa; Eastern Mediterranean Region; Eastern Europe and Central Asia; South East Asia; Western Pacific Region; Latin America and the Caribbean; Communities; Developed Country NGOs; and Developing Country NGOs. The purpose of the Implementer Group is to strengthen implementers' participation in, and engagement with, the Global Fund Board. (See [GFO article](#).)

In its statement, the Implementer Group also called on the international community to channel resources to Venezuelan civil society to enable it to continue monitoring the situation, and also to distribute

medications and other commodities.

Finally, the group called on governments in countries receiving people living with HIV from Venezuela who are seeking treatment to provide them with necessary (and quality) services, including treatment – for humanitarian reasons – and to stop deporting them “because this inevitably equates to a death sentence.”

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

At its 37th meeting in May 2017, the Board approved a decision point acknowledging the health crisis in Venezuela. Demonstrators in Caracas send out distress signal The Board expressed continued concern “about the resurgence of malaria, shortages of critical commodities for HIV and TB, and the broader health crisis in Venezuela and its impact on the region.” Noting that Venezuela is currently not eligible for Global Fund financing, the Board said that in the context of a regional response, the Fund “will continue to engage and, if possible, support the regional response.” (See [GFO article](#) .)

“Since then, not much has happened, the statement from the Implementer Group said.

On 13 November, the pre-meeting day at the Board meeting, there was a round table on the situation in Venezuela. According to the statement from the Implementer Group, at the round table PAHO reported that TB incidence is on the rise in Venezuela; and that there is a scarcity of basic TB diagnostics, a scarcity of drugs, and an increased incidence in HIV/TB mortality. Representatives from PAHO said that the organization has been providing credits for procurement of HIV, TB and malaria commodities to Venezuela – the last valued at \$2.3 million. However, PAHO said, 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.

The Implementer Group said that while it was finalizing its statement, Standard & Poor’s has declared that Venezuela has defaulted on debt valued at \$60 billion, having failed to pay \$200 million in interest. “This will undoubtedly worsen the economic situation of Venezuela,” the statement said.

(On 14 November, Forbes [reported](#) that Venezuela has defaulted on two of its US dollar-denominated sovereign bond issues.)

The Implementer Group’s statement quoted Alberto Nieves, a person living with HIV from Venezuela, as saying that “the devastation we are facing is being perpetuated in part by the arbitrary rules and regulations that shape global health aid.”

Although there was a round table discussion on the pre-meeting day, no discussion of the situation in Venezuela was included on the agenda of the Board meeting itself.

Aidspan’s most recent GFO article on the situation in Venezuela can be found [here](#) . See also [separate article](#) in this issue on potential changes to the Global Fund’s Eligibility Policy.

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