



# **OVERALL SITUATION OF HUMAN RIGHTS IN THE STATE OF ZULIA AUGUST 2020 SUMMARY**

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## AUGUST 2020 SUMMARY

Commission for Human Rights of the state of Zulia (Codhez)

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## GENERAL OVERVIEW

The *August 2020 Summary* on the general situation of human rights in Zulia focuses on the documentation on the living conditions of the citizens who belong to the indigenous peoples and communities that inhabit the region. Specifically, the current circumstances related to the human rights of the indigenous population, whose observance has been ignored by the Venezuelan State, are mentioned, an issue that is evidenced in the deficient provision of electric service, drinking water, domestic gas, health, education, public transport, among others. This panorama has worsened since March with the application of restrictive measures related to *collective and social quarantine*.

According to the last census of 2011, the indigenous population in Zulia consists of 443,544 inhabitants<sup>1</sup>, distributed among the Wayuu and Añú peoples whose habitat is situated in La Guajira (north of Zulia, on the border with Colombia), and the Barí indigenous peoples, Japreria and Yukpa, whose habitat is located in the *Sierra de Perijá* (west of Zulia state, also on the border with Colombia). These territories represent the natural habitat of these peoples, although for years they have moved throughout the region, and for this reason some communities are found in other municipalities, particularly in Maracaibo.

This *August 2020 Summary* is dedicated to indigenous peoples and communities because the International Day of Indigenous Peoples is commemorated on August 9 of each year, a date that in 1982<sup>2</sup> laid the foundations of the working groups on these peoples within the United Nations. These working groups have issued a set of international instruments that are aimed at the promotion, protection and defense of the rights of indigenous peoples around the world. One of the most relevant has been the United Nations Declaration on the Rights of Indigenous Peoples, approved in 2007<sup>3</sup>. Meanwhile, in the inter-American sphere, the American Declaration on the Rights of Indigenous Peoples was approved in 2016<sup>4</sup>.

This Summary also follows up the functional crisis of the national public health system under the Covid-19 pandemic. There are still failures in infrastructure, supplies and sanitary implements that are evidenced in the rise in the number of infections and deaths, and alarmingly in the increase in deaths of health personnel. These circumstances ratify the repeated failure of the Venezuelan State to comply with its obligation to guarantee the right to health and access to quality health care services in the region.

### 1. SITUATION OF THE INDIGENOUS PEOPLES IN ZULIA

The crisis in the indigenous peoples and communities of the region is extremely alarming. In consideration of this, the Human Rights Committee of *La Guajira* requested precautionary protection measures before the Inter-American Commission on Human Rights due to the serious situation suffered by the Wayuu and Añú communities, caused by the almost nonexistent provision of drinking water, electrical service, as well as the unavailability and inaccessibility of food, which intensified since March of this year due to the Covid-19<sup>5</sup> pandemic. In general, this panorama of abandonment has been constant for years, and the Venezuelan State has ignored the multiple demands for attention, which determines a flagrant violation of their human rights.

The obligation of the State to protect indigenous peoples and communities derives from the framework of rights recognized in various international and national normative texts, such as the

United Nations Declaration on the Rights of Indigenous Peoples, the American Declaration on the Rights of Indigenous Peoples, the Constitution of the Bolivarian Republic of Venezuela, and the Organic Law of Indigenous Peoples and Communities.

The Universal Declaration stipulates that “*Indigenous people have the right to life, physical and mental integrity, liberty and security of person*” (Article 7)<sup>6</sup>. Meanwhile, the American Declaration on the Rights of Indigenous Peoples establishes that “*Indigenous peoples and individuals have the right to the full enjoyment of all human rights and fundamental freedoms, as recognized in the Charter of the United Nations, the Charter of the Organization of the American States and in international human rights law*” (Article V)<sup>7</sup>.

The Venezuelan Constitution provides rights for all the people who are part of indigenous peoples and communities, in addition to recognizing their existence, customs, worldview, habitats, and economic practices. To this end, it provides that “*The State shall recognize the existence of indigenous peoples and communities, their social, political and economic organization, their cultures, uses and customs, languages and religions, as well as their habitat and original rights over the lands that ancestrally and traditionally they occupy and that are necessary to develop and guarantee their ways of life...*” (Article 119)<sup>8</sup>. For its part, the Organic Law of Indigenous Peoples and Communities stipulates that “*The Venezuelan State recognizes and protects the existence of indigenous peoples and communities as first peoples, guaranteeing them the rights enshrined in the Constitution of the Bolivarian Republic of Venezuela, the treaties, International pacts and conventions and other universally accepted norms, as well as the other laws of the Republic, to ensure their active participation in the life of the Venezuelan nation, the preservation of their cultures, the exercise of self-determination of their internal affairs and the conditions that make them possible*” (article 1)<sup>9</sup>.

The territory of La Guajira includes a border crossing to and from Colombia, which implies that the transit and trading of goods and services in that area is one of the main sources of lucrative activity. As a result of the restrictive measures announced by the Venezuelan and Colombian governments due to the pandemic, more than 80% of the labor and commercial sector<sup>10</sup> was paralyzed, worsening the living conditions of its inhabitants as of the second quarter of 2020. For their part, in the area of the Sierra de Perijá, the scenario of the indigenous peoples is much more distressing, since the difficulties to access towns, the drought, the floods and the proliferation of presumably eradicated diseases continue to cause irreparable damage to the communities settled there, in the face of state inaction and inertia.

### **1.1. Guajira Electric service**

Constant fluctuations and untimely interruptions of electrical energy that last for hours or days, continue to be part of daily life in the Guajira subregion. During the first months of the year, there were a series of blackouts on the western coast of Lake Maracaibo, which affected several municipalities, including the Guajira<sup>11</sup> municipality, highlighting those that occurred on January 22 and May 18<sup>12</sup>.

By mid-June, unscheduled outages increased to such an extent that for a week there was no electricity for more than 100 hours, that is, almost four days. This situation brings as a consequence the interruption of mobile phone signal<sup>13</sup>. For its part, after the electrical fluctuation experienced throughout the country on the night of July 6, the municipality reported more than 12 hours without power<sup>14</sup>.

In August the situation has been similar. The inhabitants of La Guajira, in a territory with an apparent temperature of 48 degrees Celsius and where mosquitoes proliferate, tend to spend more than 72 continuous hours without electricity nor explanations<sup>15</sup>.

The situation of August 19 stands out, when 80 communities of Paraguaipoa, that is, more than 50,000 people, were left without electricity service due to heavy rains that caused a fall of steel cables and five utility poles. In this regard, the authorities stated that they did not have the necessary tools and gas to travel there to fix the fault. This forced several citizens to collect money to buy gasoline on the black market and supply it to Corpoelec trucks<sup>16</sup>. However, this circumstance persisted for several days<sup>17</sup>. After a week and more than 180 hours without service, the residents of Paraguaipoa concentrated in their central square to organize commissions and demand the restoration of electricity. The fact has been cataloged by the Human Rights Committee of La Guajira as a violation of the human rights of more than 50,000 people<sup>18</sup>.

### **Drinking water**

On January 21, the Governor of the state announced that from the following month the Guajira municipality would have potable water through the pipelines. It is a subregion in which there are towns that have spent more than 20 years without running water, for which they were forced to build artesian water wells, and whose most important aqueduct, *El Brillante*, stopped working since 2017 due to lack of maintenance and irreparable damage to engine systems. For this reason, many inhabitants were incredulous at the announcement, because for this aqueduct to start working again, important repairs had to be made on its infrastructure<sup>19</sup>.

In February, the promise had not been fulfilled. The indigenous people of the Wayuu and Añú communities, inhabitants of the municipality, continue to use artesian wells to supply themselves with water. In addition to the reactivation of the aqueduct, which requires a series of sanitation, lighting, repair and installation of machinery, it is necessary to restore pipes, since some were stolen and others are rusted. According to residents of La Guajira, the governments have allocated large amounts of money for this reactivation but in reality it never materializes<sup>20</sup>, the money gets lost and the project does not exist.

In April, with the increase in Covid-19 cases, the inhabitants of La Guajira continued waiting for running water. Meanwhile, water trucks cannot reach the area due to fuel shortage, and those that manage get them sell it at very high prices. In March, the price for a water container (200 liters) was, on average, Bs. 25,000.00, that is, \$ 0.30<sup>21</sup>. In June, it was reported that water trucks that arrived in the municipality, sent by regional authorities, charged 4,000 Colombian pesos for each water container (USD 0.90), and those who did not have the money were not supplied water<sup>22</sup>.

A great number of families have been forced to drink water that is not suitable for human consumption. This increases the possibilities for the multiplication of Covid-19 cases or the outbreak of other diseases. Also, this absence of drinking water prevents the correct food preparation<sup>23</sup>. In this regard, reports emerged of families that can only cook one meal a day because they do not have water for its preparation. Likewise, there are others who cannot access water and must walk for miles to try to find it on the way<sup>24</sup>.

This problem also persists in the indigenous communities located in Maracaibo. This is the case of the Guajira community, located between the Idelfonso Vásquez and Venancio Pulgar parishes. Its inhabitants have had to improvise pipe installations to have access to drinking water,

due to inefficiency and government inaction. According to a social leader in the area, José Rangel, this installation was achieved thanks to self-management, and he denounces that the “...*abandonment of the regional government and the mayor of Maracaibo has forced us to take action. We will have water soon*”<sup>25</sup>. There, the trucks that transport drinking water for sale demand payments in US dollars or in bolivars in cash, which is unpayable for its inhabitants. In addition to the lack of water, they denounce that they do not have “... *legal electricity, nor waste collection and the police is absent*”<sup>26</sup>.

### **Domestic gas**

The problems related to the provision of basic services in La Guajira are structural. Not only do failures regarding electricity and drinking water affect the daily life of indigenous peoples and communities, but essential elements for cooking, such as domestic gas, are added to the list of concerns.

The shortage of domestic gas has sparked several protests so far in 2020. In particular, on August 24 it was reported that residents of Paraguaipoa expressed their discontent at the abuse and increase in the price of a domestic gas cylinder, valued at 120,000 Colombian pesos (USD 35.00) for taking it to Maracaibo and recharging it. The price was announced by the person in charge of the gas service of mayor's office of La Guajira<sup>27</sup>. This only worsens the food insecurity outlook in such an impoverished subregion as La Guajira.

### **Health**

Before the beginning of the pandemic in the country, health care for indigenous peoples and communities could also be classified as precarious. For example, in January, there were repeated complaints about the state of abandonment of the Binational Hospital of Paraguaipoa Doctor José Leonardo Fernández, the exodus of the medical staff, the poor conditions of the infrastructure, and the insecurity to which those still working there are subjected<sup>28</sup>.

This panorama has worsened with the declaration of a health emergency caused by Covid-19 that, according to national and regional authorities, had an increase in cases due to the entry of infected people across the border in La Guajira. This area is one of the most active border areas in the country, where the trading of goods and services is constant, fluid and represents the main source of income for its inhabitants, both in Venezuela and Colombia. At the beginning of March, a week before the declaration of a state of alarm in the country, it emerged that there was no type of sanitary control there<sup>29</sup>.

At that time, neither the national nor the regional government had alerted the inhabitants of this region about the risks to their health, taking into account that the first cases of Covid-19 had already been reported in Colombia. On March 14, after the state of alarm was decreed, the mayor of the Guajira municipality reported the authorization of two hospitals to provide care for Covid-19 cases, the Binational Hospital of Paraguaipoa and the Hospital of Sinamaica, noting that since that moment the “... *National Armed Forces were deployed throughout the Guajira to guarantee that the disease does not enter through this border*”<sup>30</sup>. However, health personnel have been prevented from attending hospital centers, as the problem of transportation and the shortage of gasoline do not allow them to travel to their work sites. Likewise, the lack of supplies and the constant fluctuations and prolonged power outages have shown that these hospitals are not prepared to attend to any contingency<sup>31</sup>.

In April, the first Covid-19 case was reported in La Guajira. Under this circumstance, the regional government announced that all persons who entered national territory would get tested, regardless of whether they suffered any symptoms or not, and also, that they would be subjected to medical surveillance for a period of 14 days, and ratified the closure and control of border checkpoints by the military authorities<sup>32</sup>. At that time, the regional authorities stated that any Venezuelan who entered through illegal by-paths would be considered as *biological weapons*, subjected to detention and tried before a court<sup>33</sup>.

In addition to the scourge caused by Covid-19, other diseases remain neglected in the Guajira subregion. There are cases of malaria and tuberculosis, and people living with HIV have limited access to relevant medicines and treatments. In this regard, the mayor of the Mara municipality stated that “*La Guajira is an endemic area. We have arranged for the epidemiology team not to only take care of COVID-19 cases*”<sup>34</sup>, since the number of detected deaths caused by malaria or tuberculosis is higher than the ones caused by Covid-19.

### Education

The educational issue, not only due to the academic quality but also for infrastructure, technology and trained personnel, is one of those that causes the greatest concern in the Guajira municipality. In this regard, it was reported that in some *rancherías* (villages), the Wayuu people decided to leave their homes after schools in various sectors were left without teachers, who, given the low wages they earned, decided to leave. Many of these children began to attend Colombian schools and were forced to travel through by-ways. Because children were sometimes “...*caught in shootouts between armed groups and security forces. Then all the families relocated*”<sup>35</sup>.

Since mid-March, the problems regarding education have become more devastating, when the national government declared the suspension of face-to-face teaching and the activation of the *plan Cada familia una escuela* (every family is a school), which involves carrying out remote academic activities through the use of the virtual management of education. For the execution of this plan, a continuous electric power service and permanent internet access are required as basic elements. The Guajira municipality does not fulfill these conditions, and most of its inhabitants do not have mobile devices or computers.

### Nutrition

Food insecurity among indigenous people in the state of Zulia has been a typical problem, since both the accessibility and availability of the necessary food for the nutrition of these peoples have not been guaranteed by the Venezuelan state. Most inhabitants of La Guajira must travel to Colombia to purchase the little food they can<sup>36</sup>. In February, they had already spent two months without receiving the Mercal or CLAP bags, and according to reports, the spokespersons of the Community Councils sell these bags at higher prices and, furthermore, when the bags arrive, they are incomplete<sup>37</sup>. In March, on the weekend when the *collective and social quarantine* was decreed, the distribution in the Guajira municipality of a total of one hundred thousand CLAP food bags worth Bs. 120,000.00 (USD 1.60) was announced, containing 4 kilos of rice, 2 of lentils, 1 of sugar, 1 of beans, 2 of pasta, 1 of wheat flour, 2 of corn flour, and 1 liter of oil<sup>38</sup>. This was a conjunctural measure. In fact, this type of government aid takes time to arrive, sometimes more than a month.

Many of the inhabitants of indigenous peoples and communities depend on these bags of food. At the beginning of 2020, as reported by the Human Rights Committee of La Guajira, these were sold for 20,000.00 Colombian pesos (USD 5.40) to the families of the Alta Guajira parish<sup>39</sup>,

despite the fact that their actual price was Bs. 20,000, 00 (USD 0.25). This circumstance not only takes place in these cases but for to purchase of any good or service. There are reports of complaints about the disappearance of the Bolivar as a commercial exchange currency, and its substitution by Colombian pesos or US dollars. For example, in popular markets such as Los Filúos, food must be paid in foreign currency, bolivars are not accepted. For this reason, some workers who receive their wages in bolivars must exchange them for these foreign currencies to buy food<sup>40</sup>.

The food insecurity experienced in the Guajira municipality has intensified since March. Just 15 days after the declaration of the state of alarm and the subsequent application of restrictive measures, the inhabitants of the region affirmed: *“the virus will not kill us, hunger will”*, given the closure of border checkpoints where they would normally buy their food. In addition to this, it was denounced that to reach other areas, one had to travel up to 12 kilometers on bicycle, or in the worst case, walk to purchase only three items with bonuses provided by the government, since most of them don't even earn fixed salary<sup>41</sup> and for those who perceive it, it is insufficient.<sup>42</sup> This has forced families to exchange the little food they have (barter system) given their lack of money.

This situation has triggered a series of protests and actions by the residents, who amid desperation and state neglect, are forced to raise their voices so that their needs are taken care of. In April, in the midst of a protest carried out by 500 families due to the lack of food, National Guard officials used tear gas and bullets and injured several people, including a Wayuu leader<sup>43</sup>.

In May, with the intention to reduce the spread of Covid-19, mobility restrictions were imposed from 4:00 pm to 10:00 am the following day, an issue that further limited the possibility to access food, because many people go out at 5:00 am to look for food and thus have at least one meal a day<sup>44</sup>. This closure of the municipality contributed to limit the entry of food such as fruits, vegetables and plantains<sup>45</sup>. According to the mayor of the Mara municipality, in the former and the Guajira municipality there are more than 496 families with malnourished and dehydrated children who are also associated with other pathologies such as heart disease and parasite infections<sup>46</sup>.

In August, high rates of malnutrition were reported in children of La Guajira. Some families walk up to 20 kilometers to beg for fish to have a meal for the day. Sometimes confrontations take place between the owners of the boats and the families because they (the owners of the boats) try to take the fish from them. It is known that more than 300 people walk every day along the entire *Troncal del Caribe* highway and head towards Zuliamar beach<sup>47</sup>. Other families prefer to cross the by-ways<sup>48</sup> to reach Paraguachón or Maicao in the neighboring country, and thus buy the necessary food for their family, despite the announcements of closure of these improvised paths by the Venezuelan authorities. In regards to the risk of being detained for non-compliance with the restrictive measures of mobility and illegal passage across the border, some people affirm that *“I keep on working because if I don't, my children will starve, I know that I am violating these measures but my kids come first”*<sup>49</sup>.

The minimum wage and pension stipulated at Bs. 400,000.00 per month (USD 1.20) are insufficient to purchase basic food. For this reason, the pensioners of La Guajira demand improvements in such economic benefit from the national government, since what they received is only enough to buy half a kilo of beef - in case they find it for less than Bs. 1,000,000.00 per kilogram— or one kilogram of rice or corn flour, for which they *must walk for more than 3 hours to get to Paraguaipoa. The testimonies point to the same thing: “What can we buy with 400,000 bolivars in this town, where food items are sold in pesos or in dollars? My pension is a pittance that on many occasions only helps me to buy*



*half a kilo of cheese, and what can I do to buy flour?*<sup>50</sup>. Under these circumstances, many seniors go a full day without eating.

### Public transport

Since the beginning of the state of alarm in the country, the closure of the bridge over the Limón River, the main connection and access route of that municipality to Mara and Maracaibo, was ordered, the vehicular passage was blocked, and six checkpoints of the National Guard from that bridge to Paraguachón were installed, leaving the Guajira in absolute isolation. At that time, public transportation decreased and the ticket price increased by 100%, going from Bs. 50,000.00 (USD 0.65) to Bs. 100,000.00 (USD 1.30). This led to the cease of all the activities of the municipality<sup>51</sup>. In addition to this we emphasize the closure of the border by Colombia; formally since September 2015 the border has been militarized on the Venezuelan side.

### Security

Years of negligence of the Venezuelan State have allowed the control of the border zone by guerrilla groups and paramilitaries, as well as drug, gasoline and trafficking of other goods, illegal by-ways *-trochas-*, among other irregularities that make up the scenario suffered by the inhabitants of the Venezuelan Guajira, coupled with the fact that it is one of the corridors for Venezuelan migration to Colombia<sup>52</sup>.

Other crimes against people or property, such as homicides, rapes, trafficking, robberies, and extortion, take place in the area. Likewise, the recruitment of children for criminal activities in exchange for cell phones and high-caliber weapons has been reported. This happens in view of the military forces that are in the subregion, that are accused of being alleged accomplices and supporting corruption<sup>53</sup>.

During the first semester of 2020, other scenarios of citizen insecurity took place, for example the looting of food items, reprimanded by the security organs stationed in the subregion. With greater notoriety, these actions have been verified since the beginning of the quarantine, because despite the closure of the bridge over the Limón river and the suspension of all commercial activities, trucks with food have continued to transit to and from Colombia. The villagers, aware of this situation, and given the shortage of food in their homes, stopped and tried to loot the trucks. For their part, the National Guard and other citizen security bodies have repressed and detained the people involved in these demonstrations<sup>54</sup>.

At the beginning of August, the National Guard installed tanks in the Guajira municipality to control and prevent the passage of Venezuelans through the illegal by-ways. Paradoxically, the residents affirm that these restrictive measures have increased robberies, since after 2:00 pm vehicle circulation is not allowed, thus, forcing them to walk long distances to their homes<sup>55</sup>, exposing them to crime.

## 1.2. Perijá

Statistically, there is less indigenous presence in the Perijá subregion, when compared to the Venezuelan Guajira. However, the towns and communities settled in Perijá suffer the same crisis and indolence. The health issue is one of the main problems of the Yukpa people, especially due to the reappearance of malaria, since more than 120 inhabitants, men, women and children of the Sierra de Perijá, suffer from this disease. They use their own healing techniques since they do not have the means to travel to urban hospitals. Despite having supplies and the will, technical experts

in fumigation cannot access the mountains because they do not have suitable vehicles for it, an impediment that also affects health authorities<sup>56</sup>.

Gasoline shortage also threatens the health of the Yukpa people. Such is the case that took place on May 1st, of a child bitten by a snake, who died because there was no gasoline to take him in a timely manner to a health center that is 6 hours away from his community, Santa Catalina. The following day they were able to take him to an outpatient facility in El Tukuko, but they did not have antivenom, nor in the type II hospital Nuestra Señora del Carmen in Machiques de Perijá. Despite the efforts, the child died 3 days later at the University Hospital in Maracaibo<sup>57</sup>. Two shortages caused this death, the shortage of gasoline and the shortage of the antidote to counteract the venom.

In June, Covid-19 related contagions and deaths of yukpas were reported. All the *caciques* (indigenous leaders) requested the sale of diesel for the transport of the sector, since they are distant peoples that are isolated, in a more vulnerable position, not only due to Covid-19 but also against any type of health condition<sup>58</sup>. The terrible state of the transport units in the area is dangerous, since they lack lights or seats and their capacity is exceeded due to the large number of passengers they transport. Even for the mobility of health personnel, each one must go to several places to find the necessary fuel to carry out the health sessions in the Sierra of Perijá<sup>59</sup>.

On the other hand, in February forest fires broke out in the Sierra de Perijá, which caused damage to the indigenous communities of Apón, Macoita, Toromo and El Tukuko, endangering crops and the natural water supply of the rivers. The fire department in the area does not have suitable vehicles for this type of event and of that magnitude. When the flames were extinguished, 480 hectares had already been affected<sup>60</sup>. It is estimated that more than 8,000 yukpas suffered some type of illness due to these fires, especially children who suffered damage in their respiratory tract since they inhaled smoke<sup>61</sup>.

In July, due to the fear of flooding caused by the rise of the water level of the rivers in the Sierra de Perijá, several communities moved towards the upper part of the mountains to avoid being carried away by the stream. It was reported that the reaction of the State bodies on this occasion was fast, but the memory of last year persists when two months after the flooding of the rivers in October, indigenous people were left unattended<sup>62</sup>. In August, landslides occurred in the mountains causing the disappearance of six children and one adult, all of them Yukpas, who also lost all their material possessions. More than 1,130 affected families were registered, while another 700 families were held incommunicado without further information on their current condition<sup>63</sup>.

## 2. OVERALL SITUATION OF THE COVID-19 PANDEMIC IN ZULIA

August began with an increase in deaths due to Covid-19 in Zulia, reaching 58 deaths, including the death of 6 people in Maracaibo between August 4<sup>64</sup> and 6<sup>65</sup>.

The vulnerability of health personnel in the region against Covid-19 further intensified, with some deaths reported in press releases. On the first day of August, the death of two doctors was reported<sup>66</sup>. On August 2, the death of another doctor was announced<sup>67</sup>. The following day, the death of the director of the Central Hospital of Maracaibo<sup>68</sup> and another specialist doctor<sup>69</sup> was reported. On August 5, the death of a doctor specialized in nephrology occurred<sup>70</sup>. Two weeks later, on August 20, a male nurse passed away. On August 21, another specialist doctor died in Zulia<sup>71</sup>. In

sum, since the beginning of the pandemic until August, 33 health personnel deaths were registered in the region<sup>72</sup>. The medical union continues carry out constant calls for attention and complaints about the need to provide biosafety implements for health personnel who are in the first line of control and treatment of Covid-19 cases. So far they have not obtained a timely and efficient response from the Venezuelan State.

In general terms, in August 24,854,140 sick people and 838,924 deaths were reported worldwide<sup>73</sup>. In Venezuela, a total of 46,728 infections and 386 deaths were reported<sup>74</sup>. In Zulia the figures show 5,133 infected people<sup>75</sup>, and 77 deaths<sup>76</sup>.

On the other hand, as of August the University Hospital of Maracaibo began applying a new medical protocol for Covid-19 cases that consists of the treatment with plasma of already recovered patients who have created antibodies. This was implemented in patients with moderate to serious symptoms<sup>77</sup>.

In parallel, for the fifth consecutive time, the national Executive extended the state of exception. On August 9, decree number 4,260<sup>78</sup> was issued, which extended for 30 days decree number 4,247 issued in July, to regulate the state of alarm established since March 13. However, a 7-day restriction and 7-day flexibility scheme was also implemented since August 10 for some regions of the country, including Zulia, with the exception of its border municipalities.

Although the partial flexibility scheme covered certain industrial and commercial sectors<sup>79</sup>, it was reported that the change was not perceived due to the fact that a good portion of the businesses have been providing their services despite the existing prohibition. This is the case of some restaurants that have operated, behind closed doors, until 9:00 pm. The most notable differences are the permission to move around the city and the opening of the bridge over Lake Maracaibo until 4 in the afternoon, and the reactivation of the banking entities, but the problem related to gasoline shortage persists<sup>80</sup>. Of the 198 service stations set up to supply gasoline in the region, about 40 are operational, although only for prioritized sectors. This has allowed the resurgence of the illegal sale of gasoline, valued between USD 2 and 2.50 per liter, and the sale of spots in the queues near the stations<sup>81</sup>. Added to this, we find the disproportionate increase in the price of bus fares for the service provided by a small public transport fleet, with amounts currently ranging between Bs. 130,000 (USD 0.40) and Bs. 180,000 (USD 0.60). Because of this, many people prefer to go on long walks or use other means such as cycling to get around<sup>82</sup>.

Codhez has reiterated the complaints about the mistreatment of people with chronic diseases, since their health situation and quality of life have deteriorated since the beginning of the *collective and social quarantine*. These people face many obstacles to access treatment, which they may require several times a week. In addition to the lack of medicines, there are difficulties to take them to the few hospitals where chemotherapy or dialysis are performed. In this regard, at the beginning of August the inability to access gasoline in the Cabimas<sup>83</sup> municipality was denounced by people with chronic diseases.

## FINAL CONSIDERATIONS

The indigenous peoples and communities of Zulia present large-scale problems that require in-depth and sustained solutions over time, not inopportune and temporary responses. The

permanent shortage of food, as well as the repeated inefficiency in the provision of basic services, in particular drinking water and electricity, turn these peoples into marginalized and desolate communities.

Circumstances related to the pandemic that has taken place this year have intensified the already difficult reality of its inhabitants. Specifically, the closure of the Colombian-Venezuelan border, as well as the restriction and isolation measures, have paralyzed the commercial and productive sector, affecting the vast majority dedicated to informal trade and the exchange of goods and services. All this worsens the problems related to food insecurity and diseases that affect, to a great extent and particularly, children and the elderly.

People belonging to indigenous peoples and communities have the right to the full enjoyment of all human rights and freedoms recognized by national and international instruments, which they must exercise without any type of discrimination, and this implies State protection of their basic needs, which must be the guarantor of the improvement of their economic and social conditions. Thus, health, education, access to high quality public services, accessibility and availability of food, respect for their customs and idiosyncrasies, among others, should be the guiding elements of State care. Therefore, article 21, paragraph 2, of the United Nations Declaration on the Rights of Indigenous Peoples, provides that “States shall adopt effective measures and, when appropriate, special measures to ensure the continuous improvement of their economic and social conditions. Particular attention will be paid to the rights and special needs of the indigenous elders, women, youth, children and people with disabilities”<sup>84</sup>

## NOTES

<sup>1</sup> National Statistics Institute (2011), *Población indígena por sexo, según entidad federal, Censo 2011*, [http://www.ine.gov.ve/index.php?option=com\\_content&view=category&id=95&Itemid=9](http://www.ine.gov.ve/index.php?option=com_content&view=category&id=95&Itemid=9).

<sup>2</sup> Although these efforts began in 1957, with Convention No. 107 Convention on indigenous and tribal populations, *Convention relative to the protection and integration of indigenous populations and other tribal and semi-tribal populations in independent countries*, of the International Organization of the Labor (ILO). Subsequently, the said Convention was revised in 1989 by *Convention No. 169 on Indigenous and Tribal Peoples in countries independent of the ILO*.

<sup>3</sup> General Assembly of the United Nations, *United Nations Declaration on the Rights of Indigenous Peoples*, September 7, 2007.

<sup>4</sup> General Assembly of the Organization of American States, *American Declaration on the Rights of Indigenous Peoples*, third plenary session, June 15th, 2016.

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