

Venezuela's Coronavirus Response Might Surprise You

By [Leonardo Flores](#)

Global Research, March 25, 2020

Region: [Latin America & Caribbean](#)
Theme: [History](#), [Science and Medicine](#)

*Within a few hours of being launched, over [800 Venezuelans in the U.S. registered](#) for an emergency flight from Miami to Caracas through a website run by the Venezuelan government. This flight, offered at no cost, was proposed by **President Nicolás Maduro** when he learned that 200 Venezuelans were stuck in the United States following his government's decision to stop commercial flights as a preventative coronavirus measure. The promise of one flight expanded to two or more flights, as it became clear that many Venezuelans in the U.S. wanted to go back to Venezuela, yet the situation remains unresolved due to the U.S. ban on flights to and from the country.*

Those who rely solely on the mainstream media might wonder who in their right mind would want to leave the United States for Venezuela. [Time](#), [The Washington Post](#), [The Hill](#) and the [Miami Herald](#), among others, published opinions in the past week describing Venezuela as a chaotic nightmare. These media outlets painted a picture of a coronavirus disaster, of government incompetence and of a nation teetering on the brink of collapse. The reality of Venezuela's coronavirus response is not covered by the mainstream media at all.

Furthermore, what each of these articles shortchanges is the damage caused by the Trump administration's sanctions, which devastated the economy and healthcare system long before the coronavirus pandemic. These sanctions have impoverished millions of Venezuelans and negatively impact vital infrastructure, such as electricity generation. Venezuela is impeded from importing spare parts for its power plants and the resulting blackouts interrupt water services that rely on electric pumps. These, along with dozens of other implications from the [hybrid war on Venezuela](#), have caused a decline in health indicators across the board, leading to [100,000 deaths](#) as a consequence of the sanctions.

Regarding coronavirus specifically, the sanctions raise the costs of testing kits and medical supplies, and ban Venezuela's government from purchasing medical equipment from the U.S. (and from many European countries). These obstacles would seemingly place Venezuela on the path to a worst-case scenario, similar to Iran (also battered by sanctions) or Italy (battered by austerity and neoliberalism). In contrast to those two countries, Venezuela took decisive steps early on to face the pandemic.

As a result of these steps and other factors, Venezuela is currently in its best-case scenario. As of this writing, 11 days after the first confirmed case of coronavirus, the country has 86 infected people, with 0 deaths. Its neighbors have not fared as well: Brazil has [1,924 cases with 34 deaths](#); Ecuador 981 and 18; Chile 746 and 2; Peru 395 and 5; Mexico 367 and 4; Colombia 306 and 3. (With the exception of Mexico, those governments have all actively participated and contributed to the U.S.-led regime change efforts in Venezuela.) Why is Venezuela doing so much better than others in the region?

Skeptics will claim that the Maduro government is hiding figures and deaths, that there's not enough testing, not enough medicine, not enough talent to adequately deal with a pandemic. But here are the facts:

First, international solidarity has played a priceless role in enabling the government to rise to the challenge. China sent coronavirus diagnostic kits that will allow [320,000 Venezuelans to be tested](#), in addition to a team of experts and tons of supplies. [Cuba sent 130 doctors](#) and [10,000 doses of interferon alfa-2b](#), a drug with an [established record of helping COVID-19 patients recover](#). Russia has sent the [first of several shipments of medical equipment and kits](#). These three countries, routinely characterized by the U.S. foreign policy establishment as evil, offer solidarity and material support. [The United States offers more sanctions](#) and the IMF, [widely known to be under U.S. control](#), denied a Venezuelan request for \$5 billion in emergency funding that even [the European Union supports](#).

Second, the government quickly carried out a plan to contain the spread of the disease. On March 12, a day before the first confirmed cases, President Maduro decreed a health emergency, prohibited crowds from gathering, and cancelled flights from Europe and Colombia. On March 13, Day 1, two Venezuelans tested positive; the government cancelled classes, began requiring facemasks on subways and on the border, closed theaters, bars and nightclubs, and limited restaurants to take-out or delivery. It bears repeating that this was on Day 1 of having a confirmed case; many U.S. states have yet to take these steps. By Day 4, a national quarantine was put into effect (equivalent to shelter-in-place orders) and an online portal called the Homeland System (Sistema Patria) was repurposed to survey potential COVID-19 cases. By Day 8, 42 people were infected and approximately [90% of the population was heeding the quarantine](#). By Day 11, over [12.2 million people had filled out the survey](#), over 20,000 people who reported being sick were visited in their homes by medical professionals and 145 people were referred for coronavirus testing. The government estimates that without these measures, Venezuela would have [3,000 infected people and a high number of deaths](#).

Third, the Venezuelan people were positioned to handle a crisis. Over the past 7 years, Venezuela has lived through the death of wildly popular leader, violent right-wing protests, an economic war characterized by shortages and hyperinflation, sanctions that have destroyed the economy, an ongoing coup, attempted military insurrections, attacks on public utilities, blackouts, mass migration and threats of U.S. military action. The coronavirus is a different sort of challenge, but previous crises have instilled a resiliency among the Venezuelan people and strengthened solidarity within communities. There is no panic on the streets; instead, people are calm and are following health protocols.

Fourth, mass organizing and prioritizing people above all else. Communes and organized communities have taken the lead, producing facemasks, keeping the CLAP food supply system running (this monthly food package reaches 7 million families), [facilitating house-by-house visits of doctors](#) and encouraging the use of facemasks in public. Over 12,000 medical school students in their last or second-to-last year of study applied to be trained for house visits. For its part, the Maduro administration [suspended rent payments](#), instituted a nationwide firing freeze, gave bonuses to workers, prohibited telecoms from cutting off people's phones or internet, reached an agreement with hotel chains to provide 4,000 beds in case the crisis escalates, and pledged to pay the salaries of employees of small and medium businesses. Amid a public health crisis – compounded by an economic crisis and sanctions – Venezuela's response has been to guarantee food, provide free healthcare and widespread testing, and alleviate further economic pressure on the working class.

The U.S. government has not responded to the Maduro administration's request to make an exception for Conviasa Airlines, the national airline under sanctions, to fly the Venezuelans stranded in the United States back to Caracas. Given everything happening in the United States, where [COVID-19 treatment can cost nearly \\$35,000](#) and the government is [weighing the option of prioritizing the economy over the lives of people](#), perhaps these Venezuelans waiting to go home understand that their chances of surviving the coronavirus - both physically and economically - are much better in a country that values health over profits.

*

Note to readers: please click the share buttons above or below. Forward this article to your email lists. Crosspost on your blog site, internet forums. etc.

Leonardo Flores is Latin American policy expert and campaigner with CODEPINK.

Featured image: Venezuelan doctors conducting a COVID-19 house visit. Photo courtesy of @OrlenysOV

The original source of this article is Global Research
Copyright © [Leonardo Flores](#), Global Research, 2020

[Comment on Global Research Articles on our Facebook page](#)

[Become a Member of Global Research](#)

Articles by: [Leonardo Flores](#)

Disclaimer: The contents of this article are of sole responsibility of the author(s). The Centre for Research on Globalization will not be responsible for any inaccurate or incorrect statement in this article. The Centre of Research on Globalization grants permission to cross-post Global Research articles on community internet sites as long the source and copyright are acknowledged together with a hyperlink to the original Global Research article. For publication of Global Research articles in print or other forms including commercial internet sites, contact: publications@globalresearch.ca

www.globalresearch.ca contains copyrighted material the use of which has not always been specifically authorized by the copyright owner. We are making such material available to our readers under the provisions of "fair use" in an effort to advance a better understanding of political, economic and social issues. The material on this site is distributed without profit to those who have expressed a prior interest in receiving it for research and educational purposes. If you wish to use copyrighted material for purposes other than "fair use" you must request permission from the copyright owner.

For media inquiries: publications@globalresearch.ca