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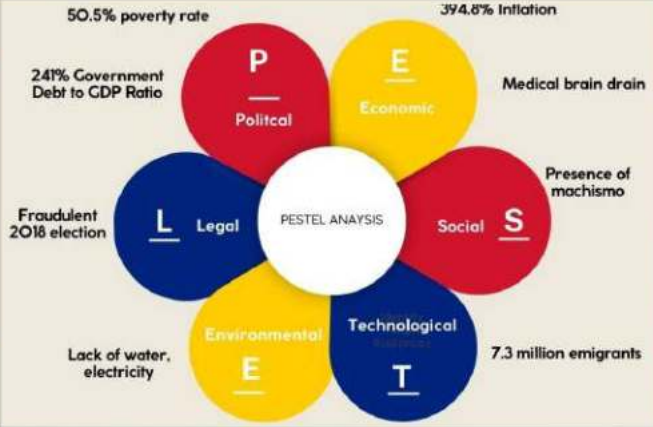
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Sexual & Reproductive Health in Venezuela

Venezuela's current sexual and reproductive healthcare landscape with solutions based in social determinants of health.

Background

- Venezuela is a federal republic in northern South America, faces severe economic, political, and humanitarian crises.
- Capital: Caracas; Population: 28.1 million.
- Rich in oil reserves and biodiversity, with 21,000 plant species, 38% of which are endemic.
- Cultural diversity includes European, African, and indigenous influences.
- Despite a high literacy rate (99.14%), healthcare suffers from a shortage of medical professionals.



Reproductive Landscape

- Abortion care access:** illegal and criminalized with up to 5 years in prison
- Contraceptive access:** no public access pack of condoms is \$4.40, birth control is \$11 a month while the monthly min wage is \$1.50
- Gender based violence:** no civil protection on the basis of sexual orientation and gender identity
- Vaccinations:** HPV vaccines are highly expensive and inaccessible can go as high as \$350

Tiered Prevention & Intervention

Community engagement & empowerment	Increase community health presence via digital healthcare support as modeled by Aya Contigo, an abortion care app that supports people before, during and after.
Regional & local delivery	Integrating the Aya Contigo app into local healthcare systems facilitates grassroots-level improvements in abortion care delivery. Training healthcare workers on app usage and conducting community outreach campaigns raises awareness about the app's role in connecting patients with healthcare providers.
National policy & infrastructure	Foster collaboration between United Nations Population Funds (UNFPA) and national institutions such as the National Women's Institute (INAMujer) of the Bolivarian Republic of Venezuela to enhance sexual and reproductive health services in Venezuela, advocating for increased budget allocation to combat gender-based violence and offer training opportunities. Strengthen sustainable partnerships with local authorities via capacity built programs that expand access to condoms and STI/HIV prevention education, ensuring comprehensive support for a healthier society.

Conclusion

In conclusion, Venezuela faces multifaceted challenges encompassing economic, political, and humanitarian crises, further exacerbated by limited healthcare resources and restrictive abortion laws. Our proposed tiered intervention consisting of community engagement through digital healthcare support, collaboration between international organizations and national institutions; holistically addresses these pressing issues. By leveraging technology, empowering local communities, and strengthening policy frameworks, we can enhance sexual and reproductive health services to contribute to a healthier and more equitable society in Venezuela.