

3-30-2009

# Barrio Adentro in Health: a Political and Social Project of the Bolivarian Republic of Venezuela

V Aguirre

Follow this and additional works at: [https://digitalrepository.unm.edu/lasm\\_cucs\\_en](https://digitalrepository.unm.edu/lasm_cucs_en)

---

## Recommended Citation

Aguirre, V. "Barrio Adentro in Health: a Political and Social Project of the Bolivarian Republic of Venezuela." (2009).  
[https://digitalrepository.unm.edu/lasm\\_cucs\\_en/156](https://digitalrepository.unm.edu/lasm_cucs_en/156)

This Article is brought to you for free and open access by the Latin American Social Medicine at UNM Digital Repository. It has been accepted for inclusion in English by an authorized administrator of UNM Digital Repository. For more information, please contact [disc@unm.edu](mailto:disc@unm.edu).

## DOCUMENTO CUCS # 50B

SC20084(2)Aguirre

**Aguirre V. Barrio Adentro en Salud: un proyecto político y social de la República Bolivariana de Venezuela. [Barrio Adentro in Health: a Political and Social Project of the Bolivarian Republic of Venezuela.] Salud Colectiva (Buenos Aires, Argentina) 2008 mayo-agosto; 4(2):221-238.**

**Objectives:** To analyze and describe the implementation of "Mission Barrio Adentro", inserted into the new National Public Health System in Venezuela.

**Methodology:** Descriptive and analytical

**Results:** The author begins by describing the political, economic and social context in Venezuela. The starting point for this analysis is the sequential description of what was the social movement called the Caracazo in 1989, the *coup d'etat* against Chavez in April 2002, and what is known as the popular backlash.

According to the author, the implementation of the program pays a social debt which is reflected in the wide inequality gap of the excluded sectors, with a strong sense of community involvement. This program allows people to have health service in their own neighborhoods and homes for free.

The most important results of the "Mission Barrio Adentro" are qualitative in nature, as it has created a collective health culture. As an important quantitative data, the author notes that by the year 1998, access to primary care was available to 15% of the population, which quadrupled in 2007 reaching 60% of the population.

Currently, the "Mission Barrio Adentro" works with four levels of care and is an essential part in constructing the national public health system.

One of the capabilities of this system is training professionals and technicians to use critical thinking skills so they will be capable of producing structural changes with a heightened political sense.

**Conclusions:** For the author, the "Mission Barrio Adentro" is for Latin America and the Caribbean one more example of a social and political process that is highly dynamic in creating new ways of addressing problems of health care with community involvement.