



Mining: Activity that violates the human right to health in the Orinoco Mining Arc

Minería: Actividad violatoria del derecho humano a la salud en el Arco Minero del Orinoco

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Abstract

The paper presented had the general objective of understanding the incidents of mining as an activity that violates the human right to health within the Orinoco Mining Arc. In this sense, a research with a qualitative approach and documentary design was configured, in the form of a review article where the state of the art on the subject was explored and after a coherent discussion with it, the necessary conclusions were drawn. In the theoretical development, the content of the right to health was unraveled within the framework of the International Law of Human Rights, the situation of the extractive activity within the Orinoco Mining Arc was explained with direct link to the prerogative topic of this work and the importance of respecting the right to health in accordance with the responsibilities of the Venezuelan State was discussed. Therefore, it was concluded that both the government and the community can participate in the redirection of policies and measures to eradicate the violation of the right to health in the Orinoco Mining Arc.

Keywords: Health; human rights; mining.

Resumen

El artículo que aquí se presenta, tuvo como objetivo general comprender las incidencias de la minería como una actividad violatoria del derecho humano a la salud dentro del Arco Minero del Orinoco. En este sentido, se configuró una investigación con enfoque cualitativo y diseño documental, bajo la forma de un artículo de revisión donde se exploró el estado del arte sobre la materia y posteriormente a una discusión coherente con ella, se procedió a realizar las conclusiones necesarias. En el desarrollo teórico, se desentrañó el contenido del derecho a la salud en el marco del Derecho Internacional de los Derechos Humanos, se explicó la situación de la actividad extractiva dentro del Arco Minero del Orinoco con vinculación directa a la prerrogativa tema de este trabajo y se discutió la importancia del respeto del derecho a la salud de acuerdo con las responsabilidades del Estado venezolano. Por ello, se concluyó que tanto gobierno como comunidad pueden participar en la reconducción de políticas y medidas para erradicar la vulneración del derecho a la salud en el Arco Minero del Orinoco.

Palabras clave: Derechos humanos; minería; salud.

INTRODUCTION

When considering the definition of mining, it can be stated according to the Standard Commission of the Extractive Industry Transparency Initiative of the Dominican Republic, EITI (2022) that “it is the set of activities related to the discovery and extraction of minerals found in the soil and subsoil...” (p. 1), therefore, it translates into a form of exploitation of the resources available in a territory. Thus, the People’s Ministry of Mining and Ecological Development of Venezuela (2022) explains that mining activity consists of several stages, which are:

a) Exploration: consists of the gathering of geochemical and geographic information on an area to determine its mining potential.

b) Exploitation: It is the implementation of operations to extract and exploit the minerals.

c) Beneficiation: This consists of processing the minerals obtained by washing, crushing, grinding, homogenizing, classifying, concentrating, and identifying them.

d) Refining: It is the physical or chemical alteration of minerals by industrial action. In addition, after refining, the mineral’s value is added, the resources are stored, and their tenure is determined, transported, put into circulation, marketed and related to the support of specialists to configure the entire mining activity.

Based on the above, extractive activities have great complexity, and by possessing this nature, they produce consequences of various kinds. One of them could be the compromise of human health when such activities are not properly conducted, and that is why Lopez (2016) is apparent in pointing out the materials used in mining:

Ergonomic hard work and the use of chemical substances affect the ecosystem and human health. Heavy metals have specific characteristics of bioaccumulation and bioavailability in the human organism, altering the physiology of the neuronal synapse, alveolar respiratory membrane, and locomotor system, as well as alterations in the genetic system and cellular dysplasias (p.92).

The preceding, although it refers to the metallic mineral activity, which is only one of the mining typologies, represents a sample of the considerations on the potential impact generated by this set of actions aimed at obtaining profit from resources. Therefore, if we take into account that health is contemplated in different legal texts, both national and international, assuming it is a human right, this situation would have a direct impact on the exercise of this prerogative.

One of the areas where mining has increased is the zone known as the Orinoco Mining Arc, located within the jurisdiction of the Bolivarian Republic of Venezuela. On this point, Caritza and León (2019) clarify that on February 24, 2016, Decree 2,248 was enacted in accordance with publication in the Official Gazette of the Bolivarian Republic of Venezuela 40,855, for the creation of the National Strategic Development Zone Arco Minero del Orinoco, consisting of 111,843.70 square kilometres, and this was done with the intention of activating the mining engine for purposes of recovering the economy affected by the decrease in oil prices.

However, organizations such as the Venezuelan Program for Human Rights Education Action and PROVEA (2016) have reported that mining in the Orinoco Mining Arc leads to harmful health effects. This, going through the proliferation of malaria due to deforestation and water accumulation, the production of cardiovascular and respiratory diseases due to atmospheric pollution in line with the dissemination of suspended particles and organic compounds with volatility and the increase of gastroenteritis, migraines, cancer and skin conditions, to mention some consequences, among others that are generated with a specific link between the extractive activities within the Arc, thus compromising the physical integrity of people.

Thus, based on the information provided in this section, this study was conducted with the general purpose of understanding the impact of mining as an activity that violates the human right to health within the Orinoco Mining Arc. To explain the content of the right to health within the framework of International Human Rights Law; 2. To review some implications of the mining activity within the Orinoco Mining Arc and; 3. To discuss the legal consequences of mining in the Orinoco Mining Arc, with particular reference to the human right to health.

However, before developing the theoretical basis of this work, it is necessary to know the methodology implemented to produce it. For this reason, the methods and materials used in the study are described below.

METHOD

This research executed for its promotion at the Council for Scientific, Humanistic and Technological Development of the Universidad Centroccidental Lisandro Alvarado (Venezuela). was developed as a review work, which follows the criteria of Reyes (2020) can be defined as follows: "it is a retrospective analysis of studies compiled in the literature on a topic that is considered interesting for a general or specialized public" (p. 103), and based on this, the line of documentary study was followed, which is one where, according to Brito (2015), "the researcher analyzes the different phenomena of reality obtained and recorded by other researchers in documentary sources" (p. 8). Likewise, the collection of information carried out was constituted with a qualitative approach, which, as Sanchez (2019) points out, "is based on evidence that is more oriented towards the deep description of the phenomenon..." (p. 104) and in this way, the issue of the violation of the right to health within the Orinoco Mining Arc in Venezuela was unravelled, as a consequence of the extractive activities carried out in the region, whether they are corporate or non-corporate.

For the reasons above, the protocol of documentary research was followed, using the appropriate operational sources for this purpose. In this sense, first-grade reading and second-grade reading, observation, the application of the underlining technique, as well as the summary, were implemented, and the critical analysis of the information collected was carried out, complementing this action with an exercise of reflexivity to achieve the desired production, as Cuesta-Benjumea (2011) argues.

The documents collected were legal texts, scientific articles hosted in domains such as SciELO, Redalyc, and Google Scholar, among others, books, texts from prestigious web portals and journalistic texts. Documentary prestige, in accordance with the thesis of Estrada and

Morr (2006), was determined by comparing the visibility and quality of the material reviewed with respect to other similar works. Then, corresponding to the qualitative studies, a categorization process was carried out, which resulted in the following categories for the body of the theoretical framework:

1. Health: The health category refers to its consideration as a right from the point of view of international human rights legislation.

2. Mining activity: Consists of the content of mining activity as a factor that undermines the right to health, especially within the Orinoco Mining Arc.

3. Consequential legal relationship: This category refers to the content that, by way of consequence, refers to a legal analysis of the direct causal relationship between the violation of the right to health within the Orinoco Mining Arc, based on the extractive activities.

También a todo este respecto, es resaltante destacar que los objetivos establecidos se construyeron siguiendo los niveles de conocimiento de la taxonomía de Bloom. De esta manera, se ensambló el corpus teórico, el cual se desarrolla en los puntos subsiguientes.

On the Right to Health in International Human Rights Law

When relating the right to health within the spectrum of human rights, it can be established that it is connected mainly with other prerogatives, such as the right to life, the right to freedom, the right to equality and the right to justice, in the function of the fact that it catalyzes the development of people within different spheres (Delgado, 2018). This criterion is entirely understandable due to the interdependent and indivisible nature of fundamental rights, given that they all have the same hierarchy and that the advancement or stagnation in the enjoyment of a human right is related to the safeguarding or violation of another (Piovesan & Morales, 2020).

However, when seeking the establishment of a more concrete definition of the right to health, it is appropriate to call upon González (cited by Delgado, 2018) when he points out that it is "the branch of law that regulates the legal relations that have as their object human health and its protection" (p.119). For this same reason, Figueroa

(2013) agrees to clarify that this prerogative is a constitutional right enforceable to every State because it is not just a programmatic consideration, i.e., without direct effectiveness by establishing guidelines for ordinary legislators (Real et al., 2023).

In other words, the right to health consists of the whole framework of norms aimed at the development of a structure that guarantees the health system and the physical and psychological integrity of people, considering that health also includes the mental State of human beings. It is because of the importance of the right to health that International Human Rights Law has tended to protect it. This is because, as Vinuesa (1998) explains:

International human rights law requires States to both “guarantee” and “respect” the rights recognized through treaties and customs. To “guarantee” implies the obligation to ensure that internationally recognized rights are respected within the internal jurisdiction of the State. The “respect” implies that the State must refrain from violating those rights by an act or omission attributable to it. Both obligations imply behaviours of a State towards its nationals. The legal relationship remains between the State and the individual (p. 1).

Therefore, the fundamental bases of international human rights law that develop the safeguarding of the right to health are established in various complex law instruments that are binding on the States that have signed the respective agreements. Thus, the Universal Declaration of Human Rights of the United Nations, UN (1948) states in Article 25.1 that “everyone has the right to a standard of living adequate for the health and well-being of himself and of his family” (p. 1), which determines that the right to health is directly related to the right to a decent life that allows human beings to develop optimally.

This is not unrelated to the general framework of natural rights because, as Bou Franch (2003) refers, the Universal Declaration of Human Rights corresponds to what is known as the universal legal instruments that establish a system of protection. However, the author also makes the caveat that there are international legal texts of regional scope which develop the scheme of human rights.

Thus, following the line of considering the universal scope of international legal texts of mandatory compliance and also of human rights, the right to health is further developed in Article 12 of the UN International Covenant on Economic, Social and Cultural Rights (1966). This norm refers to:

1. The States Parties to the present Covenant recognize everyone’s right to the enjoyment of the highest attainable standard of physical and mental health.

2. The steps to be taken by the States Parties to the present Covenant to achieve the full realization of this right shall include those necessary for:

(a) The reduction of the stillbirth rate and of infant mortality and the healthy development of the child;

(b) The improvement of all aspects of industrial hygiene and the environment;

(c) The prevention and treatment of epidemic, endemic, occupational and other diseases and the fight against them;

(d) The creation of conditions which will assure all medical care and medical services in the event of sickness (p. 5).

On this basis, it can be understood that the right to health has a multidimensional nature: it not only assumes the prerogative to defend the right to life but also encompasses the labour sphere, policies for the prevention and containment of ailments, the strengthening of health institutions, as well as particular orientation with a focus on children.

These are just a few examples of general texts that explain the scope of the right to health. However, this fact does not represent exclusivity in the approach to the human right referred to because it is also contemplated in instruments aimed at targeted groups, even if they are applicable in all continents of the planet, as would be the case of legal documents aimed at the protection of women, indigenous peoples, children, among others.

As regards international instruments of a regional nature, since this work is a study on the Orinoco Mining Arc in the Bolivarian Republic of Venezuela,

it should be mentioned that the Inter-American legal texts are those that adhere to its jurisdiction. Along these lines, the American Declaration of the Rights and Duties of Man of the Organization of American States, OAS (1948) sustains in its article 11 the right to the preservation of health and well-being by indicating that “everyone has the right to have his health preserved by sanitary and social measures...” (p. 1). In addition, the American Convention on Human Rights, also of the OAS (1969), stipulates in its Article 26 that:

The States Parties undertake to adopt measures, both internally and through international cooperation, especially economic and technical, to achieve progressively the full realization of the rights derived from the economic, social, educational, scientific and cultural standards contained in the Charter of the Organization of American States, as amended by the Protocol of Buenos Aires, within available resources, through legislation or other appropriate means. (p. 1).

Among the rights derived from social norms is the right to health, and it is for this reason that in accordance with Article 26 of the American Convention on Human Rights, subsequently with the development of the Additional Protocol to the American Convention on Economic, Social and Cultural Rights of the OAS (1988), its guideline was specifically broken down. Thus, in Article 10 of the Protocol, several important notes are established:

1. Everyone has the right to health, understood as the enjoyment of the highest level of physical, mental and social well-being.

2. In order to realize the right to health, the States Parties undertake to recognize health as a public good and, in particular, to adopt the following measures to guarantee this right:

- a) Primary health care is understood as essential health care made available to all individuals and families in the community;
- b) the extension of the benefits of health services to all individuals subject to the jurisdiction of the State;
- c) the full immunization against the major infectious diseases;

d) the prevention and treatment of endemic, occupational and other diseases;

e) the education of the population on the prevention and treatment of health problems, and

f) Meeting the health needs of the most vulnerable and high-risk groups due to their conditions of poverty (p. 1).

In line with the above, the progression in consideration of the right to health is observed since the Protocol not only reaffirms everything already established in other international instruments but also makes reference to the importance of the right to education in the scheme of treatment and prevention in health incidences. Thus, it is observed that there is sufficient basis in International Human Rights Law to consider that States must protect the integrity of persons, and the Venezuelan State is subsumed in this obligation. Therefore, it is necessary to consider the facts caused by the mining exploitation within the Orinoco Mining Arc as factors that the members of the Venezuelan government must adequately address, hence the need to know the situation of the area in question.

Mining and industrial activity within the Orinoco Mining Arc

The Orinoco Mining Arc represents a space that, as mentioned above, is destined for the development of extractive activities. According to Prince (2021), there are a variety of companies that have carried out mineral exploitation, and among them are foreign companies such as GR Mining of Barbados, Guaniamo Mining of the United States of America, Bedeschi of Italy, Energold Mineral of Canada, the Palestinian entities Sakam and Comercializadora Orinoco River, China CAMC Engineering of China, Marilyns Prje Yatirim of Turkey, Afridiam of the Republic of Congo and the North American Guaniamo Mining. In addition, the influence of military companies such as Compañía Anónima Militar de Industrias Mineras, Petrolíferas y de Gas is well known.

Therefore, mining activity is carried out in the Orinoco Mining Arc with the consent of the Venezuelan State, and thus, there is legal mining. However, it is known that there is also an impact of illegal mining in the area, and on this subject,

Ávila (2020) summarizes that.:

The Orinoco Mining Arc currently has the participation of 150 national and foreign business groups from 35 countries, with the limitation that it is not possible to identify which ones are found legally and which ones carry out mining extraction illegally or that depend directly on control through a “close linkage of corporate and criminal interests with public policies and their representatives” (Grabendorff, 2017) of the Venezuelan State...

However, local testimonies indicate that it is those criminal organizations called “syndicates” that administer most of the mines in Bolivar State; where these structures are not found, the syndicates and the ELN have exercised political, organizational work and armed intimidation for several years in order to distribute these areas criminally (pp. 226,228).

In any case, whether mining is legal or illegal, with or without consent regarding the exploitation of the Arc's resources, activities of this type have encouraged the proliferation of events that threaten the right to health. In fact, all of this is a consequence of the expansion of extractive activities, which may vary in their types. However, for that very reason, they spread in an accelerated manner, which resulted in an intensification of their actions in the Venezuelan Amazon (Mora et al., 2019).

Consequently, the incidence of mining within the area that makes up the Orinoco Mining Arc can be seen. Meanwhile, according to the Center for Reflection and Social Action CERLAS (2020), the following has been reported regarding the boom in mining activity in the region, taking 2020 as a reference date:

In the last 15 years and especially in the last 4-5 years, as a result of the deepening of the Complex Humanitarian Emergency and coincidentally with the creation of the A.M.O. zone, the expansion of mining has been exponential and alarming. Research published in December 2018 reveals that in the Venezuelan Amazon, there are 1,899 sites with informal mining activity (small and medium scale), representing more than 80% of the total mapped points in the entire Amazon territory (in 6 countries and more than 7 million square kilometres) (p. 152).

Based on the above, it can be affirmed that the lack of control in the multiplication of mining activity, even if it is an illegal activity, is palpable in the area studied. In concatenation with the above, the Embassy of the Bolivarian Republic of Venezuela in Canada (2021) has systematized a list of all the facts that are linked to this information by stating that:

1. The migration of groups interested in the exploitation of gold, coltan, and diamonds, among other resources, has catalyzed Venezuela to become the Amazonian territory with the highest number of illegal mines.
2. Mining activities in Venezuela are carried out using cyanide and mercury. In addition, the waste clay and rocks are emptied into rivers, which in turn are contaminated and affect the fauna. This is transcendental because the humans that consume the water and the fish in these bodies of water are contaminated by this same effect.
3. Indigenous ethnic groups such as the Ye'Kwana, Pemón and Sanema have blood and tissue mercury levels five times higher than those allowed by the World Health Organization (WHO).
4. Miners become propagators of mercury contamination when in contact with their children and members of the communities where they live.
5. The Orinoco Mining Arc is now a space where diseases that were considered eradicated are prevalent. Among them, measles resurfaced in the area and reached Chile and Argentina through the transfer of migrants since 7,054 cases of affected people were reported between 2017 and 2019. In addition, diphtheria foci have been identified since 2016. Also, in this context, Venezuela holds the record for malaria increase with 1,239%, all due to the fact that extractive activities produce water stagnation, which in turn is a breeding vector for the mosquito that transmits the disease.

In addition to the above, it should be noted that apart from the fact that the high rates of malaria have impacted both the communities in the area and the individual miners, the lack of availability of drinking water makes the health incidences palpable because this is precisely a necessary resource for sanitation activities, and that is why there is a need to conduct studies based on what

happens with the bodies of water (Berrío et al., 2023), all in order to reduce the shortage of access to this water. This is also necessary because, in addition to the above, there is the coexistence of indigenous populations with malaria, measles and malnutrition, which is interconnected with the mining activity. After all, they subsist among the human beings who are exposed to it in the Orinoco Mining Arc, and there is even persistence of the situation due to the contamination that is also generated in the aquiferous sources that are affected by the inadequate management of mercury (Vielma, 2021).

As a complement to all these problems, Linares (2021) has replied that in the Arco Minero, there tends to be a proliferation of forced and unforced prostitution, which has been a catalyst for the promotion of venereal diseases among the people who live there. So, there is a series of documentation that exposes the commitment to health that exists in the studied territory. Thus, the need arises in the following section to discuss its implications.

RESULTS AND DISCUSSION

The research conducted, based on the objectives and the theoretical framework developed, yielded the following results:

a) It was determined that the Orinoco Mining Arc is a space destined for the exploitation of minerals in the Bolivarian Republic of Venezuela. As such, this situation is promoted and known by its government. This is according to Avila (2020) and Prince (2021).

b) There is a binding international legal framework, both universal and regional, which is responsible for protecting the right to health. Therefore, the states that have signed the relevant conventions must respect this prerogative and guarantee it. This is in accordance with Vinuesa (1998), the United Nations Organization (1948) or the Organization of American States (1948).

c) It was observed that within the Orinoco Mining Arc there is legal and illegal mining, and that business and non-business activities are carried out with the consent of the State, even to the point of creating companies of a military

nature, dedicated to extractive activities. This is according to the Embassy of the Bolivarian Republic of Venezuela in Canada (2021) and the Center for Reflection and Social Action CERLAS (2020).

d) Mining activities in the Venezuelan Mining Arc have directly affected the health of the people living in this area. This is a consequence of the products used for extraction and the sanitation conditions that have led to the proliferation of diseases that years ago were considered to be under control. In addition, sexual exploitation in the area, also due to the proliferation of mining, has contributed to the increase in sexually transmitted infections. This was deduced from the information provided by Berrío Serrano and Sánchez (2023) and Linares (2021).

Therefore, in accordance with the above, it is necessary to reaffirm that the human right to health is internationally recognized as a fundamental right that is essential for the well-being of individuals. This right implies that individuals have the right to access adequate, non-discriminatory and quality health services, in addition to the protection and promotion of their physical and psychological integrity.

Consequently, it is necessary to clarify that health is not limited to the absence of disease but includes a complete state of physical, social and mental well-being. Access to health services includes the diagnosis, prevention, rehabilitation and treatment of ailments, as well as the promotion of a healthy lifestyle.

In view of the above, it should be noted that it is the responsibility of the power structures to guarantee equal access to health services for the entire population, regardless of ethnic origin, age, gender, sexual orientation, creed, ideology or socioeconomic status. This entails the implementation of public policies that promote justice in access to health care, as well as the guarantee of adequate resources for the health system.

In addition, the right to health implies the protection of and respect for other interconnected fundamental rights, such as the right to a healthy environment or the right to adequate food, to mention a few specific examples. Therefore, the human right to health is crucial to ensure a dignified and fulfilling life. Governments have,

therefore, the duty to guarantee equitable access to health services and to promote public policies consistent with this idea.

It should also be noted in this discussion that mining is an essential economic activity in several countries. However, it can have adverse effects on the fundamental right to health of the people who live or work around mines. Exposure to toxic substances such as lead, mercury or arsenic can produce significant health consequences, including cardiovascular, neurological and reproductive problems (Aguirre & Dávila, 2021).

Therefore, governments and mining companies must take measures to safeguard the fundamental right to the health of human beings impacted by mining. This includes the implementation of occupational health and safety measures for mine workers, as well as regulations on the emission of toxic substances into the environment.

It is also mandatory that studies be conducted on the long-term effects of exposure to toxic substances on communities near the mines and that measures be taken to prevent and treat mining-related diseases. With this, mining can have adverse effects on the human right to health. However, such ailments can be mitigated with effective occupational health and safety guidelines, environmental regulation and medical care for those affected.

Now, it is well known that the Venezuelan State, through its rulers, has not only promoted the exploitation of the Orinoco Mining Arc but also has direct participation in the activity by granting concessions to foreign and national companies and allowing the constitution of military companies. With this, a framework of State responsibility is established because, in the matter of human rights, the active agent in the violation of human rights is the State. Therefore, the government of the Bolivarian Republic of Venezuela acted negligently in knowing the situation in the area. Therefore, it is natural to demand that it comply with its responsibility in the protection of human rights and especially the right to health, as it is obliged to do so by the international agreements that Venezuela has signed.

Furthermore, it is noteworthy that as a consequence of the international agreements signed and ratified by Venezuela both in the universal and regional sphere, the Constitution of

the Bolivarian Republic of Venezuela (1999), for the sake of harmonization with international legal instruments, contains provisions that have also been violated by the Venezuelan government in the case in question regarding the right to health. Thus, it should be mentioned that Article 83 of the Magna

Carta states:

Health is a fundamental social right, an obligation of the State, which shall guarantee it as part of the right to life. The State shall promote and develop policies aimed at raising the quality of life, collective well-being and access to services. All persons have the right to health protection, as well as the duty to actively participate in its promotion and defence and to comply with the sanitary and sanitation measures established by law in accordance with the international treaties and conventions signed and ratified by the Republic. (p. 17).

Therefore, as a consequence of the failure to safeguard the right to health in terms of the facts narrated in this work, the Venezuelan State is not only responsible for the breach of its international human rights commitments, but it has also violated its domestic legal system that mandates respect for these agreements and that considers health as an overriding interest in the Republic. This, especially considering that the Constitution of the Bolivarian Republic of Venezuela (1999) in its Article 23 states specifically that “the treaties, covenants and conventions related to human rights, signed and ratified by Venezuela, have constitutional hierarchy and prevail in the internal order, to the extent that they contain rules on their enjoyment and exercise more favourable...” (p. 5), so it is clear the guideline of the supremacy of the agreements on fundamental rights within the Venezuelan territory.

Therefore, it is necessary that the Venezuelan government redirects its actions and is responsible for diligently supervising the mining exploitation in the Orinoco Mining Arc so as to verify that it is carried out without a direct violation of the environment and by way of consequence also of the right to health, the more so because at present it is understood that within the country “the growing deterioration of the conditions of access to services, treatments and medicines evidences the absence of real

guarantees to make the right effective” (Delgado Blanco, 2018, p. 89). This, without forgetting that the ideal is to establish public policies so that the health system functions appropriately in the area and immunizations, educational guidelines, protection guidelines, as well as sanctions (when the activity is legally harmful, especially in terms of the psychic and physical integrity of human beings) that guarantee the whole exercise of the fundamental right to health among those who coexist in the Venezuelan territory described here are guaranteed.

In the future, it is recommended that statistical studies be carried out to demonstrate the improvement or worsening of the health conditions of the people in the Orinoco Mining Arc in order to serve as a guide for the structuring of the necessary public policies that can be suggested to the governmental entities, to avoid the adverse events described here with respect to the health structure and the personal conditions of those who live in the mining environment.

This could also be a contribution to inform and background for future research on the subject since the main limitation that was found to produce this manuscript was the reduced scientific dissemination of the problems mentioned. In the same way, it can be recommended that the affected and unaffected community, through the exercise of mechanisms such as constitutional protection, proceed to participate in the legal approach to the case so as to collaborate with the factual redirection of the problem with the help of the Law. Thus, we can now proceed with the conclusion of the study.

CONCLUSIONS

It is necessary to emphasize that the adequate enjoyment of the right to health helps to adequately configure other fundamental rights. In this sense, the importance of reorienting the violation of the prerogative in the context of mining within the Orinoco Mining Arc is consolidated and therefore, taking into account the purposes of the study, it was understood that mining can constitute an activity that has a negative and direct impact on the right to health when it is not carried out responsibly.

Likewise, throughout this structure, it was explained that the right to health is specially protected under International Human Rights Law because it is linked to life itself. Thus, one cannot enjoy a dignified life if one does not have the necessary conditions to experience it with the most significant physical or psychological fullness. This is because the implications of mining within the Orinoco Mining Arc are oriented to the exposure of the right to health to a direct violation as a consequence of pollution, illicit and ill-conducted legal activities, and even sexual exploitation.

All this led to a discussion around which it was determined that the Venezuelan State is genuinely responsible for the situation. Therefore, it must produce practical solutions to guarantee the right to health within the Orinoco Mining Arc because this is an obligation that derives from both international and national legal texts, and it is a responsibility that it must not evade. All these notes are of essential consideration since if a country claims to be a social, democratic and lawful State, it must first safeguard one of its fundamental elements without which it could not exist: the population. This would be, without a doubt, a testimony of true social justice and equality.

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