

AGING IN CUBA: DEMOGRAPHIC AND SOCIAL POLICY CHALLENGES

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2023

BRIEFINGS ON CUBA

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LATIN AMERICAN
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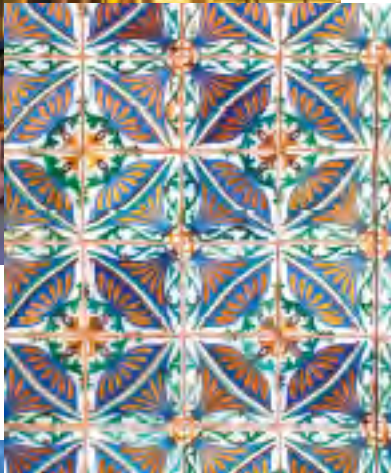
Foreword

CasaCuba, the Cuban Research Institute (CRI), and the Kimberly Green Latin American and Caribbean Center (LACC) at Florida International University (FIU) are proud to continue the publication of *Briefings on Cuba*. The purpose of this series is to provide up-to-date analyses of Cuban politics, economy, culture, and society, by leading Cuba experts. This is the sixth instance of the series, inaugurated in 2020. Previous titles are listed in the back cover.

In this briefing, Drs. Sergio Díaz-Briquets and Elaine Acosta González assess the rapid aging of Cuba's population as a result of declining fertility and death rates, as well as massive emigration to the United States and other countries. The authors examine the multiple demographic and social implications of the growing share of elderly Cubans. The island already has one of the highest proportions of people over 65 years of age in Latin America (estimated at 16.8% in 2023, only surpassed by Puerto Rico at 24.2%) and is projected to have the twelfth oldest population in the world (27.1%) by the year 2050.

Drs. Díaz-Briquets and Acosta González provide a sobering analysis of the current and future predicament of Cuba's older citizens. Among the most pressing issues are the financing of the island's retirement pension system; the deterioration of the public healthcare system; the difficulty of meeting the elderly population's basic nutritional and housing needs; the declining State investment in social welfare policies; and the need to coordinate State interventions with the care and resources provided by nongovernmental organizations. The authors' critical conclusion is that "existing institutional and social policies designed to serve elderly needs are inadequate and insufficient." They end their essay with several recommendations for urgent public policy changes in Cuba.

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About the Authors



[Sergio Díaz-Briquets](#) is an independent researcher and consultant. He has served as president of NTS Consulting, executive director of the Council for Human Development, and senior vice president of Casals & Associates, a consulting firm in the Washington, D.C. area. Previous appointments include serving as program officer at Canada's International Development Research Centre, research director of the U.S. Congressional Commission for the Study of International Migration and Cooperative Economic Development, and project director with the Population Reference Bureau. He has also been a consultant to numerous international development agencies. His books include *Corruption in Cuba: Castro and Beyond* (coauthored with Jorge Pérez-López, 2006); *Conquering Nature: The Environmental Legacy of Socialism in Cuba* (also coauthored with Jorge Pérez-López, 2000); *Cuban Internationalism in Sub-Saharan Africa* (1989); and *The Health Revolution in Cuba* (1983). He has a Ph.D. in demography from the University of Pennsylvania, a master's degree in sociology from Georgetown University, and a bachelor's degree in psychology from the University of Miami.



[Elaine Acosta González](#) is a Visiting Scholar at FIU's Cuban Research Institute and Executive Director of Cuido60, an observatory on aging, care, and rights in Cuba. She holds a Ph.D. in international and intercultural studies from the University of Deusto in Spain, and a master's degree in Latin American studies from the Alberto Hurtado University in Chile. She earned her bachelor's degree in sociology from the University of Havana. She has published several books and articles on aging, care, and migration in Cuba and Latin America, including *Cuidados y agencia de la sociedad civil en Cuba: Aprendizajes internacionales, experiencias locales y desafíos éticos* (coedited with Sergio Angel, 2023); *Crisis de cuidados, envejecimiento y políticas de bienestar en Cuba* (2020); *Cuidados en la vejez en América Latina: Los casos de Chile, Cuba y Uruguay* (2018); and *Cuidados en crisis: Mujeres migrantes hacia España y Chile* (2015).

Cuba confronts a challenging aging scenario partly due to demographic developments that have shaped its age structure over several decades. Up to the 1960s, its population evolution was unexceptional, even though it was undergoing—by developing country standards—an early demographic transition. Death rates had been declining since the early 1900s, the birth rate having entered into a downward trajectory by the 1920s, just as the country saw the end of a period in which it welcomed hundreds of thousands of overseas migrants. The political and economic developments of the 1960s precipitated several demographic developments with immediate and long-term consequences. The first was the 1960s short-lasting baby boom, when the total fertility rate (TFR), defined as the number of children the average woman will have during her reproductive lifetime, rose by one child per woman (from 3.8 in 1955-60 to 4.7 in 1960-65). This period coincided with the initial postrevolutionary emigration outflows, which would become prominent once again in recent decades. The third would be the post-baby-boom rapid and sustained—although fluctuating—fertility decline, leading to the establishment of a long-term below-replacement fertility regime. Cuba's current TFR stands at 1.4 children per woman, the ultra-low fertility level, and the annual number of births has declined from 125,000 in 2015 to a 2022 historical low of 95,000 births.

The combined effects of these demographic trends, much aggravated by a collapsing and dysfunctional economy and an ossified political system, have brought Cuba to the verge of an unprecedented social and financial calamity, whose short- and long-term resolution appears elusive. Particularly vulnerable to the consequences of such a profound economic and social crisis is the country's elderly population.

Even though population aging is a global phenomenon, few countries are as ill-prepared as Cuba to confront its consequences. For demographic reasons alluded to earlier, the country is among those aging faster. While in 2017 the United Nations ranked Cuba as the fiftieth-oldest country in the world, it projects it would be the twelfth-oldest by 2050. Furthermore, the aging process has accelerated due to the unprecedented 2021-22 emigration, when close to 400,000 people left the country, including those heading to the United States and other destinations. Such an outflow, amounting to about 3.6% of the 2022 Cuban population, exceeds all major previous emigration episodes, including the 1960s Freedom Flights and the 1980 Mariel boatlift. The outflow was so large it had a measurable impact on the elderly dependency ratio, the number of aged (above age 65) over the economically active population (ages 15 to 64). Whereas just a few years ago it was projected there would be 26 elderly dependents for every 100 working-age adults in Cuba, the ratio will rise instead to 28, or by 7%, as the vast majority of recent emigrants were of working age, few older adults included among them. Over time, the growing ratio will have a cascading effect, as the population's elderly share increases at a faster pace.

The Aging Boom—the Growing Crisis as the 1960s Baby Boomers Grow Old

A particular problem compounding Cuba's elderly situation, not an issue in most other countries, is the impending arrival at the retirement age of the generation born during the 1960s baby boom. By 2050, in just about a quarter of a century, an estimated 1.4 million Cuban elderly, or about 40% of the senior population, will be above 80 years of age (in the so-called old-old ages). For the following decade or so, until they pass away, the old-old generation, accounting for 15% of the country's total population, will pose an exceptional healthcare burden. Financing their healthcare needs will be particularly problematic as old-old annual healthcare costs, as shown by other countries' estimates, are three times higher than among younger retirees.

In the meantime, granted that the challenge is still several decades away, other pressing concerns will emerge. They include how to finance pensions for a growing number of retirees; provide the elderly with affordable and adequate nutrition; ensure geriatric access to quality healthcare, including medications; and satisfy social needs, from basic social services to residential elderly care. The public pension system, financed on a “pay-as-you-go” basis, lacks reserves and is woefully short of resources, despite 2008 parametric reforms (retirement age increases, among others) to promote its survivability. Few elderly have accumulated savings and private pension plans in Cuba, unlike in most other countries. The current average State pension is the equivalent of a few U.S. dollars, insufficient to cover basic needs, and eroded by galloping inflation. Elderly pensions are inadequate to acquire even the supposedly “guaranteed” essential commodities assigned under the food distribution rationing system (the *libreta*), let alone purchase food in the black or dollar-denominated markets. Because of their penury, many of the elderly must engage in petty trading—or even beg—to supplement meager State pensions.

Mounting evidence also suggests the virtual collapse of the once-vaunted, high-quality national healthcare system, developed while the country was heavily subsidized by the Soviet Union and later, to a lesser extent, by Venezuela. Hospital inputs and medication shortages often reach critical levels, disproportionately having an adverse impact on the old, who more often require hospitalization and suffer from chronic conditions. Signs of the crisis include a retrenchment in life expectancy at birth, along with rising infant and maternal mortality rates.

According to recent estimates, between 2015 and 2021, life expectancy at birth (for both sexes combined) declined from 77.8 to 71.2 years, as the infant mortality rate nearly doubled from 3.8 to 7.0 infant deaths per 1,000 live births. Although the pandemic significantly contributed to the worsening outcomes, the deteriorating trends had already been underway. Government officials attributed the dramatic quadrupling of the maternal mortality rate (from an average of 40.6 maternal deaths per 100,000 births in 2015–2020 to 176.6 in 2021) to public health authorities’ neglect due to their focus on the Covid-19 crisis.

The Elderly Care Crisis—Social Demographic Solutions?

The confluence of such dire conditions has de facto coalesced to begin altering revolutionary Cuba’s approach to social welfare. With the State no longer capable of satisfying basic human needs, families on their own—often with support from domestic and international charitable organizations—have begun filling the breach. In this sense, the Cuban family has embraced traditional, deeply embedded cultural norms whereby the family assumes responsibility for elderly support and care. The authorities, recognizing reality, have gone further by codifying, if imperfectly in the 2022 Family Code, the legal obligation close relatives have for the well-being of older relatives and other vulnerable kin. More cynically, Havana’s political elite has created the conditions whereby a growing émigré community will become an even greater source of financial support for relatives left behind, an objective first initiated by relaxing formerly highly restrictive migration rules. More recently, in implicit collaboration with Nicaragua, one of Havana’s most closely aligned countries, the authorities achieved the dual purpose of diffusing social and political tensions by allowing the disaffected to depart the country by tacitly orchestrating the historic early 2020s exodus. Havana is betting that further consolidation of the social and economic nexuses rooted in an expanding transnational society will generate the added financial and other resources the governing model has failed to produce. What remains in abeyance is who will be left behind to tend to the social and health needs of older generations, as families have fewer children and emigration continues siphoning the able-bodied abroad.



Obstacles to Elderly Social and Healthcare Services

The growth of the elderly population and its multiple needs faces a challenging domestic scenario which, aside from the developments enumerated earlier, suffers from the following:

1. A deepening care crisis arising from increased demand as State service access diminishes and worsens, adding to a growing burden upon unremunerated female caregivers.
2. A social policy reform that curtailed the definition of well-being, leading to fewer social protection resources, the burden being transferred to families and the market.
3. A deficient regulatory framework undermining the effective implementation of the 2022 Family Code, even when its eligibility criteria are insufficient to protect elderly and caregivers' rights.
4. The presence of major obstacles interfering with the development of service-oriented community and civil society initiatives; and
5. The absence of accessible poverty and inequality data, impeding an effective policy dialogue.

A comprehensive evaluation of elderly care in today's Cuba should rest on the consideration of several interconnected dimensions, many of them vulnerable and already under threat, as they are crucial for the aged population's welfare. Major problem areas are discussed below.

Limited Normative Progress Guaranteeing Full Elderly Protection

Some progress is in evidence regarding how the 2019 constitutional language addressed the elderly care issue. It explicitly incorporates age as a nondiscriminatory element (Articles 41 and 42), while domestic work and provision of care are formally recognized as valuable labor rights in Article 212. Simultaneously, the 2022 Family Code is effectively aligned with international human rights instruments acknowledging the five core principles of the 2015 *Inter-American Convention on Protecting the Human Rights of Older Persons*: independence, participation, access to care, self-fulfillment, and full dignity. However, enforcement of these principles is not effectively contemplated in the related regulatory framework. For instance, rights pertaining to ancestors' care are not as well defined as for descendants. Likewise, the normative fails to specify caregivers' rights, whether remunerated or not. Another shortcoming is the failure to judicially align the social policy reforms in accordance with the 2011 political guidelines (*Lineamientos*), given the shifting emphasis for elderly care from the State towards the family, while failing to address how families could be supported to facilitate their enhanced caregiving role. Safeguarding delivery of consecrated rights will remain in abeyance as the country's Magna Carta sees as irrevocable the socialist system (Article 4), while assigning to a single party—the Communist Party—"the superior political guiding force of society and the State" (Article 5).

Reimagining Social Policy and the Inexistence of an Integrated Care System

Given the significance of aging in the demographic evolution and structure of the country, existing institutional and social policies designed to serve elderly needs are inadequate and insufficient.



Last updated in April 2021, current demographic policies follow a reductionist approach, narrowly emphasizing pronatalist interventions designed absent a clear understanding of their implications or obstacles to overcome if they were to succeed. At the institutional level, however, some efforts have been underway to address elderly care comprehensively, leading some ministries, academia, and “authorized” civil society organizations to work together. Nonetheless, this collaboration is insufficient. Even the authorities have acknowledged that the implementation of official “demographic dynamics” interventions is not well integrated, coordinated across sectors, or territorially coherent. Furthermore, a major elderly policy institutional weakness is the primacy assigned to the Health Ministry. The national older adults’ program is mainly allocated to this government agency. However, the growing and complex older adults’ needs exceed the capacities and competencies of this ministry. Another bottleneck is a paucity of fiscal resources for existing elderly policy implementation and development of an integrated care system. While during 2022 several initiatives got underway with international financial and technical support, nothing has been announced concerning their proposed design, feasibility, and economic sustainability.

A Deficit of Elderly Care Social and Welfare Initiatives and Programs

Contrary to the growing social welfare and healthcare needs arising from population aging, State budget allocations for social services and welfare have been on the decline within the policy reform framework of the 2021 alleged upgrading of the existing political and socioeconomic system (*Actualización del Modelo*) and prioritization tasks pronouncements. Elderly care continues to be anchored on the family as does the heavier burden on females it implies. Elderly program access options continue to be scarce, unequally distributed territorially, and increasingly costly. Rising costs have led to a decline in usage rates, particularly but not exclusively in dining facilities managed by elderly daycare centers (*Casas de Abuelos*) and the Family Services System (*Sistema de Atención a la Familia, SAF*), a national program to assist low-income families. Although the State continues to be heavily involved in elderly affairs, its leadership and control over the management, reach, and quality of service are eroding. As a result, the community impact of central and sector-oriented initiatives of the National Integrated Elderly Services Program (*Programa Nacional de Atención Integral al Adulto Mayor*) progressively diminishes, with technical and operational procedures undermining efficacy at the local level. It is difficult to incorporate local initiatives and actors into a common elderly care agenda. Flowing from these constraints is the underutilization of local community resources, including human capital, as often bureaucratic and institutional coordinating barriers between local and State offerings cannot be overcome. The 2011 National Population Aging Survey exposed considerable dissatisfaction with the healthcare services provided by the State. The Covid-19 pandemic made clear that the crisis was present across all healthcare sectors, from primary to in-hospital care. It was reflected also in the unavailability of many prescription drugs, a deteriorated infrastructure, an overall competence decline among healthcare personnel, and a deficit in geriatric and gerontology specialists.

Greater Civil Society Involvement in Elderly Care Services

Elderly care by religious institutions and other civil society organizations has been on the increase, presently only trailing services available from the State. These organizations, however, confront operational and financial problems due to legal impediments and budgetary shortfalls. How sustainable their programs will prove to be is uncertain due to legal restrictions, lack of resources, and, in many instances, political persecution by the authorities, which increasingly view social activism as something to be controlled.

Worsening Housing and Mobility Conditions Limiting Elderly Independence and Autonomy

Housing conditions and public spaces essential for elderly mobility are in precarious condition. Access to wheelchairs and other devices necessary to elderly mobility and care is minimal or nonexistent, as demand rises. Poor public lighting and failure to maintain streets and sidewalks, a wretched health situation, and persistent public transportation difficulties preclude elderly mobility and create service access barriers. By failing to prioritize the development of a public and social elderly care culture, the 2022 Family Code fell short of its requirements. So have related programs supposedly developed to encourage more accepting public attitudes toward the aged within work and family, including their sexuality, as the goal of facilitating their increased involvement was ignored.

Proper Elderly Nutrition Retrenchment

Mounting evidence suggests that many elderly in Cuba are unable to regularly secure a healthy, well-balanced, and varied diet. The number of subsidized food items offered through the rationing system, previously capable of satisfying basic intake requirements, was gradually reduced. As the nutritional situation has worsened, questions have been raised regarding the coverage and quality of the National Family Services System's elderly supplemental feeding program, especially since the prioritization tasks guidelines were issued. Most alarming is that the vulnerability threshold, correlated with individual or family income, was retightened after it was lowered during the pandemic. As meal prices increased for some users, participation declined.

Dearth of Professionally Trained Staff with Access to Continuing Education

Within the healthcare and social work sectors, a growing deficit of human resources is underway, aggravated by personnel losses due to emigration and employment shifts to better-paid economic sectors. Social workers are in short supply. Many of those available are poorly trained and not current in social intervention skills, despite modest advances, such as the recent adoption of university-level training options. Information about training content for specialized geriatric health and social care workers, as well as for professional caregivers, is scarce. While the current availability of sociodemographic data about the elderly in the National Statistical and Information Office and Health Ministry has improved—along with the 2011 elderly survey—details about specific subprograms, necessary for planning and management purposes, are lacking.

In short, the worsening structural crisis gripping Cuban society, aggravated by the 2021 reforms and midterm pandemic, coalesced to shape an inhospitable climate for the emergence of a favorable environment where elderly human rights would be respected. Uncontrolled inflation, the declining purchasing power of salaries and pensions, nutritional insecurity, and medicine shortages, among other perverse trends, led to a drastic deterioration of elderly quality of life, worse among the most vulnerable. Facing such deplorable conditions, assistance and social programs should have expanded, but the opposite occurred. Social policy response mechanisms continue to be slow and ineffective in addressing multiple urgent population needs, including those of the elderly.

Public Policy Recommendations

Within such a challenging economic and social context, Cuba can do little over the short term to address the intensifying aging crisis, unless broad reforms are introduced to promote rapid economic growth. Not only is a deep economic reform required but also a social policy better oriented to Cuban society's major demographic challenges, moving to an integrated care system. In the absence of financial resources and with galloping inflation, elderly pensions will remain below subsistence levels, while it would be impossible to rebuild the country's badly eroded healthcare system. However, a few palliative measures remain open to help the elderly improve their living conditions. This would require official acquiescence to collaborate more closely with domestic civil society and émigré organizations, along with the international charitable community, while granting them greater operational autonomy. Modifying the many regulatory impediments interfering with elderly care and embracing international healthcare standards would also be beneficial.

As part of the economic reform, we suggest promoting the "silver economy" (economic activities, products, and services designed to meet the needs of older adults), eliminating obstacles for private entrepreneurs, and facilitating the expansion of non-private organizations focused on older adults and social issues. This implies a new regulatory framework to allow for their normal operations. Facing the rise in the cost of living, the government should elaborate an emergency plan focusing on vulnerable groups, prioritizing food and medications. One of the tasks could be to establish discounted prices for the elderly in different services and reform the national program to assist low-income families (SAF), expanding the inclusion criteria. At the same time, the institutional capacity and human resources should be strengthened to make legal reform implementation, like that of the Family Code, effective. In order to improve decision-making and social intervention, it is necessary to expand and improve statistical information on the elderly, particularly on the impact of the crisis on the increase in poverty and social inequalities. The increasing caregiving demand will require expanding social programs coverage, reducing territorial and gender inequalities.

Finally, it is urgent to promote the development of applied social research and the transfer of knowledge on aging and caregiving through alliances with foreign universities and international organizations to expand the training of social workers and health workers. All of the above should encourage further reflection, research, and debate on the social organization of elderly care in Cuba, within the context of an increasingly feminized international migration. More broadly, Cuba needs a public debate on the welfare State, the reordering and rationalization of assistance policies, and the rights of older adults.

FIU CasaCuba

CasaCuba at Florida International University is bringing together scholars, policymakers, business leaders, students, and the community at large to realize a multidimensional Cuban cultural center and think tank that facilitates the discussion and study of Cuban affairs—history, policy, business—and the celebration of the Cuban heritage. CasaCuba has attracted influential board members, recruited a uniquely qualified team, secured a prominent site on campus, and received significant philanthropic support, including prestigious grants from the National Endowment for the Humanities, the John S. and James L. Knight Foundation, and the Florida Division of Arts and Culture of the Florida Department of State. CasaCuba will feature galleries for interactive exhibits, as well as a state-of-the-art venue for events, performances, and dynamic programming.

Cuban Research Institute

FIU's Cuban Research Institute (CRI) is dedicated to creating and disseminating knowledge about Cuba and its diaspora. The institute encourages original research and interdisciplinary teaching, organizes extracurricular activities, collaborates with other academic units working in Cuban and Cuban American studies, and promotes the development of library holdings and collections on Cuba and its diaspora. Founded in 1991, CRI is the nation's premier center for academic research and public programs on Cuban and Cuban-American issues. No other U.S. university surpasses FIU in the number of professors and students of Cuban origin.

Kimberly Green Latin American and Caribbean Center

The Kimberly Green Latin American and Caribbean Center (LACC) at FIU was founded in 1979 to promote the study of Latin America and the Caribbean in Florida and throughout the United States. By forging linkages across the Americas through high quality education, LACC's research is aimed at better understanding and addressing the most urgent problems confronting the region. LACC is designated by the US Department of Education, funded by Title VI, as a National Resource Center on Latin America, recognizing it as one of the top Latin American and Caribbean centers in the country. LACC draws upon the expertise of one of the largest concentrations of Latin American and Caribbean Studies scholars of any university in the country, spanning a multitude of disciplines across colleges.

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