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**CUBAN ELDERS IN THE TRANSITION
TO DEMOCRACY:**

**A REVIEW AND ANALYSIS OF
CURRENT RESEARCH AND PLANS**

Prepared for

**Little Havana Activities and
Nutrition Centers of Dade County, Inc.**

By

**The Southeast Florida Center on Aging
Florida International University**

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**SOUTHEAST FLORIDA CENTER ON AGING
FLORIDA INTERNATIONAL UNIVERSITY**

The Center on Aging is a comprehensive University-wide center with a broad mission to conduct policy research, educate, and serve the community. The Center conducts applied public policy and practice research, with emphasis on emerging issues of long term care, and encourages collaboration of faculty from all disciplines. The Center offers many educational opportunities, including multidisciplinary certificate programs for undergraduates, graduates, and professionals; training seminars and workshops for professional caregivers who work with Southeast Florida's older population; and continuing education programs for older learners. The Center provides technical assistance to public agencies and community organizations that deliver health and social services to Southeast Florida's multi-ethnic older population.



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PREFACE

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Little Havana Activities and Nutrition Centers of Dade County, Inc. (LHANC) was founded 21 years ago by Rafael Villaverde.

Rafael Villaverde was an extraordinarily gifted person, gifted in areas seemingly diverse as military strategy and the study of literature and humanities. These gifts of vision and sensitivity took him to the Bay of Pigs as a young liberator in the Invasion of 1961. He was captured and endured years of imprisonment in Castro's jails. Upon his release from Castro's jails, Rafael Villaverde was commissioned by the President of the United States as a First Lieutenant in the U.S. Army and assigned to the Division of Special Forces. Then, as a U.S. Army reservist, he attended the University of Miami and graduated with a Masters degree in Latin American Studies. Upon his graduation, he worked for the State of Florida's Division of Family Services. He established the first Hispanic branch of the American Red Cross in 1972. Once again, his gifts of vision and sensitivity focused on the plight of our elderly and led him to establish the Little Havana Activities and Nutrition Center in 1973. Throughout his life he continued his efforts to establish a democratic system in a Free Cuba.

It is appropriate and consistent with Rafael Villaverde's spirit and vision for this organization and a Free Cuba that his community prepare for the fall of Castro's regime and the rebuilding of a Free Cuba. It is to his memory and patriotism that LHANC dedicates this report.

Josefina Carbonell
President
Little Havana Activities and Nutrition
Centers of Dade County, Inc.



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INTRODUCTION

After the fall of the Berlin Wall in 1989 and, especially, after the collapse of the Soviet Union in 1991, many observers concluded that the communist system in Cuba was destined for an early demise. While initial expectations of an imminent collapse of the government of Fidel Castro have not been borne out, there is still a broad consensus among scholars and policy makers that significant change will take place on the island in the near future.

In response to these anticipated changes, several studies have developed scenarios about how and when a transition may occur and, specifically, about what may happen in Cuba after the Fidel Castro era. At the same time, policy makers at the federal, state and local levels, as well as Miami-based non-governmental organizations, have been developing short and medium-range plans for the aftermath of communism in Cuba.

Elders make up a very large proportion of the Cuban-American population of the United States, and a growing percentage of the population on the island. To date, there have been no studies or plans that specifically address the impact of a major political change in Cuba's regime on them.

This Report has been prepared pursuant to a contract with Little Havana Activities and Nutrition Centers, Inc. (LHANC) for the purpose of providing the Board of Directors with background information for planning the agency's response to Cuban elders' needs in the event of political change in Cuba. The specific objectives of this Report are:

- 1) to review and analyze studies and planning documents related to potential changes in Cuba;
- 2) to present demographic and needs assessment data on Cuba's elders in 1993.

Chapter I of this Report reviews and analyzes four policy studies and one commission report/plan for dealing with the transition to a Free Cuba. **Chapter II** presents demographic data on older Cubans on the island. This data was obtained from An Aging World II: International Population Reports, published by the U.S. Department of Commerce, Economics and Statistics Administration, Bureau of the Census (hereafter, U.S. Bureau of the Census). In addition, it presents an overview of the social safety net existing in Cuba and its impact on older Cubans living on the island. Conditions on the island are in constant flux and no scientific assessment has been made of the impact of the last few years on elders; the "snap shot" of the service network in Cuba is anecdotal and we anticipate that, unless there is a positive turn in the Cuban economy, conditions will continue to deteriorate and the health and well-being of elders will continue to suffer severe set-backs. **Chapter III** presents demographic information for Cubans in Dade County and describes their service network. A needs assessment of Cuban elders will be available in the spring of 1994 as part of a larger project funded by the Alliance on Aging, Inc. to determine the needs of older persons in Dade County. Demographic information about elder Cubans in Miami was obtained from the 5 percent Public Use Micro Data Sample of the 1990 Census.¹ **Chapter IV** presents migration figures and provides some preliminary recommendations to LHANC for the development of its Free Cuba plan.

CHAPTER I
CUBA IN TRANSITION: STUDIES AND PLANS
1992 - 1994

In this chapter we will 1) review four policy studies; and 2) list and describe short and medium-range plans for the aftermath of the end of communism in Cuba and review one commission report for dealing with the transition to a Free Cuba. All conclusions and recommendations will be presented in Chapter IV.

I.1 POLICY STUDIES

The studies we review here are:

- *Cuba Adrift in a Post-communist World* (1992). Edward Gonzalez and David Ronfeldt for RAND (RAND);
- *When Change Comes to Cuba: Social and Economic Impact of Cuban Migration on Dade County* (1992). Jaime Suchlicki, Principal Investigator, for the North-South Center, University of Miami (North-South Center);
- *Cuba and the New Caribbean Economic Order* (1993). Ernest H. Preeg with Jonathan D. Levine for the Center for Strategic and International Studies (CSIS); and
- *Transition in Cuba: New Challenges for US Policy* (1993). Lisandro Perez, Project Director, for the Cuban Research Institute and the Latin American and Caribbean Institute, Florida International University (FIU).

Three of the four studies were done for or sponsored by governmental entities and focus primarily on political and economic analyses of the crisis in Cuba and possible scenarios for change on the island. The RAND study was prepared for the Under Secretary of Defense for Policy. The North-South Center study was funded by Metropolitan Dade County. The FIU project was undertaken through a grant provided by the United States Department of State.

The Rand Study

The earliest of the studies, completed in June 1992, was done by Gonzalez and Ronfelt for the National Defense Research Institute at RAND. An earlier draft of the report, completed before the failed August 1991 coup in the Soviet Union, was substantially revised to take into account the new developments.

The RAND study does not assign a high probability to an imminent overthrow of the current Cuban government. The authors develop four scenarios that may confront the United States during the next five years. In order of *decreasing* probability, these are:

- Castro survives to taunt the United States;
- Another Mariel;
- Violent change is detonated on the island; and
- A "Gotterdamerung-like" showdown with the United States.

The Castro survival scenario assumes that the regime's strategy of integrating parts of the Cuban economy, such as the tourism sector, into the international economy, can stop the deterioration of the Cuban economy; and, because the Cuban revolution was indigenous, that the regime can continue to enjoy substantial legitimacy among the Cuban people. According to the authors, if the regime survives against all odds "in a proud, defiant manner that impresses the world and especially Latin America," Castro may be in a position to negotiate with the United States from a position of strength.

The Mariel II scenario involves Castro's exporting to the U.S. hundreds of thousands of the disaffected, "constituting an act of purification, consolidation, and material opportunity." If Castro could pull off a larger scale Mariel without destabilizing his own regime or provoking a confrontation with the United States, it could assist him in maintaining political control and reducing economic hardship.

The violent overthrow scenario might be brought about by the consequences of a deteriorating economic situation and could involve a coup, the assassination of the Castro brothers, anti-regime demonstrations that run out of control, or an undeclared general strike that paralyzes the economy. This scenario would likely involve

significant bloodshed because "the Castro regime is not likely to succumb peacefully once it has entered a terminal crisis. The ensuing conflict might bring on direct U.S. involvement."

Finally, if all else fails, Castro might provoke an all-out confrontation with the U.S. in order to exit the historical stage as a martyr. While the authors say this scenario is unlikely, they warn that if it were to take place, it "would leave a successor government with a ruinous legacy upon which to build a new Cuba and improve relations with the United States."

Gonzalez and Ronfelt, the authors of the RAND study, describe Cuba as "a moving target." They see two diverging possible outcomes of the scenarios outlined above: (1) "the Cuban economy and the Castro regime could collapse in a year or two, finally opening up the way to the establishment of a new regime"; and (2) "Castro and Cuba could muddle through and emerge in a few years fully stable with significant ties to the global economy except for the United States." They conclude that of the two, "stability seems more likely than instability in Cuba over the short term (one to two years) and over the medium term (three to five years)."

The RAND study discusses U.S. policy options at some length, but there is little on the consequences of possible developments on various sectors of the Cuban population or on Cubans in the U.S. The report states that "with a population of 10.7 million people, the island is also a potential exporter of people to the United States, especially if civil strife and a wasted economy comprise Cuba's future," but the authors do not make projections or give estimates of number of exiles that would arrive in the U.S. as a consequence of the various transition scenarios.

To date, none of these scenarios have been realized. The economic situation in Cuba has not been stabilized. As a result, the government is being forced to take measures it long has resisted, such as the dollarization of the economy. Another Mariel has not taken place, despite the increase in rafters and in emigration through third countries. There has been no violent overthrow, despite reports of increased acts of

collective defiance. Finally, there has been no attempt to pursue an all-out confrontation with the U.S. The impact of these scenarios on elders and the role of LHANC in responding to these needs will be discussed in chapter IV.

The North - South Center Study

Published in November 1992 and prepared by a team of researchers, this study focuses on the consequences of change in Cuba on migration to South Florida and the fiscal and other implications of increased immigration here. The study's major conclusions:

- Between 150,000 and 250,000 refugees could arrive from Cuba within two years;
- The total cost of such a migration would range from \$635 million to \$1 billion over five years;
- Dade County's ability to provide social services would be severely strained, and the need for affordable housing would increase greatly;
- The state and federal governments must provide the resources to meet the crisis because the area lacks the resources to face such a crisis; and
- Relocation programs should include strong incentives to relocate and include a major role for private volunteer agencies.

The study also presents six scenarios for change in Cuba and analyzes the immigration consequences:

- A new Mariel--250,000 immigrants within a short span of time;
- A revolutionary overthrow of Castro--100,000 immigrants within a span of six months;
- A civil war--300,000 immigrants over a period of 18 months;
- A gradual decline of authority--200,000 over an 18 to 24 month period;
- Peaceful transition to democracy--70,000; and
- A partial lifting of the U.S. embargo--70,000.

The authors also calculate the characteristics of immigrants under two migration scenarios. Under a low migration scenario, (150,000 immigrants over two years) they estimated the following sub-groups:

35,450 persons younger than 15; and

17,550 persons over age 60.

Under a high migration scenario (250,000 immigrants over two years), they estimated:

61,900 persons younger than 15; and

39,100 persons over age 60.

The low estimate of older immigrants appears to have been calculated by multiplying the number of expected arrivals (150,000) times the percentage of elders in Cuba's population (11.8% in 1990). This implies a proportional representation of elders among new arrivals. The estimate of older immigrants under the high migration scenario, however, is higher than such a calculation would yield, implying the authors believe that under this scenario, elders would constitute a large representation of this cohort among new arrivals.

An influx of Cuban refugees to Dade County will exert strong pressures on the County's ability to deliver social and health services while the funding sources for these services are mostly federal funds channeled through the state. Although this study presents the impact of two scenarios, "the case of rapid influx" and "the case of protracted migration," on social services, health care, transportation, education, police, etc., none of these projections take into account the special needs of older immigrants and the capacity of the aging network to respond to these needs. The authors project local public costs of immigration over a five-year period to range from \$635 to \$1,036 million, and claims that the greatest public cost -- 69 percent of cost -- will be incurred in the area of education, while only 15 percent of projected cost would be needed for health care. However, the authors of this report do not appear to take into account frailty of the 60 and over population or to calculate health service needs based on levels of impairment. This issue is addressed in Chapter II.

The CSIS Study

This study is basically limited to assessing the economic prospects for Cuba, especially in the event of a transition to capitalism. Its central conclusion is that "Fidel Castro is simply wrong when he tells the Cuban people that such a restructuring will cause the kind of economic collapse and chaos that is currently happening in Russia."

The study concludes that a lifting of the U.S. embargo while Castro remains in power would boost the Cuban economy, but sees the probability of such an event as "extremely low." However, if there were a peaceful transition to democracy and capitalism, the authors foresee a rapid recovery of the Cuban economy. This implies that Cuba would be spared the devastating social and economic costs faced by Russia and some other countries that are undergoing similar transitions. However, the political assumption that undergirds this prediction, painless change toward a democratic political system, does not appear to be on the immediate horizon.

The Florida International University Study

Released in late 1993, the 674-page FIU project is the most ambitious study of this kind to date. Fifteen experts contributed analyses of a range of political and economic topics. One major conclusion: regardless of political outcomes, an opening toward a market economy is inevitable. Despite its length, **the study does not deal with the subject of migration.** Neither does it deal with the question of how the transition will affect South Florida or the U.S.-based Cuban community of more than one million people.

Carmelo Mesa-Lago's contribution, "The Social Safety Net in the Two Cuban Transitions," is perhaps the most relevant chapter for purposes of this Report. Mesa-Lago distinguishes between a "socialist transition," which has taken place since 1990, in which the government has attempted to incorporate some elements of the market into the existing structure, and a "market transition that is assumed will eventually take place." The paper examines what might happen to the safety net during these two

transitions. During the "socialist transition," the state tries to minimize the effects on the social safety net, with no success. If and when the market transition occurs, "the needed adjustment and restructuring policies typical of transition from a centrally planned to a market economy will generate grave social costs." Among some of the conditions likely to change:

- The Social Security and Welfare System: "At the end of the 1980s, Cuba had the most comprehensive and costly social security and welfare system within the socialist world and Latin America;"
- Retirement Age: "Cuba's retirement age is much lower than in Latin America despite a shorter life expectancy in the latter;" and
- The Health Care System: "Cuba had one of the highest health indicators in the world by the mid-1980; however, by the end of the 1990s, it had developed one of the world's most capital intensive, costly and wasteful health care systems."

Contrary to the conclusions of the CSIS study, Mesa-Lago concludes that "a market transition in Cuba would be no easier, and might be more troublesome, than in other countries."

A second relevant contribution is "The Transition to Somewhere: Cuba in the 1990s," in which political scientist Jorge Dominguez explores nine possible scenarios. These range from the continuation of the status quo ("tight, repressive government control of politics, an important opening to foreign investment, booming illegal markets, and persistent economic decline") to the overthrow of the regime through violence.

During and after a period of crisis and transition in Cuba, Dominguez predicts that political change will take place in an environment where:

- . Crime with impunity is tolerated;
- . Rule-governed markets and non-coercive, peaceful politics are foreign to the majority of the population; and

authoritarian institutions will continue to be strong.

Dominguez's conclusion is that:

"We do not know how or when a major regime transition might occur, but a relatively long period of stasis may be followed by a somewhat unexpected, swift, perhaps violent change that will most likely be comprehensive in its consequences. That is, there may be a prolonged, slow decline waiting for a catastrophe.

Cuba's future will be grim no matter what is the name of its ruler or the form of its political regime. The most optimistic conclusion sets the date for an appreciably more liberal, more democratic, and more prosperous Cuba not sooner than the beginning of the new millennium."

The impact on elders' physical and mental health during this grim period is devastating; however LHANC' role in relief efforts may depend on the political realities during the transition. The impact of migration of elders to Dade County will depend primarily on whether there is a change in U.S. immigration policy. These issues will be more fully addressed in chapter IV of this Report.

I. 2 PLANNING DOCUMENTS

During the last few years, organizations ranging from the federal government and the State of Florida to the Greater Miami Chamber of Commerce and the United Way of Dade County have been holding conferences and/or developing plans for the post-Castro era. The Governor's Commission on a Free Cuba Report is the only comprehensive plan that addresses several event scenarios likely to result from political changes in Cuba. In this section we give an overview of key points in the Commission's Report and provide information on other local or state plans.

This section is followed by a summary of conclusions made by the studies and plans of the effect of political change in Cuba on South Florida health/social network of various scenarios. Based on these conclusions we make some preliminary

recommendations. Chapter IV will deal more specifically with the impact of the various scenarios presented by these reports on LHANC.

Report of the Governor's Commission on a Free Cuba

Created by Governor Lawton Chiles through an executive order on September 23, 1991, the Commission's report was intended to be "a blueprint to address the impact of a free Cuba on the State of Florida." The Commission, chaired by Jorge Mas Canosa, Chairman, Cuban-American National Foundation, issued its report on February 24, 1993. The primacy of economic concerns is reflected in the organization of the Commission, which had three working committees. One committee dealt with business and commerce, a second with tourism and a third with immigration, education, health, and welfare. A subcommittee on Public Health provided a plan of action for public health services.

The Commission asserted that a dramatic change in the government of Cuba would cause significant migration into South Florida. Among the Commission's recommendations: immediate action by the President "to establish an orderly immigration policy to encourage compliance with existing immigration laws," i.e., no new Mariel.

The Commission provided the following situations/scenarios as a framework for planning purposes:

- Prolonged community celebrations;
- Influx of Cuban-Americans from within the U.S. into the South Florida Area;
- Massive influx of people directly from Cuba (this scenario has the potential of creating the greatest workload and impact on local, state, and resources); and
- Simultaneous mass emigration to Cuba.

While the Commission recommends the creation of a guardian-ad-litem program for unaccompanied minors, and discusses the impact of these scenarios on public health concerns, it does not address the needs of elder immigrants. However, the Commission does make several general recommendations regarding health and welfare in the event of mass immigration:

- There should be a single point of entry into the U.S., or at most two if necessary;
- A statistical and identification unit should be established at the point of entry to provide data necessary for budgeting and planning; and
- A medical triage capability at the arrival site should be established. This may include: developmental services, children medical services, aging and adult services, and mental health support services.

It is assumed that "when events should so dictate" the Governor would declare a "State of Emergency" in preparation to seeking a similar Federal declaration from the President or the U.S. Attorney General. This Federal action will make funding available through the Immigration Emergency Fund established by the Immigration Reform and Control Act of 1986.

Metropolitan Dade County--Free Cuba Plan

This brief undated document (six pages) provides a summary of the County's planned response to local events during the first 48 hours after a political change in Cuba. Plans call for the County Manager to be in charge of the situation and for the Emergency Operations Center to be activated. Maximum security procedures will be in place. The plan assumes that the situation will be one of high stress. It envisions the following scenario:

- Crowds and car caravans will form, disrupting traffic;
- Increased demand for fire rescue "in response to auto accidents, aerial discharge of firearms, and **high stress levels in older Cubans;**"

- High absenteeism will occur;
- Ethnic tensions will increase; and
- Telephone service will be disrupted by a high volume of calls.

Miami Police Department's Contingency Plans for Major Political Changes in Cuba

Last reviewed in November 1992, the document envisions three scenarios:

- Use of the Orange Bowl as a place for celebration;
- Street celebrations on Calle Ocho; and
- Large-scale caravaning in Little Havana and Downtown.

This document is limited to issues of law and order and traffic control.

Greater Miami Chamber of Commerce (GMCC)

The Greater Miami Chamber of Commerce has had two conferences on the impact of a change in Cuba on South Florida and it issued a 1991 report on "The Trade Impact of a Free Cuba." The GMCC also acts as a clearinghouse, compiling available plans.

American Red Cross

The organization does not have a single document outlining its plans in the event of a change in Cuba, but different sections of the organization have discussed or developed responses.

United Way of Dade County

A committee of the organization is developing recommendations to the Board of Directors regarding a plan of action in the event of major political change in either Cuba or Haiti.

Other Plans

The federal government's plans for dealing with contingencies in the event of a change in Cuba are not available to the public and, therefore, cannot be reviewed.

The Cuban American National Foundation has extensive plans for the rebuilding of a Free Cuba and for crisis intervention at the moment of the overthrow of the present regime. Likewise, these plans are not available to the public.

CHAPTER II THE AGING OF THE CUBAN POPULATION IN CUBA

In this chapter we will 1) provide the demographic characteristics of older Cubans; and 2) profile the service and health care system on the island including anecdotal information about the social, health and long term care needs of Cuban elders. All conclusions and recommendations will be presented in Chapter IV.

II.1 DEMOGRAPHIC CHARACTERISTICS

Most data on Cuba's older population living on the island used in this study come from population estimates by the U.S. Department of Commerce, U.S. Bureau of the Census, Center for International Research, International Data Base on Aging.² The following section provides a snap-shot of Cuba's aging population.

The age distribution of Cuba is older than that in most of Latin America and other less developed countries, and is aging rapidly. Cuba is unusual in that it has an age distribution that increasingly resembles that of a developed country, but the economy of an underdeveloped country, an economy that is in an acute crisis. The following provides further details on the Cuban demographic picture.

The median age in Cuba is 27.9 years. The median age of a country divides the age distribution into two equal parts. This means that one half of Cuba's population is under the age of 27.9 and the other half is over this age. This makes Cuba the country with the second highest median age in Latin America (the highest median age is Uruguay, 30.7). A high median age usually implies a low birth rate and a high life expectancy. Both Cuba and Uruguay have low birth rates and high life expectancies. Developed countries usually have higher median ages than less developed countries that are characterized by high birth rates and high mortality rates. For instance, the median age in 1990 was 32.8 in the United States and 38.7 in Sweden, compared to 22.1 in Brazil and 18.2 in Bangladesh.

Table 1 provides the age distribution of the Cuban population in 1990 and a projection for 2025. While the population younger than 25 years old is expected to decrease by over a million by 2025, the population 65 and over is expected to increase by 1.2 million over the same period and the population 55 to 64 years old will rise by nearly 1.3 million.

| TABLE 1 Population by Age Groups: Cuba 1990 and 2025 | | |
|---------------------------------------------------------------------------------|------------|------------|
| | 1990 | 2025 |
| Total Population | 10,622,000 | 12,875,000 |
| 0 to 24 years | 4,686,000 | 3,611,000 |
| 25 to 54 years | 4,249,000 | 5,072,000 |
| 55 to 64 years | 752,000 | 2,041,000 |
| 65 to 74 years | 539,000 | 1,139,000 |
| 75 to 79 years | 184,000 | 414,000 |
| 80 years and over | 212,000 | 598,000 |

(Source: U.S. Bureau of Census, 1990)

The expected growth of the older population in Cuba is of particular importance to the future of the island. Cuba's population will continue to age, but not as rapidly as that of many Third World countries, because Cuba's age structure is already much older than the average for the Third World. During the period 1990 to 2025, the projected increase in the number of elders in Cuba is 130 percent. Chart 1 (Appendix A) shows the projections for the aging population growth in the world. The percent of elders will continue to grow, and the oldest old (those 80 years and older) will more than double by the year 2025, as reflected in Table 2 and Chart 3 (Appendix A).

| TABLE 2 | | | |
|-------------------------------------------------------|-------------|-------------|-------------|
| Percentage of Elders in Total Cuban Population | | | |
| 1990, 2010, and 2025 | | | |
| | 1990 | 2010 | 2025 |
| Total Population | 10,622,000 | 12,274,000 | 12,875,000 |
| 65 to 74 years | 8.8% | 12.3% | 16.7% |
| 75 to 79 years | 3.7% | 5.2% | 7.9% |
| 80 years and over | 2.0% | 3.2% | 4.6% |

(Source: U.S. Bureau of Census, 1990)

According to 1990 estimates, 49.4% of elders are males and 50.6% are females. The ratio of males to females for the older cohorts are shown in Table 3. The data shows there is a much smaller gender gap in survival in the older age ranges in Cuba than in the elder population in the United States.

| TABLE 3 | | |
|--------------------------------------------------------------------|-------------|-------------|
| Gender Ratios of Persons 65 Years and Over in Cuba and U.S. | | |
| Males per 100 Females | | |
| 1990 | | |
| | CUBA | U.S. |
| 65 to 69 years | 97 | 81 |
| 70 to 74 years | 96 | 74 |
| 75 to 79 years | 91 | 65 |
| 80 years and over | 92 | 46 |

(Source: U.S. Bureau of Census, 1990.)

Support ratios in Cuba for 1990, 2010, and 2025 are shown in Table 4. The support ratio is a measure of the proportion of the population younger or older than the normal age range for labor force participation (roughly pre-school children, students

plus retirees) versus the proportion in the age ranges in which individuals are normally active in the labor force. The higher the support ratio, the greater the burden of support for the economically active portion of the population. The data in Table 4 show that the overall support ratio in Cuba will actually improve in the next thirty five years despite of the aging of Cuban population and the increase in support of elders, because of a major shrinkage in the burden of supporting the young.

| TABLE 4 | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------|-------------|
| Cuban Support Ratios | | | |
| 1990, 2010, and 2025 | | | |
| | 1990 | 2010 | 2025 |
| Total Population ^a | 71 | 63 | 64 |
| Elderly ^b | 15 | 20 | 27 |
| Oldest Old ^c | 23 | 26 | 28 |
| Youth ^d | 56 | 43 | 36 |
| ^a The total support ratio is the number of persons 0-19 years and 65 years and over per 100 persons 20 to 64 years. ^b The Elderly support ratio is the number of persons 65 years and over per 100 persons 20 to 64 years. ^c The Oldest Old support ratio is the number of persons 80 years and over per 100 persons 65 years and over. ^d The youth support ratio is the number of persons 1 to 19 years per 100 persons 20 to 64 years. | | | |

(Source: U.S. Bureau of Census, 1990)

Retirement age in Cuba is 60 years for men and 55 for women. Table 5 shows labor force participation rates for men and women 60 to 64 years and over 65 years of age. Chart 4 (Appendix A) shows the growth in the retirement age population from 1950 to 1980 and projects the numbers to 2010. Between 1950 and 1980, the retired population grew from 8.6 percent of the total Cuban population to 12.4 percent; while in the next thirty years, this group will grow to 19.3 percent. These data are of

particular importance to understanding the impact of the aging population on Cuba's social security system.

| | Men | Women |
|-------------------|------------|--------------|
| 60 to 64 years | 60.9% | 7.8% |
| 65 years and over | 21.4% | 2.0% |

(Source: U.S. Bureau of Census, 1990)

II.2 SOCIAL AND HEALTH CARE DELIVERY SYSTEMS

Cuban elders have invested many years of sacrifices in hope of a dream that never materialized. Today they are faced not only with lack of food and material goods but more importantly with prevailing sadness, lack of hope, and unending broken promises. The impact of depression, anxiety and lack of hope in this population cannot be accurately measured from a distance. However, a description of the social safety net and an assessment of the social and health care needs of Cuban elders by testimony of recent arrivals will help us complete a general profile of Cuban elders.

Even when there is general consensus that the social and health care delivery systems, as described, are in crisis and continue to erode, many analysts also claim that the expectations created by the socialist regime for social protection are considered by most Cubans to be a right that must not be relinquished, only improved, with any future change.³ We will describe the programs that have been developed to serve elders and will provide some observations to illustrate the degree to which these programs appear to have been affected by the present crisis.

Social Security

In 1987, the minimum monthly pension in Cuba was raised to 100 pesos. The maximum pension replacement rate is about 90 percent, the highest in the world.⁴ The cost of the system to the Cuban economy is great so the Castro regime has every imaginable incentive to facilitate the migration of as many pensioners as possible. Meanwhile, the U.S. is reducing the number of visitor's visas given to Cubans. This policy has the effect of controlling the number of older immigrants. However, we do not know whether the number of elders arriving as tourists who choose to stay in Miami has increased over the past year.

The impact of the legalization of the dollar on the retired population has been devastating. The peso's real value is in constant decline and retirees find that the purchasing power of their pensions is meager and is likely to continue to decrease (\$100 pesos for \$1 dollar in January, 1994 according to one recent arrival). In addition, goods once available on the black market now require dollars which older people, for the most part not in the labor force, have access to only if received from friends or relatives in the United States.

Health and Long Term Care

Cuba's national health system covers virtually all of the population and is free with the exception of payment for prescription drugs. The system is managed through an extensive network of neighborhood-based family doctors, each of whom provides primary health care for 600 to 700 individuals.⁵ In 1990-91 it is estimated that the island had 36.4 physicians per 10,000 inhabitants (Table 6). Each family doctor is assigned to a multi-disciplinary team (pediatrician, gynecologist, internal medicine, orthopedic, and cardiologist) from the area polyclinic. Each polyclinic, in turn, is linked to a general hospital as well as to a specialty hospital for referral purposes.

TABLE 6
Cuban Health Indicators
1959-1991

| Year | Physicians per 10,000 inhabitants | Hospital beds per 1,000 | Crude Mortality ^a | Infant Mortality ^b | Life Expectancy |
|-------------------------------------------|-----------------------------------|-------------------------|------------------------------|-------------------------------|-------------------|
| 1959 | 9.2 | 4.3 ^d | 6.4 | 34.7 | 64.0 ^c |
| 1969 | 7.1 | 5.0 | 6.6 | 46.7 | 68.5 ^d |
| 1979 | 15.4 | 4.2 | 5.6 | 19.4 | 72.8 ^e |
| 1989 | 32.8 | 5.2 | 6.4 | 11.1 | 75.2 |
| 1990-91 | 36.4 | 5.3 | 6.7 | 10.7 | 75.4 |
| ^a per 1,000 inhabitants | | ^c 1960 | | ^e 1980 | |
| ^b per 1,000 infants born alive | | ^d 1970 | | | |

(Source: Reprinted from Carmelo Mesa Lago, *The Social Safety Net in the Two Cuban Transitions, Transition in Cuba: New Challenges for U.S. Policy*. Florida International University Cuban Research Institute. Study Sponsored by U.S. Agency for International Development and U.S. State Department Office of Research, September 1993.)

Geriatric care as a specialty was added to the Medical School curriculum in 1989 and in May, 1992, CITED (Centro Iberolatinoamericano de la Tercera Edad) was created. The purposes of this Center are to: provide continuing education and training for health care professionals in gerontology and geriatrics; develop and validate instruments of geriatric assessment; and develop community-based programs for the care of older persons. The Director of the Center is also the President of the Sociedad Cubana de Gerontologia y Geriatria (Cuban Society of Gerontology and Geriatrics). This group has members throughout the island and has been active in promoting gerontological training for physicians, nurses, and social workers. Activities of the Society have been dwindling due to lack of material resources.

A measure of the impact of the lack of medicines, assistive devices and medical supplies on the geriatric population is not obtainable. However, there is a general perception among key informants and focus group participants that elders are not

receiving adequate medical treatment for conditions such as diabetes, hypertension, asthma and other respiratory diseases. Diagnostic tests for early detection of cancer are only offered to the elite. Surgical procedures are interrupted by energy failures and are often not available due to lack of surgical supplies. Lack of refrigeration and use of contaminated water is increasing the risk of parasites and creating major public health hazards. Lack of food and depression make the older population much more vulnerable to illness.

Cuba has both public and private nursing homes. Private nursing homes are administered by religious congregations and are considered to be superior in quality. These homes serve the elite. Government nursing homes are well staffed and provide 24-hour nursing care for chronically ill elders. All nursing homes have a long waiting list and admission into the homes has to be negotiated through the family doctor's office. It is reported that currently no new admissions are being made into Cuba's nursing homes due to the cost of feeding and caring for this population. The Ministry of Health's response to the need of providing care for chronically ill elders that cannot be admitted into nursing homes has been to encourage the development of Day Hospitals and Adult Day Care Centers in neighborhoods. There is no information with regard to how many Centers have been developed or the number of participants.

Well elders in the past used to enjoy activities organized by the *Circulos de Abuelos* (Senior Centers). These centers organized recreational activities, developed exercise programs, provided opportunity for socialization and productive activities. Many of these activities have been eliminated or cut back as a result of the economic crisis. It is reported that the economic crisis is causing not only severe stress in this population, but also malnutrition. These conditions, combined with widespread depression, have affected participation in the *Circulos de Abuelos* and only few of them continue to function.

An assessment of impairment and disability of elders in Cuba is not possible, but there is some anecdotal evidence that the general pattern of morbidity of elders on the

island and Cuban elders in Miami is not that different. A Cuban physician, who is working as a physician's assistant in Miami, states that there is a remarkable similarity in the physical and psychological presentation of Cuban elders on both sides of the Florida Straits.

For lack of better data, one could assume that the reported types of impairment by the Cuban older population in Dade County could serve as an indicator of the types of impairments experienced by the Cuban older population in Cuba. However, this assumption does not reflect the negative impact that prolonged lack of medicine, assistive devices, medical supplies and food may be having on this population. In Table 7, we use estimates derived from the 5 percent Public Use Micro Data Sample (PUMS), US Census, 1990, and apply the percent distribution for personal care limitations and mobility limitation among the older Cuban population in Dade County to the same cohorts in Cuba.

| | Personal Care Limitation | Mobility Limitations | Prevented From Work | Limited in Kind or Amount of Work |
|-------|-----------------------------------------|---------------------------------|--------------------------------|--------------------------------------------------|
| 65-74 | 65,758 12.2% | 65,219 12.1% | 96,481 17.9% | 112,651 10.9% |
| 75-79 | 29,808 16.2% | 39,928 21.7% | 53,544 29.1% | 59,248 32.2% |
| 80+ | 70,172 33.1% | 91,160 43.0% | 96,460 45.5% | 101,760 48.0% |

(Source: U.S. Bureau of Census, 1990 data on Cuba's elders.)

The Southeast Florida Center on Aging's report, Aging 200: Projecting the Needs of Florida's Older Population to the Years 1995 and 2000, utilizes three different forecasting models to project impairment levels and service needs of the 60+ and 65+

population. Each of these models utilize varying assumptions about how morbidity and mortality influence projections as to the disability and service needs of older persons. The forecasting models were applied to data specific to Florida's older population. The study did not make projections of service needs for the Cuban older population per se. Thus, one would have to assume that there is no significant difference in the characteristics of the Cuban older population, on the island or in Florida, as compared to Florida's population overall in order to apply the same forecasting model to estimate future service needs of Cuban elders migrating to Dade County. This would be an assumption of heroic proportions. A realistic estimate of service needs would require an epidemiological study of the Cuban older population to provide meaningful data.

Housing

The situation of housing in Cuba has been one of severe shortage for many years. This situation has been aggravated by the current crisis. It has been reported that by 1992, "the housing deficit probably surpassed the one million mark."⁶ The housing shortage has resulted in more multi-generational households than otherwise would have been the case. An assessment of the impact of the housing shortage on older people is not obtainable, but this aspect of Cuban life might have proven to be an asset to older persons who continue to be members of an extended family network. On the other hand, overcrowded living quarters also may contribute to an increase in intergenerational conflicts and to severe deprivation of privacy for everyone in the family. Also, in the past elders felt useful and productive because they were the everyday "problem solvers" for the household. Elders stood in the long "colas" and came home with food. They cooked, washed, took care of the kids after school, etc. Today, the lack of food, electricity, and transportation make many of these chores impossible and, therefore, helplessness, depression, and intergenerational conflicts increase. Focus group participants also pointed out that the greater the level of basic human needs, such as food and shelter, the greater the degree of lawlessness.

The rate of abuse and exploitation of elders in Cuba is not known. However, a recently arrived psychiatrist reports that the incidences of elder abuse by family members and neighbors have increased as individuals compete for scarce resources. This is likely to continue as basic societal values are neglected and "survival" strategies replace more civil behaviors.

Nutrition

Rationing of consumer goods has been a way of life in Cuba since 1962. However, in the past "la libreta" (the rationing card) could be supplemented by purchases "por la libre" in state-owned stores or on the black market. Table 8 shows the decrease of rationing quotas in Havana between 1979 and 1992. "It is estimated that current rationing quotas (assuming that they are fulfilled in practice, which is not the case) only satisfy 14 days of the population's minimum food needs.⁷

The nutritional situation of the Cuban elderly is severe, deteriorating, and would pose a challenge during any transition. Focus group participants reported observing dramatic weight loss and low hemoglobin counts for which there is no medical explanation except a deficient diet. One physician who has two elders living in his household reported that despite his position in the hospital, he could not provide adequate nutrition for his elder dependents. In an intergenerational household, elders frequently do without their one piece of bread in order to feed the children in the family. Elders in the street are not only complaining of being hungry but they have been saying that not even in the "Machadato," during the depth of the Depression, were things so bad.

TABLE 8
Monthly Per Capital Quotas of Selected Rationed Consumer Goods in
Havana, Cuba: 1979-1992
(in pounds)

| | 1979 ^a | 1991-92 ^b |
|----------------------------|-------------------|----------------------|
| Beef ^c | 2.5 | 0.75 |
| Fish | free ^d | 0.67 |
| Rice | 5 | 5 |
| Beans | 1.25 | 0.62 ^f |
| Cooking oil and lard | 1.5 | 1.5 |
| Eggs (units) | free | 20 |
| Butter | free | g |
| Coffee | 0.375 | 0.25 |
| Milk (canned) ^e | 3 | 3 |
| Sugar | 4 | 4 |
| Bread | free | 5 ^h |
| Cigarettes (package) | 4 | 4 |
| Gasoline (gallon) | 10 | 7 |
| Detergent (medium package) | 0.5 | 0.3 |
| Soap (cake) | 1.5 | 1 ⁱ |
| Toilet Paper (roll) | 1 | 1 ^j |
| Toothpaste (small tubes) | 0.33 | 1 ^j |
| Cigars (units) | 4 | 4 |
| Beer (bottle) | free | 24 ^j |

a Also free in 1979 were macaroni, spaghetti, yogurt, cakes and vegetables (according to season); and break (after 4 pm).

b Most information is from late 1991, partly updated through 1992.

c Chicken is alternated with beef, about two pounds per month; both became extremely scarce in 1992, beef virtually non-existent.

d Small fish. Seafood has not been available for more than two decades.

e Children under seven had a daily ration of two-thirds of a liter of fresh milk and adults over 65 received six cans of condensed or evaporated milk monthly in 1979; in 1991 they received double rations of canned milk.

f Black, red, and white beans; the first is seldom available; the quote was reduced to 0.125 in January 1992.

g Not available in the market at all.

h One small roll daily.

i Bath soap; laundry soap has not been supplied for two months.

j Per family; toothpaste for up to four people.

(Source: Reprinted from Carmelo Mesa Lago, *The Social Safety Net in the Two Cuban Transitions, Transition in Cuba: New Challenges for US Policy*. Florida International University Cuban Research Institute, Study sponsored by US Agency for International Development and US State Department Office of Research, September, 1993.)

CHAPTER III

THE AGING OF THE CUBAN POPULATION IN DADE COUNTY

In this chapter we will 1) provide the demographic characteristics of Cuban elders in Dade County, 2) describe the role of LHANC in the aging services network, and 3) summarize needs assessment findings for elders in Dade County. All conclusions and recommendations will be presented in Chapter IV.

III.1 DEMOGRAPHIC CHARACTERISTICS

The Cuban origin population of the United States has by far the oldest age structure of any Hispanic group in the United States. Most Cubans, and most Cuban elders, live in Dade County.⁸ In 1990, there were about 150,000 Cubans 60 years old and over in Dade County (Chart 5, Appendix A). This means that about 26 percent of the 561,840 Cubans in Dade County in 1990 are over 60. To put this figure in perspective, in 1991 Sweden had the oldest age structure in the world, with 22.8 percent of its population over 60. And, the ratio of Cuban origin persons 65 years and over per 100 persons 20 to 64 years in Dade is 32 to 100; in Cuba the ratio is only 15 to 100.

The age structure of the Cuban origin population in South Florida is reflected by the fact that Cubans account for 83.5 percent of the Dade Hispanic population 60 years old and over, but only 59.2 percent of the Dade Hispanic population of all ages. Cubans also account for about 40 percent of the total population 60 years and over in Dade County.

Support ratios for the Cuban origin population of Dade also reflect an older age structure (Table 9). The total support ratio is 64. But while for the Cuban population on the island, youth support accounts for most of the support ratio, in Dade County the elderly support ratio (32) equals the youth support ratio (32).

| TABLE 9 Cuban Populations Support Ratios in Dade County 1990 | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|--------------------------------|---------------------------|
| Total ^a | All Elders ^b | Oldest Old ^c | Youth ^d |
| 64 | 32 | 21 | 32 |
| ^a The total support ratio is the number of persons 0-19 years and 65 years and over per 100 persons 20 to 64 years. ^b The Elderly support ratio is the number of persons 65 and over per 100 persons 20 to 64 years. ^c The Oldest Old support ratio is the number of persons 80 years and over per 100 persons 65 years and over. ^d The youth support ratio is the number of persons 1 to 19 years per 100 persons 20 to 64 years. | | | |

(Source: Estimate derived from 5% Public Use Micro Data Sample (PUMS), US Census, 1990.)

Within the Cuban origin population 65 years old and over, males account for 41.1 percent and females 58.9 percent of the total (Chart 6, Appendix A). Of the males in this age bracket, 28 percent are employed (Table 10). Among the Cuban origin females 65 years old and over, 9.3 percent report being employed.

| TABLE 10 Cuban Labor Force Participation Rates in Dade County Persons 60 and Over 1990 | | |
|-----------------------------------------------------------------------------------------------------------------------------|----------------|------------------|
| | Men (%) | Women (%) |
| 60 to 64 years | 75.3 | 46.2 |
| 65 years and over | 28 | 9.3 |

(Source: Estimate derived from 5% Public Use Micro Data Sample (PUMS), US Census, 1990.)

The majority of Cuban elders in Dade County have been here for fifteen years or longer (Table 11). About 67 percent of Cuban origin elders living in the county in 1990 arrived here between 1960 and 1975. Indeed, more than half (52.9 percent) came in the 1960s. An additional 14.5 percent came in the period 1970-1974. After the end

of the freedom flights in the late-1970s, the number of arrivals diminished sharply. As a result, only 4.5 percent of Cuban living in Dade County in 1990 came here in the period 1975-1979. The Mariel boat lift brought a substantial number of elders, although refugees from the Mariel wave on the whole were younger than Cuban arrivals from earlier waves. In all, 15.8 percent of Cuban elders residing in Dade County in 1990 had arrived in the 1980s.

TABLE 11
Elder Cuban Population in Dade County
Percent Distribution by Year of Entry and Age Cohort

| | 60-64 | 65-74 | 75-84 | 85 and over | Total |
|----------------|--------|--------|--------|-------------|--------|
| 1987 - 1990 | 3.0 | 3.9 | 2.5 | 1.8 | 3.2 |
| 1985 - 1986 | 1.9 | 1.7 | 1.6 | 1.6 | 1.7 |
| 1982 - 1984 | 2.3 | 2.1 | 1.6 | 3.1 | 2.1 |
| 1980 - 1981 | 8.6 | 9.5 | 8.5 | 6.5 | 8.8 |
| 1975 - 1979 | 2.7 | 4.1 | 6.2 | 7.6 | 4.5 |
| 1970 - 1974 | 15.31 | 12.6 | 15.7 | 21.2 | 14.5 |
| 1965 - 1964 | 26.5 | 24.8 | 26.6 | 27.7 | 25.9 |
| 1960 - 1964 | 26.3 | 28.8 | 26.5 | 19.6 | 27.0 |
| 1950-1959 | 9.6 | 8.6 | 6.3 | 5.1 | 8.1 |
| Before 1950 | 3.0 | 3.1 | 3.5 | 5.4 | 3.3 |
| Born in the US | 0.9 | 0.8 | 0.9 | 0.4 | 0.8 |
| | 100.0% | 100.0% | 100.0% | 100.0% | 100.8% |

(Source: Estimate derived from 5% Public Use Micro Data Sample (PUMS), US Census, 1990.)

Over 50 percent of Cuban elders in Dade have completed 8 years of schooling or more (Chart 7, Appendix A). Most are married, but 42 percent are widowed, divorced, separated or never married (Chart 8, Appendix A). The majority (56 percent) are not U.S. citizens, while 40 percent are naturalized citizens (Chart 9, Appendix A).

The vast majority of Cuban elders live with a spouse, family, or alone. Fewer than 2 percent of Cuban elders are institutionalized or live in group quarters, according to data from the 1990 Census. Among elders living in the community, about 15 percent reported having personal care limitations and 17.3 percent reported limitations with mobility. Some 26 percent said they have some limitation in the kind and/or amount of work they can perform, and 22 percent were actually prevented from working by a disability (Table 12).

| | Personal Care Limitations | Mobility Limitation | Prevented from Work | Limited in Kind or Amount of Work |
|-------------|------------------------------------------|--------------------------------|--------------------------------|--------------------------------------------------|
| 60-64 | 9.3 | 7.8 | 12.2 | 16.1 |
| 65-74 | 12.2 | 11.9 | 17.5 | 20.7 |
| 75-84 | 19.6 | 26.5 | 33.1 | 35.6 |
| 85 and over | 43.1 | 58.1 | 55.87 | 59.5 |
| Total 60+ | 15.2 | 17.3 | 22.3 | 25.6 |

(Source: Estimate derived from 5% Public Use Micro Data Sample (PUMS), US Census, 1990.

Impairment projections for Florida's older population (60 years and older) given in Aging 2000: Projecting the Needs of Florida's Older Population to the Years 1995 and 2000, show that 72.5 of older Floridians have little or no impairment; this figure is close to the 74 percent of Cuban elders who do not report having an impairment.

III.2 LHANC ROLE IN THE SOCIAL AND HEALTH SERVICES NETWORK IN DADE COUNTY

Little Havana Activities and Nutrition Centers, Inc. provides services to about one-third of all Cuban elders residing in Dade County. These services are provided by a total agency staff of 175 of which 130 are persons 60 or over. Over half of the staff

are part-time employees and are assisted by a volunteer corps of 566 who provide an annual donated services dollar value of \$415,000. Most of the agency's funding is derived through government grants (Federal [55 percent], State [25 percent], and Local [5 percent]); of the remaining funds, 15 percent are received through United Way, participant contributions, private donations and fund raising efforts. LHANC consists of a network of sites and centers located throughout the County providing:

- 16 Senior Activities and Nutrition Centers serving 3,200 persons daily;
- 3 Adult Day Health Care Centers serving over 100 frail elders;
- 2 Intergenerational Child Day Care Centers serving over 105 children from working poor families; and
- 1 Primary Health Care Center and Medi Van serving over 50 medically needy individuals daily.

LHANC is one of a number of focal points serving elders throughout Dade County. LHANC's social services department works in coordination with state and local agencies to assure that clients receive information and assistance in obtaining entitlements such as SSI, food stamps, Medicaid, legal services, etc. When these clients are no longer able to remain independent, the social work department refers them and coordinates with community-based long term care programs, foster homes, ACLFs, nursing homes and hospitals to insure appropriate placement. At the Center, elders receive meals, counseling, education, health risk assessment and screening, nutrition education, social and recreational activities, information and referral, employment and volunteer opportunities, and transportation.

Although Dade County is rich in variety of programs, these programs are often overwhelmed with long waiting lists. Access and availability of services are often serious obstacles for elders who are unfamiliar with the system and who for the most part do not speak English. The Southeast Florida Center on Aging is presently conducting a comprehensive needs assessment of elders in Dade County. This survey will be completed by the spring of 1994 and will provide additional information

regarding the needs of Cuban elders in the County. Until this information is available, a brief overview of three shorter needs assessments undertaken in 1993 will illustrate the need for expanding service capacity in order to meet the needs of current elder population. Any influx of elders into Dade County will meet with an already overburdened system.

III.3 DADE COUNTY NEEDS ASSESSMENTS

(1) Priority and Accessibility of Services for Elders in Dade County and Its Ten Service and Planning Areas: A Survey of Key Informants (1992). Burton D. Dunlop, Ph.D. and Donna J. Munroe, Ph.D., R.N. Miami: Southeast Florida Center on Aging, Florida International University.

The Alliance for Aging conducted a key informants survey of the service needs of the age 60 plus population in Dade County to help it shape its resource and planning priorities. One hundred and sixty nine persons responded to the survey. Six key services were identified as being inaccessible. The following table indicates the proportion of responses to reasons for inaccessibility of the six key services by reasons given.

| Service | Waiting List | Not Avail | Costly | No Trans | Other |
|---------------------------------------|---------------------|------------------|---------------|-----------------|--------------|
| Homemaker | 52 | 11 | 16 | 0 | 21 |
| Subsidized Independent Housing | 64 | 17 | 2 | 0 | 17 |
| Adult Day Care | 30 | 27 | 9 | 11 | 23 |
| Personal Care | 49 | 14 | 21 | 0 | 16 |
| Assistance Obtaining Benefits | 15 | 28 | 2 | 11 | 43 |
| Grocery Shopping Assistance | 32 | 22 | 6 | 18 | 22 |

(2) The Elders of North Dade: A Pilot Needs Assessment of Persons 60 and Over in Three Planning Sub-Areas (1993). Burton D. Dunlop, Ph.D., Katherine M. Condon, M.A., and Max B. Rothman, J.D.

This study relied principally on a telephone survey of representative samples of elders with listed telephone numbers residing in three north Dade County Planning Sub-areas: 2,3, and 4.

Significant proportions of elders surveyed indicated they have very serious or somewhat serious concerns with five potential problem areas: fear of crime, health, money, personal/family stress and loneliness.

(3) Elders of Coral Gables A Needs Assessment of Persons 65 and Over (1993). Max B. Rothman, J.D., Burton D. Dunlop, Ph.D., Katherine M. Condon, M.A., and Patricia McGovern, M.A.

In a telephone survey of a representative sample of elders with listed telephone numbers in Coral Gables significant proportions of elders indicated they have very serious or somewhat serious concerns with four potential problem areas:

| | |
|-------------------------------|------------|
| Fear of Crime | 45 percent |
| Health | 30 percent |
| Money/Finances | 24 percent |
| Personal/Family Stress | 16 percent |

These surveys were conducted for purposes of obtaining data for planning and coordination of services. Each of the needs assessments targets a different geographic area of the County with different socio-economic and ethnic mix, however a common thread running throughout each of the studies is a list of serious or somewhat serious concerns with lack of information about services frequently mentioned as a significant barrier to elders who need services.

In summary, current demographic realities and trends mean that issues of aging are important for Cubans on both sides of the Straits of Florida, and they tend to

become more important over time. For Cubans in Miami, the importance of issues of aging can be inferred from the fact that the Cuban population of South Florida contains a higher percentage of elders than the population of any country in the world. Short and Long-term plans for meeting the needs of Cuban elders must take into account the already taxed formal and informal system of caregivers and provide sufficient funding for expanding services at all levels.

CHAPTER IV CONCLUSIONS AND RECOMMENDATIONS

In this chapter we will summarize the key findings in this Report, and make a series of preliminary recommendations for LHANC's plan for meeting the needs of older Cubans both in Dade County and in Cuba. Conclusions and recommendations are presented under two headings: 1) Three Migration Scenarios; and 2) Impact on Cuban Elders both in Cuba and in Dade County.

IV.1 THREE MIGRATION SCENARIOS: REALITY AND PROJECTIONS

The migration of Cubans to the United States since 1959 has been remarkable in its age structure. Typically, international migrants are relatively young. In contrast, elders have been over-represented in the post-Castro exodus to the United States. As a result, the age structure of the Cuban origin population and of South Florida is older than that of any country in the world.

At least two reasons can be cited for this phenomenon, in order of importance:

- For decades, the Cuban government made it difficult or impossible for young people to emigrate, especially males of military age, while virtually facilitating the emigration of adults and elders.
- Since the establishment of the Cuban Refugee Assistance Program in 1960 and, later, the Cuban Adjustment of 1966, Cubans coming to the United States who were not able to participate in the labor market because of

advanced aged have been eligible to receive government-provided income support and medical care.

Despite the fact that few elders arrive in Florida through the most dramatic method, rafting across the water, in the current period elders continue to come here in significant numbers. In 1993, about 27,000 Cubans entered the U.S. on tourist visas (Chart 10, Appendix A); down from about 50,000 two years ago, as U.S. authorities have tightened the criteria for granting such visas to reduce the number of overstayers.⁹ An unknown but significant number of these intend to remain here permanently, including a substantial number of elders. A significant number of elders also arrive among the approximately 3,000 refugees allowed entry annually. Others arrive as immigrants sponsored by relatives in the United States. In 1993, about 3,881 Cubans arrived by raft or boat¹⁰ (Chart 11, Appendix A).

What are the prospects for the future vis-a-vis the emigration of Cuban elders into the U.S. and South Florida? What impact will political changes in Cuba have on elders, both in Cuba and in Dade County?

Over nine different scenarios have been presented by the authors of the studies and plans reviewed in Chapter I of this Report. Each of these scenarios takes into account a number of economic and political variables. However, for the purposes of this report, we are assuming that the following scenarios are the three most likely to occur: 1) status-quo or more of the same with continued, protracted migration, 2) a

second Mariel with or without violent rupture, or 3) violent rupture but no new Mariel. Each scenario will be followed by an assessment of its potential impact on LHANC.

Scenario 1 : Status-quo or More of the Same with Continued, Protracted Migration.

Description: This scenario assumes the continuation of tight, repressive government control of politics, opening to foreign investment, booming illegal markets, erosion of respect for law, legalization of the dollar, and persistent economic decline.

Role of external factors: The present U.S. immigration policy and the economic embargo will continue.

Effect on South Florida's health/social services network: In general this scenario will not bring major changes to South Florida. One would expect that elders will continue to arrive in substantial numbers, with perhaps some increase, but there probably will not be a new, massive migration of elders. As the Cuban economy and safety net deteriorates, one would expect that more elders would want to come to the U.S. In the immediate future, however, this will not necessarily result in a massive increase in the immigration of elders. On the contrary, the major route open to most Cuban elders, tourist visa overstays, has been tightened by the U.S. Alternate routes, including rafting, swimming into the U.S. Naval base in Guantanamo, commandeering vessels and aircraft, and entering without inspection through the Mexican border, generally are not undertaken by elders, for evident reasons.

Under this scenario, elders with family members in Cuba continue to experience high levels of stress and anxiety as the condition on the island continues to deteriorate and the health and well-being of their relatives are increasingly compromised.

Recommendations

1. Nutrition screening and comprehensive health assessments of clients should be increased to prevent malnutrition and severe medical crises.

Since a large percentage of LHANC's participants have relatives in Cuba, it is probable that a percentage of their "money to buy food and medicine" may be used to help their relatives survive the present crisis. A prolonged period of "more of the same" in Cuba could have an impact on the nutrition status, mental health and well-being of Cuban elders in Dade County.

2. Recruit volunteer psychiatrists and psychologists to provide participants with relatives in Cuba mental health services and crisis intervention through Pro-Salud.
3. Meaningful and productive activities, preferably within an intergenerational environment, should be established as a priority for helping Cuban elders survive this prolonged period of crisis. The need to feel productive and useful is reported as being very important to Cuban elders, second only to a comprehensive mental health program.
4. Develop an outreach program targeted to Cuban elders visiting from the island. A comprehensive functional evaluation would provide important data to document the health status of elders in Cuba and help the agency plan for relief efforts at the time of a free Cuba.
5. Plan a series of focus groups with newly-arrived professionals and caregivers to document the changes occurring within the social/health care system in Cuba.

Scenario 2: A New Mariel With or Without Violent Rupture

Description: This scenario would involve a sudden, dramatic event in Cuba, either a second Mariel-type event as a political safety valve, a civil war, or the overthrow of the regime. Outcomes under these kinds of scenarios are difficult if not impossible to predict.

Role of external factors: While the eventuality of a mass emigration, including a substantial number of elders, cannot be excluded and requires contingency planning, there are important factors that militate against this. U.S. policymakers appear to be determined to: (a) deny the Cuban government the use of mass emigration as a political and economic escape valve; and (b) prevent mass, uncontrolled immigration, as in Mariel, in order to prevent a domestic political debacle for the current Administration and a major fiscal impact on U.S. taxpayers.

Effect on South Florida's health/social services network: In the event of a mass migration, one would predict, judging by Mariel, that a substantial number of elders would come simply as a result of the size of the migration. However, one might expect proportionately fewer than historically have come through more normal routes, given the physical hardships and risks likely to be associated with such unplanned departures.

Under this scenario the North-South Center Study and the Governor's Commission Report address the potential impact on federal agencies such as FEMA and INS and on state and county programs such as Public Health, Law Enforcement and Public Safety, Transportation, Education and Housing. In fact, the North-South Center projects a total cost over a five-year period of \$1.036 million. However, it is worth noting that the authors of this report calculate that approximately two-thirds of this figure would be needed for public school education.

Recommendations

1. LHANC needs to coordinate with Federal, State and County agencies to assure its role at the initial point of entry to screen and triage services for older persons. This is essential because emergency plans developed by these agencies for responding to a massive migration from Cuba do not address the specific needs of elders.
2. LHANC should train professional staff and volunteers to handle screening and triage efforts at the point of entry and prepare for data collection

concerning all aspects of newly-arrived Cuban elders to help LHANC plan for their future needs.

3. Identify plans and funding for the development and financing of these plans prior to the moment of crisis.
4. Develop and maintain a nutritional assessment and malnutrition treatment center for newly-arrived elders.
5. Identify potential foster homes or "shared housing" arrangements to provide immediate shelter to the most vulnerable elders.
6. Prepare and distribute to participants information regarding what to do in case of a Cuba-related crisis. This information should include the agency's basic plan for providing information and services to clients.
7. Develop and distribute mass media public education materials designed to recruit older persons as volunteers in the event of a massive immigration from Cuba.
8. Train peer support group leaders in each Senior Center to help participants deal with questions and decisions regarding everyday life in a time of crisis.
9. Seek funding for respite care and home care for elders most affected by the period of crisis.

Scenario 3: Violent Rupture Without a New Mariel

Description: This scenario assumes that the status-quo or more of the same strategy fails and political change in Cuba comes about by a violent rupture with the present regime. In this scenario we expect prolonged community celebrations, influx of Cuban-Americans from within the U.S. into South Florida, and a limited and protracted migration from Cuba.

Role of external factors: A violent overthrow could well lead to a large outflow of Cubans wanting to leave the island and many relatives in the U.S. may attempt to

extract family and friends from the island. However, we believe that the U.S. may well block such attempts; and with the cooperation of neither the Cuban government nor the U.S., the personal risk of leaving the island or retrieving family from the island may well be quite high.

Effect on South Florida's health/social services network: Under this scenario the County plan, which addresses the first 48 hours following political change in Cuba, anticipates that large numbers of persons will either congregate or try to communicate to share information and celebrate. This would result in rapid increases of telephone usage, traffic congestion and/or blockages, large-scale caravanning, activation of pre-designated celebration sites, increased absenteeism at work places and schools, a national and international media influx, and heightened ethnic tensions. The County plan also anticipates increased demand for fire/rescue services in response to auto accidents, aerial discharge of firearms, and high stress level in older Cubans.

Based on these assumptions, the County's contingency plan will execute functional responses to unfolding events under the direction of the County Manager (or his designee) from the County Emergency Operations Center. Maximum security procedures would be implemented, all liaisons relative to the plan would be notified, and operations would be coordinated with municipalities, key officials, and other local, state, and federal agencies. Law enforcement agencies will provide security, crowd, and traffic control and responses to specific jurisdictions have been developed by Metro-Dade, Miami, and Hialeah police. Fire-rescue operations interagency communications, and mutual aid provisions routinely provided between the jurisdictions of Metro-Dade, Miami, Hialeah, Miami Beach, and Coral Gables would continue; and Metro-Dade, Miami, and Hialeah Fire Departments have developed specific plans in support of the overall County plan. The Office of Community Affairs will provide information regarding impact and community response to events in Cuba. The Office of Communications staff would be deployed to meet media needs and ensure the provision of adequate information to the public through the media. Also, rumor control

would be activated to respond to inquiries about local events and County services. The Dade County Aviation Department has extensive plans developed in coordination with INS and US Customs to accommodate any increases in passenger traffic to and from Cuba. Pre-designated sites for celebrating crowds include the Orange Bowl and Tamiami Park.

Recommendations

1. Create an emergency preparedness plan for events related to a prolonged community celebration.
2. Review subcontractors' plans to assure they have an emergency preparedness plan suited for the eventuality of a prolonged community celebration.
3. Prepare and distribute to participants information regarding the agency's plan in the event of community celebrations at the time of the overthrow of Castro.
4. Develop and plan activities for older volunteers to assist in the managing, processing and/or delivering of relief efforts for the island.
5. Develop inter-agency agreements with other agencies in the aging network to provide back-up support for delivering meals and transporting volunteers to outreach sites.
6. Design and plan implementation for an Information Clearinghouse Center for elders with special needs, including those who are hearing impaired and those who may become anxious and confused by conflicting news, rumors and lack of information.
7. Develop a plan for networking with gerontological and geriatric professionals on the island to coordinate and deliver relief efforts to the "Circulos de abuelos," Adult Day Care Centers, Nursing Homes and family doctors.

8. Seek funding for the purchase and delivery of nutritional supplements, vitamins, medical supplies, assistive devices, medicines, recyclable undergarments, and basic supplies such as bedding, towels and utensils for nursing homes and hospitals.

IV. 2 IMPACT ON CUBAN ELDERS BOTH IN CUBA AND IN DADE COUNTY: CONCLUSIONS AND RECOMMENDATIONS

1. **While numerous studies have been conducted projecting the nature and consequences of the end of communism in Cuba, no study has been made on the impact of a transition on elders, a major sector of the population in Cuba and in Dade County.**

Recommendation: LHANC in collaboration with the Southeast Florida Center on Aging should seek funding for a comprehensive assessment of the health, mental health and social services needs of recently-arrived elders.

2. **While there is no consensus on the when or how of the political changes on the island, many observers expect that recovery will take a long time. This would imply that even assuming an early demise of the regime, conditions still would not allow for a large-scale return of elders from Miami to Havana for many years.**

Recommendation: LHANC should develop a comprehensive short-and long-term mental health program, led by a professional staff of psychiatrists and psychologists, to provide LHANC participants with crisis intervention, counseling and information in anticipation of--and during the period of-- political changes in Cuba.

3. **The age distribution of Cuba resembles that of a developed country with the economic resources of an underdeveloped country in acute crisis. In 1990, it is estimated that the retirement age population in Cuba reached the million and a half mark.**

Recommendation: The impact of a political change in Cuba on an aging society, the role of older persons in the reconstruction of the Cuban economy, and in the reorganization of society and the family should be further studied and integrated into future analyses and plans.

4. **The nutritional situation of Cuban elders is severe, deteriorating, and would pose a challenge during any transition.**

Recommendation: All persons over the age of 60 arriving from Cuba should be screened for malnutrition and treated according to need. Information regarding the impact of "the special period" on the health of elders should be publicized and communicated to international relief agencies.

END NOTES

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4. Mesa-Lago, Carmelo. "The Social Safety Net in the Two Cuban Transitions," in *Cuba in Transition*, p. 627.
5. Mesa-Lago, p. 637.
6. Mesa-Lago, p. 647.
7. Mesa-Lago, p. 647.
8. U.S. Bureau of the Census. 1990 Census of Population. Persons of Hispanic Origin in the United States. Washington, D.C., 1993
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