

Title

**SOCIAL PROTECTION IN LATIN AMERICA, A DESCRIPTION OF EIGHT COUNTRIES.**

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## **SOCIAL PROTECTION IN LATIN AMERICA, A DESCRIPTION OF EIGHT COUNTRIES.**

### **INTRODUCTION**

The rapid ageing of the population in the Latin America and the Caribbean Region (3.77%) poses important challenges as the region continues to be the most inequitable of the world. Families and the society will face new challenges, such as: (i) the ageing index; (ii) the dependency ratio; and (iii) the demographic window of opportunities. The ageing process in LAC will not happen at the same rhythm in all countries, and the age structure of a given country might raise the pressure of social protection programs, shape governmental investment in education and health, and public and private savings.

As the Montevideo consensus on population and development states, it is important to understand the economic and social transformation related to the age structure generated by demographic and epidemiological transitions. Policymakers need to understand population dynamics in order to effectively create a plan that allows countries to satisfy the needs of the population and enable people to fully exercise their rights.

### **METHODOLOGY**

This is a descriptive secondary analysis summarizing the situation and the progress related to ageing and the rights of the elders in eight Latin American countries. The sources of information were the narrative reports and excel templates summarizing qualitative, and quantitative data of eight countries, prepared by the United Nations Population Fund (UNFPA) country offices to inform the discussions at the Global Symposium on Ageing, Seoul 2017.

### **RESULTS**

The profile of older persons in Latin America and the Caribbean. There are three different profiles identified in the LAC region: the population of the first group of countries is considered young, at the initial phases of the demographic and epidemiological transition, countries as Bolivia, Guatemala, Haiti and Honduras are included. The second group of countries, Brazil, Colombia, Peru, and Dominican Republic are included, are at intermediate level of transition, and the total fertility rate and the death rate are declining, but still a large number of young population. The third group of countries are aged societies, very advanced in the demographic transition, with fertility rates below replacement levels, such countries are Cuba, Uruguay and Costa Rica.

### **CONCLUSIONS**

Based on the three profiles the paper summarizes the existing programs and initiatives related to poverty, social protection and participation of ageing adults in working spaces, as well as recommend interventions to mitigate the impact of ageing societies in social, economic and inclusive development.

**Key words:** Ageing, Demographic transition, Social Development, Development, Pension, Ageing adult in the workplace

## INTRODUCTION

In Latin America and the Caribbean (LAC) the growth rate of the population 60 years or older is greater (3.77%) than expected at the global level (3%) during the period of 2015-2020 (United Nations, Department of Economic and Social Affairs, Population Division, 2015). This rapid ageing of the population of LAC poses important challenges as the region continues to be the most inequitable of the world and has not reached the human development indexes achieved by other regions with similar ageing levels.

As a result of the decreasing mortality rates (BID/CEPAL/CELADE) the life expectancy is increasing in LAC. This poses new challenges to families and to societies in several aspects, such as: (i) the ageing index, which refers to number of individuals aged 65 and older correlated to the number of individuals aged 15 and younger; (ii) the dependency ratio of the ageing population. In other words, the number of people of working age corresponding to each elderly person; and (iii) the demographic window of opportunities, that measures the time in which the percentage of population in productive age (15 to 64 years) is greater than the percentage of the population in non-working age (0 to 14 plus 65 and older). Considering these factors, there are three distinguishable scenarios among the LAC countries (Table 1).

TABLE 1  
DEMOGRAPHIC TRANSITION IN LAC

	Demographic Transition		
	I	II	III
Global Fertility Rate	↑↑	↑	↓
Death Rate	↑	↑	↓
Life Expectancy	↓	↑	↑
Countries	Bolivia Guatemala Honduras Haiti	Brazil Colombia Peru Dominican Republic	Cuba Uruguay Costa Rica

Source: UNFPA – LACRO

The ageing process in LAC will not happen at the same rhythm in all countries. It depends on the stage of demographic transition in which they find themselves (Table 1). Changes in the age structure of a given country might raise the pressure of social protection programs, shape governmental investment in education and health, and public and private savings. Policymakers need to understand population dynamics in order to effectively create a plan that allows countries to satisfy the needs of the population and enable people to fully exercise their rights.

The Madrid International Plan of Action on Ageing of 2002 and the Charter of San Jose highlight older persons as right-holders who have contributed to development, and should be included in the formulation of policies related to ageing. The Montevideo consensus on population and development considers the epidemiological profile of the LAC region as heterogeneous, with different overlapping stages, and promotes the inclusion of population dynamics into public policy. The demographic context of LAC countries should be considered when public policies are being designed and implemented, taking into account the life course perspective approach, boosting the social and economic contributions of young people and women in the context of an ageing society. A comprehensive public policies approach in light of the ageing process is needed.

**METHODOLOGY**

This is a descriptive secondary analysis summarizing the situation and the progress related to ageing and the rights of the elders in eight Latin American countries (Table 2). Using as a framework, the Madrid International Plan of Action on Ageing of 2002 and the Charter of San Jose, which was adopted during the Latin America Regional Intergovernmental Conference on Ageing that took place in 2012.

The sources of information were the narrative reports and excel templates summarizing qualitative, and quantitative data of the countries, prepared by the United Nations Population Fund (UNFPA) country offices to inform the discussions at the Global Symposium on Ageing, Seoul 2017. In Latin America and the Caribbean, UNFPA relies on a network of experts across 22 countries as staff or consultants, many of which collaborated during the reporting process that took place 15 years after the adoption of the Madrid International Plan of Action.

TABLE 2

Countries
Bolivia
Brazil
Colombia
Costa Rica
Cuba
Mexico
Dominican Republic
Uruguay

Source: UNFPA – LACRO

## RESULTS

### **The profile of older persons in Latin America and the Caribbean**

Latin America and the Caribbean (LAC) maintains the tendency observed at a global level: the life expectancy from birth has increased by over 30 years (WHO, 2016), and in just one century (1950-2050) the number of persons 80 years or older will increase 26 times, going from 14 million to 379 million (Palloni & Souza, 2013).

Cuba is the country with the most aged population in LAC region (87.8 people aged 60 or more for every 100 people aged 15 years and under) (ONEI-CEPDE, 2015). This process of demographic ageing has occurred in less than 50 years and the only age group that is growing is the 60 years or older, and within that group, those 75 and older are the fastest growing group and are predominantly female (ONEI-CEPDE, 2015). In the year 2002, the percentage of the population of 60 years old or more was 14.7% (ONE, 2005); ten years later, the percentage was 18.3% (ONEI, 2014); while in 2015, it reached 19.4%. By 2030, 29.0% will be 60 years or more and by 2050, they will reach 33.2% (ONEI-CEPDE, 2015).

In the National Survey on Ageing in Cuba 2010-2011, as well as in the Population and Housing Survey of 2012, 12.6% of senior citizens were registered as living alone, a growing tendency that is expected to increase in upcoming years (ONEI-CEPDE, 2015).

*Uruguay* is the second most aged country in the region (INE, 2014), finding itself in an advanced stage of demographic transition and exhibiting a low fertility rate (1.9 children per woman), and a life expectancy of 77.7 years (74.1 for men 81.1 for women) (INE, 2012). At the same time, the country has experienced a long and deep process of international migration since the 1960's, more recently (Pellegrino, 2008) retired Uruguayans are returning to the country which increases the number of the population 65 and older. In 2015, 484.407 people were 65 years or more, which represents 14% of the total population (Cabella, 2015). In Uruguay the ageing index has shown an important intercensal growth, going from 51 in 1996 to 67 in 2015. Approximately one out of every three Uruguayan households holds an individual aged 65 years or more, and one out of every ten holds a person aged 80 years or more (INE, 2014).

Costa Rica has an ageing population; the estimated global fertility rate in 2015 was 1.8 children per woman and a life expectancy at birth of 77.4 years for men and 82.4 years for women (INEC, 2015). The population 65 years and older in 2000 was 5%, in 2011 it was 7% and it will increase up to 20% by 2050. It is estimated that by 2040 the ratio of the population of 65 years and over will be equal to the population of 15 years or less (INEC, 2016).

In Brazil, the most recent survey shows that in 2013, 14.1% of Brazilian women were 60 years or older, whereas men of the same age group represented 11.9% (IBGE, 2013). The population of people aged 60 years or more increased from 2% to 12% between 1960 and 2014 and has doubled in 34 years (6% in 1980 and 12% in 2014) (IBGE 2009). The age group with the highest growth rate is the group of 80 years and older.

Colombia finds itself in an advanced stage of demographic transition and a moderate stage of ageing. In 1985, 7% of the population were 60 years or older (5.2 million people), and by 2050 this age group will represent 23% of the population. The demographic structures of the country have been influenced by a decreasing infant mortality rate (16.5 deaths in every 1000 live births), a global fertility rate (2.2 children per woman in 2015) (MINSALUD, 2014), the life expectancy is currently 74 years (77 for women and 71 for men) (Dulcey-Ruiz, Arrubla & Sanabria, 2013), and migration, both internal (due to armed conflict) and external.

In Mexico, there were 10,195,818 elders in 2010 and by June 2016 there were 12,520,721 persons aged 60 or older, which means that this population group increased by 22.8% in a period of six years. Currently they represent 10.2% of the population (INEGI, 2011). For the year 2050, Mexico will have more than 32 million older persons nationwide. Life expectancy has been higher for women than for men: while in 1930 the statistics were 37.5 years for women and 36.1 for men, in the year 2016 it was 77.8 years for women and 72.6 years for men (Secretaría de Salud, 2011). In 2016, according to the population projections of CONAPO from 2010-2050, women of 60 years have a life expectancy of 22.9 years, whereas men have 20.9 years.

In the Dominican Republic, the ageing index in 2002 was 23.7 senior citizens for every 100 children aged 15 years and under (ONE, 2005), reaching an index of 43.7 in 2015. By 2025 the number is expected to increase up to 45 older persons for every 100 children 15 years and under (ONE, 2014). According to the 2002 population census, the percentage of people 60 or older was 8.0 (ONE, 2003), and in 2010 the percentage raised to 9.1, from which 51.4% were women (439,819) and 48.6% were men (415,844) (ONE, 2012). Life expectancy went from 71 years in 2002 to 71.8 years in 2010, with a projection of 74.2 years by 2025. Life expectancy for women is about 5 years higher than for men (ONE, 2015).

### **Coverage of the pension system**

The population dynamic of the LAC region is shifting the age structure of its population, and the dependents (children and ageing adults) are increasing at a faster pace than the adults of working ages, mainly due to older persons. The balance of the contributive systems depends on the age structures of the population, because it depends on the intergenerational solidarity to transfer quotas from the active economic population to the non-working population.

In Cuba, access to services and basic care, especially for ageing adults, are the cornerstones of the dignity and well-being of its citizens. Universal social security system and social assistance based on a method of contributions and distribution guarantee 100% coverage of social security, the system includes governmental businesses, and worker's contributions (including new forms of non-governmental work). Social security coverage is universal, including independent workers. Those who have not worked receive, if necessary, a non-contributive coverage from the Social Security System.

In Uruguay, there is a high level of social security coverage during retirement, in 2014, 83.8% of senior men and 62.2% of senior women were receiving retirement payments. At the same time, recent reforms adding flexible conditions to access retirement pensions is, without doubt, a substantial progress to ensure elders economic rights. The progressive and substantial increase in the amounts of retirements and pensions experienced in recent years also stands as an aspect that underlines the relationship of economic security of older people. Finally, the systems recognize the intermittent participation of women in the labor market, secondary to reproductive events, it computes one year of work per child in order for them to access retirement funds.

In Colombia, the Political Constitution established the Pensions General System with two modalities 1. A traditional distribution system with defined benefits (RPM) and 2. A system of individual capitalization for those who work in the formal sector of the economy (RAIS). At a national level, the pension coverage for ageing people is 23% (875,981 people), of whom 65% are men and 25% women. Coverage is five times higher in urban zones than in rural zones, a result of the high informality of labor in the rural zones. According to the survey of Quality of Life in 2015, 27% of the working population reported affiliation to a pension system and pays quotas for their retirement. 65% of the people are not affiliated because they do not have sufficient income or because they are unemployed. According to the OECD, 86% of the pension subsidies granted by the State is received by the wealthiest 20% of the population, and the lowest fifth of the population receives only 0.1% of these subsidies (OECD, 2015). In order to widen the financial security of ageing adults, the country relies upon various additional schemas: Voluntary and complementary savings system (for those who have capacity to save); as well as the Periodic Economic Benefits (BEPS), a mechanism of individual savings for the informal population complemented by a governmental subsidy of 20% to the individual savings. Last, there is a non-contributive pension program called the Ageing Colombia, which guarantees a minimum income for the most vulnerable elderly in the population. This provides coverage for 25% of the population aged 60 years or more (approximately 1,468,799 people) of whom 83% is older than 65 years living below the poverty line. The coverage consists of a direct economic subsidy, which matches approximately 10% of the minimum salary in Colombia, or a social services subsidy such as food, basic supplies, healthcare, etc.)

Mexico possesses a pension system created through the decree of May 23<sup>rd</sup> of 1996. The pension system includes workers affiliated to the Mexican Institute of Social Security (IMSS) and the ISSSTE. In the year 2010, only 26.4% of people aged 65 or more possessed a retirement fund or pension (SEDESOL, 2013:15). It should be emphasized that the people who work at the informal sector do not have access to the pensions systems. The accounts administered for the population of 60 years or more numbered 2,509,845, of which three out of four corresponded to men.

In the Dominican Republic, the system of individual capitalization was established in 2003, with 5,468 affiliated. Ten years later (2013) the total affiliation is 84,938 from which 60% corresponded

to old age, disability and survival<sup>1</sup>. There are three affiliation plans: (1) a contributive plan with programmed retirement; (2) a solidarity plan, which established a subsidized pension for those with incomes inferior to 50% of the minimum national wage<sup>2</sup>; (3) a contributive subsidized plan that contemplates those who were not able to complete the minimal pension of 300 month quota by age 65. The Protection Program for the Ageing in Extreme Poverty (PROVEE) stands out. It provided conditional transference to more 115,000 seniors in 2014<sup>3</sup>, through the "Solidarity" card.

In Bolivia, the Comprehensive System of Pensions is composed by three regimens of distribution: (1) the contributive, which refers to the payments of workers during their working life and can finance their retirement on their own; (2) the semi-contributive, that are those who paid different amounts during a fraction of their working life and require help from the Solidarity Fund to increase their incomes; and (3) the non-contributive, which applies to those who never participated in the system and receive, the majority of them, only the "Dignity Program", as a specific provision from the Plurinational State. The "Solidarity Fund" was created, to elevate the lowest contributions of workers, i.e the Elderly Solidarity Pension provided to the workers who have contributed at least 10 years so that they can reach the basic income. The retirement age is 55 for men and 50 for women. In accordance with the Households Survey of Bolivia from 2005, only one out of every five ageing adults receives a pension (UNFPA, 2007). And according to the survey of Ageing Adult (UPADE, 2013) senior citizens have a low coverage of pensions, only 10.7% of the retirees between 60-64 years have access to a pension and 16% of those aged 65 or more. The group less representative receiving a pension are women in rural areas (5%). The dignity Program is a universal benefit to increase the income of elders, and it represents Bs. 250 monthly (36.00 USD) if the person does not receive any pension, and Bs. 200 monthly (28.80 USD) for those who receive a retirement pension.

## **DISCUSSION**

The rapid ageing of the population in Latin America and the Caribbean is the result of science, technology, health and social protection successes; to the extent that the age group with the fastest growth is the 65 years and older. But in LAC, most of the older persons do not have access to retirement funds or pensions that allow them to have economic stability, especially those who didn't participate in the formal labor market or had an intermittent labor trajectory (especially women), it varies depending on the urban and rural distribution, as well as the situation of older women, which is the result of accumulated inequalities in the course of her life, especially related to unpaid work related to care and household activities.

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<sup>1</sup> National Bureau of Statistics. Demographic Ageing: Challenge to the System of Social Security in the Dominican Republic, March 2016.

<sup>2</sup> Presidency of the Dominican Republic, Decree 381-13. December 2013.

<sup>3</sup> CONAPE, Annual Memory, 2014. Dominican Republic.



One of the most important achievements of the countries has been the establishment of non-contributive pensions for older persons who would otherwise not have access to them because they worked primarily in the informal sector.

CEPAL (2010) has pointed out that countries could finance a minimum non-contributory pension, as long as future reforms are put in place to increase funding resources for social security considering the age structure of each country. They have proposed, as part of their agenda of equality, a tributary structure with redistributive effect for strengthening the role of public policy and, in this way, guaranteeing the thresholds of well-being.

## **CONCLUSIONS**

Longevity is an achievement of society that should be accompanied by the eradication of poverty, and financial stability of older persons in the region. Public policy, laws and programs need to generate opportunities for economic participation, addressing the challenges of an ageing population, focusing on human rights.

National policies should consider the challenges derived of the population dynamics of their population. This would help to identify the economic, social and human resources needed to guarantee access to social security and assistance to make development sustainable. This article summarizes areas of public policy intervention in contributive and non-contributive pensions based on three country profiles (Table 3).

The three country profiles should promote labor market and economic policies to prevent financial and social vulnerability in older persons. as well as promote voluntary savings, and develop programs of financial education from early ages in order to encourage savings and economic preparation of the population for their elderly years.

TABLE 3

MAIN RECOMMENDATIONS BY TYPOLOGY OF COUNTRY			
Topics	Advanced Ageing	Moderate Ageing	Oncoming Ageing
Contributive and non-contributive pensions	<ul style="list-style-type: none"> <li>● Increase coverage and equity of contributive and non-contributive pensions to reach all the elders.</li> <li>● Evaluate the value of the pensions so they allow older persons to live a life with dignity.</li> <li>● Consolidate the pensions derived from private schemes.</li> <li>● Promote individual savings</li> </ul>	<ul style="list-style-type: none"> <li>● Redesign the pension system in a way that allows them to include the population with the lowest incomes and the furthest behind.</li> <li>● Improve women's conditions so they can obtain a pension, reducing the gender differences in the retirement ages (such as, for example, providing a pension bonus that compensates for maternity and recognizing the weeks of coverage for each child that they have had like Uruguay has done)</li> <li>● Recognize the unpaid household work and caregivers, to which could be assigned a pension bonus.</li> </ul>	<ul style="list-style-type: none"> <li>● Widen the coverage and quality of the social protection systems, with inclusive, democratic and cohesive societies with clear parameters of intergenerational solidarity, decreasing the inequity and the intergenerational transmission of disadvantages, such as in the case of the Dignity PProgram in Bolivia.</li> <li>● To control the evasion of contributive payments into social security on the part of employees and employers who are already contributing to their vulnerability in later years.</li> </ul>

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