The situation of ageing in the Dominican Republic

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Abstract*.* This paper looks into the study titled "Misión Dominicana Envejece" which is considered as the first research effort in the Dominican Republic that comprehensively addresses old age and aging. The objective of this research was to enquire the situation of older people and the challenges faced with the change in the population structure associated with the aging of the country. The "Misión Dominicana Envejece" focused on six key aspects: demography; health; education and employment; savings and pensions; and migration. The methodology applied was a multi-method study with retrospective observation, evaluation and mixed quantitative and qualitative analysis, accompanied by: surveys carried out in the Dominican Republic, a database review, followed by primary and secondary analysi. For qualitative research, three main strategies were used: focus groups, case studies and in-depth interviews. These strategies are articulated with each other and triangulated with the quantitative results, strengthening their validity and reliability. The results show that the Dominican population aged 60 years and over by 2050 will reach 15.2% of the total and life expectancy will be 78 years for men and 82 years for women. The data represents challenges for the Dominican health and pension system, as well as chalenges related to education, employment, care among other issues related to the older adult population of the Dominican Republic.

Keywords*: population, ageing, older adults, households, health, education, employment, social security*

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Resumen. El estudio denominado "Misión Dominicana Envejece" es el primer trabajo de investigación en la República Dominicana que aborda la vejez y el envejecimiento de manera integral, El objetivo de esta investigación es conocer la situación de las personas mayores y evidenciar los desafíos ante el cambio de la estructura poblacional asociado al envejecimiento del país. La "Misión Dominicana Envejece" se enfoca en seis aspectos clave: Demografía, Salud, Educación y Empleo, Ahorro y Pensiones, y Migración. La metodología desarrollada fue un estudio multimétodo con observación retrospectiva, evaluación y análisis mixto cuantitativo y cualitativo, acompañado de encuestas realizadas en República Dominicana, revisión de bases de datos, análisis primarios y secundarios de las mismas. Para la investigación cualitativa se usarán tres estrategias principales: grupos focales, estudios de caso y entrevistas a profundidad. Estas estrategias se articularán entre sí y se triangularán con los resultados cuantitativos afianzando su validez y confiabilidad. Los resultados muestran que la población dominicana de 60 años o más para el 2050 alcanzará el 15.2% del total y la expectativa de vida será de 78 años para los hombres y 82 para las mujeres. Estos datos representan retos para el sistema de salud y pensional dominicano, así como los temas relacionados con la educación, el empleo, el cuidado y otros temas vinculados a la población adulta mayor de la República Dominicana, los cuales son abordados más ampliamente en cada capítulo.

Introduction

The demographic process in Latin America and the Caribbean marks a continuous trend towards the aging population. Despite the differences between countries in the region, in the last decades this region has experienced a considerable increase in the number of people aged 60 and over (Centro Latinoamericano y Caribeño de Demografía - CELADE, 2017). It is predicted that this will result in a change in the distribution between age groups in the population of the Latin American and Caribbean countries and will be characterized by the increase in life expectancy of individuals, greater relative weight of older persons within households and the shift of the age structure in society (Fundación Saldarriaga Concha, Fundación NTD Ingredientes, 2018).

It is stated that it is possible to identify three different expressions of population aging: (1) individual aging; that consist of the ageing process of each individual, (2) domestic aging; which is the increase in the proportion of people 60 years of age or older in households, and (3) demographic aging; which is the systematic increase in the relative weight of people 60 years or more over the total population. Each of the concepts stated mentions a process that includes repercussions and challenges.

The Dominican Republic is not unbeknownst to this reality. "Misión Dominicana Envejece", which means "Mission, The Dominican Republic is Aging", is the first national study which deals with aging and old age in a comprehensive manner. It focuses on six sections: demography; health; care; education and employment; savings and pensions; and migration. The objective of this research was to enquire the situation of older persons and to shed light on the challenges of the country's population structure when associated with aging (Flórez , Villar, Puerta, & Berrocal, 2015).

Method

This paper combines analysis methods trough a cross sectional design to describe the conditions of ageing in the Dominican Republic and explains the current situation of its older population. For the quantitative analysis, sociodemographic information databases available in the Dominican Republic were consulted. The qualitative analysis recurred to focus groups, case studies, and in-depth interviews. Quantitative data was described with relevant data for each section. Qualitative results were analyzed within each other and triangulated with quantitative results.

Results

Demographic Situation in the Dominican Republic

World population aging is a reality, in Latin America and the Caribbean, the population is going through a demographic transition due to accelerated aging (Fundación Saldarriaga Concha, Fundación NTD Ingredientes, 2018; United Nations CEPAL, 2014). According to the National Statistics Office 'ONE' (2013), the Dominican Republic is a country with a population of more than 10 million people.

The Dominican Republic, has witnessed a shift of its population aged over 60 years of age, from 2.7% in 1950 to 6.1% in 2015. It is estimated that by 2050 it will increase further by 15.2%. This increase in its older population implies challenges for the country in terms of guaranteeing access to health, work, pension, and decent wellbeing in older years (Fundación Saldarriaga Concha, Fundación NTD Ingredientes, 2018).

The main indicator of individual aging is the life expectancy of the population, both at birth and at specific years that people expect to live (Comisión Económica para América Latina y el Caribe (CEPAL), 2008). In the Dominican Republic, life expectancy is seen to increase over time, especially for women. While in 1960, the life expectancy at birth for men was approximately 46 years, for women, this stood at 49 years. In contrast, in 2020 it is expected that the life expectancy at birth is of 72 years for men and 78 for women, while by 2040 it will be approximately 78 for men and 82 for women (Fundación Saldarriaga Concha, Fundación NTD Ingredientes, 2018).

Demographic aging has implications for the structure of the population. The depiction of population as a pyramid shape is being transformed (ibid.). As can be seen in the figures 1 and 2, in the years 1950, 1985, and 2016, it is evident how the proportion of people over 40 years is increasing progressively while also having a decrease in the number of children under 14 years. This situation can be explained by the change in the fertility rate and the increase in the life expectancy of the population, generating a greater relative weight of adults in relation to younger people (ibid.).

Figure 1: Aging Demographic 1950
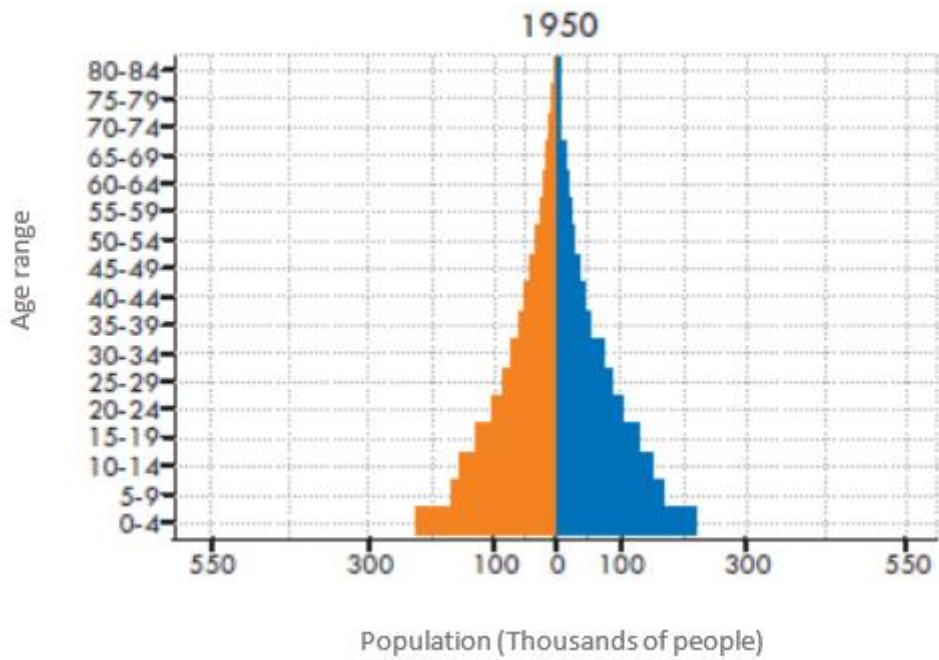
Source: Misión República Dominicana Envejece (2018).

Figure 2.: Aging Demographic 2050
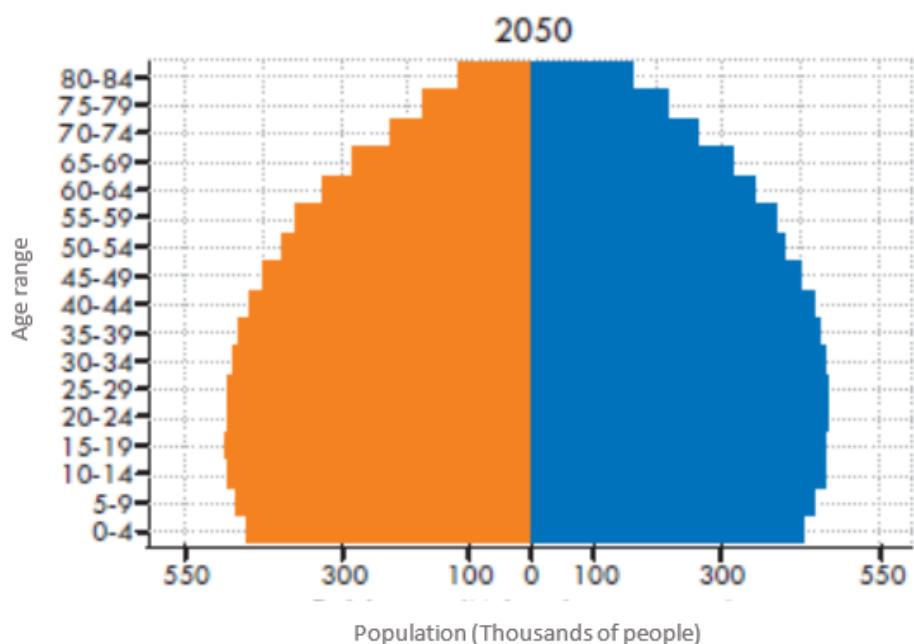
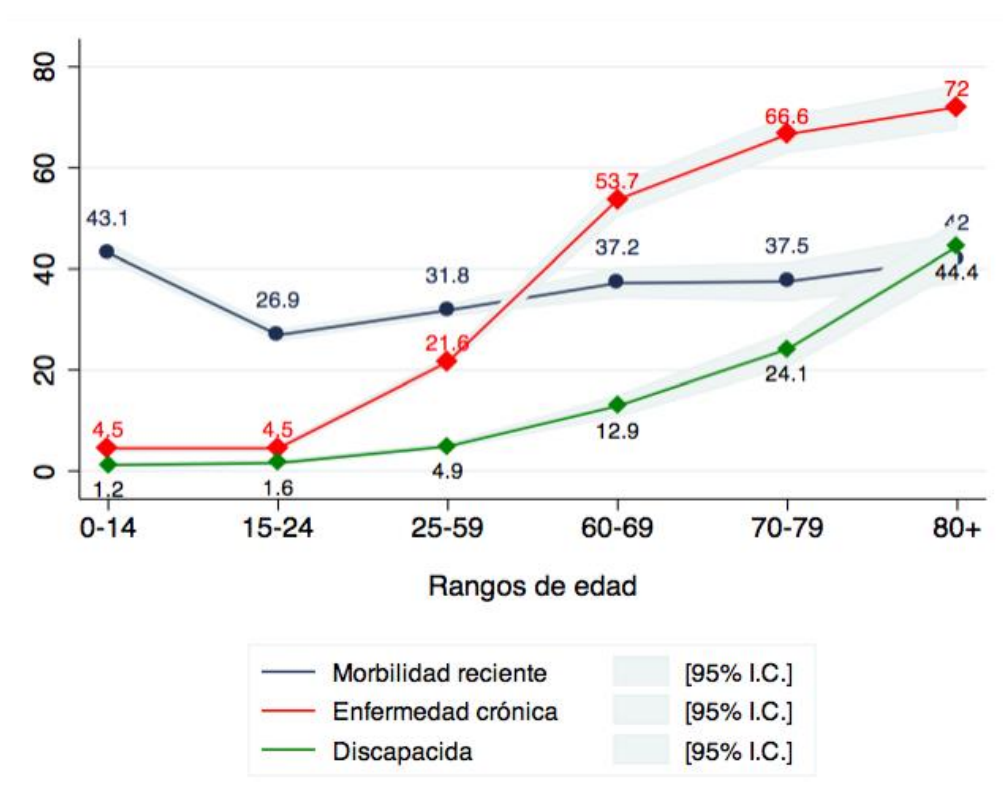*Source:* Misión República Dominicana Envejece (2018).

The country is going through a stage of demographic transition. During the five-year period between 2015-2020, the fertility rate is estimated at 2.38 children per woman, and the aging rate at the end of 2020 will be 26.7%. In 1950, the volume of the total Dominican population registered less than three million inhabitants and it is assumed to increase to 14 million by 2020. If this trend continues, by 2030, it is predicted that there will be no generational renewal due to the sustained decline in the fertility and mortality rates of the population (Fundación Saldarriaga Concha, Fundación NTD Ingredientes, 2018). Almost zero in population growth is expected by the year 2050. The adult population of 60 years old and over, will be the only portion of population with positive growth with approximately three million people (ibid.). Feminization of aging is another reality in the country due to a higher life expectancy of women, especially after 60, to 80 years. By 2040, life expectancy is assumed to be 82 years for women and 78 years for men (Fundación Saldarriaga Concha, Fundación NTD Ingredientes, 2018).

Challenges of the health system against old age and aging: The situation in the Dominican Republic.

In maintaining the health status and quality of life of older populations, presents challenges on a personal, economic, and social level. The challenges faced by the health system is at the level of prevention, promotion of healthy lifestyles, and care of chronic and noncommunicable diseases, where prevalence tends to increase with age (ibid.).

The morbidity and mortality in the country has experienced variations in recent years, which is associated with better health outcomes, a decrease in communicable or infectious diseases, such as tuberculosis, and also an increase in chronic noncommunicable diseases (ibid.). Among chronic diseases in people over 60, hypertension is the most common with a prevalence of 48% (36.3% in men and 60% in women), followed by diabetes (12.6% in men and 18.2% in women), arthritis (15.6% in men and 21.6% in women), cardiovascular disease (7.9% in men and 12.4% in women), kidney failure (4.8% in men and 3.1% in women) (ibid.). Recent and chronic morbidity and disability rates were estimated for all age groups. Chronic morbidity and disability rates are higher in advanced ages. From 0 to 14 years old 1.2% of the population has some form of disability, becoming as high as 44.4% for people 80 years and older. Chronic morbidity is present for 4,5% in the age group from 0 to 14 years and 72% for older people (80 years and over) (Figure 3).

**Figure 3.: Recent morbidity, chronic disease and disability rates bay age group**

Source: Misión República Dominicana Envejece (2018).

Figure 4 present data gathered from the 2015 World Health Organisation (WHO) mortality database and the 2016 National Survey of Demography and Health ENDESA (Social and Demographic Studies Centre (CESDEM), 2016), shows the mortality rate of the population from 1950 to 2050 (projection). Although mortality has lowered in all ages and both sexes,

children under 5 years and adults above 60 years have the highest chance of death. The probability of dying increases for both sexes from 10 years of age, and it's higher after the age of 60, decreasing for women than men (Figure 4).

Figure 4.: Mortality rates from 1950 to 2050 for all age groups and both sexes
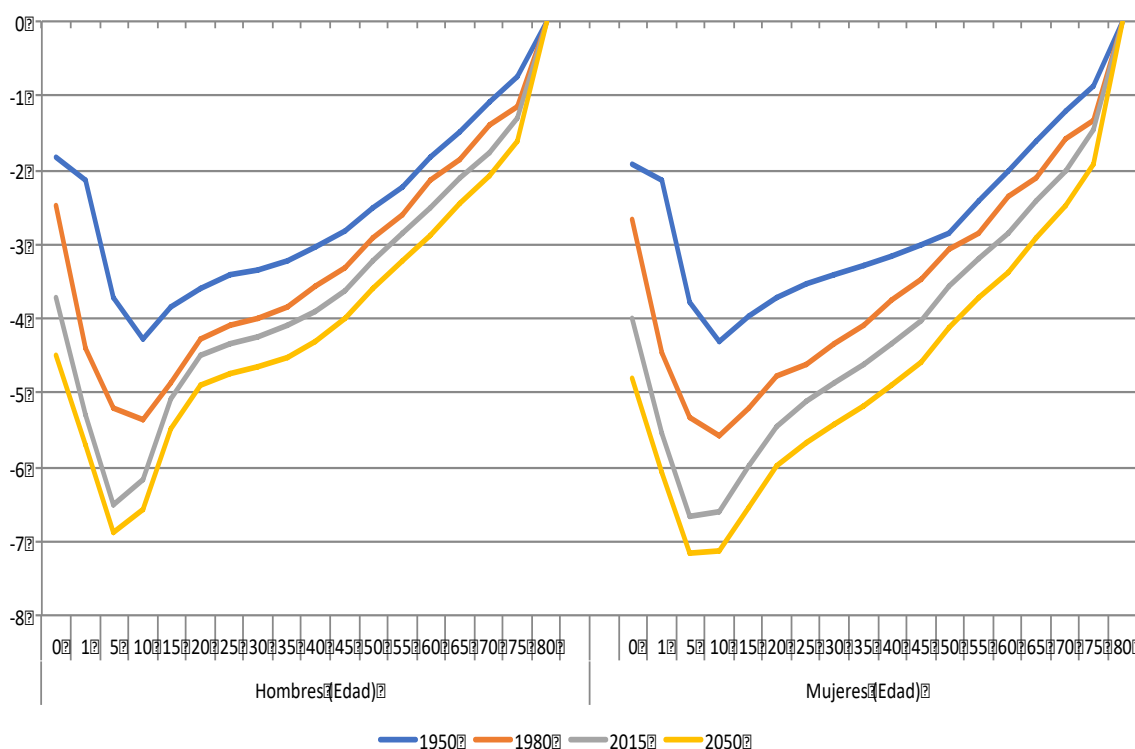
Source: Misión República Dominicana Envejece (2018).

The disability average in older persons is 23.5% (21.4% for men and 25.6% for women), which is greater than the prevalence in the population between 0 and 59 years, standing at 3%. This prevalence increases with age, from 12.9% in people between 60 and 69 years to 44.4% in people over 80 years. In turn, the prevalence of recent morbidity does not show such a marked growth with age, being 33% in people between 0 and 59 years old, and 39.5% in people 60 years or older. With regard to older persons who reported a recent morbidity, it should be noted that only 30% received some type of care for it (Fundación Saldarriaga Concha, Fundación NTD Ingredientes, 2018).

Insurance coverage within the health system has shown a significant increase in the last 10 years, from 28.1% for older persons in 2007, to 87.1% in 2016 (ibid.). No difference was shown in the percentage of affiliation between men and women.

The health expenditure for 22.4% of households was greater than 10% of total income; for 12.7% of households the expenditure was greater than 20%; and for 8% more than 30%. Belonging to a low socioeconomic level was associated with a higher percentage of health expenditure due to felt morbidity, when compared to high-income households (ibid).

Care and caregivers in the Dominican Republic

The Dominican Republic has initiatives both legal and institutional for the care of old persons, together with a broad legislative framework that favors care actions for its older population. However, it is stated that this still is not enough in covering the different aspects of care and response to caregivers (ibid.). Care still depends on families (traditional care arrangement). This caregiving role was also discussed during the focus groups, where the older persons themselves stated that this is considered as normal practice.

Data analysis showed that 12% of Dominican households consist of single parents and older adults. In addition, 23% are made up exclusively older adults headed households. Within this percentage, the 64.7% are single-person households (older person residing alone). This suggests a special household dynamic of older persons in the Dominican Republic: they usually live alone or with their partners. This is not a problem per se, however may imply a need for community care support.

Traditional gender care roles care continues being predominant in the Dominican Republic, according to qualitative data; it is the daughters who are the ones who take care of the grandparents (ibid.). The family then becomes the primary reference for the older person in order to receive care. There is poor knowledge about the options available for the care of older persons that are currently available by government and other institutions. All this suggests that, given the imminent increase that the population older than 60 years will experience, a phenomenon of overloading family care is expected in the midterm.

Education, employment and economic situation of older persons in the Dominican Republic

Education, employment, and the economic situation implies development challenges for countries. This section focuses on these important topics. Although in recent years, most of Latin America and the Caribbean countries have presented high rates of economic growth, it is also one of the regions with the highest levels of informality, in which case the low educational level of people has an important role (Fundación Saldarriaga Concha, Fundación NTD Ingredientes, 2018).

There is a high correlation between the level of education of a person and the chance of being employed (Bertranou, 2005). It was analyzed by the gross coverage rate, that is the percentage of individuals enrolled at a specific level of education (regardless of their age) over the total population with the appropriate age to pursue that level of education. It was found, according with the data of the Social indicator system (SISDOM, for its initials in spanish), the rate of lowest coverage is in initial education (preschool to 2nd degree) 32.9% and the highest in basic education (3rd degree to 5th degree) with 118.8% (ibid.). However, data shows that the highest gap occurs in higher education; also, the gross coverage rate for urban areas is 31.3 percental points higher than rural areas. By gender, it is women who have greater access to education with 58.9% whereas 33.2% for men. The higher participation of women in education system could contribute to solving inequities within the labor market, if there were no problems with labor discrimination against women (ibid.).

The education scene for older persons in the Dominican Republic differs from that of the general population. According to ENHOGAR surveillance data, illiteracy rates are higher and increase with age, which the higher incidence among people aged 70 years and over. With 20.6% in the urban areas and 34.1% for rural ones; in both cases illiteracy is greater for women (ibid.). This highlights the inequities in access to the education system from decades ago, since at the time the inaccessibility of education for women was more prevalent. In rural areas, 91% of the population of 70 or more only achieved basic or primary education, while in urban settings about 17% of people in the same age group achieved some access, at least, to high school (ibid.).

In relation to employment, the Dominican Republic presents very high figures in the informal economy. 2.3 million people worked in informality in 2016, according to figures from the Central Bank (2014). In the group of older people, according to that data, the development of the Global Participation Rate (GPR) is decreasing, being higher in the age group between 60 and 69 years, the rate has been decreasing since 2000 until 66.4% in 2016. Official data recorded in 2000, 2005, 2010 and 2016, show a decrease in participation for men aged 70-79, and especially for those who are 80 or older (ibid.). In 2016, the GPR of men aged 80 and over registered a GPR of 29.9%, 36.5 percental points less than men aged 60 to 69 in the same year. In the case of women 60 to 69 years, they registered a GPR of 22.5% while those of 80 and more years old, had a GPR of 7.0%, that is, 15.5 percental points below (ibid.). When comparing this difference between that registered by men, it is found that the GPR gap between women aged 60-69 and 80, is lower by 21 percental points than GPR of men at same ages (Fundación Saldarriaga Concha, Fundación NTD Ingredientes, 2018).

In terms of occupation, the highest occupancy rate (OR) within the group of older persons corresponds to people between 60 and 69 years (46.9%), with 23.5 percental points of difference with those between 70 and 79 years old, and 38.1 with people 80 and over. The wide differences show a significant fall in employment of older persons once they reach 70 years (ibid.).

According to the figures presented in the National Survey of Demography and Health (ENDESA for its Spanish acronym), Social and Demographic Studies Centre CESDEM (2016), the economic situation of older persons in the Dominican Republic through the analysis of their income indicates that 34.3% of people between 60 and 69 receive income only for their work, 34.8% only through family assistance, 7.8% for pensions and 23% through other sources of income. In the case of older persons located in the subgroup aged between 70 and 79 years, the relative weight of income accrued by the help of family members, only pension and other sources of income increases, while those whose income comes only for their work, decreases. The same dynamic is identified among people aged 80 and over, since 46.2% only receive income through the help of family members, 41.3% from other sources of income, 9.3% only from pensions and only 3.3% from work.

In terms of the amount of income of households with or without older persons, the data of ENDESA shows that the per capita income average of households with and without older persons is higher in urban areas than rural ones. On the other hand, in the larger households, the per capita income is higher than in the cities, in contrast to the reality of the rural area where it is the households without older persons who have a higher per capita income. However, it is important to keep in mind that the gaps are not too high (ibid.).

Savings and investment for old age

The Dominican social security system establishes a mixed benefit structure with individual contributions through a personal account and a solidarity component in favor of low-income workers and the population (Bosch, Melguizo, & Pagés, 2013). Likewise, there are some special regimes for pensions established prior to the social security law of 2001. The pension system is made up of three regimes: contributory pension, subsidized pension and subsidized-contributory pension. In all cases, the aim is to cover the adult over 60 with an old-age pension, total or partial disability, and survivor's pension (Fundación Saldarriaga Concha, Fundación NTD Ingredientes, 2018).

In 2014, only 2.9% of older persons that were in extreme poverty and 6.0% of older persons in conditions of moderate poverty are covered by a pension. 17.0% of the non-poor older adult is covered by a pension. These poverty differentials were smaller in 2000: 12.4% of the non-poor and 5.0% of the extreme poor had pension coverage, that is, the gap by level of poverty in pension coverage has increased in the last 15 years (ibid.).

This pension system achieved a coverage of 14.4% of the population over 60 years of age in 2014, a figure that is by far below the regional average in terms of pension coverage. Despite this, it is worth highlighting the reform carried out after the year 2000 in which the coverage of the groups did not depend on whether or not they were salaried. This notion favoured Dominican women in terms of equity, evidencing that the gap by sex has been declining. While in 2000 the coverage of men was 2.5 times that of women, by 2014 the gap decreased by 1.76. As of 2014, 61.9% of pensioners are men (ibid.). One of the differences to highlight on pensions between urban and rural areas, is that, while in the former a coverage of 18.5% is reached, in rural areas it is only 6.8%. These coverage levels indicate a difference of 11.7 percental points between the urban area and the rural one, thus demarcating the need to prioritize additional efforts in coverage for rural areas. In terms of differential coverage by population group according to poverty status, the analyzes show that in 2014 only 2.9% of older persons were in extreme poverty and 6.0% of older persons in moderate poverty, both of which were covered by some pension. 17.0% of the non-poor older adult is covered by a pension. These poverty differentials were smaller in 2000; 12.4% of the non-poor and 5.0% of the extreme poor had pension coverage, that is, the gap by level of poverty in pension coverage has increased in the last 15 years (Fundación Saldarriaga Concha, Fundación NTD Ingredientes, 2018).

Significant progress has been made on the proportion of the contributing population with respect to the number of employed persons, especially in the last decade. In 2016, 38.9% of those employed were contributing for pensions, while in 2000 only 25.4% of those employed were listed. In 16 years (2000 to 2016), coverage increased 13.5 percentage points. These coverages have increased particularly for women. The proportion of men contributing to the economically active male population was, in 2003, 14.1% and for women 19.1%, by 2017, the proportion of men contributing increased to 36.8% and that of women at 45.7%. That is to say, the population of contributing women tripled in the period, while

that of men doubled, but this data must be interpreted carefully, as this ratio is based on people who contribute with respect to economically active or employed people. To analyze the figures in reference to 2016, it is noted that while the number of male contributors is 1.2 times greater than the number of female contributors, the economically active male population is 1.7 times greater than the female and the male employed population is 1.6 times larger than the female (ibid.).

Savings

In terms of savings and as a protection mechanism for aging, it is the accumulation of assets during the productive life. 85.9% of older adults live in a home that has at least one of the following assets: motorcycle, car/truck, land, farms/herds/livestock, or housing (ibid.). The highest proportion of older adults are living in a home with an asset is observed in homeownership. By differentiating the Urban-Rural area, the rural older population are more protected, since 91.7% of them live in a home with ownership of the dwelling they inhabit. In the urban area this population represents 83.2%. Thus, although the proportion of rural older adults with pensions is so low, at least housing ownership represents a form of financial protection for old age (Fundación Saldarriaga Concha, Fundación NTD Ingredientes, 2018.
The percentage of households with older persons, and at least one asset, could be used as a protection mechanism for old age. According to the Pension Superintendence, older people choose for investment in their own home as an insurance strategy for their old age, as an asset that allows them in the least productive age to insure against lower expected levels of income (Social and Demographic Studies Centre (CESDEM), 2014). Alternatively, the life cycle hypothesis becomes relevant to explain this higher concentration of homeownership in homes with older adults, in relation to households without at least one older adult.

The distribution of homes with older adults and house ownership is especially concentrated, 72.9% of households with older adults and homeownership register their homes as fully paid. In the case of households without older adults, this percentage amounts to only 43.9% (ibid.). These results may suggest that older persons, especially the rural, due to the low coverage rates of the pension system, have chosen to have their home as an investment strategy for old age, which allows them to be less productive with lower levels of income. Alternatively, the life cycle hypothesis becomes relevant to explain this higher concentration of homeownership in homes with older adults, in relation to households without at least one older adult. However, these results also indicate that the older person who do not have their housing are barely protected due to the low coverage of the pension system, as they will be more vulnerable to changes in the income. This result is consistent with the low coverage rate of the pension system for older persons in extreme poverty.

International Immigration and older persons in the Dominican Republic

The Dominican Republic within the region is the fifth country with the lowest proportion of international migrant population. As regards to the average for the region, the Dominican

Republic is located 0.8 percentage points above the average for the region, which is 3.9%, and well below the average for high-income countries, which according to the ENI surveil (National Survey of Inmigrants) (National Statistics Office, ONE. 2013) is 14.1%. These results suggest that the phenomenon of immigration in the Dominican Republic is relatively moderate compared to the standards of the region (Fundación Saldarriaga Concha, Fundación NTD Ingredientes, 2018).

Analyzing the distribution of the older adult population of foreign origin by area of residence, a greater concentration of this population is found in the urban areas: 70.2% of the total, reside in urban centers and 29.8% in the rural area. Besides, a higher proportion of older adults of foreign origin are males. The results indicate that 4.1% of the total foreign population in the Dominican Republic are old persons, 40.8% of the older population in the country are not in possession of an Identity Card or Dominican Passport.

The Constitution of the Dominican Republic establishes the right to equal treatment to all people, even if their migratory situation is irregular. It's unconditional also, the right to receive good health treatment for their illnesses. Immigrants have the right to a healthy family unit and work (ibid.).

Conclusion

The process of ageing is complex and is full of challenges for both governments and societies. Also, each country has different cultures, political traditions and legal arrangements that conditions the way in which the ageing challenge may be solved. For the case of the Dominican Republic, the Misión República Dominicana Envejece looks to point at some of the challenges (and risks) affectingh oldr persons this country. The below highlight the main challenges in the context of the Dominican ageism:

1. As of today, the Dominican Republic has 22 years to pay social and economic capital, because it is in an intermediate phase of aging and if it manages to make the necessary adjustments it will be a better-prepared country and able to take advantage of the opportunities that aging brings.

2. As is happening in the world, caring for its older population is a great challenge, preparing in the setting up of a care system, as soon as possible will not only ensure financial resources but also ensure social resources for the population that needs care.

3. Improving the educational levels of the general population and generating strategies to reduce informality are strategies to prioritize to contribute to the better aging of the population, as it will produce a more productive work force and embrace the enrollment in the formal economy.

4. There is a clear feminization of aging. This is undoubtedly a characteristic that must be considered when establishing health, pension, care, savings and education policies.

5. The situation of immigrants raises the need to generate inclusive policies for this population, particularly because they are people who are aging with needs and conditions that make them more vulnerable to the rest of the population.

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