

# **Development cooperation facing the challenge of global aging: a critical analysis**

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# **La cooperación al desarrollo ante el desafío del envejecimiento global: un análisis crítico**

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### Abstract

World populations are changing rapidly in terms of their composition by age groups. If in 2019 9.54 % of humanity was sixty-five years old or older, the United Nations predicts that in 2050 it will be 16.7 %. Increased well-being has been instrumental in extending people's lives, giving rise to longer-living societies. Nevertheless, ageism persists in all areas in society; older people suffer discrimination in contexts of crisis according to their probability of survival, such as during the COVID-19 pandemic. How does international development cooperation face this new demographic reality, which is a growing concern in countries already receiving aid? Throughout this paper, we attempt to answer this question, and others, to ensure that international development cooperation is effective in building an inclusive society.

**Keywords:** ageing, international cooperation, development cooperation, transversal paradigm.

### Resumen

A nivel mundial, las poblaciones están cambiando a gran velocidad en términos de su composición por grupos de edad. Si en 2019 el 9,54 % de la humanidad tenía sesenta y cinco años o más, la Organización de las Naciones Unidas prevé que, en 2050, alcance el 16,7 %. La mejora del bienestar ha supuesto un revulsivo para alargar la vida de las personas, desembocando en sociedades cada vez más longevas. Sin embargo, el edadismo persiste en la sociedad en todos sus ámbitos, discriminando en contextos de crisis como la pandémica del COVID-19, según su probabilidad de vivir. ¿Cómo afronta la cooperación internacional al desarrollo esta nueva realidad demográfica, que también caracteriza a los países destinatarios de esta ayuda? En este artículo, se intenta responder a esta pregunta y a otras, a fin de que la cooperación internacional al desarrollo sea una herramienta eficiente en la construcción de una sociedad inclusiva, sin distinción por razones de edad.

**Palabras clave:** envejecer, cooperación internacional, cooperación al desarrollo, paradigma transversal.

# 1 Introduction

One of the great revolutions facing society in the 21<sup>st</sup> century is the accelerated ageing process. In 2019, 1 in 11 people in the world were aged sixty-five or older, that is, 9.54 % of the population, while it is estimated that, in 2050, 1 in 6 people will exceed this age threshold, according to the *World Population Prospects 2022* (UN 2022). This figure, which stood at just under 5 % in 1960, has almost doubled in the last six decades. In absolute numbers, this age group has gone from 150 million people in 1960 to 747 million in 2021. A longer-living society is the result of both low mortality and low birth rates, with reduction in birth rate having a multiplying effect on the ageing process.

These data in turn reveal that the process of population ageing, a result of advances in health, education, and well-being, is no longer an exclusive phenomenon of Western countries, but is a global humanitarian concern. In Europe and North America, which together have the highest proportion of elderly people, forecasts indicate that, by 2050, 1 in 4 people could be aged sixty-five or older, that is, around 25 % of the population. In Latin America, the population in this age group is expected to grow from 9 % in 2022 to 19 % in 2050. In absolute terms, by 2050 this population group is expected to reach the figure of 1.6 billion, making up 21.5 % of the world's population, according to the *World Report on Ageing and Health* of the World Health Organisation (WHO 2015).

The more advanced the society, the greater the degree of ageing of their populations (Díaz-Tendero & Cruz-Martínez 2023). Along with this democratisation of ageing (Bourdieu & Kesztenbaum 2007), which is no longer limited to certain groups, a second generalised phenomenon is manifested which is independent of the level of development of a country: the feminisation of ageing. Ageing overlaps with other discriminations, such as discrimination based on skin colour (Zabala Argüelles & Fundora Nevot 2022). An individual in the West is considered an elderly person, with the threshold age being sixty-five, yet in countries receiving development aid this threshold is sixty, a difference of five years. Interestingly, the population census conducted in 2023 in Brazil caused significant controversy when it put sixty-five, instead of sixty years, as the threshold age from which a person is considered elderly.

There are, however, subregions of the world, such as Latin America and the Caribbean or the East-Asia Pacific region, where, although their standards of living and economic activity are far from that of industrialised countries such as Germany, France or Spain, their ageing process is taking place much quicker than that recorded in leading countries in the demographic transition (UN 2007).

This rapid process of population ageing, together with the pandemic caused by SARS-CoV-2, has highlighted inadequacies in the international development cooperation policy related to public policies on health and care of the elderly, as well as in their economic security, especially in countries with low-coverage pension systems. Furthermore, from a human rights perspective, the pandemic has caused a re-victimisation of the elderly population (Del Pino *et al.* 2020, Gideon 2020, Filgueira *et al.* 2020); for example, in the case of Spain, admission to the Intensive Care Unit (ICU) is governed by the Spanish health system policy which gives priority to those patients with a greater quality of life expectancy. This policy discriminated against the elderly during the most dramatic moments of the pandemic, mainly because of the shortage of hospital beds caused by the increased demand (Culebras *et al.* 2020), even though this age group was more at risk of contracting the virus (Fernández-Ballesteros & Sánchez-Izquierdo 2020). In other words, structural ageism is present in institutions. Further afield, in the countries of Latin America and the Caribbean, new variants of the virus and the subsequent increase in transmissibility and severity of infections generated a situation of overflow, and even collapse, of the region's health systems, a system that was already precarious (Da Silva & Pena 2021).

It is crucial, therefore, that the current situation and the pending challenges of international development cooperation are addressed, from the paradigm of the policy approach of political science, with an eye on the well-being of older people in a world marked by global ageing (Díaz-Tendero & Cruz-Martínez 2023). The change in the demographic structure has social and economic consequences that require a redefinition of international development aid programmes which adapt to the new reality from the perspective of the needs of a longer-living population. This demographic transformation is not only due to an increase in the population of sixty-five-year-olds and over, or sixty-year-olds (in Latin America and other countries), but also to a decrease in the active and working-age population as well as a drop in the population under eighteen years of age. This paper centres on the following question: «How does the public policy of Spanish development cooperation confront the accelerated process of ageing of the world population and, particularly, the incessant growth of this segment of the population of an older age?».

To answer this, and other questions, Section 2 addresses the adoption of the Ibero-American approach around international development cooperation. Section 3 then analyses changes in the population structure and looks at the challenge of structural ageism. Section 4 deals with the transversal paradigm of longevity. Section 5 discusses the incorporation of the «longevity paradigm» into development cooperation policies to address the problems presented by the recipient countries in the face of the new demographic pan-

orama. Finally, a series of reflections are presented in the «Conclusions».

## 2 Ibero-American Approach

The study focuses on countries in the Ibero-American space, composed by the 19 Spanish-and Portuguese-Speaking countries in Latin American and those of the Iberian peninsula (Andorra, Portugal, and Spain), taking into account the international development cooperation policy implemented by the Government of Spain, which is mostly destined for this region of the world, in accordance with the Spanish Agency for International Cooperation (AECID) and the different master plans of Spanish cooperation. According to the Economic Commission for Latin America and the Caribbean (ECLAC 2022), Latin America is the region that is advancing the fastest in the ageing process of its population structure.

To limit the length of this paper, our analysis focuses on just three countries in Latin America and the Caribbean: Brazil, Nicaragua, and the Dominican Republic. These three countries are representative of the three large geographic subzones of Latin America: South America, where Brazil is located; Central America, where Nicaragua is located; and the Caribbean, where the Dominican Republic is located. All three are immersed in a process of demographic change, but they follow different rhythms that place them at different stages. ECLAC (2022) uses two indicators to classify countries according to their different stages of population ageing: *i*) the percentage of older people (aged sixty and older) in the total population, and *ii*) the total fertility rate (TFR). Based on this, countries are then classified into five different stages according to the degree of population ageing. Brazil and the Dominican Republic are in the so-called «stage of moderately advanced ageing»; that is, they have a TFR of less than 2.5 children per woman and a proportion of older people of between 10-14 %. Nicaragua, on the other hand, is in what is known as the moderate ageing stage, with a TFR of less than 2.5 children per woman and a proportion of older people less than 10 %. These differences between countries reflect advances in well-being related to health care, mortality rates and fertility levels. However, it should be noted that, although the TFR has an inversely proportional relationship with the percentage of older people, it is not perfectly linear. According to ECLAC (2022), in some countries in the region which have the same fertility rate, different degrees of population ageing are observed, due to the diversity of trajectories followed in the TFR reduction process, together with the differentiated effects of other variables which explain the new population dynamics (mortality and international

migration). In fact, when analysing the Human Development Index (HDI) —an indicator created by the UNDP, that reveals the degree of progress of each country—, Brazil and the Dominican Republic are ranked high in the 2022 ranking (UN 2022). The Dominican Republic appears in 80<sup>th</sup> place and Brazil in 87<sup>th</sup>, with an HDI of 0.767 and 0.754, respectively. Nicaragua, however, with an HDI of 0.667, is in a lower position, coming 126<sup>th</sup> in the world ranking. In contrast Spain, with an HDI of 0.905, is in 27<sup>th</sup> place.

As mentioned earlier, the selection of these three beneficiary countries of the Spanish development cooperation policy lies in the different characteristics that each country presents (see Table 1). However, there are also common elements, such as high social inequality (Gini index), which makes them direct recipients of AECID development aid. The Gini index, used to measure inequality, shows particularly high values in these three Latin American countries, compared to Spain.

We begin the analysis by outlining the different political system model seen in each country under study. The political system refers to the model of organisation of constitutional power that a state adopts based on the relationship between the different powers. This information is relevant, because it not only determines how a country is governed, but also how it is managed, such as the social coverage model adopted. The three Latin American countries are presidential, while Spain corresponds to a parliamentary monarchy. In terms of territorial organisation, Nicaragua and the Dominican Republic are distinguished by being unitary countries, while Brazil is a federal state; that is, it has a territorially decentralised power structure. Spain is more like Brazil, since it is a State of autonomies, which has given rise to a quasi-federal decentralised territorial structure.

Gross Domestic Product (GDP) per capita is important as a macroeconomic indicator of productivity and economic development (World Bank 2023b). It provides insight into the economic growth of a country. Provision, and management, of economic resources determines the configuration of a social public policy that, for example, meets the needs of the older population. GDP, when divided by the country's population (otherwise known as GDP per capita), can also be an indicator of social well-being. Here, important differences are observed between Spain and the three Latin American countries.

Since GDP considers only economic growth, we also look at the Human Development Index (HDI), which is calculated by the United Nations Development Program (UNDP 2023) and contemplates aspects such as the economy and the health and education level of its population. Once again, the highest development rate according to the HDI is seen for Spain. The country with the lowest index coincides with the country with the greatest inequality: Nicaragua. Bra-

zil and the Dominican Republic have similar rates, with a global HDI average of 0.732.

The amount spent on pensions, education, and health as a percentage of total public spending provides further invaluable information. In the case of pensions, this indicator shows the level of coverage of the public retirement pension system and, therefore, the availability of income for elderly people if they are not employed. The percentage in healthcare is much lower in Spain than in other countries, perhaps because its healthcare system is consolidated, despite recent stresses, while in other countries it is still being established. The same is true of education (World Bank 2023b).

The Rule of Law Index is a quantitative assessment tool designed by the World Justice Project (2023) to provide a detailed and comprehensive picture of the extent to which countries adhere to the rule of law in practice, operationalised into eight factors: limits on government power, absence of corruption, open government, respect for fundamental rights, order and security, regulatory compliance, civil justice, and criminal justice. These data show a significant difference between Spain and the other countries under study, particularly between Spain and Nicaragua. In the case of Brazil, the drop in position is likely related to the far-right populist government of Bolsonaro and the events following Lula da Silva being sworn in as president.

Lastly, the Gini Index is a measure of inequality, typically used to measure income inequality within a country, but can also be used to measure any form of unequal distribution. The Gini coefficient is a number between 0 and 1, where 0 corresponds to «perfect equality» (everyone has the same income) and 1 corresponds to «perfect inequality» (one person has all the income and the others none). The Gini index is the Gini coefficient expressed with reference to 100 maximum. In this indicator, Brazil is the country with the greatest inequality, both at population and territorial level, followed by Nicaragua (World Bank 2023b).

The interest in comparing these three Latin American countries which benefit from a development cooperation policy with Spain also lies in the fact that these three countries lack a European-style welfare state. Spain has a familistic welfare state (Table 1), placing the family as the main provider of well-being and, only when this provision is not enough, does the State intervene. In contrast, in the three Latin American countries under study, any social services needed usually must be paid for privately.

But what happens if a person cannot afford to pay? If the established social protection system does put the onus on the state to act as a shield of social protection, in the form of a European-style welfare state, then, in countries receiving development aid, the development cooperation policy is supposed to assume these functions based on Law 1/2023, of February 20.

CHARACTERISTICS	SPAIN	BRAZIL	NICARAGUA	DOM. REPUBLIC
Population (2022)	48,345,223	203,062,512	6,850,540	11,117,873
Political system	Parliamentary monarchy	Presidential and federal	Presidential and Unitary	Presidential and unitary
GDP per capita (2022) USD	28,280	8,917.70	2,255.40	10,120.60
HDI (2021)	0.905	0.754	0.667	0.767
Expenditure on pensions (2022) (% public expenditure)	37.29 %	18.10 %	16.00 %	18.20 %
Expenditure on healthcare (2022) (% public expenditure)	1.44 %	10.26 %	5.34 %	6.10 %
Expenditure on education (2022) (% public expenditure)	9.02 %	12.30 %	22.71 %	22.41 %
WJP Rule of Law Index	0.73 %	0.49 %	0.35 %	0.49 %
Gini Index (2022)	32%	52.9 %	46.2 %	38.5 %

**Table 1**

Characteristics of Brazil, Nicaragua, and the Dominican Republic

Source: World Bank (2023b), compiled by the authors.

Therefore, depending on the established welfare provision system, it can act as a mechanism to reduce or increase social inequalities by compensating or increasing the difficulties of accessing them, according to Esping-Andersen (2003).

Adequate social welfare coverage is of vital importance in societies with a large population of elderly people, given that the physical and psychological erosion that comes with getting older demands special social and health care, which not everyone can afford due to limited economic resources. From this perspective, this paper asks: «Can and should international development cooperation meet the social and health care needs of people aged sixty or over in the case of Latin American countries?». In what follows, we attempt to answer this, and other questions.

### 3 Methodology

Research on Spanish development cooperation policy is carried out from the paradigm of the «policy approach» in political science, which defines «a public policy as a set of decisions and activities that are linked to the solution of a collective problem» (Dente & Subirats 2014, p. 39). Depending on the collective challenge identified, decisions are made, with each understanding of the reality



being a subjective perception of our environment. From the school of public policy, each problem introduced into the public agenda is an artificial and biased construction of reality, even though it is multifaceted and complex. In Spain, since the approval of Law 23/1998, of July 7, on International Cooperation for Development, «development cooperation» is classified as public policy with a status differentiated from foreign policy. This same concept is reflected in the new Law 1/2023, of February 20, on Cooperation for Sustainable Development and Global Solidarity, which establishes that Spanish cooperation for development is a state policy that seeks to collectively respond to global challenges, such as poverty. But, upon detailed analysis of the text of the body of the law, at no time is the objective identified as addressing the challenge of sociodemographic transformation, which is widening inequality gaps, defined by the UN (2003) itself as a global challenge.

This research, therefore, is developed from the interpretive approach, which offers the possibility of identifying the context and time in which the framework of interpretation is developed. This perspective allows us to approach reality from the theoretical framework of reference and in a holistic way. It is a different perspective from that of positivism, which looks at reality from the quantifiable, articulated around quantitative methods and deductive logic (Ricoy-Lorenzo 2006, Durán 2021).

Through the «interpretive paradigm», development cooperation policy is addressed, and the need to incorporate longevity on a transversal basis is identified. This theoretical study is, therefore, also accompanied by the analysis of quantifiable empirical data, which outline the demographic and social change that humanity has been experiencing for decades. The fertility rate, for example, provides information on the evolution of behavioural patterns that modulate the population structure. Our research study uses «quantitative» methodology to measure the change in the population structure of the countries, receiving development aid from the Spanish government. In this way, the demographic structures of the four countries under study can be compared: three in Latin America (Brazil, Nicaragua, and the Dominican Republic) and Spain. The interpretive paradigm and the study of quantitative data facilitate the analysis of public development cooperation policy and allow the identification of its current shortcomings considering the sociodemographic challenge.

## **4** **A new demographic structure**

The world population is experiencing profound transformations of a social and demographic nature, which affect its growth and age

structure. The lower mortality in childhood, the new patterns of cause of death, the greater life expectancy at birth, the increase in the use of modern contraceptive methods, the massive female participation in the labour market, the individualization, the female preferences for development professional rather than choosing the creation of a family environment, and the continuous migratory movements are just some of the factors responsible for these transformations. But the changes are not occurring in a homogeneous way; differences are seen between countries, and even within countries, according to geographical areas and socioeconomic and ethnic groups.

This process of demographic transition, which has happened over two centuries in developed countries, is now occurring in Latin America over just a few decades. The sustained decrease in mortality and fertility means that the region has gone from high levels of mortality and fertility in the 1950s to the low levels seen today (UN 2022). Consequently, the age structure of the countries of Latin America has been profoundly modified, with a significant increase in the proportion of older people. The ageing of the population translates into the transition of young societies into adult societies and, subsequently, into aged societies, with important consequences from an economic, social, and epidemiological perspective.

But what is more disturbing for this large region is the scenario in which population ageing occurs, characterised by inequality, and poverty; the exhaustion of an unsustainable economic growth model, with growing unemployment and low-productivity jobs. Hence, there is a real need for the development and implementation of a cooperation policy based on demographic scenarios that, despite the variations that exist in each country, offers a framework that allows the adoption of important decisions for the development of these countries (Huenchuan 2018).

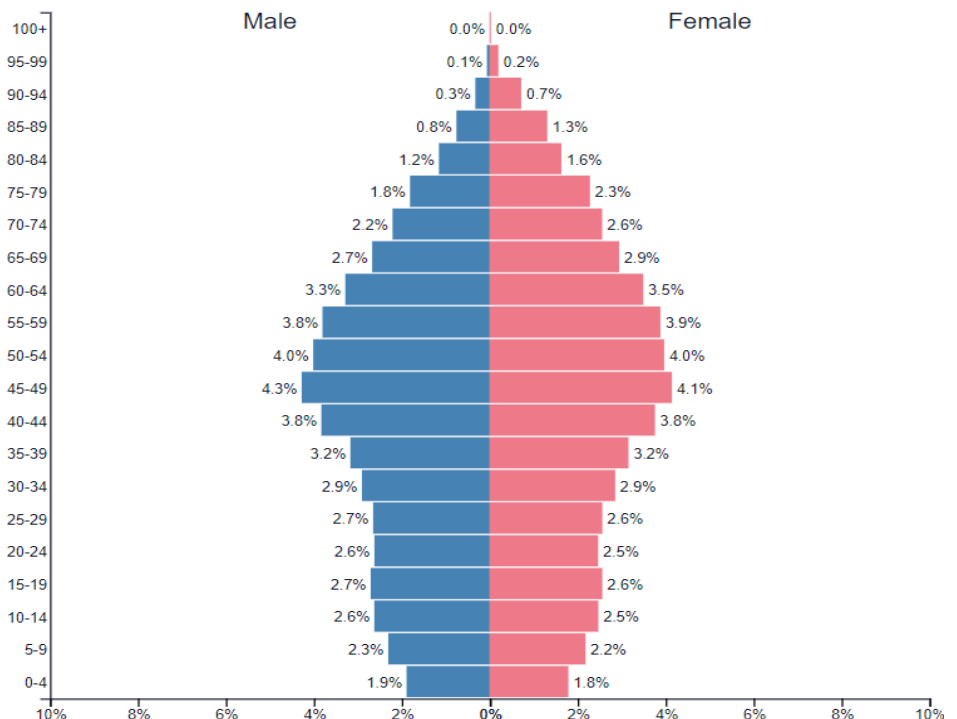
This increased longevity of the world's population is creating a new demographic structure, which questions fundamental foundations of the European model of society, such as the welfare state model. This current social welfare provision system is designed for a society with a greater weight of working-age population and, therefore, potential contributors to the development and maintenance of the welfare state through social contributions. It is also based on the premise that the proportion of the population aged over sixty-five in the case of Europe, or aged over sixty in the case of Latin America, is not particularly representative of the population as a whole. However, the so-called «longevity revolution» has now meant a change in the weight of each age group in the population structure, with the group of older people becoming increasingly more numerous, while the active population aged under sixty is decreasing in size. According to United Nations (UN) forecasts in the 2022 World Population

Prospects Report (UN 2022), Brazil is expected to have 147 older people for every 100 young people by 2050, *i.e.*, the number of older people will overtake the number of young people. The Dominican Republic, in 2050, is expected to have eighty-one older people for every one hundred young people, while in Nicaragua the figure is lower, with sixty-three older people for every one hundred young people. Clearly, the speed of ageing does not follow the same pattern in these three countries (UN 2022).

The disappearance of the classic population pyramid implies a smaller number of citizens in the working age group, compared to the growing group of citizens who reach sixty-five or older in Spain or sixty or older in Latin America and join the non-active population. With old age, the human body enters a phase of biological deterioration and so requires greater healthcare. A question, therefore, arises about the viability of the welfare provision model in Latin America, and its social protection capacity, which is sustained by the social contributions to the state made by the legally employed population.

This debate on the viability of a national welfare provision system has been ongoing in Europe and is already reflected in countries that are benefitting from international development cooperation aid, such as Chile (Larrañaga 2010). Now, there is an urgent need to consider international development cooperation that serves the older age group.

For instance, the population structure of Spain of 2023 does not represent the traditional population pyramid (see Figure 1).



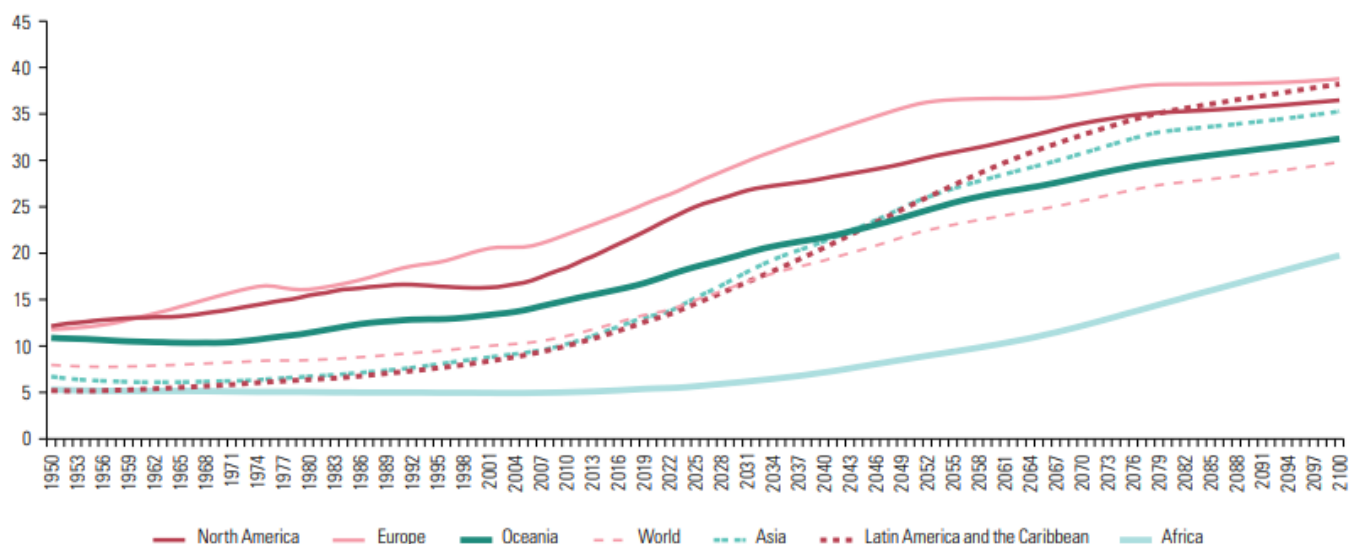
**Figure 1**  
Population structure of Spain, 2023

Source: adapted from Population Pyramid Net (2023), <https://www.populationpyramid.net/es/espaa/C3%B1a/2023/>, accessed November 13, 2023.

The largest percentage of the population (15.7 % for men, and 15 % for women) is in the age group forty to fifty-nine, yet, in less than a decade, most citizens in this age segment will have already reached sixty-five years of age. In contrast, in the younger age groups of the working-age population of between twenty and thirty-nine years old (11.4 % for men, and 11 % for women), the percentage is much reduced. Figure 1 demonstrates the so-called «regressive» or «bulb population pyramid», which is common in developed countries. Both the decline in the birth rate and the higher percentage of older people in the population mean that the lower part of the pyramid is narrower than the central area and the upper areas. This shape illustrates the typical structure of an ageing society.

The demographic structure of the population of Latin America and the Caribbean is also experiencing significant changes, resulting in a rapid demographic transition over the last seventy years (CELADE 2007). The following figures on the population structure of Brazil, Nicaragua and the Dominican Republic confirm the ageing process which these countries are undergoing, highlighting the need for international development cooperation programmes to address the challenge of growing longevity.

Figure 2 shows the evolution by region of the world population aged sixty and over. This shows that Latin America and the Caribbean have experienced a population ageing in only half a century what Europe experienced over two centuries (Villa & González 2004). Furthermore, in 2060 the proportion of people aged sixty and over in Latin America and the Caribbean region is expected to exceed that of Asia and Oceania, placing it closer to the values of North America and Europe and, by 2100, the same region will reach 38.2 %, very close to the proportion estimated for Europe in that same year (UN 2022).



**Figure 2**  
World population aged sixty and over, by region, 1950-2100 (in percentages of the total population)

Source: adapted from UN (2022), <https://population.un.org/wpp/>, accessed 13 September 2023.

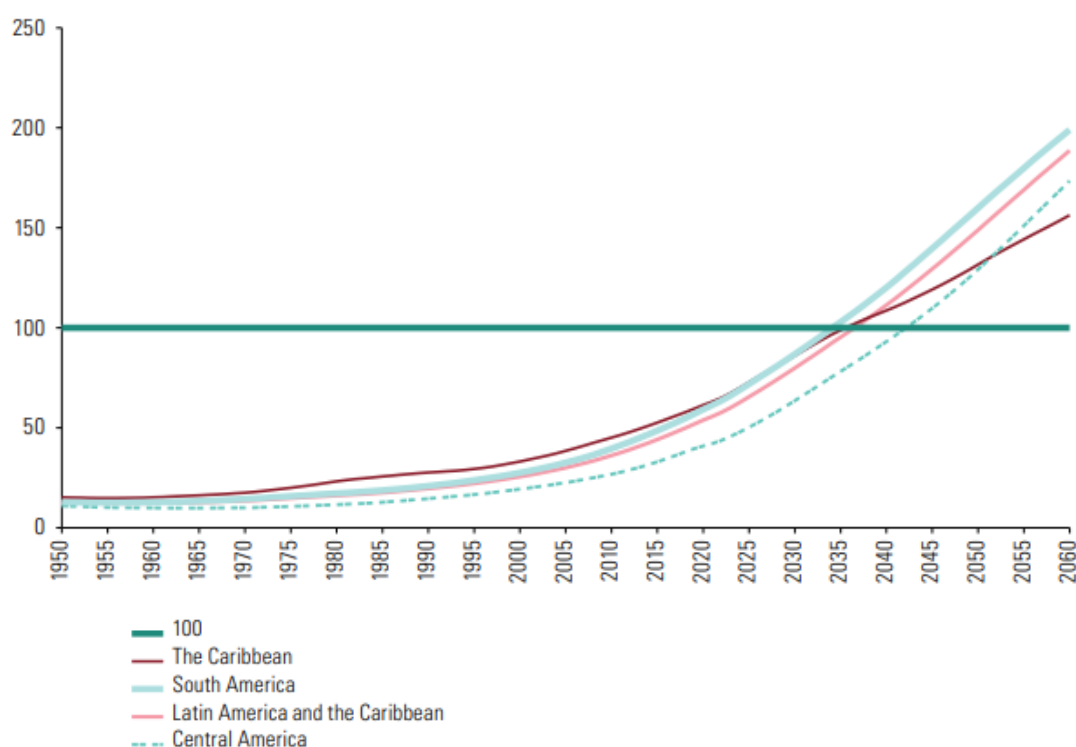
Another indicator that provides crucial information on the advancement of longevity is the ageing rate, which directly compares the number or proportion of older people (sixty years and over in Latin America and sixty-five years and over in Europe), with the number or proportion of boys, girls, and adolescents (aged under fifteen) (see Table 2). Figure 3 shows that, in the coming decades, South America will lead the population ageing process. However, in Central America the process follows slower patterns of change, where political instability and economic hardship are more acute. Data for the Caribbean subregion predict a slowdown with respect to the regional average (ECLAC 2023).

Country	Ageing rate (%)	Life expectancy at birth	Fertility rate	Mortality rate
Brazil	72.2	73.4	1.63	8.1
Nicaragua	26.7	74.6	2.28	4.9
Dominican Republic	41.2	74.2	2.25	6.7
Spain	133.5	83.2	1.19	9.7

**Table 2**

Demographic indicators (%)

Source: ECLAC (2022) and INE (2023), compiled by the authors.



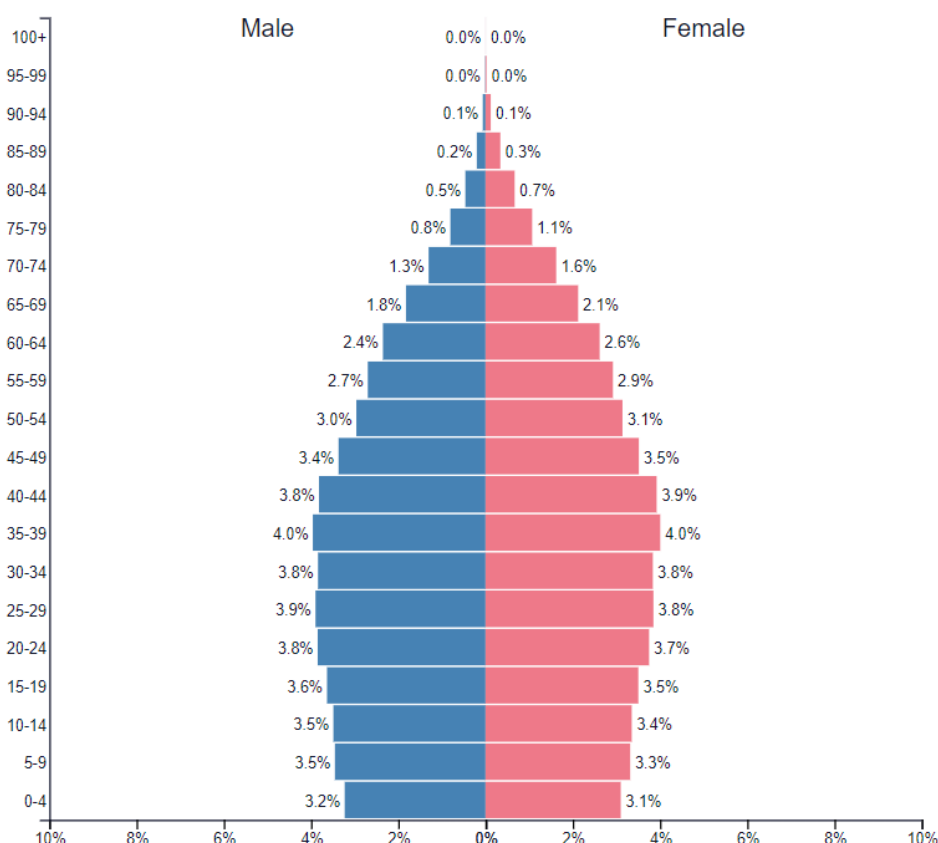
**Figure 3**

Latin America and the Caribbean: ageing index, by subregion, 1950-2060 (number of people aged sixty and over per one hundred people under fifteen years of age)

Source: adapted from UN (2022), <https://population.un.org/wpp/>, accessed September 13, 2023.

However, the indicator of life expectancy at birth in 2023 in these three countries is similar, according to the Pan American Health Organisation (PAHO). In Brazil people live up to 76.2 years, in Nicaragua up to 74.8 years and in the Dominican Republic up to 74.4 years (Anon 2023). Before the COVID-19 pandemic, UN projections estimated that life expectancy would continue to increase, always in the direction of convergence (UN 2022). The most lagging countries would experience stronger declines than developed countries and the differences by sex would even decrease. But the pandemic, while it affected the elderly population the most and significantly increased mortality in this age group, has had a short-term effect in reducing the life expectancy of the population. However, although it has already begun to increase again, it is doing so a lot more slowly than in developed countries. This situation has made it difficult for international organisations to prepare future mortality estimates, not only in this region but also throughout the world.

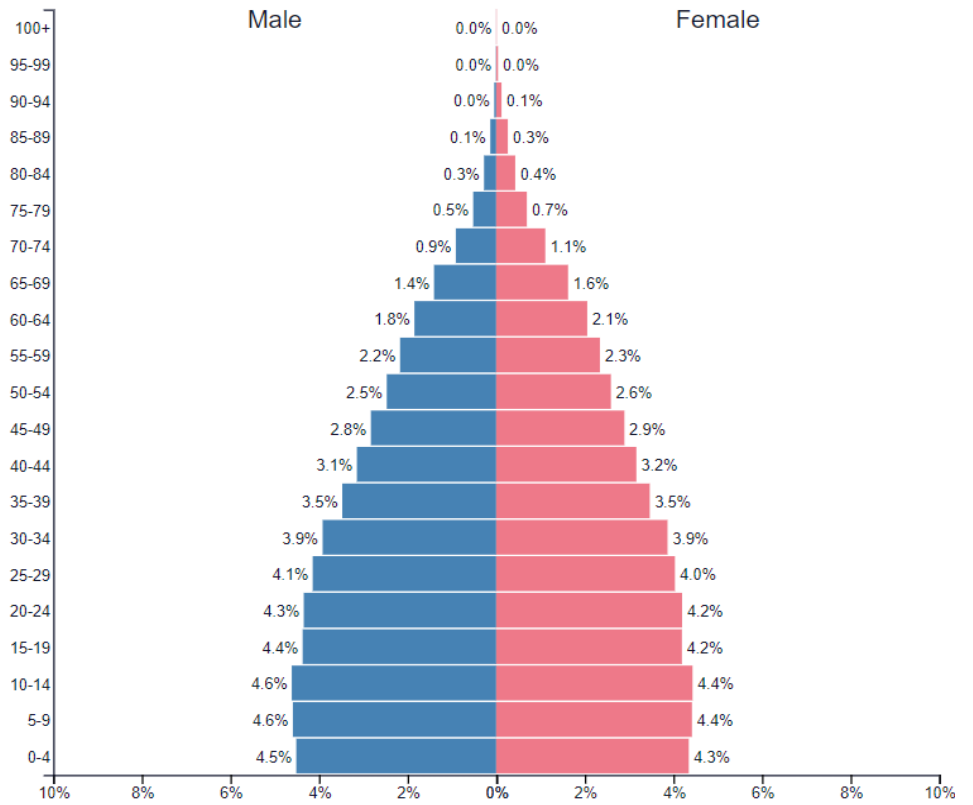
The different indicators on the level of ageing or life expectancy at birth are drawing a new population structure which does not correspond to the usual demographic pyramid. Figures 4, 5 and 6 show the population structures of the three countries and their differences, particularly, when compared to Spain.



**Figure 4**

Population structure of Brazil 2023

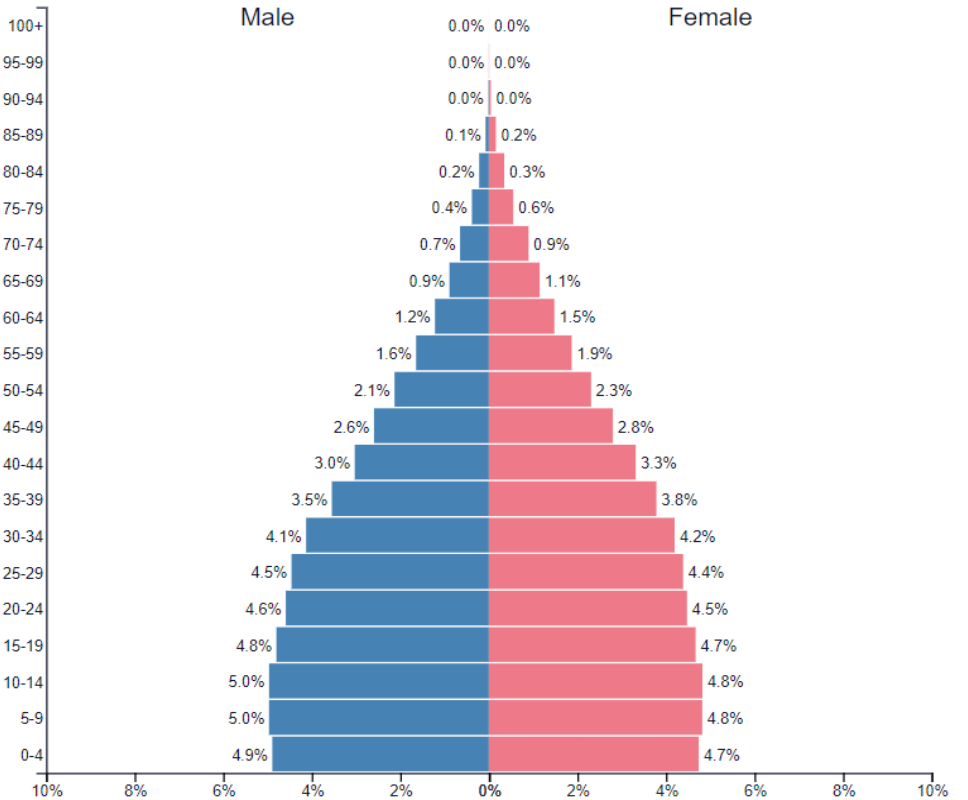
Source: adapted from Population Pyramid Net (2023), <https://www.populationpyramid.net/es/esp%C3%B1a/2023/>, accessed November 13, 2023.



**Figure 5**

Population structure of the Dominican Republic, 2023

Source: adapted from Population Pyramid Net (2023), <https://www.populationpyramid.net/es/rep/C3%BAblica-dominicana/2023/>, accessed November 13, 2023.



**Figure 6**

Population structure of Nicaragua, 2023

Source: adapted from Population Pyramid Net (2023), <https://www.populationpyramid.net/es/espa%C3%B1a/2023/>, accessed November 13, 2023.

These population structures have lost their classic triangular shape and increasingly resemble a bell with a wide base, but with an increase in the relative weight of the older population. This is the so-called «stationary» or «stagnant pyramid», typical of developing countries, in which mortality is beginning to be within «normal» parameters, but the birth rate is still very high. The base is wider in the case of Nicaragua and the Dominican Republic and narrower in the case of Brazil, which means that the birth rates in the first two countries remain high, with women bearing 2.35 and 2.30 children, respectively, while in Brazil the rate is lower, at 1.65 (World Bank 2023a). The bulk of the population is in the age group of between twenty and thirty-nine years (15.9 % for men, and 15.6 % for women), while the zero-four-year-old population barely represents 3.3 % for men, and 3.1 % for women.

Although the Dominican Republic, in Figure 5, shows signs of demographic change, the shape of its structure still basically responds to the classic pyramid. The Dominican Republic, with more than half of its population aged zero to thirty-four, specifically 60.63 %, can be considered to have a young population. However, there is a trend towards ageing caused by a reduction in fertility, a decrease in mortality, the incorporation of women into the labour market and an increase in life expectancy at birth (ONE 2021).

Nicaragua presents a classic, albeit changing, pyramidal structure. The base is now less wide and is growing in the centre. Despite this, the largest population is aged between zero and thirty-nine (36.4 % for men, and 36 % for women); then, the percentage of the older age group decreases (3.5 % for men and 4.6 % for women at the age of sixty's or more). The demographic change has not yet reached the same intensity in Nicaragua as in other countries. The division of labour according to gender is more accentuated, as demonstrated by the difference between men and women in the participation rate in the labour market. The female employment rate is 54.7 %, much lower than that of men, which is 78.4 %. Women continue to mainly assume the role of caregiver, prioritising being mothers and reproducing. However, poverty continues to grow, an increase of 13 % in 2022 (World Bank 2023b), despite the remittances sent home by all those who emigrated in 2021 (more than 300,000 people).

## 5 Structural ageism

One of the greatest achievements of humanity is to have extended the human life cycle while maintaining quality of life and well-being up until death. However, unlike in any other animal group, human beings hold a negative social perception of ageing.



This is reflected in the WHO (2021) report, which indicates age discrimination as the third cause of exclusion, along with machismo and racism. According to Lebrusán (2019), any negative social view that involves systemic discrimination is a source of social setback. Along these same lines, the European Economic and Social Committee (EESC 2023) in September 2023 urged the European Commission to develop a new European Strategy for Older Persons, to stop the elderly being considered as a burden and a cost to society. In this section, we analyse structural ageism and how this relates to development cooperation policy as a public policy. The institutionalisation of ageism, viewing ageing in a pejorative way, permeates the entire process of public policy development. It is no coincidence that the WHO itself has published the World Report on Ageism (WHO 2021) with words of caution for those responsible for developing public policies to eliminate this deeply rooted form of discrimination against older people.

The adjective «old» is usually applied to describe the end of the useful life of an object, such as a washing machine. Our own language associates the last stage of the life cycle with incapacity and lack of usefulness. Like a washing machine, this is what in the world of electronic devices is known as «planned obsolescence». In the seventies, the philosopher and writer Simone de Beauvoir in her work *Old Age* (1972) had already denounced society's indifference towards this segment of the population aged over sixty-five in Spain, or sixty in Latin America.

This biased view of longevity is nothing more than a social construction around age, supported by prejudices about old age. Based on chronological age, a series of stereotypes and preconceived ideas are projected onto older people. From social gerontology, this type of age discrimination is known as «ageism». This term was coined by the 1<sup>st</sup> President of the National Institute on Ageing of the United States, Butler (1969), in the late 1970s. «Ageism», as we have seen, follows similar patterns to «racism» and «sexism». It can refer to any stage of the life cycle, although here the focus is on elderly people.

«Age discrimination» or «ageism» refers to the way we see ourselves and others, and there can be a gap in prejudice between one generation and the next (WHO 2021). «Ageism» «is the obsession with the age limit» (Carette 2022, p. 26). It represents a barrier to carrying out activities or socialising or contributing to the community; these possibilities being considered more appropriate for the younger generations.

«Ageism» affects all areas of society and is present in everyday life. Unconsciously, people limit themselves in how they dress or behave, because of their age. City design, personal aspirations and so on are often determined by «ageism», and this can be to the detriment, at times, of individuals who do not fit the norm (Lebrusán 2019).

This very reductionist view of people gives rise to a society with first- and second-class citizens, based on age, especially when «ageism» is applied when assessing someone's capabilities or when individuals are prevented from fully participating, socially. «Ageism» sets up a metonymy of incapacitation, as if the ageing process, physical and mental, makes someone incapable of living life fully. The same occurs with «racism» towards black people or people with disabilities (Faleiros 2023).

This social perception of old age has its roots in Ancient Greece. Aristotle identified «old age» with «decrepitude», understood as «loss of physical faculties» (2015). The cult of youth was not only honoured by Classical Athens, but also throughout the course of Western history. The image of a warrior is that of a young strong person on the cusp of manhood. Even great historical political and economic changes are articulated around young people. In fact, industrialisation would have been inconceivable without an army of young labour, working long days in unhealthy conditions.

This idolisation of youth is visible today in the cosmetic industry and aesthetic medicine, encouraging people to maintain a youthful appearance and eliminate, or at least reduce, any signs of ageing. It is even considered impolite to ask a mature person their age, especially a woman. Lastly, the Spanish development cooperation law (Law 1/2023, of February 20) does not even identify «ageism» as a global challenge for the different development aid programmes, as previously noted. Thus, rejection of ageing is strongly rooted, economically, politically, and socially.

## 6 The need for a cross-cutting paradigm of longevity

Considering «longevity» as a transversal paradigm, which by this very nature affects development cooperation policy, requires specifying the transversal concept in public management. Public Administrations are usually organised based on highly formalised vertical structures and defined by specialised and complex technical systems, for example, healthcare, urban planning, education, defence, or security. This set-up does not allow these Administrations to face multidimensional, heterogeneous, spatially differentiated phenomena caused by both structural and conjunctural factors (Nogueira & Cavalcante 2019).

Nevertheless, problems arise in different segments of the population (for example, older people, children, women, people with disabilities...) that force these Administrations to adopt visions or work perspectives that do not fit the classic divisions of the organisation and that, consequently, require new organisational respons-

es or new ways of working. To this end, over time, instruments or organisational designs can be generated that allow, with greater or lesser success and almost always insufficiently, a response to these nascent organisational challenges (Serra 2005).

«Transversality», as Serra (2005) points out, is a concept and an organisational instrument whose function is to provide organisations with the capacity to act in relation to issues for which the classic organisation is inadequate. As such, it responds to both the design needs of the organisation and the management needs. «Transversality» is not a technical concept, in contrast to multidisciplinary, interdisciplinary or integrated assistance to users, and it is unique in its introduction of lines of work that are not assigned or assignable vertically.

«Transversality», although it has some similarities with «intersectorality», acquires its own identity from the circumstances in which it is applied (Souza 2015, Bichir *et al.* 2016). As Oliveira (2014, p. 22) points out, «being transversal is not only articulating different management spaces, it is adopting a new way of thinking about management and allowing results to be achieved, understanding the multidimensionality of the problems involved in these issues». Cross-cutting policies place different points of view in contact, generating what Brugué (2008) calls «collective intelligence», that allows better decisions to be made, since stimulating interaction and collaboration between different actors and sectors allows for better use of resources and increased efficiency.

Transversalism has achieved strong theoretical recognition in Public Administrations —along with an effective lack of commitment to the substantive changes that this approach demands: hence the failure to achieve the results expected from some of the transversal public policies, such as those on gender equality (Calvo *et al.* 2017)—. Many of the criticisms refer to an overemphasis of the procedural scheme of transversality with little attention to the substantive motivations.

Unfortunately, within organisations, transversality in public management is often rejected, because it represents a complete paradigm shift (Lombardo & Mergaert 2013). Administrations usually have a clear opposition to change, stemming from their inherent inertia. Transversality requires new skills, commitment, and training from those who already participate, as well as the incorporation of new actors and civil society; in international development cooperation, this requires both actors from the country responsible for the aid programme and actors from the countries receiving this aid.

Transversal policies also need new leaders who are experts in the subject matter of public policy, and these specialists often lack the support of the organisation as they are interfering. Finally, the change required in the organisations' culture is not always

well received. These are changes designed to move the principle of vertical compartmentalisation and functional isolation/specialisation towards a horizontal and flexible mode of operation, based on constant communication and diversity of tasks (Calvo *et al.* 2017).

When incorporating the transversality of longevity in public management, and in international development cooperation particularly, we are not calling for a society exclusively attentive to the elderly. The model of society to which we should aspire is a society for all ages of an intergenerational nature, one that does not marginalise this group of elderly people, in accordance with the motto proclaimed in the First International Year of Older Persons in 1999.

## **7 Longevity in international development cooperation**

Starting from the premise that development cooperation incorporates the objective of establishing socially inclusive systems and the reduction of poverty and inequalities in different areas according to the explanatory memorandum of Law 1/2023, February 20, in line with the Sustainable Development Goals (SDGs) of the UN 2030 Agenda, the United Nations Cooperation Framework for Sustainable Development (UN 2019) and the New European Consensus on Development (Joint Declaration of the European Parliament, Council of the European Union and the European Commission, 2017, June 30), «longevity» must be transversal to international development cooperation policy. Failure to do so will mean it will be difficult to achieve the objective of reducing inequalities and contributing to the development of inclusive societies in the era of longevity. Demographic change is unstoppable, due to advancements in improved well-being, combined with new patterns of social behaviour, such as low fertility. Given this reality, any public policy aimed at the development and implementation of aid programmes for international cooperation must make as a priority this segment of the population aged over sixty in the Latin American region.

Incorporating «longevity» in development cooperation means adapting cooperation to this group of diverse elderly citizens. These citizens may not have enough material resources to cover basic needs such as food, or may have to work, because their income is insufficient, due to the characteristics of the pension system in their country, or may have reduced mobility but excellent mental health, or may simply be suffering from loneliness.

Throughout history, development cooperation has demonstrated the ability to evolve, especially since the Second World War. Now, in the 21<sup>st</sup> century, development cooperation must follow this same path and adapt to reality and its challenges, one of which is the sociodemographic transformation resulting from population ageing. As the UNDP (2023) points out, humanity is currently facing instability which generates insecurity, stemming from pandemic crises, such as COVID-19, or global war conflicts, such as the war in Ukraine or the Palestinian-Israel conflict. These situations call for changes in «traditional cooperation», a model that is characterised by spreading an exogenous approach to development (imposed from outside), partial (considering that the problem that cooperation must solve affects only the party that requests help) and unilateral (only one party decides), according to Román (2002). In response, new cooperation models have emerged that do not share vertical dynamics, such as South-South cooperation and triangular cooperation (Das 2007, Roy & Andrade 2010, Pérez-Rodríguez 2013, SEGIB 2023), and the new framework already includes Spanish legislation on development cooperation (Law 1/2023, February 20). In recent years, new approaches and criteria have been consolidated that include, for example, dialogue on global policies and their coherence, active participation, partnership, and appropriation of cooperation by national and local actors. In the new, more complex, contexts novel cooperation modalities and instruments have been consolidated, just as the role of multiple actors has expanded, both from the point of view of donors and recipients. In some cases, this has caused a lack of coordination and overlap between the activities of the different actors (Pérez-Rodríguez 2013), making it difficult to manifest, for example, the challenge of ageing on a global scale.

Although in recent years a significant consensus has been built at an international level on the objectives to achieve development and the way forward within the framework of the UN 2030 Agenda and the SDGs, we cannot forget that paradigm changes tend to be slow, especially when traditional ones are entrenched. The stark truth, however, is that currently half of the world's population does not benefit from a social security system, and 80 % of older people do not have a regular income (ECLAC 2023). For this reason, «poverty», one of the main objectives of development cooperation, and specifically in old age, is a very common phenomenon in developing countries undergoing transformation, and no development aid programme can afford to overlook this. The right to social security is part of our human rights. A social inclusion policy must preferably benefit vulnerable social groups in society, and the elderly are a vulnerable group. In this sense, it is appropriate to refer to the need to adapt the SDGs to the new population structure, expressly considering the needs of this great group

of elderly citizens in the same way that the SDG pays special attention to the children, for instance.

Therefore, an international development cooperation policy must have as its objective the social protection of these priority citizens. An important element for this segment of the population is economic security, which is directly related to the degree of universality and decommodification of the type of welfare state, resulting in significant heterogeneities between countries.

Unlike in Spain, where the retirement pension system is public in nature and private pensions have been assigned a complementary role within a multi-pillar architecture, in Latin America private pensions are the main pillar of the pension system after having gone through various privatization processes. Two processes, which began in the 1990s in Chile, have eroded any trace of a public universal retirement pension system like the Spanish one. This reality once again points out that development cooperation cannot ignore the needs of the elderly if, in common agreement with the United Nations Cooperation Framework for Sustainable Development, the public development cooperation policy strives to leave no one behind in its progress towards achieving the SDGs (UN 2019).

The retirement pension system of a country can reduce or accentuate social inequalities in the last stage of life among elderly people aged sixty or over in Latin America, or sixty-five or over in Europe, forcing them to depend on their families or social services, or to continue working in the labour market. In many of these countries, such as Mexico, less than half of the active population is covered by a pension or retirement plan. This implies that many people who have already reached retirement age have to continue working, because there is no public retirement pension system which offers universal access (Angel *et al.* 2017).

The problem of lack of social protection in old age is worsened in the case of women for two fundamental reasons: *a)* they live longer and, as they age, they need more social support and health-care, and *b)* the lack of a viable pension, since the majority of women in these countries are constantly or intermittently out of the labour market, due to assuming the role of caregivers in the family unit, while men, as main breadwinners, continuing working, earning an income and paying contributions to a retirement pension.

Another fundamental element for the quality of life of older people, as mentioned above, is health coverage for the process of physical and mental deterioration that begins at the end of the life cycle. Unlike coverage in Europe, which is practically universal, although with limitations in terms of equity and quality of coverage (Gea-Sánchez *et al.* 2016, Barral Buceta *et al.* 2021), in the Latin American region universalism is in the process of consolidation, con-

ditioned by the position that the individual occupies in social stratification based on, for example, the dimensions of gender, income, type of locality (Medici 2014). The classification with the greatest consensus is the one that divides the cases of the countries into «integrated», «segmented» and «highly segmented systems» (Mesa-Lago 2009), based on the existence of a health system for the entire population or differentiated systems for workers (and their families) from the public sector and the private sector, or for workers in privileged sectors (strategic sectors of the economy or others). Although reforms have been carried out to provide formal coverage to those traditionally excluded, due to being outside the labour market (including a sector of the elderly), universalism is yet to be achieved.

Furthermore, there is no integrated public health network specialised in the needs of the elderly in these countries, although legislation is being approved that can rectify this situation (Díaz-Tendero & Cruz-Martínez 2023). Neither are there sufficiently qualified personnel in medicine and geriatric services to deal with the increasing percentage of older people.

The integration of care and the importance given to it in developed countries has not yet had the same impact in developing countries, but as developing countries register higher rates of ageing and continuous increases in levels of incorporation of women into the labour market, the provision of care is gaining ground as a priority for discussion (Gracia-Ibáñez 2022, Barros *et al.* 2022).

There are also many other issues that must be addressed through international development cooperation aimed at countries with an increasingly elderly population; for example, the problem of suitable housing, the availability of public healthcare centres for those elderly who need special attention, day social centres, better mobility in cities, protection against violence, and so on, are ongoing issues. Given this reality, the following question arises: «Can any development cooperation programme continue to be considered as such if it discriminates based on age against a part of the needy population within the framework of a long-lived society?». In accordance with the Inter-American Convention on the Protection of the Human Rights of Older Persons of the Organisation of American States (OAS 2006, December 13), which is part of public international law and governs the law of its member states such as Brazil, the development cooperation aid programmes must include the elderly as recipients. Article 4 says: «The States Parties undertake to safeguard the human rights and fundamental freedoms of older persons set forth in this Convention, without discrimination of any kind, and to this end: a) they will adopt measures to prevent, punish and eradicate those practices contrary to this Convention».

## 8 Conclusions

Given the rapid increase in the percentage of the elderly population in developing countries, both their governments and international development cooperation bodies must include the problems, and the potential, of this segment of the population in their public development cooperation policies. Many of these elderly individuals may find themselves in a situation of poverty and marginalisation, due to the lack of a public and universal pension system that offers them a regular income. This does not equate to a fair, social, and economic development of the society to which they belong, in accordance with the United Nations Cooperation Framework.

If one of the objectives of development cooperation is to achieve more inclusive societies, this must also include this growing segment of the population. A social inclusion policy must identify the most vulnerable social groups as priorities, such as the elderly in countries with wide social inequalities, as seen in the Latin American region. Old age overlaps with other social inequality gaps resulting, for example, in gender discrimination.

Added to this is the need for a public policy of non-ageist development cooperation, that supports a more inclusive model of society, where there are no barriers or impediments for older people in the economy, in culture, in legislation as subjects of rights and protagonists of citizenship and autonomy, who can participate in influencing the destiny of the city, the country, the family, and themselves. This will only happen when institutions develop and implement age-friendly public policies in the field of development cooperation.

## 9 References

- ÁNGEL J, VEGA W, LÓPEZ-ORTEGA M (2017). Aging in Mexico: Population Trends and Emerging Issues. *Gerontologist* 57(2):153-162.
- ANON (2023). Life Expectancy and Disease Burden in Older People in the Region of the Americas. <https://iris.paho.org/handle/10665.2/57795>, accessed November 24, 2023.
- ARISTOTLE (2015). *Retórica*. Editorial Gredos, Madrid.
- BANDEIRA L (2005) Fortalecimento da Secretaria Especial de Políticas para as Mulheres: avançar na transversalidade da perspectiva de Gênero nas Políticas Públicas. Brasília: Secretaria de Políticas para as Mulheres. <https://periodicos.unb.br/index.php/revistadoceam/article/view/10075/8901>, accessed September 14, 2023.
- BARRAL BUZETA B, BOUZAS-LORENZO R, CERNADAS A, FERNÁNDEZ DA SILVA A (2021). Acercar la equidad a la salud. Un análisis de los planes de salud de las comunidades autónomas. *Revista Española de Salud Pública* 95:e202102029.
- BARROS PFA, ALMEIDA LCC, CARVALHO ACS, SANTANA RF, ISTOE RSC (2022). Contenção ambiental de idosos nas instituições de longa permanência em tempos de Covid-19: reflexão teórica. *Interface* 26:1-15.



- BEAUVOIR S (1972). *Old Age*. Weidenfeld and Nicolson, London.
- BICHIR R, OLIVEIRA MC, CANATO P (2016). Para além da transferência de renda? Limites e possibilidades na articulação intersectorial de políticas sociais. *CADERNOS DE ESTUDOS: Desenvolvimento Social em Debate* 26:81-102.
- BOURDIEU J, KESZTENBAUM L (2007). Comment vivre vieux dans un monde vieillissant? Les personnes âgées en France, 1820-1940. *Population* 62(2):221-252. <https://www.cairn.info/revue-population-2007-2-page-221.htm>, accessed November 24, 2023.
- BUTLER RN (1969). Age-Isms: Another Form of Bigotry. *The Gerontologist* 9(4):243-246.
- CALVO K, GUTIÉRREZ M, MENA L (2017). Entre pasillos: la aplicación de la transversalidad en las Administraciones públicas. *Revista de Estudios Políticos* 178:137-168. <https://doi.org/10.18042/cepc/rep.178.05>, accessed February 5, 2023.
- CARETTE J (2022). *Droit D'Aînesse*. Boréal, Montreal.
- CELADE (2007). Informe sobre la aplicación de la Estrategia regional de implementación para América Latina y el Caribe del Plan de Acción Internacional de Madrid sobre el envejecimiento (LC/L.2749(CRE-2/3)). Santiago de Chile, CELADE. <https://repositorio.cepal.org/items/94df8c16-bd33-4707-8f55-bfb0e2d4fa32>, accessed October 2, 2023.
- CULEBRAS JM, JÁUREGUI-LOBERA I, FRANCO-LÓPEZ A (2020). En la pandemia de COVID-19 no hay camas para todos, ¿a quién tratamos? *Journal of Negative and No Positive Results* 5(6):569-668. <https://dx.doi.org/10.19230/jonnpr.3664>, accessed February 5, 2023.
- DA SILVA SJR, PENA L (2021). Collapse of the public health system and the emergence of new variants during the second wave of the COVID-19 pandemic in Brazil. *One Health (Amsterdam, Netherlands)*, 13:100287. <https://doi.org/10.1016/j.onehlt.2021.100287>, accessed February 5, 2023.
- DAS Z (2007). Towards an inclusive Development paradigm South-South Development Cooperation. Paper presented at the UNDP Forum on South-South Development, 17 October 2007. <https://www.econstor.eu/bitstream/10419/77966/1/64015235X.pdf>, accessed November 24, 2023.
- DEL PINO E, MORENO-FUENTES FJ, CRUZ-MARTÍNEZ G, HERNÁNDEZ-MORENO J, MORENO L, PEREIRA-PUGA M, PERNA R (2020). Informe Gestión Institucional y Organizativa de las Residencias de Personas Mayores y COVID-19: dificultades y aprendizajes. Instituto de Políticas y Bienes Públicos, Madrid.
- DENTE B, SUBIRATS J (2014). *Decisiones públicas. Análisis y estudio de los procesos de decisión en políticas públicas*. Ariel, Barcelona.
- DÍAZ-TENDERO A, CRUZ-MARTÍNEZ G (2023). Políticas públicas y derechos humanos de las personas mayores en la Europa mediterránea y en América Latina y el Caribe: seguridad económica, salud y cuidados de larga duración. *Política y Sociedad (Madrid)*:60(2). <https://revistas.ucm.es/index.php/POSO/issue/view/4236>, accessed October 7, 2023.
- DURÁN L (2021). El enfoque interpretativo: una nueva manera de ver la contabilidad. *Actualidad Contable Faces* 24(42):95-112. <https://www.redalyc.org/journal/257/25767348004/html/>, accessed October 11, 2023.
- ECLAC (2022). Ageing in Latin America and the Caribbean: inclusion and rights of older People. *Envejecimiento en América Latina y el Caribe*. Santiago de Chile, ECLAC. <https://repositorio.cepal.org/items/49ebd6cc-abb-4d04-866b-6ca95bea7bc9>, accessed November 24, 2023.
- ECLAC (2023). El contexto sociodemográfico y económico del envejecimiento en América Latina. <https://repositorio.cepal.org/server/api/core/bitstreams/3db2b60e-f157-4c8a-a9f7-dd307751d13f/content>, accessed October 2, 2023.
- EESC (2023). Opinion of the European Economic and Social Committee on a European Strategy for Older Persons (Exploratory opinion at the request of the Spanish Presidency). *Official Journal of the European Union* C 349, 29 September 2023:28-35.
- ESPING-ANDERSEN G (2003). *Why We Need a New Welfare State*. Oxford University Press, Oxford.

- FALEIROS V (2023). A estruturação do idadismo contra a pessoa idosa. *Oikos: Família e Sociedade em Debate* 34(2):01-20. <https://doi.org/10.31423/oikos.v34i2.15332>, accessed February 5, 2023.
- FERNÁNDEZ-BALLESTEROS R, SÁNCHEZ-IZQUIERDO M (2020). Impacto del COVID-19 en personas mayores en España: algunos resultados y reflexiones. *Clínica y Salud* 31:3. <https://journals.copmadrid.org/clysa/art/clysa2020a25>, accessed September 11, 2023.
- FILGUEIRA F, GALINDOM LM, GIAMBRUNO C, BLOFIELD M (2020). América Latina ante la crisis del COVID-19: vulnerabilidad socioeconómica y respuesta social. Santiago de Chile, Economic Commission for Latin America (ECLAC). <https://www.cepal.org/es/publicaciones/46484-america-latina-la-crisis-covid-19-vulnerabilidad-socioeconomica-respuesta-social>, accessed November 24, 2023.
- GEA-SÁNCHEZ M, TERÉS L, BRIONES-VOZMEDIANO E, MOLINA F, GASTALDO D, OTERO L (2016). Conflictos entre la ética enfermera y la legislación sanitaria en España. *Gaceta Sanitaria* 30(3):178-183. <https://doi.org/10.1016/j.gaceta.2016.02.005>, accessed February 5, 2023.
- GIDEON J (2020). Introducción al COVID-19 en América Latina y el Caribe. *Boletín de Investigaciones Latinoamericana* 39(s1):4-6. <https://doi.org/10.1111/blr.13218>, accessed February 5, 2023.
- GRACIA-IBÁÑEZ J (2022). Derecho al cuidado: un abordaje desde los derechos (humanos), *Serie Sociojurídica de Oñati* 12(1):179-210. <https://opo.iisj.net/index.php/osls/article/view/1330>, accessed February 5, 2023.
- HUENCHUAN S (2018). Envejecimiento, personas mayores y Agenda 2030 para el Desarrollo Sostenible: perspectiva regional y de derechos humanos. ECLAC, Santiago de Chile. <https://www.cepal.org/es/publicaciones/44369-envejecimiento-personas-mayores-agenda-2030-desarrollo-sostenible-perspectiva>, accessed October 12, 2023.
- INE (2023). Movimiento Natural de la Población/Indicadores Demográficos Básicos/Tablas de mortalidad. Año 2022. [https://www.ine.es/dyngs/INEbase/es/operacionhtm?c=Estadistica\\_C&cid=1254736177003&menu=ultiDatos&idp=1254735573002](https://www.ine.es/dyngs/INEbase/es/operacionhtm?c=Estadistica_C&cid=1254736177003&menu=ultiDatos&idp=1254735573002), accessed October 12, 2023.
- Joint Declaration of the European Parliament, Council of the European Union and the European Commission (2017, June 30). Joint statement by the Council and the representatives of the governments of the Member States meeting within the Council, the European Parliament and the Commission on European Union Development Policy: «The European Consensus». *Official Journal of the European Union*, n.º 210/1, 30 June 2017.
- LARRAÑAGA O (2010). El estado bienestar en Chile: 1910-2010. *Estudios PNUD 2010-2*, PNUD de la ONU. <https://www.undp.org/es/chile/publicaciones/el-estado-bienestar-en-chile-1910-2010-0>, accessed September 19, 2023.
- LEBRUSÁN I (2019). La vivienda en la vejez: problemas y estrategias para envejecer en sociedad. Consejo Superior de Investigaciones Científicas, Madrid.
- Ley 1/2023, del 20 de febrero, de Cooperación para el Desarrollo Sostenible y la Solidaridad Global. *Boletín Oficial del Estado* 44, 21 de febrero de 2023, <https://www.boe.es/eli/es/l/2023/02/20/1>, accessed May 10, 2023.
- LOMBARDO E, MERGAERT L (2013). Gender Mainstreaming and Resistance to Gender Training: A Framework for Studying Implementation, *NORA – Nordic Journal of Feminist and Gender Research* 21(4):296-311. <https://doi.org/10.1080/08038740.2013.851115>, accessed April 15, 2023.
- MEDICI AC (2014). Las reformas incompletas de salud en América Latina: algunos elementos de su economía política. *Bienestar y Política Social* 2(1):1-26. <https://international.vlex.com/vid/reformas-salud-america-latina-elementos-271249682>, accessed April 15, 2023.
- MESA-LAGO C (2009). Efectos de la crisis global sobre la seguridad social de salud y pensiones en América Latina y el Caribe y recomendaciones de políticas. Economic Commission for Latin America (ECLAC), Santiago de Chile.
- NOGUEIRA CAG, CAVALCANTE SHA (2019). Efeitos intersetoriais e transversais e seus impactos sobre a efetividade das políticas públicas nos municípios do Ceará. *Revista de Administração Pública* 53(1):64-83. <https://doi.org/10.1590/0034-761220170087>, accessed March 1, 2023.

- OAS (2006, December 13). Inter-American Convention on Protecting the Human Rights of Older Persons (A-70). [https://www.oas.org/en/sla/dil/docs/inter\\_american\\_treaties\\_A-70\\_human\\_rights\\_older\\_persons.pdf](https://www.oas.org/en/sla/dil/docs/inter_american_treaties_A-70_human_rights_older_persons.pdf), accessed November 24, 2023.
- OLIVEIRA MC (2014). Transversalidad em políticas públicas para a juventude: a experiência de trabalho de campo no Plug Minas. *Revista NAU Social* 5(8):21-28.
- ONE (2021). República Dominicana: una población joven con tendencia al envejecimiento. <https://www.one.gob.do/noticias/2021/república-dominicana-una-población-joven-con-tendencia-al-envejecimiento/#:~:text=Miosotis%20Rivas%20Pe%3%B1a%2C%20Directora%20Nacional,poblaci%C3%B3n%2C%20espec%C3%ADficamente%20el%2060.63%25.>, accessed November 24, 2023.
- PÉREZ-RODRÍGUEZ V (2013). La cooperación internacional al desarrollo y la evaluación de sus políticas: una aproximación teórica. Centro de Investigaciones de Economía Internacional, La Habana. <https://biblioteca.clacso.edu.ar/Cuba/ciei-uh/20141013111239/LACOOOPERACIONINTERNACIONALALDESARROLLO-YLAEVALUACIONDESUSPOLITICAS.pdf>, accessed November 24, 2023.
- POPULATION PYRAMID NET (2023). World Population Indicators. <https://www.populationpyramid.net/nicaragua/2023/>, accessed November 24, 2023.
- RICOY-LORENZO C (2006). Contribución sobre los paradigmas de investigación. *Revista do Centro de Educação* 31(1):11-22. <https://www.redalyc.org/pdf/1171/117117257002.pdf>, accessed January 20, 2023.
- ROMÁN E (2002). Cooperación y desarrollo: nueve preguntas sobre el tema. *Amycos*, Burgos.
- ROY R, ANDRADE M (2010). South-south cooperation: The same old game or a new paradigm? *Poverty in Focus 20*, International Policy Centre for Inclusive Growth (IPC-IG), Brasilia. <https://www.econstor.eu/bitstream/10419/77966/1/64015235X.pdf>, accessed November 24, 2023.
- SEGIB (2023). Una Cooperación Triangular innovadora para una nueva Agenda de Desarrollo. Secretaría General Iberoamericana (SEGIB). [https://cooperacion-triangular.org/wp-content/uploads/2023/02/Publicación-Final-CT\\_ESP-V9-7-2-2023-Navegable.pdf](https://cooperacion-triangular.org/wp-content/uploads/2023/02/Publicación-Final-CT_ESP-V9-7-2-2023-Navegable.pdf), accessed October 8, 2023.
- SERRA A (2005). La gestión transversal. *Expectativas y resultados. Revista del CLAD Reforma y Democracia* 32:1-17.
- SOUZA WF (2015). Intersetorialidade e transversalidade em políticas públicas para as juventudes no Brasil. 8<sup>th</sup> Latin America Congress on Political Science, Lima – Peru, 22-24 July 2015.
- UN (2003). Political Declaration and Madrid International Plan of Action on Ageing. <https://www.un.org/esa/socdev/documents/ageing/MIPAA/political-declaration-en.pdf>, accessed November 24, 2023.
- UN (2007). World Economic and Social Survey 2007. Development in an Ageing World. [https://www.un.org/en/development/desa/policy/wess/wess\\_archive/2007wess.pdf](https://www.un.org/en/development/desa/policy/wess/wess_archive/2007wess.pdf), accessed November 24, 2023.
- UN (2019). United Nations Sustainable Development Cooperation Framework. <https://unsdg.un.org/resources/united-nations-sustainable-development-cooperation-framework-guidance>, accessed November 24, 2023.
- UN (2022). World Population Prospects. UN, New York. <https://population.un.org/wpp/>, accessed September 13, 2023.
- UNDP (2023). Human Development Index (HDI). Human Development Reports-PNUD. <https://hdr.undp.org/data-center/human-development-index#/indicies/HDI>, accessed November 24, 2023.
- VILLA M, GONZÁLEZ D (2004). Dinámica demográfica de Chile y América Latina: una visión a vuelo de pájaro. *Revista de Sociología* 18:81-116. Universidad de Chile, Santiago.
- WHO (2015). World Report on Ageing and Health. <https://www.who.int/publications/i/item/9789241565042>, accessed November 24, 2023.
- WHO (2021). Global Report on Ageism. Pan American Health Organization – World Health Organization (PAHOS-WHO). <https://www.paho.org/en/documents/global-report-ageism>, accessed September 9, 2023.
- WORLD BANK (2023a). World Development Indicators. <https://datatopics.world-bank.org/world-development-indicators/>, accessed August 8, 2023.

WORLD BANK (2023b). The World Bank Data. <https://data.worldbank.org/country>, accessed September 12, 2023.

WORLD JUSTICE PROJECT (2023). Rule of Law Index 2022. <https://worldjustice-project.org/rule-of-law-index/global/2022>, accessed November 13, 2023.

ZABALA ARGÜELLES MC, FUNDORA NEVOT GE (2022). Interseccionalidad, equidad y políticas sociales. FLACSO, La Habana.