

## CHAPTER 22

# Aging in Exile: Family Support and Emotional Well-being among Older Cuban Immigrants in the United States

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*Iveris Martinez*

For to contemplate return ... is again to come face to face with the pain of exile, with a sharply refocused sense of lives, and homes, and youth, all gone forever, with the gnawing discomfort that goes with being an immigrant, no matter how privileged an immigrant, in America, and with the inexpressible, desolate sense all exiles the world over share of being at ease and at home nowhere on earth.

David Reiff, *The Exile: Cuba in the Heart of Miami*

In the shade of the palms of Maximo Gomez Park in the heart of the Little Havana neighborhood in Miami, Florida, older Cuban men can be seen playing dominos from eight in the morning to six in the evening any day of the week. Maximo Gomez was a hero of the Cuban War of Independence, otherwise known in U. S. history books as the Spanish-American War. The park is locally known as the "Domino Park." The quiet chatter of the tiles, the hushed conversation of the men, and the intense concentration is only broken by brief, but fiery, verbal altercations or the delivery of a lunch meal by a wife or friend. These men are exiles. And domino playing helps them remember.

Domino playing is a popular pastime in the Caribbean and elsewhere. To many Cubans, and especially older Cubans in Miami, domino playing is an intensive, all-consuming, sometimes daily activity. Men play on the streets, with friends, at senior centers throughout the city, or at family gatherings. The Domino Park is full everyday of older Cuban men (many widowed or otherwise unmarried) who pass the time in lively play, conversation, and companionship. Until recently, women did not play dominos either at the park or elsewhere in public. However, older women can now be seen playing alongside men at senior centers, and city-wide tournaments.

Domino playing in this small, inconspicuous park stands as a popular local icon of “Cubanness” in exile. In fact, the park is a popular stop for tourists visiting Miami. However, digging below the surface, what emerges at the park and elsewhere throughout the city where older adults congregate, including senior centers, is an intricate venue of representation, of networking, and of identity formation among a displaced and isolated segment of the population—elder Cuban exiles that have recently arrived or who have aged in exile since the triumph of the Cuban Revolution in 1959. In playing dominos, these men (and increasingly women) are engaged in a process of remembering the past, maintaining a distinct identity in exile, coping with loss, and establishing a sense of community, which includes “fictive” kinship in the absence of relative or blood kin. Domino playing is one way of expressing their exile identity while resisting this very same condition. This park merely opens a door to the social and cultural isolation experienced by older Cuban adults in one of the most ethnically concentrated regions of the United States. In this chapter, I will highlight how the shared experiences and the language of exile are invoked to talk about familial support and emotional stressors among older Cubans residing in Miami, Florida.

But first, to understand the cultural and social context of Cuban elders in South Florida, it is useful to understand some aspects of the history and unique demographics of this immigrant group. The great majority (nearly 90 percent) of older Cubans residing the United States fled Cuba in the 1960s due to the rapid political and economic changes occurring on the island after the Cuban Revolution of 1959 (see Condon, Burton and Rothman 1994). The majority consider themselves political exiles. Emotional distress (in the form of



Domino Tournament in Downtown Miami

depression and anxiety) in this community is often attributed to their exiled condition. Portes and Rumbaut have noted that "Migration can produce profound psychological distress, even among the best prepared and most motivated and even the most receptive circumstances" (1990: 144). Despite their relatively privileged legal status as refugees and the social capital brought by early waves of postrevolutionary immigrants, Cubans in South Florida experience stressors of immigration, weakening of social ties, and intergenerational conflict, not unlike other immigrants. As immigrants by definition, they inhabit multiple spaces or worlds: that of their culture of origin and that of the host society. How these spaces are occupied and the ability to successfully negotiate these two worlds is crucial to everyday life.

Aging is a demographic and social phenomenon mediated by structural and phenomenological realities. In other words, the way aging is experienced socially has a much to do not only with cultural expectations, but also social context such as the availability and quality of social networks. The proportion of older Cuban immigrants in the United States to younger persons of Cuban descent is relatively large. At the turn of the century, the median age for Cubans<sup>1</sup> in the United States was nearly fifty years (compared to thirty-five years for the overall U.S. population), and one-third of this population is sixty-two years of age or older (U.S. Census Bureau 2000). Over one-fifth (22.6 percent) of persons of Cuban origin in the United States are sixty-five and older, compared to 5.1 percent of overall Hispanics and 14.4 percent of the non-Hispanic white population (Ramirez and de la Cruz 2002).<sup>2</sup> This is due in large part to politics and resulting patterns of migration that favored older immigrants and fertility rates in Cuba that had begun to drop since the 1950s (Diaz-Briquets and Perez 1981). For example, immigration figures from the first half of the 1990s showed a continued influx of elderly Cuban immigrant population, with approximately 25 percent of incoming Cubans over fifty-five years of age (U.S. Immigration and Naturalization Service, 1990–1995).<sup>3</sup> But how do these figures translate to the lived social experience and stresses of older adult immigrants?

For older Cuban immigrants, the ideology of exile that imbues their everyday life is both political and affective. Forty years after migrating, this group self-identifies primarily as Cubans and exiles. Familial and intergenerational relations, ethnic identity, and politics are seen through this lens. As older generations age and die out, and younger adults assimilate, the politics of exile have become more moderate (Navarro 1997). Despite attempts to pass on the culture they were raised in and their identity as political exiles to their children, cultural values and distinct generational experiences shaping the meaning of Cubanness (*Cubanidad*) are being transformed before their eyes.

## SOCIAL DRAMA AND THE ELDER CUBAN COMMUNITY

In 1998, I returned to Miami to conduct my dissertation work<sup>4</sup> prompted by earlier short-term research at the aforementioned Domino Park. I volunteered in a senior center, engaging in participant-observation, conducting in-depth

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semistructured interviews with seventy-nine older adults of Cuban descent over age sixty, as well as focus group interviews (Martinez 2001; 2002). Individual interviews were conducted in Spanish and lasted one to two hours. They covered a broad area of topics, including migration history, ethnic affiliation, familial ties, social engagement and satisfaction, as well as self-reported health. The center was located in a census tract with approximately 82 percent of the population of Cuban origin, with a high concentration of persons sixty-five and older. I had made several initial visits in 1997 to establish what the salient issues were for older Cubans residing in South Florida. Mental health concerns were raised numerous times. The health care practitioners I spoke to in the selected region of Miami had noted a high number of cases of depression, anxiety, and loneliness. In fact, this senior center was established by a local hospital as a recreational “wellness” program in order to reduce the high number of unnecessary hospitalizations due to apparent psychosomatic illness among the elderly. The senior center was using space donated by a local Catholic church.

Senior centers are useful fieldwork sites since they are oftentimes “social arenas” for constructing social networks and provide the elderly an opportunity for engaging in and acting out “social dramas” (Cuellar 1978; Myerhoff 1979; Hegland this section; Tsuji Part V Web book). The agency of older adults in creating and using “spaces for aging,” including senior centers, is also described by Hegland in the case of Iranians in California (this section). In the case of the senior center where this fieldwork was carried out, it served as a place to create social networks for a majority of elders living alone, and provided a range of activities including domino playing, prayer groups, dancing, painting, crafts, and theatrical skits. Many of the activities at the center were initiated and led by the seniors themselves. The social dramas of *Cubanidad* were acted out not only in their daily interactions with each other, but also were highlighted at special events, which always included exhibits of paintings, arts and crafts, as well as theatrical skits and poetry recitals.

One such event was the center’s third anniversary, celebrated in February 1999 with a Valentine’s Day theme. An art exhibit was set up at the entrance, as well as a table selling a cookbook and Spanish idiom book written by the club members. Almost all of the 250 members attended dressed in their best clothing. Twenty-five round tables were set up near the stage end of the church hall used for the senior center during the daytime. They were decorated with heart balloons and heart-shaped stress balls that doubled as weights and later were given away as souvenirs. The stage was decorated with white trellises and red curtains and paper hearts by Raul, one of the club members who always volunteered to decorate for such events. Rey, a former television producer in Cuba, was the master of ceremonies, announcing the speakers, who included the director of the local hospital’s wellness division, the head of the senior center’s advisory committee, and two of the club volunteers. The advisory committee was comprised of club members elected to represent the interests and concerns of the members to the director.

The director gave a speech (accompanied with slides) reviewing the history of the center, and a short professional video recorded over a year ago as a promotion of the club. Many seemed to enjoy seeing themselves on screen. Awards were given to the “members of the year”—there was a tie between Maria and Evelyn. Maria, who had been a member for under a year, was very popular among the ladies who sat at the crafts table due to her sense of humor. Evelyn was an active dancer and participated in all the exercise classes, sometimes taking over for the teacher in her absence. Rey was also given “honorific mention.” The volunteers (including myself) and the member of the advisory committee were given a certificate of appreciation. These signs of recognition were valued by the members and older volunteers, many of whom had no other source of validation.

Prior to a Cuban-style lunch, Raul read a poem by Gema, another club member, titled “*Generaciones*” (Generations), as well as a poem titled “*Plegaria a la Virgen María*” (Prayer to the Virgin Mary) by the deceased “exiled” poet Ernesto Montaner. The poem is a plea to the Virgin Mary to save the Cuban people from the tyranny of Castro, who is not mentioned by name, but described by his deplorable acts. Raul emphasized his recitation by kneeling or raising his arms and eyes.

The senior center served multiple purposes. It provided emotional and physical sustenance for the older adults in the neighborhood. Lunch was only a dollar, and was a significant help to older adults living on limited incomes. Many left immediately after lunch was served. The majority lived on incomes of less than \$10,000 a year (the approximate poverty level for a household of one in 1998), relying mainly on modest incomes from social security checks. Despite the popular myth of the Cuban success story, many of the elders at the center had experienced a negative change in their occupational status after immigration. For example, many of the women had gone from being home economics teachers (a popular course of study among the older women) and/or housewives to factory workers in exile.<sup>5</sup> Lourdes, one of the volunteers, a divorced woman without children in her late sixties, shared with me that while she did not get paid for volunteering, the gifts of appreciation she received from other seniors at the center helped her immensely. It meant being able to dress a little better (she often got gifts of makeup and costume jewelry), and get out of the one-room efficiency she lived in by herself. It therefore served as a means of social support as well.

### ETHNIC CONCENTRATION AND SOCIAL ISOLATION

The median age of the group of Cuban elders interviewed at the center was seventy-five. One-third had arrived in the United States past the age of forty-five; the rest came at an age when many were raising young children. More than three-quarters had come to the United States in the period just after the Revolution of 1959, but prior to the Mariel Boatlift in 1980.<sup>6</sup> On average, they had arrived forty-one years before, with one-third living in Miami less than

twenty years. Several had been relocated to New York, Chicago, or Washington, D.C., upon arrival in Florida, and had a “return migration” to Miami in recent years (Boswell 1994). Three-quarters of this sample cited a political reason for leaving Cuba. The rest said that they had left to join family, with a minority citing economic motives for immigration.

Persons of Cuban origin are the most geographically concentrated of any Hispanic heritage ethnic group in the United States, and three-quarters of this population resides in South Florida (Ramirez 2000). This continued ethnic concentration is unusual in the history of immigration in the United States and contributes to the lived experience of older Cubans, including the language they speak (Spanish), who they socialize with (mostly, though not totally, other persons of Cuban origin), and what they talk about. Cuban politics, U.S.-Cuba relations, and the shared experience of migration are a large part of social and public discourse.<sup>7</sup>

In the 1960s and 1970s, many Cuban immigrants began to settle in the densely populated area of “Little Havana” near downtown Miami. This is the site of the Domino Park, the *Calle Oche* carnival, several cigar-making shops, and other symbols of Cubanness in the city of Miami. In the last three decades, the Cuban immigrant population has pushed away from the downtown areas of the city, northward as well as south and west into the suburbs of Miami-Dade County.<sup>8</sup> There are pockets of naturally occurring retirement communities (NORCs) of Cuban elders extending westward along major roads in the central part of the county, with younger populations residing in suburban southwestern reaches of the county—effectively “ghettoizing” certain pockets of older adults and creating a geographical and social distance with younger generations for those not living with families.

Older Cubans in Miami also live in a linguistically isolated world. Virtually all older Cubans in Miami-Dade listed Spanish as their language of choice, and almost half did not speak English at all (Condon, Burton, and Rothman 1994). While the majority were naturalized citizens, in 2000, 94 percent of Cuban-born persons residing in the United States spoke only Spanish at home, and of these 60 percent reported not speaking English very well. In my own sample, one-third reported no English language proficiency, and all but two persons reported speaking anything other than Spanish with friends, the great majority (90 percent) of whom were of Cuban-origin. For those persons with children, nine out of ten spoke to them in Spanish only, and only two out of ten with grandchildren spoke to them in English. Moreover, the default language of information they received was in Spanish. This, coupled with relatively lower educational levels, can create a level of dependency on younger generations when information is not available in Spanish.

### **FAMILY AS SOCIAL SUPPORT OR STRESSOR?**

Caregiving and the nature of social support are impacted in part by living arrangements. Intergenerational living arrangements among older Cuban immigrants have been steadily decreasing since the 1960s (see Arias 1998). The

three-generation household and the economic contribution of the elderly were important in the socioeconomic reestablishment of the early waves of Cuban immigrants after the Revolution (Perez 1986; Arias 1998). However, the multi-generational household among Cuban-Americans has steadily declined in the decades since 1959 and has been replaced by nuclear family living and persons living alone. The type of households has also changed. Cuban elders, especially elderly widowed women, head more households.<sup>9</sup> Nonetheless, a survey in Miami-Dade County, Florida, found that of the 72 percent Cuban elders who reported living with at least one other person, 41 percent lived with children and 15 percent with grandchildren (Condon, Dunlop, and Rothman 1994).

The average household size for the older adults I interviewed was less than two. One-half of those interviewed at the center were widowers. While slightly more than half lived alone, living arrangements varied greatly. While 27 percent reported being currently married, only 17 percent lived with a spouse or partner as several appeared estranged from their spouses. Of those interviewed who did not live alone or with their spouse seven lived with a daughter, three with a son, six in multigenerational households, and the rest with assorted relatives and nonrelatives.<sup>10</sup> While intergenerational values remain important, intergenerational differences in English language proficiency and acculturation have led to a decreased role of grandchildren in the daily lives of older adults as indicated by the decrease in intergenerational households. So while there may be values of extended familial support, the reality reflects a great variety in actual support available and a continued decline in intergenerational familial arrangements.

As one might expect, the quality of social support varied in relation to complex factors, including familial histories and life course trajectories (Cattel and Albert Part II). The role of family as a supportive network is seen as central to mental health among scholars of immigrant health in the United States. While common predictors for psychological distress among Mexican, Cuban, and Puerto Rican elders in the United States included poor health and unmet needs in social services, for Cubans dependence on others, familial conflict, and living alone stand out as predictors for poor mental health (Mui 1996). The senior center served as a place for the development of social support beyond the family, when family support failed due to geographical distance caused by the migration of children to other counties or states, the separation from kin in Cuba, the loss of family members (spouses and siblings) due to death, or otherwise dysfunctional relations.

Despite a certain geographic, linguistic, and social isolation, family, and intergenerational relations played an important role for the older Cubans in the center, even for those living alone and who do not have day-to-day in-person contact with family. Family is usually part of the core support system for older adults, though this varies across cultures, family structure, the availability of other supportive structures, and state policies (Shenk and Christiansen 1997; Sokolovsky 2002; Lowenstein 2005). Research on social support structures of Latino elders has been conducted largely with Mexican American samples and

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centered on the notion of “familism.” Family is often the motivation for immigrating at older ages, and is the de facto source of social support (Angel, Angel and Markides 2000). While the perception of family as central to support does not appear to change with acculturation among Latinos, the sense of familial obligation and the family as referents do appear to decline, therefore certain familial values may be upheld in principle but may also be contradicted by their actual behavior (Sabogal et al. 1987). In this regard, research on Latinos has sometimes overlooked the structural and life course processes that impact the availability and quality of support (Miller-Martinez and Wallace 2006). The family is assumed to be the “natural” support network for the elder without considering the impact—structural, cultural, and psychosocial—of immigration on the family and declines in health (Bastida 1988; Angel et al. 2004; Gonzalez Vazquez et al. 2007).

The meanings of family and kinship are understood through a cultural interpretation of perceived structural changes, taking into consideration historical and symbolic processes from a life course approach. For older Cuban immigrants with whom I spoke, the concept of family extended beyond spouses and children to include siblings, cousins, grandchildren, and nieces and nephews. The family support that Cuban elders in Miami experience was quite different from the kin context they were born into. It has been affected by several factors, including decreasing fertility, separation from kin across borders, and changes in intergenerational values (see Martinez 2002). The elders that I interviewed were born before Cuba went through its demographic transition, and therefore came from relatively larger families than what they themselves had. It is not unusual to meet an older adult from a family of eight or even sixteen. For example, my Cuban grandparents on my mother’s side were from families with nineteen children each! However, 18 percent of these same elders never had children, and 23 percent no longer had any children alive.<sup>11</sup> No one in my sample had more than three children, and on average they had only one remaining child and two grandchildren. However, siblings and extended familial relationships also play an important role in the Cuban concept of family life. While the number of siblings still alive ranged widely from none to nine, on average they had two living siblings. Therefore, the density of available kin support, be it lateral or vertical kin, is dramatically less than what their parents’ generation would have experienced.

A common complaint centers around changes in these elders’ roles within the family. There has been an increasing trend towards Cuban elders living alone; therefore, older adults may not play such a prominent role in the day-to-day decisions of the extended family. Nevertheless, the majority expressed satisfaction with their interaction with their children and siblings. This may be because for Cubans the “functional” solidarity of the family extended beyond the household and was generally of a reciprocal nature (see Arias 1998; Bengtson, Lowenstein, Putney, and Gans 2003). The majority of the elders who do not live with their children or in multigenerational households maintain regular contact through daily or regular phone calls and sometimes weekly or less



frequent visits. A few paid extended visits and even vacationed sometimes with their children. Elders with adult children and grandchildren may provide care for their grandchildren, especially during summer vacation or school holidays. They also helped out families financially with gifts in kind or money in return for chores. However, they acknowledged that this contact was not the same as living together, and that in the end, it is for the best. The elders seem to perceive that older adults can be otherwise recognized as a "nuisance," and therefore, they prefer to maintain their distance in terms of living arrangements. Geography and the constraints of modern life were also an explanation for decreasing contact. Children may live far away and be busy with their jobs and raising their own families.

Contact with siblings, if they resided in the United States, usually took the form of visits and frequent phone calls. If brothers and sisters resided in Cuba or abroad, their exchange was necessarily limited to infrequent phone calls and letters, and in a few cases sending remittances in the forms of cash and goods to help their families on the island. Despite the politics of the embargo, relationships with family extended beyond the reaches of their immediate locale and across borders. Almost half had immediate close kin remaining in Cuba, including siblings, children, and even some parents. Of these, 84 percent regularly sent money and goods to them despite their overall support for the embargo against Cuba. Nevertheless, contact with family in Cuba has always been a contentious issue. The ease of travel sending money to Cuba has fluctuated with changes in United States law and the political climate of Miami at the time. Until the mid 1970s, travel back to the island was prohibited, and even today is only permitted for immediate family. Given this situation, "family" takes on not only its usual emotive role, but also a political one. Travel and contact with family on the island was more readily accepted by women and those who immigrated after 1980, while the subject was generally considered taboo among men and those who immigrated immediately after the Revolution. Divides between families, either due to personal politics or law, are a cause of stress and distress that older Cubans have been managing for decades.

### ***PEQUEÑOS FIDELITOS (LITTLE FIDEL CASTROS): EXILE AND THE ROLE OF FAMILY IN EMOTIONAL WELL-BEING***

At age sixty-nine, the impeccably and fashionably dressed Sylvia was independent and her health very good. However, her memory and emotional health were not. Sylvia exhibited a high level of depressive symptoms, took pills in order to sleep, and was seeing a psychiatrist for depression. Sylvia joined the senior center (which she referred to as *El Club*) when her sister, who was like her "umbilical cord," died. Despite what some might consider an active social life, she complained of loneliness.

Sylvia came to the United States in 1961 from a small town in central Cuba via Costa Rica. After arriving in Miami, her family then relocated to New York where her sisters lived. She lived in Brooklyn for five years with her

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husband and daughter until she had her second child, a son, and their apartment became too small. With the encouragement of a nephew living in California, the family moved to Los Angeles. About ten years ago, her son suggested that Sylvia move closer to her sisters who had retired to Miami. At the time, she was separated from her husband and living alone. Since arriving in South Florida, Sylvia had resided alone in an apartment on Miami Beach owned by her brother. She emphatically stated that she preferred not living with either of her children (both still in Los Angeles) in order not to make them “bitter.”

Sylvia was fluent in English and became a U.S. citizen in 1966. She said she realized then that Castro would be in power a long time and that she would not return to Cuba. Nevertheless, when asked her ethnic identity, she proudly stated that she considered herself “100 percent Cubana” and an exile. She got her news from Radio Mambi, one of the oldest Cuban exile “news” talk radio stations. Sylvia had a relatively good income from real estate investments and a pension, and relatively few expenses. She contributed money and time to several exile organizations, participating in their demonstrations against the Cuban government. She believed it her duty to do so. Meanwhile, her relationship with her three remaining sisters (whom she moved to Miami to be near) was strained to the point that she did not speak to them. Interestingly, she referred to one of them as a “little Fidel Castro.” Sylvia concluded that life has taught her that the world is full of little Fidel Castros.

As can be seen by Sylvia’s own words, the experience and language of exile colors relations with family and often overlapped with emotional well-being in the daily lives of Cuban elders. Sylvia described her difficulties with her sisters and others by generalizing and comparing these persons to Fidel Castro, the communist dictator who came into power over forty years ago, precipitating her exile and that of hundreds of thousands of Cubans. Sylvia’s case suggests that poor mental health may be conflated with several sociocultural factors including marital disruption, strained family ties, and an adherence to the ideology of exile. Sylvia’s story is but one of many. Her example provides a glimpse of the complex lives, experiences, motives, contradictory views, and emotions of the Cuban elders I interviewed at the senior center in Miami.

The challenges and stresses of family life and the experience of exile are ever present and oftentimes emerge spontaneously in everyday life. During my fieldwork in Miami, I attempted to collect life histories of a limited number of informants to record more detailed examples of the experience of aging of the Cuban elderly in Miami from a life course perspective.<sup>12</sup> I had proposed to lead a voluntary workshop at the senior center. However, my numerous attempts at recording life histories largely failed. The workshop was met with mixed and largely negative results. I found that among these Cuban elders, the life review was largely a spontaneous event, and not to be actively recorded or worse yet, scheduled.<sup>13</sup>

When asked about the importance of life review for Cuban elders in Miami-Dade, Dr. G., a local clinical psychologist working largely on

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depression, said that he did not believe in “fixing what was not broken” or what did not surface. In this context, he held that a life review is the equivalent of picking at an open wound due to the discontinuity of their life stories caused by exile. Instead of resolve, a life review brings a painful reminder—it opens up what in fact remains unresolved in some cases due to the vicissitudes of history and culture. Dr. G. suggested that the exercise of a life review may bring up the fragmentation of life and family with the different waves of exodus from Cuba.

Moreover, the life review was also associated with confronting the death of loved ones and one’s own mortality. While this was a relatively healthy group of elders, conversations about death were generally avoided and disassociated from the self. Despite the difficulties of a structured life review, the Cuban elders I interacted with did spontaneously reminisce. This could occur at any given moment. Dreams, an event, or a “familiar” location might trigger it. When they did reminisce, Cuban elders did so with great enthusiasm, even if it was about difficult topics, such as stories of persecution and hardship during the early years of the Revolution.

For example, on an outing with seniors from the center to a city-sponsored event on a cruise ship docked in the port of Miami, Rey, the television producer mentioned earlier, turned to me and stated in his typical sardonic, yet jovial, tone that that he hoped that we weren’t hijacked back to Cuba. As we made our way up the gangway, he continued to tell me the story of the harassment he suffered as he tried to leave the country shortly after the triumph of the Revolution of 1959. Rey told me he worked at one of the local television stations in Havana as a producer of comedy sketches and musical specials, and was transferred to producing political segments. For eleven months, he said, he worked without pay and with a heavily armed soldier (*miliciano*) at his back to make sure he did not sabotage the productions. Recently married and with a small child, he was driven to poverty and forced to move in with his parents. His parents gave him bus fare. Rey reminisced about pacing in an insomniac state back and forth in his room while his young wife watched him. He said it made him *mal de los nervios* (sick from nerves). When he was finally granted an exit permit, he was subjected to the *actos de repudio* (ritualized harassments targeting those who were planning to leave the island).

When I interviewed Rey, over thirty-five years after he had left Cuba, the memories were fresh enough to be spontaneously recalled. A heavy smoker and formerly heavy drinker who had survived pancreatic cancer, Rey was generally in good spirits. At age seventy, he attended the center every day with his wife who was ten years younger, and transferred his skills in show business to daily life at the senior center by writing and staging theatrical skits for every party at the center, usually associated with holidays such as Mother’s Day, Valentine’s Day, or Christmas. The skits, and the ones about exile in particular, followed the format of Cuban theatrical sketches and often referred to popular characters in the pre-1959 world of entertainment, making it difficult for persons of other generations, such as myself, to follow.

### MENTAL HEALTH AMONG OLDER CUBAN IMMIGRANTS

Mental health issues among Cuban elders, including dementia, carry a degree of stigma that may affect responses to direct questioning (see Williams et al. 2001). Some of the people I interviewed in my time in Miami took a defensive attitude when asked any questions related to their mental and emotional health. Others were quick to perceive what the questions, such as the Geriatric Depression Scale (GDS),<sup>14</sup> were to “measure” and accordingly shifted their answers to reflect this. For example, after several responses that might indicate depression, they might switch to responding to the remaining questions to indicate the opposite. One woman said to me directly, “I know what you are getting at ... you are trying to see if I am crazy, aren’t you?” During my observations at the center, the distinction between *mal de los nervios* and *mal de la cabeza* (sick in the head) and *loco* (crazy) became quite evident.<sup>15</sup>

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Clark and Anderson argue that “mental disorder is a social judgement placed on an individual by various institutions in his society” (1980:21). From this perspective, it is acceptable within the Cuban community to be *mal de los nervios*, but it is less acceptable to be *mal de la cabeza*, which implies a more severe and permanent state and is a highly stigmatized category. However, to be “sick in the head” is not as severe as “to be crazy” (*estar loco*) as it does not necessarily compromise the person’s ability to function on a daily basis. To be *nervioso* can refer to an anxious or depressed state, or any other acceptable, but usually temporary, emotional imbalance. Some persons may be *nervioso* as a personality trait, but this does not hinder social interactions and functioning. To see a psychiatrist may imply that they must be crazy.

Moreover, the few elders with apparent cognitive deficits that attended the center were often ostracized. Henderson observed experiences of family shame among spouses caregiving for Alzheimer’s patients within a largely Cuban American population in Tampa, Florida (Henderson this section Web book). The shame of poor mental health extended onto the fictive family members of the center. In fact, Lourdes, the volunteer who took me under her wing and introduced me to many of the persons I interviewed, often tried to act as a gatekeeper, keeping me away from those persons she thought were not emotionally stable enough to be interviewed. On more than one occasion, persons I had interviewed talked to me concerning information they had shared with me about their family and their mental health. Their concerns were usually relieved when they were reassured of their anonymity.

How prevalent were emotional problems in this population? Depressive symptoms, as measured by the commonly used Geriatric Depression Scale<sup>16</sup> (GDS), were only slightly higher (at 18 percent) to the prevalence of depression in the general older adult population, which is estimated at 15 percent (Ossip-Klein, Rothenberg and Andresen 1997) and higher than the 10 percent prevalence of depression found in a younger Cuban American population, using a similar scale in another study in the Miami area (see Narrow et al. 1990). Culture, as illustrated previously, dictates how we respond to the world

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around us, and therefore may influence symptom manifestation, how we measure the prevalence of mental disorders, as well as responses, including stigma associated with a disorder, whether or not treatment is sought, and what type. I therefore asked a more general question of how they would rate their present emotional health as excellent, very good, good, fair, or poor. I also asked if they had ever felt depressed or sad (*deprimido o triste*) for two weeks or more in the last ten years, and whether they had sought professional treatment for these feelings. While less than one-fifth scored with depressive symptomatology, 41 percent describe their emotional health as regular or poor, and a little over half reported being depressed for two weeks or more in the past ten years. Forty-seven percent reported seeking any type of treatment, including the use of medications.<sup>17</sup> Medication used for sleeping was quite common and acceptable. These, along with antidepressants and sedatives, were often prescribed by a primary care physician.

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Depression is clearly not the only mental health issue in this community, though it may be one of the most common. Anxiety disorders also prevail according to local psychologists. This became evident throughout the interviews about their reported use of medication for anxiety. Fourteen percent of those surveyed reported taking medications for anxiety. Almost 18 percent take sleeping pills regularly.<sup>18</sup> It appeared that sleeping pills were often prescribed after the death of a spouse or other traumatic life event such as diagnosis of a major illness, such as cancer or heart disease. Though there was little mention of alternative treatments among the seniors at the center, *tilo* or tea made from linden flowers is a popular remedy for “nerves” and insomnia. It may be that depression and other mental health concerns are underestimated among older Cuban immigrants by standard scales such as the GDS.

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Local psychologists I spoke to also reported Post Traumatic Stress Disorder (PTSD) as common and always under-diagnosed among Cubans in exile. Depression and anxiety are commonly associated features with PTSD (Reid 1995:190). Symptoms for PTSD are seen following an event (whether experienced, observed, or related to a family member or other “close associate”) that is extremely traumatic and experienced with intense fear, terror, and/or helplessness. These traumatic events typically involve death, serious injury, or a threat to one’s physical integrity. Symptoms of PTSD usually appear within the first three months and include reexperiencing the trauma, persistent avoidance, and/or increased arousal, such as irritability and sleeplessness. However, PTSD among Cubans may be latent—its delayed onset is triggered by other events like the terminal illness of a spouse that may trigger feelings, such as hopelessness, similar to those experienced when arriving in the United States (Martha Corvea, personal communication, December 7, 2000). For example, a sixty-five-year-old man’s wife is diagnosed with a malignant disorder that he can do nothing about. Hopelessness and a feeling of “not being safe anywhere” trigger feelings of how he felt when he came to Miami thirty years ago; symptoms show in anger, resentment, or substance abuse (Ibid.). While the majority of older immigrants fled due to threats posed by the establishment of a

Marxist-Leninist dictatorship both to their way of life and their safety,<sup>19</sup> there has been little work on the psychological impact of violence in this population relative to other issues such as dementia.<sup>20</sup>

19

20

According to another psychologist who has been working in Miami on a clinical project on long-term care for elderly Cuban dementia patients, due to language barriers, and their unfamiliarity with the concepts of dementia and formal service system, elders are lost without the help of their families. However, when there are strained intergenerational relations, this can pose strong barriers for attaining needed services. "Fatalism" and notion of "destiny" may be one factor deterring service use (see Abraído-Lanza et al. 2007 for summary and critique). Several older adults I interviewed at the center who complained about memory loss also expressed fear of how they would be cared for if they became ill. However, none of them had long-term care plans and were reluctant to make any. They hoped that family might take care of them, though they recognized the limits of this given the fact that even if they did have children, as one woman who lived with her son and daughter-in-law explained, they both had to work and therefore would probably not be available to care for her. Nursing homes and boarding homes where many expected they might end up were referred to as "*la casita*" (the little house).

Just recently, sitting in a waiting room at a local doctor's office, where all the clients were sixty and over, I engaged an older couple in conversation. Rosa is an elegantly attired eighty-five-year-old woman who looked at least fifteen to twenty years younger, and was sitting with her husband Luis, aged eighty-three. Luis told me about his weekly domino games with his friends, held at each others' houses. They used to be held in his house until they sold their apartment because it was too large for them alone. They did not speak of any children, but Rosa did tell me that her unfortunate sister used to live with her daughter, but was asked to move out by her son-in-law, after the grandchildren had grown. During my fieldwork, I had previously heard this story of older parents living with children until they had outgrown their usefulness as babysitters for grandchildren. Luis simply stated that they would have to see what happens when they could no longer care for themselves, but that he was resigned to not expecting any help. While it is unlikely that they will not have any help, the reality is that they will probably not get the help they would expect. Families usually come together in times of crisis, but as indicated by decreased intergenerational living arrangements, help cannot be expected on a daily basis.

Immigrants, and particularly political exiles, must strike a balance in everyday life between identifying with their country and culture of origin and integrating into the host society or new place of settlement. This is not an easy thing for Cuban exiles to do when it means letting go of the dream of returning, which is tantamount to accepting defeat, especially among the more politicized and older segment of the population. This may especially be the case in Miami where the social milieu perpetuates the preoccupation of exile through media, politics, and commercial endeavors. The situation may also be

exacerbated by the quality of familial ties connecting people to their homeland, both within and between generations.

Changes from extended family living arrangements to living alone or with their spouse and the dwindling contact with children, and especially their grandchildren, were explained as the result of “life under a different system.” There was some disagreement as to whether the perceived changes in the family were the result of a different “system” itself (i.e., the country or culture) or a change in time (through the historical evolution of things). Still others believed that the quality of intergenerational exchanges was due to the elder’s responsible “upbringing” of their family. This of course perplexed those who had tried to do everything “right” and encourage intergenerational solidarity in their children and grandchildren, but who did not receive as much as they expected in return.

### **CHANGING INTERGENERATIONAL ENGAGEMENT WITH CUBAN CULTURE**

My research took place at a particular moment in the Cuban American experience, forty years after the Revolution of 1959. Cuban popular culture’s infiltration of American mainstream life was at an all-time high since the days of the mambo craze and Desi Arnaz belting out “*Babalu*” on television in the “I Love Lucy” show of the 1950s (see Perez-Firmat 1994). Cuban music experienced a renaissance with the release of Ry Cooder’s recording of the “Buena Vista Social Club,” salsa dancing classes proliferated in dance clubs across the country, and there was renewed popularity of smoking Cuban cigars (made in the Dominican Republic or Central America). However, this time around, Cuban culture in the United States is being mass consumed by Cuban Americans, the children and grandchildren of exiles.

For Cubans and their descendents, this commercialization is couched in terms of “nostalgia.” The nostalgia is not simply for things Cuban, but for things Cuban pre-1959. The business potential of this market was noted in the business section of the *Miami Herald*, in an article titled “The Cuba Craze: Havana’s Golden Era is Rich in Opportunity” (Whitefield 1999). The article highlights the growing market potential for dealing in things “Cuban.” What is being sold includes antiques, cigars, stamps, music, and beverages, such as rum, beers, and soft drinks.

Nostalgia appeals to those Cuban Americans who were not born in Cuba and who have never been there. Bill Teck, the thirty-one-year-old founder of *Generation ñ*, a magazine aimed at first-generation persons of Latino descent of Generation X, was quoted as stating, “It is the weirdest thing in the world being nostalgic for a place you’ve never been ... It’s a longing for a weird fantasy place that doesn’t exist and possibly never existed—except in the minds of our elders.” It was from this article that I first learned of the Cuba Nostalgia event to be held at Coconut Grove Convention Center on May 15–16th, 1999, in “commemoration” of May 20, Cuba’s Independence Day. It was advertised

as “A trip through yesterday’s Cuba” and an intergenerational event that claimed to “demonstrate[s] Cuban life, culture and heritage.” The timing of the event is symbolic since for Cubans in exile the celebration of Cuban Independence Day is a bittersweet event. For exiles, Cuba is no longer a free country because of the long-standing Castro dictatorship. In fact, the national drink of “*Cuba Libre*” (Free Cuba) is often defiantly asked for as “*una mentirita*” (a little lie).

The event was clearly advertised as an intergenerational affair. The poster for the event, which was printed in newspaper advertisements in the local papers and was available in postcards, depicts a gray-haired grandfather dressed in a *quayabera* (typical Cuban dress shirt for men) with a little boy (presumably his grandson) on his lap. The logo—in red, blue, and white with a lone star in a red triangle and a blue strike—is reminiscent of the Cuban flag. Many of the advertisements made references to Cuba, or the past, alluded to remembering, or the continuation of tradition. The event is now in its ninth year. Yet, the relationship to Cuban culture, history, and values, however commoditized, is different across the generations. As one seventy-five-year-old woman commented to me as she was having difficulty recollecting specific events while attempting to write her life history, “Cubans lost the thread of [their] history when they came over here [to the United States] ... exile has made them lose their [genealogical] line.”

#### **LA PATRIA ES LA FAMILIA (THE NATION IS ONE’S FAMILY)**

While the direct link often made in the community between exile and poor emotional health is not supported by quantitative analysis, there appears to be a significant relationship between exile and poor familial relations; there is also a relationship between poor familial relations and poor emotional health. This suggests that emotional well-being may be related to the quality of family relationships in the context of political immigration or exile (see Martinez 2001). Ideologies play a role in the interpretation of inevitable structural changes of the family through time (see Martinez 2002). The fact that their children and grandchildren were now Americans (*americanos*) was the “price paid for liberty.” One man reflected that while the great majority of children of Cubans born and raised in the United States would not even think of going to Cuba, for they have made their lives in the United States, the definition of the homeland is the family. So while family and nation are often inextricably linked for Cuban elders, as family changes, so does the relation to the homeland.

Immigrants to the United States that are labeled as political and seen as involuntary, such as in the case of refugees and Cuban exiles, may enjoy a certain degree of acceptance in host communities than so-called “economic” immigrants. They also usually have the added benefit of relatively quick “normalization” of their legal status. However, immigration, whether political or economic, voluntary or involuntary, often entails similar difficulties of adaptation to a new and unknown environment. These difficulties include separation



from kin, lower socioeconomic status vis-à-vis the larger population, and discrimination, as well as changes in the quantity and quality of family social support. This was coupled by the “involuntary” separation of families due to the largely political nature of the immigration, and unexpected changes in the structure and quality of familial relations (see Martinez 2002).

This population provides a case example to explore the implications of aging “out of place” among immigrant elders and the multidimensional issues of migration, identity, familial relations, and well-being in aging beyond the language of ethnicity and culture to that of ideological constructs of community. Migration may be experienced as a drastic change in life course and expectations. It can lead to rapid changes in familial dynamic due to changes in available social support and values. Their example may provide an opportunity for a broader understanding of aging among displaced persons and the cultural patterning of well-being among immigrant groups. This carries important implications for social as well as health care policy. Given the rapidly increasing and aging population of Latinos in the United States, mental health among immigrant elders is a subject worthy of further understanding.

## NOTES

1. Refers to foreign-born Cubans, compared to Cuban-origin, which includes foreign-born and those born in the United States.
2. The median age for persons of Cuban origin (compared to Cuban-born) is lower at forty years, due in part to the demographic characteristics of immigration from Cuba.
3. Several authors have postulated that the unusually older population structure of the Cuban population in the United States is due to both low birth rates and selective immigration patterns (Perez 1992: 97).
4. This research was supported by a Mellon Grant through the Department of Population Dynamics (currently the Department of Population, Family and Reproductive Health) at the Johns Hopkins Bloomberg School of Public Health and a grant from the National Institute on Aging (R03 AG16279-01A1).
5. A large proportion of Cubans leaving in the early 1960s experienced a permanent negative change in socioeconomic standing (46 percent of my sample). Several of the persons interviewed expressed a sense of being “*recogidas*” (taken in) by the United States, but not feeling a part of this country. A sense of powerlessness and alienation in aging has been precipitated in some cases by the fact of migration. Some, but not all of the women interviewed may have been considered middle class back in Cuba by our standards. However, more importantly, it seemed that regardless of class women were not expected to work outside the home. A broader network of family support, including shared household resources, may have contributed to keeping women outside the workforce.
6. Cubans have a long history of migration and exile to the United States, and particularly South Florida (see Poyo 1989). Geography, as well as, economic and political interests, have inextricably linked their histories for centuries (Portes and Stepick 1993). This interconnectedness dates from the time of the Cuban struggle for independence from Spain to the present. Since the late 1800s, “Cuba gradually converted Florida into her own political backstage, where the dramas, and sometimes comedies, were

enacted" (Portes and Stepick 1993: 94–95). Miami would later become the "moral community" of Cuban immigrants (Ibid. 107). The volume and flow of immigration between Cuba and the United States since the late nineteenth century has waxed and waned in relation to the political and economic environments on either side of the Florida Straights, but remained low in comparison to the migrations of the last forty years. A few of the elders I interviewed migrated in the late 1940s and 1950s as very young adults. Some were escaping rural poverty in Cuba or seeking greater job security; a few were opposed to the Batista regime. After the Revolutionary War of 1959, en masse migration to the United States by Cubans took on a different meaning and characteristic, and a new definition of exile. Cubans now entered the United States officially as refugees. The initial flow of Cuban exiles to the United States after 1959 consisted principally of upper-middle-class professionals, business owners, and political rivals (primarily known sympathizers of the former Batista regime) who were hardest hit by the establishment of a communist regime in Cuba, and who thought that their exile was temporary and focused their efforts on immediate survival and deposing the new regime. The failed attempt to overthrow the Castro regime in 1961, known as the Bay of Pigs Invasion, and the Cuban Missile Crisis in 1962 ended the illusion of a temporary exile for these initial waves of migration and secured their status as political exiles. The initial exodus was then followed by a large immigration in the mid 1960s of older Cubans through the Family Reunification program via the Freedom Flights, an airlift also known as the aerial bridge (*punte aereo*) from 1965 to 1973. Approximately 451,000 Cubans immigrated to the United States between 1960 and 1967. Contrary to popular belief, by the mid 1970s the waves of "golden exiles" (i.e., upper-middle-class and professional persons) came to represent, at least economically, the spectrum of Cuban society (Aguirre 1976). Racially, "white" Cubans have been overrepresented in the migratory waves up to 1980 (over 90 percent). The flow of Cuban refugees remained relatively slow throughout the 1970s after the end of the "Freedom Flights." The next most notable influx was in 1980, during the Mariel Boatlift, at which time approximately 125,000 Cubans entered the United States (Borneman 1986). Mariel brought to the community persons who had lived under Castro's regime for over twenty years, including younger persons and those of suspected criminal backgrounds, causing many tensions in the Cuban community of Miami, but which were eventually overcome. With a rapidly rising number of boat people in 1994, the Cold War over, and the threat of another mass exodus like Mariel, Cubans were denied the special and automatic immigration status as political refugees that they had held for nearly thirty years (see Perez 1999).

7. Although the Cuban population in the United States was initially settled in the major urban centers of New York and Chicago, as well as South Florida, Miami has had a continuous pull for Cubans, even among those originally settled elsewhere in the United States. Despite the efforts of the Cuban Relocation Program, a "trickle back" was being witnessed as early as the 1970s; this phenomenon of "return" migration to Miami has intensified in the last twenty years (Boswell 1994). This is contrary to the historical tendencies of immigrants in the United States to move away from their ethnic enclaves and assimilate. Among Hispanic elders, there is a greater tendency to move across state lines among other older Americans in general (Biafora and Longino 1990: S214). By 1990, 65 percent lived in the state of Florida, and 54 percent of all Cuban Americans lived in Dade County, in contrast to 1970 when 46 percent of all Cuban Americans lived in Florida, while less than 24 percent lived in Miami-Dade (Boswell 1994: 11). Cubans are the most highly concentrated of Hispanic groups in the United States (Biafora and Longino 1990). Explanations for this phenomenon include the

comparable climate, proximity to Cuba, and socioeconomic benefits of the ethnic enclave. Cuban elders have been even less geographically dispersed, concentrating mostly in Dade County, Florida (Queralt 1983:54). Biafora and Longino propose that "geographic concentration of Hispanics is attractive to older migrants because it facilitates a comfortable and familiar life style." (1990: S213). Forty-nine percent (thirty-nine persons) of those interviewed at the center lived in the area immediate to the senior center. Another thirty persons (38 percent) lived in the city of Miami, including Little Havana (four) and Coral Gables (twelve). Seven persons lived further west in Westchester and another three lived in neighborhoods north, south, and east of the center. Length of time in current residence was fourteen years (i.e., since the mid 1980s), indicating some residential stability. Roughly half lived in houses and another half live in apartments. More than half owned the structures they lived in (53 percent), and the rest rented (38 percent) or had other living arrangements.

8. Over 50 percent of the area known as Westchester is Cuban, while Little Havana is now less than 30 percent Cuban.

9. Arias (1998) analyzed Census data from 1970, 1980 and 1990 and found that "Of all age groups within the Cuban population, individuals 65 and older experience the most pronounced changes in living arrangements. In 1970, 51 percent of the Cuban elderly population lived in complex family-households, while only 31 percent did so in 1990. No other age group experienced such a change. A good amount of extended living was replaced by single and simple family living. In 1990 elderly Cubans were twice as likely to live in single households as they were in 1970." (Arias 1998:31)

Proportionally fewer Cuban elders lived in their children's households in 1990 and more were living with siblings than in 1970 (Arias 1998:32). Nonetheless, about 21.2 percent of Cuban American children in the United States had at least one grandparent living with them (Perez 1994).

10. One person lived with a grandchild. A few others lived with other relatives (three) and nonrelatives (three).

11. The prevalence of childlessness has varied greatly through time by birth cohorts and across cultures. The reasons for childlessness are often complex and diverse. Childlessness has been related to average age of marriage, marriage rates, historical events, economic opportunities and policies. Overall childlessness for older women and men in the United States is 15 percent according to the National Survey of Families and Households (Koropeckyj-Cox, Vaugn, and Call 2007).

12. Holzberg notes that "life history allows us to gain access to the conceptual world of the individual" and is a valuable source in presenting "the insider's view of the past and reflect the underlying perceptions the story tellers have of themselves and their world" (1984:262). This can help shed light on a culture from the example of individual lives, exploring the juncture of aging with lived historical time (see Myerhoff 1979 for example).

13. There is no consensus as to whether reminiscence or life review is a normative process in later life. Some believe it is beneficial in terms of adaptation, resolution, coping with loss, preservation of self-identity, and continuity of the past and present (Sellers 1997). In fact, life reviews are often used in the context of mental health therapy. Some health care professionals hold that the life review is a natural part of later life and meets a need at this time of the life cycle. Others hold that the life review is a middle-age phenomena and less relevant beyond a certain age (Coleman 1986).

14. The short version of the Geriatric Depression Scale (GDS) in Spanish was administered as part of the survey (Sheikh and Yessavage 1986). A score of five or more is generally suggestive of depression.

15. There is some evidence of low rates of emotional well-being and high rates of depression among Cuban Americans in South Florida. A needs assessment conducted in Miami-Dade County, Florida, (Rothman, Dunlop and Condon 1994) found that relative to other ethnic groups, older Cubans self-report a lower degree of life satisfaction and emotional health. These findings are corroborated by earlier work of clinical family psychologists who practiced in south Florida and outlined several factors affecting the mental health of Cuban elders, including the lack of English language skills, knowledge of "American culture," social isolation and loneliness (Szapocznik, Faletti and Sopetta 1979; Hernandez 1992). However, with the exceptions of several brief articles by Bastida (1984; 1987; 1988), the mental health issues and the context of psychological distress among Cuban elders in the United States has gone unexplored.

16. While the reliability and validity of the Geriatric Depression Scale (GDS) was demonstrated for "community-dwelling" elders, one study suggested it may underestimate severe depression [0] in older Hispanics (Ossip-Klein, Rothenberg, and Andresen 1997:189-90). Others have found that the GDS may be of limited usefulness in screening for depression among Mexican American elders since there may be basic differences in how these elders present symptoms (Espino et al. 1996).

17. More recent studies have explored the prevalence of psychiatric disorders and mental health service use compared across Latino subgroups (Losada et al. 2006; Alegría et al. 2007a; Alegría et al. 2007b). While there are differences in both the lifetime and twelve-month prevalence of psychiatric disorders when examined by Latino subgroups (Puerto Ricans, Cubans, Mexicans, and "other") or by nativity (U.S. born, those arriving as children, and those arriving after age six), these differences are not statistically significant (Alegría et al. 2007c). However, contextual factors, such as family status and social status, were related to the risk of disorders in all Latino groups (Ibid.).

18. This, however, is not dramatically higher than the general U.S. population. The prevalence of anxiety symptoms among community dwelling elders is around 20 percent (Sheikh 1992: 426). The use of benzodiazepines (a class of sedative-hypnotics) used in the treatment of anxiety and insomnia ranges from 5 to 15 percent according to surveys (Atkinson et al. 1992:529). A recent study using data from the National Health and Nutrition Examination Survey (NHANES) found that the overall prevalence of prescription psychotropic medication use in the past month in the U.S. population was 11.1 percent in 1999-2002, up from 6.1 percent in 1988-1994. This was due largely to a three-fold increase to 8.1 percent in antidepressant drug use during the same time period. For the population aged sixty and over, the prevalence of prescription psychotropic drug use rose significantly from 10.6 percent to 14.9 percent. There was no significant increase among Mexican Americans of all ages, who reported a 4.5 percent and 4.6 percent use for each time period, respectively; the reported use of antidepressants, though relatively low, did rise significantly from 1.7 percent to 3.1 percent. Sedatives, anxiolytics, and hypnotics remained low at 3.8 percent for the overall population, 6.7 percent for the sixty and over population, and 1.7 percent for Mexican Americans in 1999-2002.

19. The continued imprisonments of dissidents have been documented by Amnesty International, Human Rights Watch, and others (see Americas Watch 1989). While there is a general lack of public tolerance for moderate or any other political views other than conservative ones with regard to Cuba and U.S. politics, the ideology of exile is more than political.

20. Studies on Cuban elders have emphasized more specifically the prevalence of dementia and its impact on family caregivers compared to non-Hispanic whites and blacks

(see Henderson this volume Web book). Demirovic et al. (2003) found that Cuban ethnicity was independently associated with the prevalence of Alzheimer's disease, with prevalence rates for both Cuban women and men higher than non-Hispanic whites, but lower than African Americans. Stress experienced by Cuban wives, in particular, as caregivers was found to negatively impact family functioning (in comparison to non-Hispanic and husband caregivers); this has been attributed to the central role of women in the family (Mitrani et al. 2006). Cuban Alzheimer's patients were more likely to be living with their daughters, and daughters were more depressed than non-Hispanic white counterparts (Mintzer et al. 1992). Cuban American husband and daughter caregivers in a family therapy and technology-based intervention were found to show greater improvements in depression (Eisdorfer et al. 2003).