



Sexual health and economic empowerment of young women and girls in Cuba

Exploring the role of social norms

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Key messages

- This paper brings together evidence on the links between social norms and sexual and reproductive health (SRH), as well as between social norms and women's economic empowerment (WEE), with a particular focus on Cuba. Social norms intersect with SRH and WEE in multiple ways and can contribute to the success or failure of interventions targeted at each of those two areas. While some social norms are disabling or discriminatory, others are enabling or more positive.
- Social norms related to sexual behaviour can expose women, girls, men and boys to risks and vulnerabilities. Norms that emphasise women's submissiveness can limit girls' decision-making about sex, shape fertility choices and influence access to SRH services.
- Women tend to do paid work as long as it meets certain conditions – namely, that it: benefits the household; does not threaten the position of men; and does not interfere with the caring and household work that women are expected to provide.
- Policies and laws, facility-based interventions, skills training courses, empowerment initiatives and awareness-raising can improve SRH and WEE and could indirectly transform social norms related to SRH and WEE. A holistic approach including sex education at school, provision of childcare services, mass media campaigns and interventions targeting men and boys, is likely to be most effective in shifting social norms around SRH.
- The review also suggests a number of areas for further research, including a focus on adolescents and young women, vulnerable and under-researched groups, and gender-based violence.

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Acronyms

ANAP	Asociación Nacional de Agricultores Pequeños (Cuban National Association of Small Farmers)
CPA	Cooperativas de Producción Agropecuaria (Agricultural Production Cooperatives)
ART	anti-retroviral therapy
ARV	anti-retroviral
CCRD	Centro Cristiano de Reflexión y Dialogo (Christian Reflection and Dialogue Centre)
CCS	Cooperativas de Crédito y Servicios (Credit and Services Cooperatives)
CCT	conditional cash transfer
CDA	Center for Democracy in the Americas
CEDAW	Committee on the Elimination of Discrimination against Women
CEM	Centro de Estudios de la Mujer (Center for Women's Studies)
GENESEX	Centro Nacional de Educación Sexual (National Center for Sex Education)
CEPAL	Comisión Económica para América Latina y el Caribe (Economic Commission for Latin America and the Caribbean)
CEPDE	Centro de Estudios de Población y Desarrollo (Center for Population and Development Studies)
CESJ	Centro de Estudios de la Juventud (Centre of the Studies of Youth)
CNPITS/VIH/SIDA	Centro Nacional de Prevención de las ITS-VIH/SIDA (National STI/HIV/AIDS Prevention Centre)
CPA	Cooperativas de Producción Agropecuarias (Cooperatives of Agricultural Production)
CUC	Cuban convertible peso
CUP	Cuban peso
ELA	Empowerment and Livelihood for Adolescents
EMTCT	Elimination of Mother-to-Child Transmission
ENIG	Encuesta Nacional Sobre Igualdad de Género (National Survey of Gender Equality)
ENSAP	Escuela Nacional de Salud Pública (National School of Public Health)
FEU	Federación Estudiantil Universitaria (University Student Federation)
FMC	Federación de Mujeres Cubanas (Federation of Cuban Women)
GAC	Global Affairs Canada
GDI	Gender Development Index
GDP	gross domestic product
GER	gross enrolment ratio
GII	Gender Inequality Index
GNI	gross national income
GrOW	Growth and Economic Opportunities for Women
GSHS	Global School-Based Student Health Survey
HBV	Hepatitis B
HDI	Human Development Index
HIV	human immunodeficiency virus
ICRT	Instituto Cubano the Radio y Television (Cuban Institute of Radio and Television)

ICT	information and communications technology
IEIT	Instituto de Estudios e Investigaciones del Trabajo (Instituto for Labour Research)
INSTEC	Instituto Superior de Ciencia y Tecnología (Higher Institute of Science and Technology)
IUD	intrauterine devices
ILO	International Labour Organization
IVF	in vitro fertilisation
IPS	Inter Press Service
LAC	Latin America and the Caribbean
LGBTQ	lesbian, gay, bisexual, transgender and queer
LMICs	low- and middle-income countries
MICS	Multiple Indicator Cluster Survey
MINSAP	Ministerio de Salud Pública (Ministry of Public Health)
NEET	not in education, employment or training
NGO	non-governmental organisation
NASC	Cooperativas de Creditos y Servicios (Non-agricultural and Services Cooperatives)
NSS	non-state sector
ODA	official development assistance
ONAT	Oficina Nacional de Administración Tributaria (National Tax Administration Office)
ONEI	Oficina Nacional de Estadística e Información (National Office of Statistics and Information)
PAHO	Pan American Health Organization
PMTCT	prevention of mother-to-child transmission
PCC	Partido Comunista de Cuba (Communist Party of Cuba)
PPP	purchasing power parity
SDG	Sustainable Development Goal
SIGI	Social Institutions and Gender Index
SRH	sexual and reproductive health
STI	sexually transmitted illness
TPC	Trabajadores por Cuenta Propia (Self-employed workers)
UBPC	Unidades Básicas de Producción Cooperativa (Basic Units of Cooperative Production)
UCJ	Unión de Jóvenes Comunistas (Communist Youth Union)
UMAP	Unidades Militares de Ayuda a la Producción (Military Units for the Aid of Production)
UN	United Nations
UJC	Unión de Jóvenes Comunistas (Union of Communist Youth)
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
USSR	Union of Soviet Socialist Republics
UNICEF	United Nations Children's Fund
WEE	women's economic empowerment
WHO	World Health Organization

Executive summary

This literature review brings together evidence on the linkages between social norms and sexual and reproductive health (SRH), as well as between social norms and women's economic empowerment (WEE). Our focus is on Cuba but we also present broader evidence from the Latin America and Caribbean (LAC) region and low- and middle-income countries (LMICs). We focus on adolescent girls and young women (those aged 15–24 years) as they transition from childhood and adolescence into adulthood. Globally, today's cohort of young people (aged 10–24 years) is the largest in history and 90% of them live in LMICs. In the Caribbean, adolescents and youth now comprise more than a quarter (26.6%) of the population – the largest share in the region's history. Yet we know that adolescents and young people are often overlooked by policy-makers as they fall between the binary categories of 'children' and 'adults'.

Social norms intersect with SRH and with economic empowerment in multiple ways and can contribute to the success or failure of interventions targeted at each of those two areas of policy and programming. Despite a greater focus on these issues recently, women and girls still face barriers in accessing SRH services and decent and productive employment. During adolescence, gender- and age-related social norms become more rigidly enforced and more personally salient. For example, many adolescent girls in LMICs face problems due to SRH issues, linked to early marriage, early pregnancy and childbearing, and the risk of contracting HIV and other sexually transmitted illnesses (STIs). Similarly, parents with limited resources may choose to educate sons rather than daughters, while educated girls often find it more difficult to get a decent job due to their limited access to information and networks along with norms about men being the family 'breadwinners' and

women having to shoulder most of the domestic and care responsibilities.

Cuba offers a distinctive research context to explore social norms, SRH and economic empowerment of adolescent girls and young women due to: (a) its revolutionary origins and commitments to social equality and women's emancipation; (b) recent government efforts to transform the state-controlled economy inherited from that period; (c) the serious economic problems Cuba faced with the collapse of its strategic patron, the Union of Soviet Socialist Republics (USSR) in 1990, and again since 2005–2006 with the shrinking of Venezuela's capacity to honour its policy of subsidising Cuba; and (d) the decline of the welfare sector and end of the guarantee to work.

Furthermore, although there are no official statistics on poverty or income distribution, recent estimates suggest that poverty has increased substantially in the past 15 or 20 years. However, Cuba ranks 73rd on the Human Development Index (HDI) (2018) and has enviable indicators on health and education, among other areas. Its record on gender equality is similarly mixed and even contradictory: though the Revolution granted many freedoms (such as abortion, maternity laws, equal pay or access to education and work), Cuba remains a society that continues to advantage men and discriminate against women. The culture of machismo prevails, idealising men as the family breadwinners who must be 'hyper-masculine, virile, strong, paternalistic, aggressive, sexually dominant and unfaithful', while women are idealised as mothers whose primary activity is to care for the family and do all the housework. Because of its particular political history, most research on Cuba has focused on political developments and the relationship between the state and its citizens; there is less research on the

daily lived experiences of individual girls and women, boys and men.

Summary of findings

Overall, this review has found that while some social norms are disabling or discriminatory, others can be considered enabling or more positive. Thus, for instance, some of the revolutionary period's doctrines concerned social equality and women's emancipation, which was manifested in the value placed on high levels of education for women and their participation in the labour market. However, women were also (and continue to be) the main caregivers in the household, thus they ended up facing a double burden. The review illustrates how these contradictory norms operate. Despite some enabling and positive norms, in general the evidence suggests that there is still some way to go to address discriminatory norms and to tackle persistent gender inequalities that largely work to women's disadvantage.

More specific findings on our two areas of interest are as follows.

Social norms and sexual and reproductive health

- Social norms related to sexual behaviour can expose women, girls, men and boys to risks and vulnerabilities. In Cuba, the machismo culture encourages some men to have sex early, to have multiple partners and to use condoms inconsistently. Norms that emphasise women's submissiveness can limit girls' decision-making about sex and in particular their ability to negotiate safe sex. Social norms also shape fertility choices, and girls are initiated into womanhood through a major celebration when they reach their 15th birthday (*quinceañera*). Norms around contraception, abortion, pregnancy and birth can also influence whether and when adolescents access SRH services. Norms related to specific vulnerable groups – especially lesbian, gay, bisexual, transgender and queer (LGBTQ) people and illegal workers – can affect their access to services and their SRH outcomes.
- Overall, the evidence suggests that policies and laws, facility-based interventions, empowerment initiatives and awareness-raising can improve SRH and could indirectly transform social norms related to SRH. In the Cuban context, the state provides various SRH services free of charge, and a range of awareness-raising interventions (from sex education at school to mass media campaigns and interventions targeting men and boys). The findings suggest that a holistic approach, with interventions across all four areas, is likely to be most effective in shifting social norms around SRH. For adolescents, a more coordinated cross-ministerial strategy could help to address their SRH needs.

Social norms and women's economic empowerment

- Social norms interact with broader gender inequalities in both the state and non-state economic sectors and affect women's economic opportunities and empowerment in various ways. Thus Cuban women do not have equal access to better-remunerated (and typically considered 'masculine') jobs or to leadership and managerial positions. On the contrary, they remain in lower-paid jobs with less control and ownership of assets than men; most self-employed women do not own their business but are independent workers.
- Women continue to have primary responsibility for the household and care, and they tend to undertake work that reproduces their domestic roles, remaining in (and apparently preferring to keep control of) the home while they also generate an income from various types of work they can do from home. Evidence suggests that they are allowed to undertake paid work as long as it benefits the household, does not threaten the position of men, and does not interfere with their care and household commitments. Overall, the literature suggests that social norms in Cuba have a deep foundation in gender identity and culture, which will require more than legislation to shift.
- In terms of interventions on women's economic empowerment, research finds that

in Cuba, there are some important drivers of norm change (such as high levels of education for girls and women) that could enhance women's economic empowerment. On the other hand, there are significant constraints in place. These include norms, beliefs and values around ideals of masculinity and femininity, which have led to a strongly gendered division of labour that sees women expected to prioritise their domestic and care responsibilities over paid work, and to choose types of work considered appropriate for women, leading to occupational segregation in the Cuban labour market.

Gaps and research questions

Our literature review has identified the following evidence gaps and suggestions for further research on social norms and SRH and on social norms and women's economic empowerment in Cuba.

1 Social norms and sexual and reproductive health

- **Focus on adolescents and young women:** Most of the literature on SRH in Cuba concerns women in general rather than adolescents and young women in particular.
- **Focus on vulnerable and under-researched groups:** Vulnerable adolescents (e.g. those living with HIV, street youth, adolescents with disabilities, LGBTQ youth, and adolescents engaged in sex work) require special support and services but are often stigmatised and face barriers in accessing services. There is little evidence about access to SRH services among these vulnerable youth groups in Cuba.
- **Gender-based violence:** More research is needed on the linkages between gender-based violence and SRH.
- **Norms around adolescents' childbearing intentions:** There is a need for research into the social norms that influence Cuban adolescents' decisions to have children early and, in particular, the role of the *quinceañera* (a girl's 15th birthday celebration) in shaping social norms around childbearing age.

- **Norms, attitudes and practices among service providers:** There is a need for research that explores whether women, men or vulnerable groups face barriers related to the attitudes and practices of SRH providers.
- **State media campaigns:** The Cuban government has used TV shows and radio call-in programmes to promote messages about gender equality and SRH, though little is known about their impact and public perceptions of these campaigns and whether they influence social norms.
- **Information and communications technology (ICT):** There is a need to explore how the rise of new media (and particularly social media) in Cuba is transforming (or could transform) access to and information about SRH among adolescents.
- **Influence of international NGOs:** The increasing influence of international non-governmental organisations (NGOs) in Cuba might be a theme that could be explored in the context of SRH and women's economic empowerment.

2 Social norms and women's economic empowerment

- **Focus on adolescents and young women:** Little is known about the economic activities of older adolescent girls and young women, and the influence of norms on their economic empowerment.
- **Focus on vulnerable and under-researched groups:** There is a dearth of evidence on two groups: (1) older adolescent girls and young women who work in the informal sector (e.g. girls and young women working at *paladares*, beauty parlours, stores, hotels and other service sector or tourism-related jobs); and (2) black adolescent girls and young women, who appear to be concentrated in certain types of jobs and sectors (i.e. tourism, restaurants).
- **Effects of recent economic reforms on adolescent girls and young women:** Much remains unknown about the effects of the recent economic reforms in Cuba on women in general and on adolescent girls and young women in particular, especially in terms of whether new work opportunities are opening

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- up for them, or whether work and study opportunities may in fact be closing.
- **Economic participation of adolescent girls and young women in the state sector, the non-state sector and the illegal market:** There are important research gaps about the experiences of older adolescent girls and young women working in the service or the informal sector, their working conditions, salaries, ability to apply their skills, to voice their concerns and opinions, and the norm-related challenges they face in the workplace. The same gaps exist in relation to professional young women working as technicians or administrators in the state sector.
 - **Major factors that influence the situation of girls who do not study or work:** Some evidence suggests that many Cuban girls fall into this category, partly because of a lack of family support to study or work. Other factors may also be at play, such as domestic responsibilities or lack of appropriate economic opportunities.
 - **Adolescent girls' and young women's education and work transitions:** There is a lack of evidence on girls' and young women's transitions, either from high school to university or work or from university into work. We also know little about how young women see their future roles in the workplace or at home. Although some programmes support them during these transitions, there is limited evidence on programme content and effects, including any explicit components tackling harmful social norms or their impact on transforming such norms.
 - **Sexual harassment and violence in the workplace:** There is little evidence on how sexual harassment and gender-based violence might be affecting women's economic empowerment. We also found no studies exploring whether women experience intimate partner violence over decisions to take up paid work, or if fear of such violence deters them from working.

1 Introduction

For young people, enjoying good sexual and reproductive health (SRH) and developing the relevant economic capabilities and foundations for economic empowerment are crucial for a successful transition to adulthood. Globally, today's cohort of young people (those aged 10–24 years) is the largest in history and 90% of them live in low- and middle-income countries (LMICs) (Fatusi, 2016). At the beginning of the twenty-first century, adolescents and youth constituted more than a quarter (26.6%) of the total population in the Caribbean region¹ – the largest share in the region's history (Allen, 2013).

Adolescence is a critical time for boys' and girls' physical, social, cognitive and emotional growth (GAGE, n.d.). During adolescence, gender identities are formed and gender inequalities increase (PAHO, 2013). Adolescence is also the stage when most girls and boys have their first sexual experiences (ibid.). Likewise, this stage of life is crucial in determining young people's paths to achieve productive employment and decent work.

Despite recent efforts, women and girls still face barriers in accessing SRH services and decent and productive employment. For example, many adolescent girls in LMICs face problems due to early marriage, early pregnancy and childbearing, and HIV and other sexually transmitted illnesses (STIs) (Fatusi, 2016). The International Labour Organization (ILO) has noted the challenges that young women and adolescent girls face regarding their economic empowerment (ILO, 2009). When households have limited resources, parents may have to choose whether they educate their sons or daughters, and it is daughters that usually lose out. Furthermore, even if girls are more educated, they experience more difficulties in finding a

job due to their limited access to information channels and job search mechanisms compared to men, as well as employers' preference for hiring young men rather than young women. When young women do find work, it is typically in jobs that are lower-skilled and lower-paid, in the informal economy, with little job security. Dropping out of school – whether to marry early, have a child or take up paid work – not only reduces adolescent girls' future prospects, but can also transmit cumulative disadvantages from one generation to the next (ILO, 2017a).

Adolescents and young people are often overlooked by policy-makers as they fall between the categories of children and adults. For example, attempts to meet adolescents' SRH needs might be discouraged because they are considered 'children' (PAHO, 2013). Likewise, the school-to-work transition can be a long and difficult process that is not well understood even though it is a policy priority for many countries. Young people who are more capable of starting their careers in stable employment are those who have acquired higher levels of education and training. Likewise, in all regions, young people experienced a shorter transition to work when they combined work with study (ILO, 2017a). Thus, training, skills development and education are crucial to improve and sustain young people's productivity and income-earning opportunities at work (ILO, 2009).

During adolescence, gender- and age-related social norms become more rigidly enforced and more personally salient (GAGE, n.d.). Adolescent girls are disproportionately disadvantaged compared to boys (Kabeer, 2018). While boys tend to have more opportunities and freedoms during adolescence, social norms often negatively affect girls' educational trajectories, economic

1 See definitions of 'adolescence', 'youth' and 'young people' in Table 1.

opportunities and time poverty (related to care workloads). Social norms can also be a cause of early marriage, gender-based violence and girls' diminished physical and mental health and sense of agency (GAGE, n.d.).

Definitions of social norms vary. Generally, there is agreement that social norms are 'beliefs about which behaviours are appropriate within a given group' (Yaker, 2017: 3). Social norms are influenced by group identity. Whether someone complies with social norms depends on multiple internal and external factors. It is important to emphasise that social norms describe often implicit rules governing behaviour rather than behaviour itself. Recent approaches in international development have centred around ideas that social norms derive from expectations about what people do and expectations about what one should do (Yaker, 2017). Gendered norms are social norms expressing the expected behaviour of people of a particular gender, and often age, in a given context. Embedded in formal and informal institutions, they are produced and reproduced through daily interactions without always being understood or clearly articulated. Yet they are part of, and contribute to reproducing, gendered power relations and gender inequalities in all spheres of life (Marcus, 2018). In this review we speak about social norms or gendered norms interchangeably, but we refer to gendered norms.

Social norms intersect with SRH and women's economic empowerment in multiple ways and can contribute to the success or failure of interventions targeted at each area. Social norms can either have positive impacts on women and girls or negative when they lead to discrimination. Recently, there has been more interest in understanding how social norms and constraints affect outcomes for women and girls. For example, reviewing evaluation literature on policies and programmes designed to promote women's livelihood capabilities across the life course, Kabeer (2018) finds that programmes targeting women might not reach adolescents due to structures of constraint, and that women's high care workloads can negatively affect the success of women's empowerment initiatives. In a review of projects funded by the Growth and Economic Opportunities for Women (GrOW)

programme, Marcus (2018) finds that norms around women's work, reputation and caring responsibilities in particular affect women's access to economic opportunities and their work experiences. She argues that we still know little about which norms facilitate women's economic empowerment and about how norms affect women's activity throughout the life course.

Cuba is an interesting context in which to study social norms and SRH as well as social norms and economic empowerment of older adolescent girls and young women. Various studies have investigated reproductive health (e.g. Andaya, 2014; Härkönen, 2014) and women's economic empowerment (e.g. Nuñez, 2010; Romero-Bartolo, 2011; Pino et al., 2017) in Cuba. However, no study has brought together the available evidence on SRH, women's economic empowerment and social norms. There is also limited evidence on the linkages between adolescence, SRH, economic empowerment and social norms in the Cuban context. Because of its particular political history as a communist country, most research on Cuba has focused on political and historical topics and the relationship between the state and its citizens; there is less research on the everyday lived experiences of individuals (Härkönen, 2014). The United Nations Population Fund (UNFPA) country programme for Cuba has cited gender equality as one of the key priorities for data collection and programming (UNFPA, 2011).

This literature review brings together existing evidence on the linkages between SRH and social norms as well as between women's economic empowerment and social norms in Cuba and more broadly, in the Latin America and the Caribbean (LAC) region and other LMICs. We focus on youth (those aged 15–24) as they transition from childhood and adolescence into adulthood. The literature review will inform the qualitative primary research conducted by the Overseas Development Institute (ODI) in Cuba as part of the broader study which explores the following research questions:

- What is the relationship between sexual and reproductive health and social norms?
- What is the relationship between women's economic empowerment and social norms?

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- What policies and interventions have been implemented to address SRH, WEE and related social norms?

We consulted a variety of bibliographic databases, including academic databases and journals, as well as websites of international organisations, United Nations (UN) agencies and international, regional and local non-governmental organisations (NGOs) and research centres. We compiled a long list with key and additional search terms that we used in our search (see Annex 1). We also contacted several researchers working in Cuba on relevant topics and asked them for recommendations.

There are particular challenges facing researchers in Cuba around access and underlying political agendas. Anderson (2009: 79) suggests that ‘discussion of virtually any topic concerning Cuba tends to be overshadowed by ideological positions, and more concretely conditioned by the economic blockade imposed on Cuba by the United States since the 1960s’. For this review, we had difficulties accessing some Spanish sources written by Cubans that were not available online.² However, key data was found through other Cuban literature that referred to

these studies and through the Cuban press such as the Inter Press Service (IPS), *Granma*, Havana Times and CubaDebate (as suggested by our personal contacts). Furthermore, Cuban scholars also shared studies (written by them or other authors) which are not available online. We also aimed to incorporate their perspectives as shared with us through personal correspondence and brief phone calls. We have found that most of the literature on social norms and SRH and women’s economic empowerment in Cuba refers to women in general. Some studies included young women in their sample, but did not examine the particularities and differences experienced by adolescent girls and young women, while other studies did not incorporate young women at all.

Throughout this literature review, we refer to various concepts that are defined in Table 1.

The review is structured as follows. The next section of the report examines the Cuban context. We then explore the relationship of social norms with SRH and with women’s economic empowerment in two separate sections. We conclude with a summary of key findings and suggestions on how to address evidence gaps, as well as priority areas for further research.

2 For example, studies published by the Centro de Estudios de la Mujer such as *Desigualdades de género en la sociedad cubana* or *Subjetividad de género en Cuba: las construcciones socioculturales de lo femenino y lo masculino – perspectivas de cambio* are not available online. This is also the case with recent surveys. Key surveys such as the *Encuesta Nacional de Igualdad de Género* (2016) and the *Centro de Estudios de Población y Desarrollo* are not publicly available, and our personal contacts did not have access to them. Books of interest like *Mujeres Cubanas: Estadísticas y Realidades* were not found online either.

Table 1 Definitions

Concept	Definition
Gender	Describes those characteristics of women and men that are socially constructed, while sex refers to those which are biologically determined (United Nations Human Rights Council, cited in PAHO, 2013).
Social norms	Marcus and Harper (2014: 9) define social norms as: 'A pattern of behaviour motivated by a desire to conform to the shared social expectations of an important reference group'.
Gender norms	Marcus (2018: 4) defines gender norms as: 'social norms that express the expected behaviour of people of a particular gender, and often age, in a given social context. gender norms both embody and contribute to reproducing gendered power relations, and thus to gender-based inequalities, across many spheres of economic, social, and political life'.
Sexual and reproductive health (SRH)	The World Health Organization (WHO) (2018c) considers sexual and reproductive health to be an integral part of overall health and defines it as 'a state of physical, emotional, mental and social wellbeing in relation to sexuality, and not merely the absence of disease, dysfunction or infirmity'.
Sexual and reproductive health rights (SRHR)	Achieving SRH rests on realising SRH rights (SRHR), such as the right to control one's own body, to define one's sexuality, to choose a partner and to receive confidential, respectful and high-quality services. SRH services must meet public health and human rights standards, including the 'availability, accessibility, acceptability and quality' framework of the right to health (Starrs et al., 2018).
Women's economic empowerment (WEE)	Hunt and Samman (2016: 9) define women's economic empowerment as a 'process whereby women's and girls' lives are transformed from a situation where they have limited power and access to economic assets to a situation where they experience economic advancement'.
Adolescence/ youth/ young people	The Pan American Health Organization (PAHO) (2013) defines adolescence as the period between 10 and 19 years; youth from 15 to 24 years; and young people as between 10 and 24 years. Adolescence is a time of 'physical, mental, social and emotional change accompanied by an increasing definition of sexual identity and social status' (Allen, 2013). For the purpose of our research, we focus on young people aged 15–24.

2 The Cuban context

To situate our research questions on SRH and economic empowerment in the broader context, we outline key indicators for Cuba's development, including gender equality dimensions and relevant laws.

2.1 Key indicators

Cuba has a population of 11 million, which includes white, Hispanic and black ethnic groups, but a large proportion of the population are mixed-race, *mezcla*, *mestizo* or *mulato* (Browne, 2018).

Table 2 presents key indicators (on the national economy, education, population and adolescence).

With a Human Development Index (HDI) value of 0.777, Cuba is ranked in the 'high' human development category (UNDP, 2018b). And although there are no official statistics on poverty incidence or income distribution, a survey estimated that in the capital, Havana, poverty increased from 6% in 1988 to 20% in 2002 (Mesa-Lago, 2013). According to another survey, 23% of the population classified themselves as 'poor' and 23% as 'almost poor'.

Table 2 Cuba's key indicators

Economy		Source
Gross domestic product (GDP) (current US\$) (billions)	87.13	(World Bank, 2017)
GDP growth (annual %)	4.4	(World Bank, 2017)
Gross national income (GNI) per capita (2011 purchasing power parity (PPP)\$)	7,524	(UNDP, 2018b)
Education		
Gross enrolment ratio (GER), pre-primary (% of preschool-age children)	102	(UNDP, 2018b)
GER,* primary (% of primary school-age population)	101	(UNDP, 2018b)
GER, secondary (% of secondary school-age) population)	100	(UNDP, 2018b)
Literacy rate, adult (% ages 15 and older)	99.8	(UNDP, 2018b)
Expected years of schooling	14.0	(UNDP, 2018b)
Mean years of schooling	11.8	(UNDP, 2018b)
Population		
Life expectancy at birth (average for men and women)	79.9	(UNDP, 2018b)
Human Development Index (HDI) value	0.777	(UNDP, 2018b)
% of population aged 60 or older	18	(UNFPA, 2011)
Adolescence		
Population aged 10–19 (thousands, 2012)	1430.2	(UNICEF, 2016b)
Population aged 10–19, proportion of total population (%) 2012	12.7	(UNICEF, 2016b)
Adolescents currently married/ in union (%) 2002–2012, female	19.8	(UNICEF, 2016b)
Adolescents currently married/ in union (%) 2002–2012, male	unavailable	(UNICEF, 2016b)

* Data on net attendance ratio is not available (UNICEF, 2016b)

Respondents identified five main problems: low salaries (76%); insufficient food and deteriorating housing, clothing and shoes (70%); and lack of or difficulty in transportation (70%) (Ferriol, 2004 and Añé, 2007, cited in Mesa-Lago, 2013). Del Carmen Zabala Argüelles (2010) argues that a housing shortage and poor quality of housing are some of the most pressing problems facing Cuban society.

2.2 History and religion

Much has been written about Cuba's history and of social norms in different time periods. It is critical to understand these periods given their influence on present day Cuban society and specifically on gender dynamics. The three periods are: (1) revolution; (2) 'Special Period in Time of Peace'; and (3) Post-Fidel era (from 2006 to date). (For a comprehensive analysis of women and the Cuban revolution, see Smith and Padula, 1996.)

2.2.1 Revolution

Smith and Padula (1996) argue that before the revolution, Cuban women's supposed role model was the Virgin Mary, who stood for motherhood, powerlessness, a lack of sexual instincts, and whose main purpose in life was to meet men's needs. Women's lives were to revolve around the home while men were associated with the public sphere. The authors did, however, recognise that individual women's lives were shaped by race, class, place of birth and religion, and that some women were engaged in paid work and fought for feminist legislation.

The Cuban revolution, which began in 1959, is said to have changed gender dynamics and the role of women in the country. In the revolutionary rhetoric, gender, racial, economic and regional inequalities were described as the legacy of Spanish colonialism (1515–1898) and American capitalism (1898–1959), and as such, had to be eradicated (Andaya, 2014). Even though the Revolution promoted the rise of the 'new man', Andaya (2014) suggests that claims to social progress were based on changes in women's role. Efforts for gender equality were coordinated by the Federation of Cuban Women (FMC) – an organisation set up by the state in 1960 (Andaya, 2014).

The revolution led to improvements in women's education (Fernandes, 2005). A literacy campaign in 1961 included as many women as men and encouraged young women to be facilitators (González, 2010). The FMC also organised courses to change women's traditional roles. These included: classes for housewives and rural women to educate them and encourage them to become activists for change in their communities; training sessions at schools of revolutionary instruction for women; and special programmes for specific groups of women, such as elderly women and sex workers (González, 2010).

Women's employment also increased during the revolution and the iconic image of women in the workforce became a symbol of broader changes (Andaya, 2014). To facilitate women's work, the state provided services to 'liberate' women from the reproductive sphere, such as childcare. By providing housing, health care and household necessities, nurturing responsibilities were shifted from women and the family to the state. Even though this was not explicitly conceived as either gender or reproductive policy, women benefited disproportionately from these measures, especially poor single mothers (Andaya, 2014). There were other legislative changes that had a significant impact on women's lives. In the 1960s, abortion was legalised and offered free of charge, which in principle gave women full rights over their own bodies (Báez and Soto-Lafontaine, 2015).

2.2.2 'Special Period in Times of Peace'

Under President Fidel Castro, the Soviet Union was a significant trading partner for Cuba. Likewise, Cuba received credit from the Soviet Union (2.5% interest repayable in traditional exports over a period of 12 years), which could be used for equipment, machinery, materials and technical assistance (Walters, 1966). When the Soviet Union collapsed in 1991, Cuba lost billions of dollars of aid and export income, resulting in an economic crisis (Fernandes, 2005). On 8 March 1990 (International Women's Day), Castro announced the beginning of the Special Period. He chose this day because he knew that he could count on Cuban women to determine survival strategies that could help the country to endure the years of crisis and

readjustment that followed the collapse of the Soviet Union (Nuñez, 2010).

Throughout the 1990s and 2000s, the Cuban economy plunged and quality of life sharply declined (Nuñez, 2010). The economic crisis eventually prompted economic reforms (which also ushered in larger-scale tourism), reductions in social welfare, and increased unemployment and economic inequalities (Andaya, 2014).

A series of reforms were implemented between 1989 and 1993 to address the crisis, including increasing gross domestic product (GDP), giving greater openness to foreign capital, investing in the agroindustry of sugar and the development of services (mostly tourism), and creating agricultural markets. This was also the period when the US dollar was ‘decriminalised’,³ until the decision was made in 1993 to create the ‘Cuban convertible peso’ (currency with the same dollar value, and which is known as CUC). As of 1994, an economic recovery phase began and from 2000 the economy was supposedly stable, although, according to Ferragut and Piza (2016), not necessarily expanding. During this period, relations with the LAC region were expanded and the People’s Republic of China and Viet Nam became the main importers of Cuban products (ibid.).

During this period, women remained in the labour market. The government’s strategy for development and growth, based on promoting technology and efficiency, required a skilled workforce. Nuñez (2010) noted that women represented almost two-thirds of all professional and technical workers and were therefore essential to accomplishing the national development goals; however, Cuban society continued to advantage men and discriminate against women throughout the revolution years and women continued to be secondary earners as

they adopted a range of measures that allowed them to combine paid work with their household responsibilities. As Nuñez (2010: 81) explained:

... during the crisis years they (women) switched to jobs near their homes because of the lack of transportation; they also asked for their neighbours’ help and worked out survival strategies [to get by] in their neighbourhoods. They started seeing their family doctors and nearby polyclinics instead of going to distant hospitals ... These women had to build their strategies while living in a patriarchal society, where they carried the burden of the second shift [i.e. caring responsibilities and household chores] while men dominated managerial positions.

However, other sources have highlighted that women suffered disproportionately from the economic reforms (Andaya, 2014) as they did during the harsh years of the Special Period (see Pearson, 1997). Women faced increased burdens to provide for their families, which often led them to work in illegal activities or in the informal sector, including prostitution (Carollee Bengelsdorf 1997, cited in Fernandes, 2005). As state funding for care decreased, women’s domestic and care workloads increased (Andaya, 2014). Attitudes of machismo, promoting male pride and superiority, are also said to have increased during the Special Period (Carollee Bengelsdorf 1997, cited in Fernandes, 2005). This could be due to men feeling emasculated when they cannot be the main providers for the family, or when women are the only ones playing this role – as has been observed by Formental et al. (2015). The end point of the

3 Between 1915 and 1958, Cuba’s currency was controlled directly by the USA. Cuban Law 963 of 4 August 1961 ‘demonetized all previous circulating paper currency ... at the same time, possession and circulation of the U.S. dollar was criminalized ... The new Cuban bank notes were printed in Czechoslovakia [and] ... displayed the heroes of the republican era: Marti, Maceo, Gomez, Garcia & Céspedes’ (Piper, 2008: 146). However, because of the economic consequences of the Special Period, ‘Fidel Castro legalized the possession of dollars and their free circulation in 1993. The law was intended to increase the government’s access to hard currency, to pay for food imports, and to reinvest in other parts of the economy. In addition, the state wanted to curtail the black market and prevent the undermining of the ideals of the Revolution. One unintended consequence of the decriminalization of the possession of dollars has been the development of a two-tiered economy. Cubans with access to dollars can buy food, clothing, health related products, and services, otherwise unavailable to people with who rely solely on pesos’ (Toro-Morn et al., 2002: 39).

Special Period is not specified by the literature. However, on March 8, 2005, the Cuban president Fidel Castro declared that Cuba was starting to come out of it (Nuñez, 2010).

2.2.3 Post-Fidel era (from 2006 to date)

A new period in Cuba's economic and political history began when Raul Castro took over the leadership in 2006, becoming President and Prime Minister of the Communist Party in 2008. In 2010, the Communist Party drafted the Economic and Social Policy Guidelines – a set of 291 proposals known as *los lineamientos* (O'Sullivan, 2011). These proposals were presented to Congress and approved for implementation. We discuss in more detail the effects of these recent economic reforms on the labour market – and on women and girls in particular – in the subsequent sections on women's economic empowerment and social norms.

Alongside the economic reforms, there were substantial changes to diplomatic ties and freedom of movement, which led to the lifting of restrictions on trade and travel with the United States (Becker et al., 2016). For example, according to Granma (2018b), from 2013 to 2018, 819,749 Cubans travelled abroad and 1,578,430 Cuban residents in the USA travelled to Cuba. Likewise, tourism (the third source of foreign currency after the sale of professional services – such as doctors, nurses and teachers – and remittances) increased 107% between 2007 and 2014 mainly due to visits from Canada, the USA and Cuban-Americans (Mesa-Lago, 2018).

Other studies have observed that Cuba has opened up to foreign programmes and initiatives. The amount of net official development assistance (ODA) that Cuba has received increased from US\$51.8 million in 1990 to US\$2.68 billion in 2007 (World Bank, 2017). At the same time, internet and mobile phone use is increasing; mobile cellular subscriptions have increased dramatically, from 0.1% in 2000 to 40.2% in 2017, while internet use increased from 0.4% in 2000 to 43% in 2017 (ibid.).

More recently, Mesa-Lago (2018) identifies three important events in Cuba which took place in 2018: (1) the departure, in April, of Raúl Castro as President (although maintaining his position as First Secretary of the Communist

Party) and the appointment of Miguel Díaz-Canel as President; (2) the process of approval of a new Constitution that will replace that of 1976; and (3) new regulations to the private sector for self-employed workers (i.e. the reduction of authorised occupations from 201 to 123, the discouragement of hiring people in small businesses through the labour force tax or the requirement to have a bank account) and usufruct farmers (i.e. the prohibition on selling or leasing land or the introduction of a gradual tax on land that was idle, abandoned or had very low productivity).

However, Mesa-Lago (2018) also highlights the weak performance of the Cuban economy. He notes a lack of economic growth in 2016 (0.5%), followed by a slight recovery in 2017 (1.8%), but a decline in 2018 (1.1%). He also (2018) observes that the lack of economic growth was caused by different factors such as a strong long drought followed by Hurricane Irma, Trump's negative measures against tourism, a decrease in oil and gas production, the continued reduction of oil supply, trade and purchase of Cuban professional services by Venezuela or the paralysis, and in some cases reversal, of economic reforms such as the postponement of monetary unification among others. Furthermore, according to the Economic Commission for Latin America and the Caribbean (CEPAL, 2018), Cuba's projected economic growth for 2018 is 1.1% (only above Venezuela, Dominica, Nicaragua, Argentina and Ecuador), rising to 1.3% for 2019.

The weak performance of the economy and the economic reforms have benefited some Cubans more than others (e.g. the emergence of a private sector that is more profitable for white men with access to foreign currency, as we will show). These unequal benefits have been producing a glaring disparity that Cubans have not seen before, as reported by the press (e.g. Nolen, 2017; Cino, 2019) and the Cuban literature (e.g. Espina, 2008). A study of Cuban young professionals reported their growing disenchantment as they perceive that they can only get ahead through prostitution, black market activities, hustling or access to dollar remittances from abroad, and envision their departure in pursuit of a better life abroad

(Gonzalez and McCarthy, 2004). Since that time, the government has continued cutting social benefits such as reducing food and energy subsidies, reducing staffing at health facilities or cutting welfare payments (Nolen, 2017). According to Mesa-Lago (2018), the Cuban economy is not predicted to recover in 2019 but to stagnate.

2.2.4 Religion

Until the 1930s, the colonialisation of Cuba has involved voluntary and forced immigration. Over several centuries, at least one million African slaves from more than 60 different African ethnic groups are estimated to have been brought to Cuba (Pedraza, 1998). Slavery was abolished comparatively late in Cuba, in 1886 (Scott, 1983). Under Spanish colonialism, Cuba's religious life was dominated by the Catholic Church, although some Protestant denominations have also been present since the 19th century. The Catholic Church was a major provider of education for the middle and upper classes; some Protestant denominations also provided private education. Parallel to the Christian churches, a variety of esoteric and religious beliefs of European and African origins were practised. Some traits of Catholicism were also combined with religious systems of the slave population – for example, in the Santería religion (Pedraza, 2010). The Catholic Church set up organisations called *cabildos* (councils) to evangelise and provide services to black Cubans. Many of these groups incorporated religious traditions from West Africa with Catholic practices. After independence from Spain in 1898, the *cabildos* were fragmented into private temple-houses that served as neighbourhood centres for Afro-Cubans. These temple-houses formed the basis of the emerging religion called Santería, which spread around the country (Hearn, 2008). The Cuban revolution rejected religion, both institutionalised (Catholicism, Protestantism, Jewishness) and non-institutionalised (Santería, Palo, Spiritism, Abakúa, etc.) (Härkönen, 2014).

In the 1990s, the wording of the Constitution was changed from 'atheist' to 'secular', and free practice of religion was allowed (ibid.). However, open religious practice only became widely socially acceptable after the visit of Pope John Paul II in 1998 (Andaya, 2014). Since the 1990s, the influence of the Catholic Church has grown (Härkönen, 2014) and Christian organisations have expanded welfare activities through overseas humanitarian donations (Hearn, 2008). Evangelical churches are growing rapidly in Cuba, with important implications for gender norms. For example, recently the evangelical churches played a significant role in protests against constitutional recognition of same-sex marriage (*The Guardian*, 2018). Leaders of Afro-Cuban religions have also become more popular in some neighbourhoods (Hearn, 2008). Andaya (2014) argues that even though many Cubans now identify as Catholic or Santería, the history of socialist scientific rationality has left its mark on society – for example, in supportive attitudes on abortion.

2.3 Gender dimensions

This section provides an overview of key gender indicators, norms and laws in Cuba today.

2.3.1 Gender equality indicators

Despite progressive policies on gender equality over the past 60 years, inequalities remain (Garth, 2010). In 2012, President Raúl Castro acknowledged that the full equality socialism had promised had not been achieved (Andaya, 2014). Women in Cuba face a triple burden of paid work, care for children and elderly family members and housework, and political activism (Härkönen, 2014).

Cuba ranks comparatively well on different gender indices. The Gender Development Index (GDI)⁴ is designed such that the closer a country's GDI value is to 1, the more gender equal it is. Among developing regions, the gender gap in human development is narrowest in the

4 The GDI measures gender inequalities in achievement in three basic dimensions of human development: health (measured by female and male life expectancy at birth), education (measured by female and male expected years of schooling for children and mean years for adults aged 25 years and older); and command over economic resources (measured by female and male estimated GNI per capita). <http://hdr.undp.org/en/content/gender-development-index-gdi>

LAC region (UNDP, 2018a). Cuba's GDI value is 0.942 compared to the LAC regional average of 0.977. This places Cuba in category 3 (1 being the worst and 5 being the best in terms of gender equality) (UNDP, 2018b).

The Gender Inequality Index (GII) measures gender inequalities in three areas (reproductive health, empowerment and economic activity), with a higher value representing a *less* gender-equitable society. Cuba has a GII value of 0.301, which is lower than the regional average (0.386) – i.e. Cuba is ranked as more gender equal than the average for the rest of the region. Cuba's GII is also lower than the global GII value of 0.441 (UNDP, 2018b).

On the Social Institutions and Gender Index (SIGI), Cuba has a very low value of 0.0208 (most recent data from 2014), which means that there is comparatively little gender discrimination. Discrimination is rated 'very low' for the categories 'restricted physical integrity', 'son bias', 'restricted resources and assets'; discrimination is rated 'low' for 'restricted civil liberties' and 'medium' for 'discriminatory family code' (OECD Development Centre, 2014). Cuba's SIGI rating is among the best in the LAC region, which is one of the best-performing regions on the SIGI. Indeed, Cuba is one of six countries with very low levels of gender discrimination (alongside Argentina, Trinidad and Tobago, Dominican Republic, Panama, and the Bolivarian Republic of Venezuela) (OECD, 2017).

2.3.2 Gender-based violence

There is no official available data on gender-based violence in Cuba (UNDP, 2018b). A report by the Committee on the Elimination of Discrimination against Women (CEDAW) provides data collected by the 185 welfare centres across Cuba (see Figure 1).

Founder and leader of the FMC, Director of the National Sex Education Centre and daughter of the former president, Mariela Castro argues that the most common type of violence in Cuba is psychological violence, rather than economic or physical violence (Reed, 2012). Oxfam Canada has suggested that gender-based violence rates are lower in Cuba than in other Latin American countries (Daniel, 2011).

A recent Oxfam study of gender-based violence in the LAC region – based on 4,731 surveys, 47 focus groups and 49 in-depth interviews in eight countries (Bolivia, Colombia, Cuba, Dominican Republic, El Salvador, Guatemala, Honduras and Nicaragua) with young males and females aged 15–25 – found that women are often blamed for male violence due to the clothes they wear, for being out on the streets at night or for drinking alcohol (Ruiz and Sobrino, 2018). Most men (70%) and women (60%) agreed with the statement, 'a decent woman should not dress provocatively, nor be out on the streets late at night'. Cuba (75%) and the Dominican Republic (84%) were the countries with the highest percentage of men aged 15–19 who said that their male friends believed they had the right to shout compliments to women. A high proportion of participants did not perceive that men's control over women's mobile phones and social networks, over the way they dress and how they move in public spaces constituted male violence.

2.3.3 Gendered norms

Social life in Cuba is highly gendered (Härkönen, 2014). Men are generally perceived as breadwinners (Garth, 2010) and social norms in the Caribbean region in general link being a man with being sexually active (Allen, 2013). The term 'machismo' is used to describe gender socialisation in the LAC region (Stallworth, 2002). Machismo

Table 3 FMC public welfare records

	2006	2007	2008
Violence – men against women	315	266	327
Violence – women against men	30	43	25
Violence – fathers against children	6	31	12
Violence – mothers against children	209	178	184

Source: CEDAW, 2011

refers to the idealised man as ‘hyper-masculine, virile, strong, paternalistic, aggressive, sexually dominant and unfaithful’ (Kirk, 2011: 146).

Women are still largely linked to families and care (Browne, 2018) and are expected to do domestic and care work (Garth, 2010). This can be particularly arduous in conditions of economic scarcity where supplies are limited and some are rationed. Similarly, studies report strong social norms associating womanhood with motherhood and emphasising the mother–child bond (Härkönen, 2014). In her analysis of representations of men and women in a Cuban children’s TV programme, Díaz Bravo (2013: 5) describes perceptions of women as ‘concerned about others and devoted to them, vain, sensitive, and very good in taking care of a baby, tidy, concerned about plants and animals, skilful in the kitchen and orderly’. Guillard Limonta and Ortega Brena (2009: 66) found that women in Cuban TV are often portrayed as sex objects with ‘ageless, perpetually teenaged, fair-skinned, and blonde bodies’. This relates to Härkönen’s (2014) finding that throughout the life cycle, Cuban women are expected to conform to ideals of beauty. She observes that baby girls are dressed in frilly dresses, have their ears pierced and wear high-heeled shoes from the age of two; later in life, women usually wear make-up, skin-tight clothes and have manicured nails.

2.4 Marriage, family and living arrangements

In Cuba, two ideologies about marriage, family and living arrangements coexist. On the one hand, as in other Caribbean states, matrifocality is a popular concept – i.e. households headed by mothers. Compared to nuclear families, in matrifocal families, ties tend to be stronger with consanguineal kin, especially between a woman, her children and other female relatives. It is common for older women to head three-generation extended households. A woman’s consanguineal ties provide her with financial and emotional support (Safa, 2005). Most Cubans live in multigenerational households. Relatives, especially grandmothers, often support working women with childcare (Garth, 2010). Safa (2005) found that the proportion of extended families increased

during the Special Period due to a housing shortage. She also noted that living with extended family is motivated by the need for multiple sources of income, especially among female household heads.

Various studies suggest that marriage is not a highly relevant social institution in Cuba. In 2011, only about half of all people in a conjugal bond were married, while the other half lived together without being married (Censo de Poblacion y Viviendas, 2012: 82, cited in Browne, 2018). Härkönen (2014) does not find differences in attitudes between legal marriage and non-legal unions and ‘illegitimate’ and ‘legitimate’ children. Most participants in Härkönen’s (2014) research were unmarried, living with their partners in informal arrangements. She even observed that it was not unusual for men and women to be involved in more than one relationship at a time and noted that there were also many female-headed households. Safa (2005) linked the growing proportion of female household heads to women’s access to health care, education and employment, and to limited influence of the Catholic Church.

Since the mid-1970s, however, the state has emphasised nuclear family arrangements as normative (e.g. the 1975 Family Code upholds the family as the ‘base cell of society’) (Garth, 2010). Since the 1990s (and as already noted), religion has become more influential in Cuba, with the Catholic Church promoting legal marriage and the rejection of abortion (Härkönen, 2014). These developments might explain Garth’s (2010) finding that even though extended family living arrangements are common, ideals of being a ‘complete woman’ are linked to living with a husband and children independently from parents and grandparents.

2.5 Legal and policy environment

The Cuban state has implemented various policies to promote gender equality and improve the situation of women in society. The FMC is the governing body for policy on women. It is not part of the state executive branch but carries out similar functions as other institutions that are part of the state administration, such as promoting policy, monitoring its implementation, and suggesting amendments (CEDAW, 2011). Table 4 summarises key laws and policies on gender equality in Cuba.

Table 4 Laws and policies on gender equality in Cuba

Law/ policy	Key content
1976 Cuban Constitution*	Article 44 holds that men and women have equal rights in economic, political, cultural and social spheres and within the family (CEDAW, 2011) Article 42 states that discrimination because of race, skin colour, sex, national origin or religious beliefs and any other form of discrimination harmful to human dignity is forbidden and will be punished by law (CEDAW, 2011) Under Article 24, women have the same land ownership rights as men (OECD Development Centre, 2014) Article 35 stipulates that the state protects the family, motherhood and marriage and recognises in the family the core fundamental cell of society
1975 Family Code	Defines the family as the singular base cell of society (Garth, 2010) Promotes joint responsibilities of husband and wife for household maintenance and childcare (Fernandes, 2005) Provides that parental authority should be joint (OECD Development Centre, 2014) Maintains that there is no gender discrimination in inheritance (OECD Development Centre, 2014) Guarantees the rights of children and young people in the family and society, in accordance with the Convention on the Rights of the Child (CEDAW, 2011)
1975 Consensual unions	Granted long-term consensual unions the same legal status as marriage (Härkönen, 2014)
1978 Children and Youth Code	Outlines principles and recommendations for the care of children and youth (Álvarez-Tabío Albo, 2017)
1997 Council of State's resolution	Enacts the National Action Plan following the Beijing Conference to eliminate all forms of discrimination (Artiles, 2012)
2003 Maternity Law	Full pay for women for 18 weeks – 6 weeks before birth and 12 weeks after (Álvarez-Tabío Albo, 2017) 60% of pay until child reaches 12 months (Álvarez-Tabío Albo, 2017) Fathers can take paid and unpaid leave (Álvarez-Tabío Albo, 2017)
1962 and 1985 childcare policies	In the 1960s, kindergartens were opened (Härkönen, 2014) About 1,000 state-subsidised, full day childcare programmes, providing care for 184,000 children aged from 45 days to 5 years in 2010 (Garth, 2010) Lunchrooms added to primary schools to benefit children of working mothers (Nuñez, 2010)
1994 Decree Law 154 on divorce	Divorce possible through mutual consent before a notary (Álvarez-Tabío Albo, 2017) If divorcing parents cannot reach agreement, custody will be decided in the best interest of the children (OECD Development Centre, 2014)
National Action Plan for follow-up to the Beijing Conference	Calls to implement, with a gender perspective, new forms of intervention on aspects that affect women's health, such as mental health, stress, occupational health, family coexistence, old age, double shift (the burden of caring for family and doing household work), self-esteem, lifestyles, etc. Proposes to conduct research on different aspects of the image of women in the media, which would be very useful in designing policies for women
2016 Guidelines of the Social and Economic Policy of the Party and the Revolution (2016–2020)	Prioritises better working conditions and stronger role of the family in the education of children, adolescents and young people
Decree Law No 175 of 1997 Penal Code	Includes specific language on domestic violence (OECD Development Centre, 2014) Addresses sexual harassment specifically (OECD Development Centre, 2014)

* In summer 2018, a draft updated Constitution was approved by the National Assembly. Proposed changes initially included recognising same-sex marriage and dropping the objective of constructing a Communist society. The changes will need to be approved by a referendum in early 2019 (Fletcher, 2018).

2.6 Vulnerable groups

The Pan American Health Organization (PAHO, 2013) identifies the following vulnerable groups of adolescents in the Caribbean region:

- out-of-school youth
- street children
- young people with disabilities
- migrant labourers
- domestic workers
- survivors of trafficking
- survivors of sexual abuse
- groups at risk of HIV
- men who have sex with men
- sex workers and their clients
- injecting drug users.

In Cuba, poverty is higher among female heads of household, single mothers, Afro-Cubans, migrants from the less-developed eastern provinces, residents of slums, and people who are retired (Espina, 2008, 2010, cited in Mesa-Lago, 2013). People from rural areas were also found to have less income than those from urban areas (Sánchez, 2007, cited in Mesa-Lago, 2013). Del Carmen Zabala Argüelles (2010) also points to the vulnerability of households headed by women, and particularly single mothers, whose numbers are rising. The Cuban state offers cash benefits to vulnerable population groups, such as the elderly, disabled people, single mothers, dependent parents of deceased workers, and pensioners with low income. The state also provides nursing homes, home care and state housing (Mesa-Lago, 2013). The following subsections provide more details about three vulnerable groups that have gained most attention in the literature: Afro-Cubans; lesbian, gay, bisexual, transgender and queer (LGBTQ) people; and illegal workers.

2.6.1 Afro-Cubans

Afro-Cubans represent 9.3% of Cuba's population (Abad, 2017). Afro-Cubans have continued experiencing racism and discrimination during different periods of history. The revolution opened up access to public spaces that had previously been segregated. However, socioeconomic differences between Afro-Cubans and the white population have persisted. There is recognition, at the highest level, that Cuba has not dealt effectively with issues of ethnic and gender discrimination (Mesa-Lago, 2013).

A small number of studies have explored black women's participation in the labour market (Cabezas, 2004; CDA, 2013; Torres, forthcoming). Torres (forthcoming) identifies gender and race criteria applied to women wanting to work in the service sector, with employers preferring women who are young and white:

The women who are hired [in the service sector] are mostly young, up to 25 years old, 'blonde' [light-skinned], have a good figure, with a university degree or studying at the university; the cleaning or loading support staff are more of a black and mestizo skin colour; the security workers in the bars are blacks and mulattos, tall and strong. There are successful bars that regulate entry in relation to skin colour and income ...; inside there is also discrimination in terms of service, the table that customers are given, and the privileges that are offered to them.

Furthermore, black Cubans are mainly perceived as those who work in the sex industry as *jineteros*⁵ and *jineteras*, while light-skinned Cubans are less visible and undistinguished in the

5 In Cuba, *jineterismo* is a colloquial term that refers to the broad range of activities and behaviours associated with hustling, including, but not limited to, sex for cash (Cabezas, 2004). According to Daigle (2013: 72) the term *Jinetera* 'has evolved over time as a uniquely Cuban neologism since the 1960s and 1970s, when it was already being used to denote the exchange of sexual favors for access to scarce goods in a closed economy. Through the late 1980s, and very prominently in the 1990s, it came to be used to describe the phenomenon of Cubans interacting with foreigners in various ways as a means to alleviate hardship'. Thus, *jineterismo* is different from prostitution as it refers to the ability to manipulate conditions and survive in the face of adversity. Hodge (2014) notes that the *pingueros* (from the slang term of the penis) are a subset of *jinetero*, 'a category that describes (primarily) young Cuban males who provide various informal services to tourists (and who may also rob or con tourists when the opportunity arises). *Pingueros* differ from *jineteros* in that their services are primarily erotic and romantic, and most of their clients are male' (Hodge, 2014: 443).

sector (Cabezas, 2004). Cabezas (2004: 998) also observed invisible regulations regarding those who are able to study and work in the tourism sector in Varadero, illustrating the stereotypes and type of work undertaken by Afro-Cubans:

Trainees must be young, attractive, and in good physical shape. Not only are youth and aesthetics premium considerations, but so is race. The training and distribution of work are organized according to racial, sexual, and gender considerations, resulting in occupational segregation. While most of the front desk workers are lighter-skinned Cubans, entertainment workers and back-kitchen help are mainly black. Entertainment workers, also known as *animadores* (animators), are young, scantily clad, dark-skinned young men and women who instruct the guests in dancing, games, and other forms of recreation. Their work is mainly physical and sensual and often involves suggestive and sexualized contact with guests.

This racial and sexual division of labour as well as Afro-Cubans' lower social and economic position in society has its origins in the colonial period. Furthermore, the Committee on the Elimination of Discrimination against Women (CEDAW, 2013: 2–3), in its concluding observations to the last report submitted by Cuba, noted that:

[The Committee] is particularly concerned that women themselves, especially those in rural and remote areas and women belonging to minorities, are not aware of their rights under the Convention and lack the necessary information to claim their rights.

It calls on the Cuban state to take appropriate actions to promote women's awareness of their rights and the means of enforcing them, especially in rural and remote areas, through cooperation with civil society and the media.

2.6.2 LGBTQ

Though the Cuban revolution brought in progressive policies on women's rights, there was a less progressive approach to non-heterosexual practices (Browne, 2018). Kirk (2011) argues that in revolutionary Cuba, homosexuality was condemned because it became linked to capitalist decadence. In the early 1960s, homosexuals were placed in labour camps called UMAPs (*Unidades Militares para la Ayuda de Producción*/Military Units for the Aid of Production) to turn them into 'proper citizens' (Allen, 2011: 67–73, cited in Härkönen, 2014). Some men were reported to have been incarcerated just for wearing tight trousers or having long hair (*ibid.*). Homosexual women were less often put in camps than homosexual men and were less demonised (Browne, 2018). Attitudes of machismo often promote homophobia, especially in rural areas (Kirk, 2011). Guillard Limonta and Ortega Brena (2009) argue that most Cubans react negatively to the word 'lesbian'.

Homosexuality was decriminalised in 1979, but since then no more legal changes have been made. Same-sex marriage remains illegal. Recognising same-sex marriage was one of the proposed changes of the Constitution to be approved in early 2019. However, recently, the government has backed away from this because of popular rejection, mainly from evangelical churches (*The Guardian*, 2018). Recently though, Cuba's National Center for Sex Education (CENESEX), established and led by Mariela Castro, has achieved significant advances in LGBTQ rights, including the official redefinition of homosexuality as 'normal', extensive care for trans communities, and the official incorporation of sexual diversity into the Communist Party of Cuba (PCC)'s fundamental principles (Kirk, 2011).

2.6.3 Illegal workers

People involved in illegal activities, such as illegal drug use, trafficking and sex work, face particular difficulties accessing services in the Caribbean region more broadly. Violence – whether perpetrated by the police, family or community – is often not reported (PAHO, 2013).

According to Johnson (2006), most sex workers are young women, though the number

of male sex workers is increasing. Johnson (2006) argues that sex workers in Cuba do not necessarily constitute an underclass, as in other countries; she suggests they are actually 'privileged' as they have access to foreign dollars – vital to purchase food, clothes and medicine. A report by CENESEX (Guerrero Borrego, 2014) notes that there are young people practising unprotected transactional sex in Cuba.

The sex trade was criminalised in the post-Soviet period to control prostitution. By 1998, the Ministry of the Interior had started *Operativo Lacra* (Operation Vice), which involved a special police force eliminating prostitution around the tourist trade. In 2003, President Castro confiscated all properties used for prostitution. Since 1961, the government (together with the

FMC) has organised rehabilitation programmes that provide education and employment training to former sex workers, as well as pensions to support their dependants (Stout, 2008). Some sex workers were also placed in UMAP camps in the 1960s and 1970s (Allen, 2011, cited in Härkönen, 2014). Cabezas (1998) (cited in Stout, 2008) argues that the criminalisation of sex work, has 'blamed prostitution on women rather than the tourist industry' and that Cuban rehabilitation camps for sex workers were a violation of human rights. Even though prostitution is illegal, it is tolerated, as sex tourism remains an important source of income for some (Johnson, 2006). For example, official HIV prevention programmes target people engaging in transactional sex (Gorry, 2008).

3 Social norms and sexual and reproductive health

This section explores the relationship between SRH and social norms in Cuba and more generally in Latin America and the Caribbean (LAC) and in other LMICs. We start with an overview of different aspects of SRH before moving on to explore the links between social norms and SRH. We then look at interventions to improve SRH and address related social norms. Our focus is on youth, but we also include relevant literature for other age groups.

3.1 Sexual and reproductive health

We provide an overview of SRH indicators and youth sexual behaviour globally, for the LAC region, and for Cuba (for a good overview of global SRHR and policy recommendations, see the recent *Lancet* report by Starrs et al., 2018).

3.1.1 HIV and other sexually transmitted illnesses

In 2017, there were 36.9 million people globally living with HIV. Every week, about 7,000 young women aged 15–24 years become HIV positive (UNAIDS, 2018).

In the LAC region, about 670,000 women aged 15 and over were living with HIV in 2015. More than half of those women (58%) were estimated to be receiving antiretroviral therapy (ART) (PAHO, 2017). In 2015, there were an estimated 22,800 cases of congenital syphilis in the region. In 2016, an estimated 2.1 million people were living with chronic hepatitis B (HBV) (*ibid.*).

Prevalence of HIV in Cuba is relatively low. Most Cubans who were HIV positive in 2006 were men (80%) and of those, 84% had had sex

Table 5 HIV and STIs in Cuba

Indicator		Source
Prevalence of HIV, total (% of population aged 15–49)	0.4	(UNDP, 2018b)
People of all ages living with HIV (thousands) 2012, estimate	4.7	(UNICEF, 2016b)
Women living with HIV (thousands) 2012	<1	(UNICEF, 2016b)
HIV prevalence among young people (aged 15–24) (%) 2012, total	<0.1	(UNICEF, 2016b)
HIV prevalence among young people (aged 15–24) (%) 2012, male	<0.1	(UNICEF, 2016b)
HIV prevalence among young people (aged 15–24) (%) 2012, female	<0.1	(UNICEF, 2016b)
Cumulative total number of cases of HIV infection 2010	12,217	(PAHO, 2012)
Percentage of HIV-positive individuals alive in 2010 (%)	83.2	(PAHO, 2012)
Comprehensive knowledge of HIV (aged 15–24) (%) 2008–2012, female	53.5	(UNICEF, 2016b)
Incidence of syphilis in 2010 (number per 100,000)	12.9	(PAHO, 2012)
Incidence of gonorrhoea in 2010 (number per 100,000)	37.5	(PAHO, 2012)

with other men (Gorry, 2008). Table 5 provides key indicators for HIV and STIs in Cuba.

3.1.2 Contraception

Worldwide, 2017 data suggests that 63% of women aged 15–49 who were married or in a union were using some form of contraception, mostly modern contraceptive methods (UN, 2017).

In the Caribbean region, 60% to 80% of women of reproductive age use modern contraceptives, most commonly female sterilisation and injectable contraceptives (de Gil, 2014), while 7.7% use intrauterine devices (IUD) (Ali et al., 2017). Studies have found that some young people in the region have unprotected sexual intercourse. For example, the World Health Organization (WHO) Global School-Based Student Health Survey (GSHS) showed that 38% of young people aged 13–15 in the Caribbean region did not use a condom at last sexual intercourse (cited in Allen, 2013). The British and Dutch Overseas Caribbean Territories study also reported that 28% of girls and 42% of boys (11–24 years) had not used a condom at first intercourse (cited in Allen, 2013).

In Cuba, contraceptives were introduced in the national health service in the 1960s (Andaya, 2014). Methods of contraception include IUDs, condoms, oral contraceptives (Bélanger and Flynn, 2009) and sterilisation (Härkönen, 2014). Traditional methods of contraception⁶ are less common (Bélanger and Flynn, 2009).⁷ At 12%, Cuba has the lowest percentage of single young women with unmet need for contraception in LAC countries (Singh et al., 2018). But women in Bélanger and Flynn’s (2009) study on induced abortion in Cuba reported inconsistent and discontinuous contraceptive use, often switching between different methods. Härkönen (2014) also finds that most pregnancies were not planned but ‘just happened’, which suggests that contraception is not used consistently. Table 6 provides key statistics on contraception in Cuba.

3.1.3 Abortion and menstrual regulation

Between 2010 and 2014, there were an estimated 36 abortions each year per 1,000 women and girls aged 15–44 in developing regions, compared with 27 in developed regions. Most abortions

Table 6 Contraception in Cuba

Indicator		Source
Contraceptive prevalence, any method, married or in-union women of reproductive age (15–49 years) (%)	73.7	(UNDP, 2018b)
Unmet need for family planning, married or in-union women of reproductive age, (15–49 years) (%)	8	(UNDP, 2018b)
Using traditional method, women in union (aged 15–49) (%)	2	(Multiple Indicator Cluster Survey (MICS), cited in Singh et al., 2018)
Sexually active, women not in union (aged 15–24) (%)	62	(MICS, cited in Singh et al., 2018)
With unmet need for modern method among sexually active women not in union (aged 15–24) (%)	12	(MICS, cited in Singh et al., 2018)
Condom use among young people with multiple partners, young people (aged 15–24) (%), 2008–2012, female	66.4	(UNICEF, 2016b)
Condom use among young people with multiple partners, young people (aged 15–24) (%), 2008–2012, male	Not available	(UNICEF, 2016b)

6 Bélanger and Flynn (2009) do not define ‘traditional methods of contraception’ in their paper. The WHO classifies the following methods as ‘traditional methods’: calendar method or rhythm method and withdrawal (WHO, 2018a).

7 According to Andaya (personal communication, 2018), Cuba has produced its own version of the contraceptive pill. She suggested looking into the availability and reliability of that pill. She also suggested exploring the effectiveness of IUD as she observed very low success rates.

occurred among women in the 20–24 age group (Singh et al., 2018). Globally, an estimated 55% of abortions are safe (i.e. using a recommended method and by an appropriately trained provider); 31% are less safe (meet either method or provider criterion); and 14% are least safe (meet neither criterion) (ibid.).

The LAC region has the highest abortion rate globally, at 44 per 1,000 women (Singh et al., 2018). Abortion is permitted without restriction in Cuba, Guyana, Puerto Rico and Uruguay (Guttmacher Institute, 2018).

Cuba was the first Latin American country to legalise induced abortion in 1965 (de Gil, 2014). Thus, since 1979, abortion has been freely available to adult and adolescent women across the country (Bélanger and Flynn, 2009) and it has one of the highest rates of abortion in the world. Bélanger and Flynn (2009) used the term ‘everydayness of abortion’ to describe the finding that the vast majority of Cuban respondents reported a longstanding awareness that abortion was a common and effective response to an unwanted pregnancy. They found that nearly all respondents knew someone who had had an abortion, and argued that respondents’ indirect exposure to

abortion through their social networks did not provide them with evidence of risks involved in the procedure. Bélanger and Flynn (2009: 22) concluded that even though respondents were aware of the government’s view that abortion should not be used as a form of birth control, Cubans tended to view it as a ‘reasonable fertility-control option by itself, not just in cases of contraceptive failure or unprotected sexual intercourse that results in pregnancy’.

As abortion is sometimes used as a form of family planning, some talk about an ‘abortion culture’ in Cuba (Bélanger and Flynn, 2009). Andaya (2007: 155–200) has argued that Cuba’s reliance on abortion as a form of contraception is linked to the state’s failure to provide contraception. She further suggests that abortion was initially promoted as a marker of socialist modernity, while high fertility and teenage pregnancies became attached to ‘tradition, irresponsibility and irrationality’ (Andaya, 2007, cited in Härkönen, 2014).

As Figure 1 shows, the rate of abortions in Cuba increased from the late 1960s to the mid-1980s and then started to decline. Menstrual regulation (MR) has been increasingly used since

Figure 1 Estimated number of abortion and menstrual regulation procedures per 1,000 women aged 12–49, Cuba, 1968–2002



Source: Bélanger and Flynn, 2009

the 1990s (Bélanger and Flynn, 2009). MR is a procedure that uses manual vacuum aspiration or a combination of mifepristone and misoprostol to regulate the menstrual cycle when menstruation is absent for a short duration. MR performed using medication is referred to as MRM.

3.1.4 Fertility

Worldwide, there are about 16 million adolescents giving birth each year (Salam et al., 2016). Adolescent birth rates are twice as high in LMICs as in high-income countries, representing a serious constraint to development – for example, through school dropout and limited social and economic opportunities for young mothers (ibid.). Young adolescents are also at greater risk of complications and death as a result of pregnancy (WHO, 2018b).

In the LAC region, the fertility rate (total births per woman) is 2.1 and the adolescent fertility rate 62.45 (births per 1,000 women aged 15–19) in 2016 (World Bank, 2016).

Cuba has a low overall fertility rate but a high fertility rate for adolescents. Between 1950 and 1992, the fertility rate decreased due to access to free abortion and family planning programmes (González, 2010). In 2006, Cuba’s fertility rate was 1.39, which made it one of the few low-income countries close to the ‘lowest-low’ fertility rate⁸ of 1.3 children per fertile woman. Since then, the rate has increased to 1.7 (see Table 7) (Díaz-Briquets, 2014). Díaz-Briquets (2014) presents fertility rates for different age groups in 2013 based on data from the Cuban National Office of Statistics and Information (*Oficina Nacional de Estadísticas e Información*). He finds that the 20–24 age group is the most fertile group, followed by the 25–29 age group. He suggests that the increase in fertility rate might be linked to an increasing influx of remittances from Cubans emigrating abroad. Remittances can

Table 7 Fertility rates in Cuba

Indicator	Source
Fertility rate, total (births per woman)	1.7 (World Bank, 2016)
Adolescent birth rate (births per 1,000 women aged 15–19)	43.6 (UNDP, 2018b)
Births by age 18 (%) 2008–2012*	9.4 (UNICEF, 2016b)

improve household welfare, including access to better housing, which can improve the conditions necessary for providing for children (ibid.). Fertility statistics are summarised in Table 7.

3.1.5 Youth sexual behaviour

Adolescence is a period of exploration and of developing one’s gender identity, often associated with risky behaviour. SRH decisions during adolescence have long-lasting consequences for later life (PAHO, 2013).

Girls and boys in the Caribbean region start sexual activity early. The WHO GSHS⁹ (cited in Allen, 2013) finds that 20% of girls and 40% of boys aged 13–15 years reported having been sexually active. On average, 56% of girls and 79% of boys had sex before the age of 14. Boys usually have their first sexual intercourse with someone the same age, and girls with someone older than them. A study in four British and Dutch Overseas Caribbean Territories (cited in Allen, 2013) revealed that 24.7% of young people (aged 11–24) reported that the first time they had sexual intercourse was against their will. Also in this region, 31% of boys and 10% of girls (aged 13–15) reported having multiple partners (GSHS, cited in Allen, 2013). Cell phone pornography is increasing, and adolescents are becoming more involved in sex tourism (Allen, 2013).

8 Kohler et al. (2004) first coined the term ‘lowest-low’ fertility rate to refer to the total fertility rate at or below 1.3. Sometimes, the term ‘ultra-low’ is used instead of ‘lowest-low’

9 The GSHS is implemented at country level by a survey coordinator nominated by the Ministry of Health or Ministry of Education. To date, the following countries in the Americas have implemented the survey or are in the process of doing so: Anguilla, Antigua and Barbuda, Argentina, Bahamas, Barbados, Belize, Bolivia, British Virgin Islands, Cayman Islands, Chile, Colombia, Costa Rica, Curaçao, Dominica, Dominican Republic, Ecuador, El Salvador, Grenada, Guatemala, Guyana, Haiti, Honduras, Jamaica, Montserrat, Nicaragua, Paraguay, Peru, Saint Kitts and Nevis, Saint Lucia, Saint Vincent and the Grenadines, Suriname, Trinidad and Tobago, Uruguay and Venezuela.

In Cuba, 62% of 15–24-year-old women are sexually active, which is one of the highest rates in the world (Singh et al., 2018). In a qualitative study, Härkönen (2014) found that Cuban girls started having sexual relations around the age of 15 and boys at the age of 17 or 18. Most of her informants had multiple short-term relationships. A report by CENESEX (Guerrero Borrego, 2014) notes that many young people in Cuba have unprotected sexual intercourse.

Factors identified in the literature as increasing the likelihood of sexual activity among adolescents in the Caribbean region include:

- insecure economic base (PAHO, 2013)
- participation in risk-taking activities (ibid.)
- being in a gang and fighting with weapons (Adolescent Health Survey, 2000, cited in Allen, 2013)
- alcohol and drug use (ibid.)
- peer pressure to have sex (ibid.)
- social norms that associate being a woman with being pregnant and being a man with being sexually active (Allen, 2013) (see next section).

The literature also suggests that the following factors decrease the likelihood of sexual activity among adolescents:

- being connected to their families (Adolescent Health Survey, 2000, cited in Allen, 2013; PAHO, 2013)
- being connected to schools (ibid.)
- being engaged in religious institutions (Adolescent Health Survey, 2000, cited in Allen, 2013).

The Caribbean Adolescent Health Survey (conducted in 2000) found that in the Caribbean region, risks and protective factors had larger impacts for girls than boys; in other words, girls seemed to be more responsive to their social environments and experiences in relation to sexual activity (Allen, 2013).

For Cuba, Stallworth (2002) also found that adolescents aged 12–15, especially boys, were more likely to engage in sexual activities than younger children and girls.

Having higher parental monitoring and higher delay values (i.e. values towards delaying sexual

activity) decreased the likelihood of adolescent sexual activity.

3.2 How social norms and perceptions are linked to SRH

Social norms and perceptions can influence SRH in multiple ways. There is often an assumption that social norms are always negative in their effects on women. But there are also positive gendered social norms. Some of the revolutionary period's favoured doctrines promoted social equality and women's emancipation. Here, we discuss four sets of social norms that influence SRH: (1) norms related to sexual behaviour; (2) norms related to fertility choices; (3) norms related to SRH services; and (4) norms related to specific groups.

3.2.1 Norms related to sexual behaviour

Social norms around sexual behaviour can expose women, men, boys and girls to specific risks and vulnerabilities. For example, a global systematic literature review found that gender stereotypes were key factors influencing young people's sexual behaviour (Marston and King, 2006, cited in Barker et al., 2007). Here, we discuss how norms around the ideal man and woman can influence sexual behaviour.

Norms around femininity can influence girls and young women to take on submissive roles and discourage them from speaking up and establishing some control in their sexual relationships (Svanemyr et al., 2015).

In the Caribbean region, social norms shape girls' sexual behaviour and expose them to risks and vulnerabilities. Social norms that emphasise girls' inferiority can reduce their say in sexual decision-making and make it more difficult to negotiate safe sex, thereby increasing the risks they are exposed to (see Table 8).

In Cuba, as a CENESEX report notes, many girls engage in unprotected sex as a result of power imbalances and fear of losing their partners (Guerrero Borrego, 2014). Table 8 summarises expectations of femininity, related risky sexual behaviour, and the resulting risks and vulnerabilities in LAC.

Norms around masculinity can encourage boys and young men globally to take sexual risks, to

Table 8 Expectations of femininity, sexual behaviour, and risks and vulnerabilities in LAC

Expectations of femininity	Sexual behaviour	Risks and vulnerabilities
<ul style="list-style-type: none"> • Responsibility not to act in a provocative manner • Limited autonomy 	<ul style="list-style-type: none"> • Passive role in sexual decision-making • Less able to negotiate safe sex 	<ul style="list-style-type: none"> • HIV • STIs • Early pregnancy • (Unsafe) abortions • Early motherhood • Sexual coercion, exploitation and abuse • Transactional sex

Source: created based on PAHO, 2013

Table 9 Expectations of masculinity, sexual behaviour, and risks and vulnerabilities in LAC

Expectations of masculinity	Risky sexual behaviour	Risks and vulnerabilities
<ul style="list-style-type: none"> • Sex associated with masculinity (Allen, 2013) • Prestige associated with having multiple partners (PAHO, 2013) • Attitudes of machismo (Stallworth, 2002), including male notions of entitlement, control and dominance (PAHO, 2013) • Acceptance of violence among adolescent males towards males and females (ibid.) • Perception that aroused males cannot control themselves (ibid.) 	<ul style="list-style-type: none"> • Early sex initiation (ibid.) • Multiple sexual partners (ibid.) • Inconsistent condom use (ibid.) 	<ul style="list-style-type: none"> • HIV (ibid.) • STIs (ibid.) • Early fatherhood (ibid.) • Sexual violence and sexual coercion (ibid.)

Source: created based on PAHO, 2013, Allen, 2013 and Stallworth, 2002

be violent and to dominate decision-making in relation to girls and women (Svanemyr et al., 2015). Social norms about what men and boys should do affect how men and boys interact with their partners, families and children, as well as their behaviour related to HIV, SRH, gender-based violence and men’s participation in childcare and maternal health (Barker et al., 2007).

In the Caribbean region, masculine ideals have been argued to play a crucial role in shaping sexual behaviour and related outcomes. As previously noted, social norms link being a man with being sexually active (Allen, 2013) and assign prestige to having multiple partners (PAHO, 2013). Furthermore, acceptance of violence among adolescent males and perceptions that aroused males cannot control themselves are said to be widespread in the region (ibid.). Such social norms and expectations tend to increase risky sexual behaviour, which heightens other risks and vulnerabilities (see Table 9). For example, in the Caribbean region, boys who agreed it was

necessary to have sex to prove manhood were more likely to have STIs (Allen, 2013). Alcohol and drug use among adolescent boys, also supported by traditional ideals of masculinity, are particularly conducive to violence and exposure to sexual risks (PAHO, 2013).

In Cuba, according to Kirk (2011), attitudes of machismo support aggressive and dominant sexual behaviour and allocate entitlement, control and dominance to men. Such attitudes can also encourage Cuban men to have relationships with younger women and can put girls at risk of becoming economically dependent on older men or of getting involved in transactional sex (Stallworth, 2002). Peer pressure tends to reinforce expectations of masculinity. A CENESEX report (Guerrero Borrego, 2014) notes that for young people in Cuba, relationships with their peers are important to their understanding and identity. Table 9 summarises expectations of masculinity, related risky sexual behaviour, and resulting risks and vulnerabilities in LAC.

3.2.2 Norms related to fertility choices

Social norms and expectations of masculinity and femininity can influence whether to become parents, who to have children with, when to have children, how many children to have, and whether there is a preference for girls or boys. We discuss each of these in more detail below.

Whether to have children: In most societies, social norms, often linked to religious rules, regulate fertility (Munshi and Myaux, 2006). In Cuba and the rest of the Caribbean, parenthood is regarded as one of the markers of the transition to adulthood and is thus essential in creating gender differences (Härkönen, 2014). Härkönen remarks that her Cuban respondents considered the idea that someone could not want to have children as ‘inconceivable’. Infertility is perceived to be ‘a great tragedy’ and someone who cannot have children is considered to never reach full adulthood (ibid.). Fatherhood is considered to improve men’s masculinity and to turn them into ‘proper’ adults, which can encourage men to engage in unprotected sex or to have children early (ibid.).

Both in the Caribbean and in Cuba, becoming a mother is often perceived as becoming an adult – a mature, complete and ‘real’ woman, who also receives respect from her community (ibid.). Children in Cuba are perceived to have a stronger bond with their mother than with their father, linked to physical processes of pregnancy. Härkönen (2014) argues that childcare is generally considered a woman’s issue, and women are expected to be ‘loving nurturers’; while men spend little time looking after children. Social norms equating adulthood with motherhood might encourage girls to have early sexual intercourse and early pregnancy (PAHO, 2013). A CENESEX report (Guerrero Borrego, 2014) also finds that fear of not being considered ‘grown-up women’ encourages Cuban adolescent girls to engage in unprotected sexual intercourse.

Similar to norms around motherhood, norms that grant privileges to grandmothers can encourage mothers to influence their children’s fertility choices. In Cuba and other parts of the Caribbean, being a grandmother elevates women’s position in society (Härkönen, 2014). Linked to the matrifocal family system (see section 2.4), women with daughters often become the

respected head of an extended family, gathering their children and their daughters’ children to live nearby. As the ‘queen of the family’, elderly women often make important decisions and lead family rituals (ibid.).

Who to have children with: Härkönen (2015) finds that in Cuba, material conditions are closely linked to normative ideas of fatherhood. When assessing a man’s suitability for being a father, many women considered a man’s wealth, ability to provide for them and the child, ownership of a flat and sometimes even a car. Härkönen’s earlier study (2014) finds that even though women emphasised that they wanted the father of their children not to be bad, careless or violent, considerations about a man’s wealth were ranked as more important. She relates these norms of desirability and money to the recent social and economic changes, such as the monetisation of exchanges, in Cuban society.

When to have children: Social norms can also influence the timing of childbearing (Herbert, 2015). In Cuba, according to one study, women believe the ideal age to have children is between 20 and 30, usually around 25 (Nigenda et al., 2003), but Härkönen (2014) finds that some considered it ‘fashionable’ to have children before turning 20. According to Härkönen (personal communication, 2018), and as noted earlier, Cuba’s high fertility rates for adolescents are linked to social norms that assign status to mothers and grandmothers. Mothers might encourage girls to have children early and offer their support with childcare, as being a grandmother grants them special privilege in the matrifocal kinship system. Härkönen also relates high adolescent fertility rates to the cultural celebration of a girl’s 15th birthday as an initiation into womanhood and sexual maturity (see Box 1), such that girls may then think they are ready to have children. Härkönen (2018) further suggests that the fact that Christian values of virginity and marriage are not widespread in Cuba might encourage early pregnancy. The Cuban Family Code authorises girls to get married from the age of 14 and boys from the age of 16. An increase in cohabitation arrangements of under-aged couples has been observed. This might be a reason for high birth rates among adolescents (Darias, 2013).

According to Härkönen’s (2014) study, Cuban men believe the ideal age to have children is

Box 1 *Quinceañera*: celebrating the beginning of womanhood

A traditional coming-of-age ritual in many Latino cultures (including Cuba) is *quinceañera* – a celebration of a girl’s 15th birthday. In Cuba, *quinceañera* is the second biggest celebration after weddings (Stallworth, 2002) with up to 300 guests attending (Härkönen, 2014). It is often celebrated even if resources are scarce. There is no equivalent celebration for boys.

The girl’s mother usually organises the celebration with the help of other female relatives. Some mothers start saving for the party when the girl is born and at least three years before the party (Härkönen, 2014). Extended family members also contribute (Stallworth, 2002) and the girl’s father is expected to make a financial contribution (Härkönen, 2014).

The ceremony resembles a wedding (Stallworth, 2002). The girl usually wears an 18th century-style (often white) dress. First, she is driven around in a convertible or a horse-drawn carriage. Then, accompanied by her father and a flower girl, she enters a dance hall where dancing is started with a waltz. The day usually includes a photo shoot of the girl and the photos of her are widely circulated afterwards (Härkönen, 2014).

The ritual and the circulating of the photos is designed to emphasise the girl’s new position as a sexually mature woman (ibid.). After the celebration, the girl is accepted as a woman and might engage in adult roles, including sexual activity and decision-making (Stallworth, 2002). *Quinceañera* also marks the girl’s mother’s transition into a potential grandmother, the respected head of a matrifocal kin group (Härkönen, 2014).

The *quinceañera* celebration uses images and symbols from Cuba’s colonial past. During the revolution the government condemned the ritual as a bourgeois elite practice, but later it became more tolerant, embracing the celebration as a form of national cultural distinctiveness (ibid.).

before they reach their mid-thirties. Childless people above this age were pitied or, if they were foreigners, they were said to adhere to peculiar cultural features of capitalist countries (ibid.).

The desired number of children: Social norms can also influence family size (Herbert, 2015). An increasing number of Cuban women decide to have one child only, which may be linked to economic considerations mentioned earlier (Härkönen, 2014).

The desired sex of children: Social norms can also determine the preferred sex of any children (Herbert, 2015). In Cuba, it is common to find out the sex of the baby during pregnancy (Härkönen, 2014). Härkönen observes that both female and male respondents preferred to have girl children. Mothers wished for a girl because they saw girls as continuing the lineage and thought that girls were more likely to stay close to their mother throughout their lives. They also often mentioned being able to dress a girl nicely and to organise her *quinceañera* as reasons for wanting a girl. Men said they wanted girls that could be ‘pampered’ as their ‘princesses’ (ibid.).

3.2.3 Norms related to SRH services

Norms and perceptions around certain services – including contraception, abortion, and pregnancy and birth – can restrict or encourage access to and use of services. Some have argued that communist norms of social responsibility have encouraged Cuban individuals to seek health services. For example, Johnson (2006) argued that Cubans are usually willing to follow public health protocols – not just because they fear the consequences of non-compliance but also because they believe that ‘whatever can be done to improve the daily, fundamental requirements of life is worth individual sacrifice’. Similarly, Anderson (2009) maintains that norms emphasising a person’s social responsibility for testing and treatment over the individual right to ‘opt out’ have contributed to HIV prevention. Below, we discuss social norms around contraception, abortion, and pregnancy and birth in Cuba.

Contraception: Social norms and perceptions can influence whether and when individuals use contraception (Herbert, 2015). In some contexts, traditional norms and related negative

stereotypes and social stigma prevent the use of modern contraceptives, especially among youth (ibid.). For example, one study found a positive relationship between contraceptive use and more equitable attitudes toward women (Mishra et al., 2014, cited in Herbert, 2015). Reviewing global literature, Darroch et al. (2016) find that young women across the world give similar reasons for not wanting to use contraception, including being concerned about side effects, not having regular sex, not being married, not having their period after birth, or that they (or their partners) do not like to use contraception. Herbert (2015) also identifies male dominance in decision-making and misinformation as key reasons for not using contraception.

In Cuba, Bélanger and Flynn (2009) observed a general dislike and distrust of contraceptives. While not explaining who shaped respondents' views of contraception, they emphasised the important role of peers in shaping perceptions about abortion (see below). Some respondents in their study believed that contraceptives (and particularly oral contraceptives) were a threat to women's health or 'did not work for them'. Many also said they chose not to use contraceptives because of perceived side effects. Respondents were especially concerned about the hormonal nature of oral contraceptives. Many women expressed concerns about IUDs, such as that their body shape was not suitable for the device or that their bodies 'rejected' it. Perceptions of contraceptives being ineffective also contributed to negative views. Interestingly, Bélanger and Flynn (2009) also found that many informants considered condom use primarily as a means of protecting themselves against STIs rather than pregnancy. Andaya (personal communication, 2018) also observed that using condoms was considered by some as a sign that they were sleeping with people outside of their relationship. Male chauvinistic cultural traditions might explain why condoms are not consistently used in Cuba (González, 2010). According to Härkönen (personal communication, 2018), female informants often complained about men being irresponsible and making contraception a woman's responsibility.

Abortion: Social norms typically influence whether and how women access abortion services

(Herbert, 2015). A review of the literature on social norms and abortion in LMICs (Lo Forte, 2018: 14) argues that abortion is often highly stigmatised, as it is considered to contradict 'localised, socially acceptable gendered notions of femininity, motherhood and reproduction'. The author finds that gendered norms, along with other factors (including poverty and economic dependency on men, lack of knowledge about and access to family planning services, and poor service availability) shape women's decision-making on abortion.

In Cuba, by contrast, Härkönen (2014) and others have found that there is no stigma attached to abortion, and that it is considered a normal means of contraception. As shown in section 3.1.3, abortion is commonly used as a form of contraception. The lack of stigma around abortion in Cuba might be linked to the fact that religious considerations are usually not part of the decision on whether to have an abortion.

The decision about whether to proceed with a pregnancy or not is usually considered to be the woman's rather than the man's (Bélanger and Flynn, 2009; Härkönen, 2014). This might be linked to the fact that mothers usually have much more responsibility for children. However, female relatives of the pregnant woman and her partner often play an important role in the decision too (Härkönen, 2014). Härkönen (2014) finds that mothers of a pregnant woman's partners often try to influence the pregnant woman (either to have an abortion or to keep the child), depending on the couple's financial circumstances and stage in the life course. Härkönen also argues that there are many different individual reasons for having an abortion, including not wanting a potentially lasting relationship with the man and his family, and economic constraints (i.e. not being able to provide for the child). Many respondents in Bélanger and Flynn's (2009) study terminated a pregnancy because they were living in multigenerational households with little space and privacy and could not provide for a child.

Pregnancy and birth: Social expectations of what men and boys should and should not do has been found to affect attitudes and behaviour related to men's participation in maternal and child (newborn) health (Barker et al., 2007).

In Cuba, pregnancy and childbirth are largely perceived as something outside of men's realm – purely 'woman's business' (Härkönen, 2014). The father is expected to attend only one antenatal appointment and very few men know what is going on during medical checks. Men are usually not expected to be present when babies are born; they are usually only called in when the delivery is over (ibid.).

Nigenda et al. (2003), in a study of antenatal care in Cuba, Thailand, Saudi Arabia and Argentina, found that Cuban women experienced social pressure from outside and inside the household to attend antenatal appointments, especially from mothers and mothers-in-law. They also found that women tended to use sophisticated technical vocabulary when talking about pregnancy. For example, women knew the names of infectious agents and ways of transmission of vaginal infections that can occur during pregnancy. The authors suggest that Cuba's cultural understanding of pregnancy had been 'wrapped up' with technical information from health providers.

3.2.4 Norms related to specific vulnerable groups

Social norms and perceptions around women, men and specific vulnerable groups, as well as the attitudes and perceptions of service providers, can create barriers to accessing SRH services. This subsection looks at how norms affect access to SRH services for women, men, adolescents, LGBTQ people, illegal workers, people living in poverty, and people of different racial and ethnic backgrounds. It also explores the attitudes of service providers.

Women: Norms that promote sexual ignorance for girls can impede girls' access to information and services (USAID, 2015). Taboos related to gender and sexuality can create a 'culture of silence' that prevents girls from expressing their concerns about SRH (Svanemyr et al., 2015). For example, taboos about menstruation are often associated with women's inferiority. Social norms can prevent unmarried women from seeking SRH care, especially contraception and abortion (Starrs et al., 2018). Married adolescent girls might also face gender-related barriers due to their lack of power, social isolation, limited

mobility and pressures to become pregnant (USAID, 2015).

In the Caribbean region, social norms that emphasise women's and girls' inferiority relative to men and boys can restrict girls' access to basic information about SRH. Combined with other forms of gender inequality, such as unequal educational opportunities (in many Latin American countries, but most likely not in Cuba), girls are often less able to assert their SRH rights to self-protection, services and information (PAHO, 2013).

We could not find literature on social norms preventing women from accessing reproductive services in Cuba. Härkönen (personal communication, 2018) and Andaya (personal communication, 2018), who have both conducted research in Havana, generally did not observe negative attitudes or norms preventing women from accessing sexual health services. For Härkönen, this is linked to the strong public health-care system and post-revolution ideas of sexual freedom for women. Andaya, however, observed young women who were embarrassed to seek SRH care from their family doctor and thus turned to their boyfriend's medical clinic for advice.

Men: Young men are often expected to be knowledgeable about sex, which might make it difficult for them to seek advice and access information and services (USAID, 2015). Norms about masculinity can also discourage men from seeking health care, which can create vulnerabilities in the form of untreated STIs, low rates of HIV testing and treatment, and low adherence to treatment (Starrs et al., 2018).

In the Caribbean region, the role of alcohol and illegal drug use and the secrecy of same-sex activities have been found to create vulnerabilities among certain groups of adolescent boys (PAHO, 2013), which might prevent them from accessing services.

In Cuba, Mariela Castro (the director of CENESEX) has argued that traditional ideals of masculinity encourage people to perceive men who go to the doctor as weak. This can prevent men from seeking medical help, especially if their health problem is linked to sexual potency or their genitalia (Reed, 2012).

Adolescents: Social norms that promote hostility toward vulnerable groups can prevent

these groups from accessing health services (PAHO, 2013). Some consider adolescents a vulnerable group with special SRH needs that are sometimes unmet due to social stigma, preventing adolescents (especially unmarried adolescents) accessing contraception and abortion services (Salam et al., 2016).

A report by CENESEX (Guerrero Borrego, 2014) finds that contraceptive provision in Cuba is affected by attitudes among adolescents, including young people's beliefs such as 'this will not happen to me' or 'just once, nothing will happen'. The author argues that such thinking prevents young people from accessing SRH services and drives irresponsible sexual practices.

LGBTQ people: LGBTQ people can be a particularly vulnerable group when it comes to accessing SRH care. Heterosexual norms can promote homophobia and stigmatise same-sex relationships (Svanemyr et al., 2015). An assessment conducted in four LAC countries (Guadeloupe, Suriname, Cuba and Antigua) noted that 'identifiably gay' males were more likely to cite stigma and discrimination as a major obstacle to their accessing health care than those who presented as 'straight'. Men who had sex with men who presented themselves as heterosexual were more likely to conceal their sexual behaviour from care providers, which resulted in failure to detect certain conditions (PAHO, 2011). A study in Argentina (Socías et al., 2014) finds that 40% of transgender women who participated in the study reported that they avoided seeking health care because of their transgender identity. The study shows that transgender women were less likely to access health care when they had internalised stigma and had previously experienced discrimination by health care workers.

Hippe (2011) has argued that homophobia drives the spread of HIV in Cuba. Because homosexuality is stigmatised, it remains hidden, which makes education and prevention efforts difficult. Linked to discrimination, homosexuals often suffer from isolation, rejection and a reduced sense of self-worth, which might make them less inclined to protect themselves against HIV (ibid.). Data suggests that transgender people are at significantly increased risk of HIV, with prevalence at 19.7% (*Encuesta de Indicadores de Prevención*

del vih/sida, 2017, cited in UNAIDS, 2017). HIV prevalence among men who have sex with men is also estimated to be higher than average, at 5.6%. The same data suggests that 0.7% of men who have sex with men avoid HIV testing due to fear of stigma and discrimination (*Encuesta de indicadores de Prevención del vih/sida*, 2017, cited in UNAIDS, 2017).

Illegal workers: Illegal workers, including sex workers, are often prevented from accessing SRH services and information due to stigma (PAHO, 2013). According to Johnson (2006), sex workers in Cuba tend to be culturally rejected as 'bourgeois and capitalist'. He argues that sex workers are at high risk of contracting HIV due to the number and anonymity of their sexual partners. Data from 2017 suggests that 1.9% of sex workers in Cuba avoided HIV testing due to fear of stigma and discrimination (*Encuesta de Indicadores de Prevención del vih/sida*, 2017, cited in UNAIDS, 2017).

People living in poverty: People living in poverty may also be discouraged from accessing SRH services and information because of stigma and discrimination (PAHO, 2013). Poverty has been found to negatively affect adolescents' SRH outcomes. For example, an analysis of Demographic and Health Survey (DHS) data (Khan and Mishra, 2008) from 38 countries, including 7 in the LAC region (Bolivia, Colombia, Dominican Republic, Guyana, Honduras, Nicaragua and Peru), found that young women aged 15–24 in the lowest wealth quintile were more likely to become pregnant and had a greater unmet need for contraception than those in higher wealth quintiles.

People from different ethnic and racial groups: Some studies have also found a link between ethnicity and use of SRH services. For example, PAHO (2013) has identified five factors that restrict indigenous youth from accessing health services in the Caribbean region: (1) marginal political and legal status; (2) lower literacy levels and educational achievement; (3) barriers to economic opportunities and employment; (4) barriers to health and other services; (5) limited knowledge of SRH and rights.

In terms of black women's access to health care in Cuba, a study from the province of Cienfuegos finds no differences in pre-term

birth or mean birthweight between black and white mothers (Linares and Garcia, 2001, cited in Cooper et al., 2006). Social norms can also expose black women to particular SRH risks – for example, according to de la Fuente (2001), discrimination displaces black women from the most lucrative economic activities and pushes them to work in the illegal economy, including as sex workers. That same study (de la Fuente, 2001: 327) argues that black women’s involvement in sex work is related to images used in sex tourism of black sexuality being more appealing because of the supposed racial inferiority of black women and the ‘unrestrained primitiveness of their sexual instincts’.

SRH service providers: Attitudes among service providers can make it difficult for some groups, such as adolescents, to access SRH services (Salam et al., 2016). Some providers have limited knowledge of adolescents’ reproductive rights (USAID, 2015), the need for confidentiality (ibid.) or how to deal with men’s SRH issues (Barker et al., 2007). If providers believe that adolescents should not be sexually active or that contraception inhibits future fertility, they can be inclined to restrict adolescents’ access (USAID, 2015). Providers sometimes reinforce gendered norms by refusing to provide unmarried adolescent girls with contraception even when requested (Chandra-Mouli et al., 2014, cited in USAID, 2015). For example, a study in Nicaragua (Meuwissen et al., 2006) found that provider attitudes were a major barrier to good quality SRH care for adolescents. Even after participating in training sessions, doctors were reluctant to prescribe hormonal contraceptives and IUDs, and expressed negative attitudes towards condom use as a means of dual protection for teenagers (prevention of STIs and of unwanted pregnancy).

In the Caribbean region, health personnel have been found to discriminate against vulnerable stigmatised groups, such as poor people, people infected by or at risk of HIV, illegal workers and LGBTQ people, which can lead to inadequate care for these groups (PAHO, 2013). Especially, people at risk of HIV often experience hostility and occasionally violence from precisely those who should provide support, such as health workers, teachers and the police (ibid.).

Unlike in Nicaragua, where provider attitudes were a major barrier to adolescents’ SRH, we could not find any literature on attitudes and norms among SRH service providers in Cuba.

3.3 Programming and interventions

In Cuba and other contexts, several policies and interventions have been implemented to address SRH of young people and adults in general and social norms related to SRH in particular. This section provides an overview of four types of SRH initiative: (1) policies and laws; (2) facility-based interventions; (3) empowerment interventions; and (4) social norms and awareness-raising interventions. The evidence suggests that a combination of activities from all four categories, within a holistic approach, is most effective.

3.3.1 Policies and laws

Laws and policies can restrict adolescents’ access to SRH – for example, by preventing provision of contraception and abortion to this age group (Salam et al., 2016). Many countries have made commitments to human rights agreements that include adolescent SRH, but national laws and policies are not always in line with these commitments. Even where national laws and policies are progressive, implementation often lags (Svanemyr et al., 2015). Table 10 summarises some of the main Cuban policies related to SRH and adolescents.

3.3.2 Facility-based interventions

Facility-based interventions provided in public hospitals, clinics and health centres are a key component of interventions on SRH worldwide. As Cuba has a unified health care system, most SRH services are provided through government-run facilities (Artiles, 2012). Before describing facility-based SRH services and approaches, we provide a short overview of the Cuban health care system. Johnson (2006) argues that health-care is an important part of the country’s identity and nationalism. She suggests that Cuba’s achievements in health are used to legitimise the Cuban regime domestically and internationally. Health care is symbolised as a cultural product

Table 10 Policies related to adolescent SRH in Cuba

United Nations Population Fund (UNFPA) Programme for Cuba (2014–2018) (UNFPA, 2011)

Two of its three focus areas relate to SRH:

- Young people's SRH and sexuality education
 - **Output 1:** Enhanced capacity of national and local health services to provide SRH care, including family planning and maternal health services, with an emphasis on adolescents and young adults.
 - **Output 2:** Strengthened capacity of health and educational institutions and civil society organisations (CSOs) to improve the implementation of national programmes on SRH and education, STIs and HIV prevention, using a gender-based and rights-based approach.
- Gender equality and reproductive rights
 - **Output 1:** Strengthened capacity of governmental institutions and CSOs to implement policies and programmes that incorporate gender equality and prevent and address gender-based violence.

It holds that the provision of SRH services to vulnerable populations (i.e. people at risk of natural disasters) remains a challenge despite its prioritisation by government.

In 2017, most of the UNFPA funds had been spent on improving SRH services, especially in humanitarian settings. Funds had also been used for gender equality interventions, sex education and advocacy for incorporating adolescents in national laws, policies and programmes (UNFPA, 2017).

Plan de Accion Nacional de Seguimiento a la Conferencia de Beijing (República de Cuba, 1999)

- Calls to strengthen the gender perspective in all health programmes, particularly in SRH, to engage youths in sexual education
- Calls to improve sexual education programmes given to family doctors and nurses and other people who perform community work
- Promotes educational and preventive work to reduce early pregnancy and abortion
- Calls to deepen prevention and treatment for STIs
- Calls to improve availability of modern contraceptive means for men and women
- Proposes to improve care for women seeking abortion services
- Implement the Conscious Parenting and Paternity Programme to encourage participation of fathers in antenatal care and delivery
- Suggests improving information about sexual health of older people

of the revolution. Baggott and Lambie (2018) also find that health care was an important aspect of the revolution, seen as liberating people and building solidarity. Linked to the ideology attached to Cuban health care, Libby (2011) argues that academic literature on Cuba's health care system is often distorted, due to difficulties conducting research in Cuba, which means researchers often have to rely on information collected directly and indirectly from the state, with questionable statistical reliability.

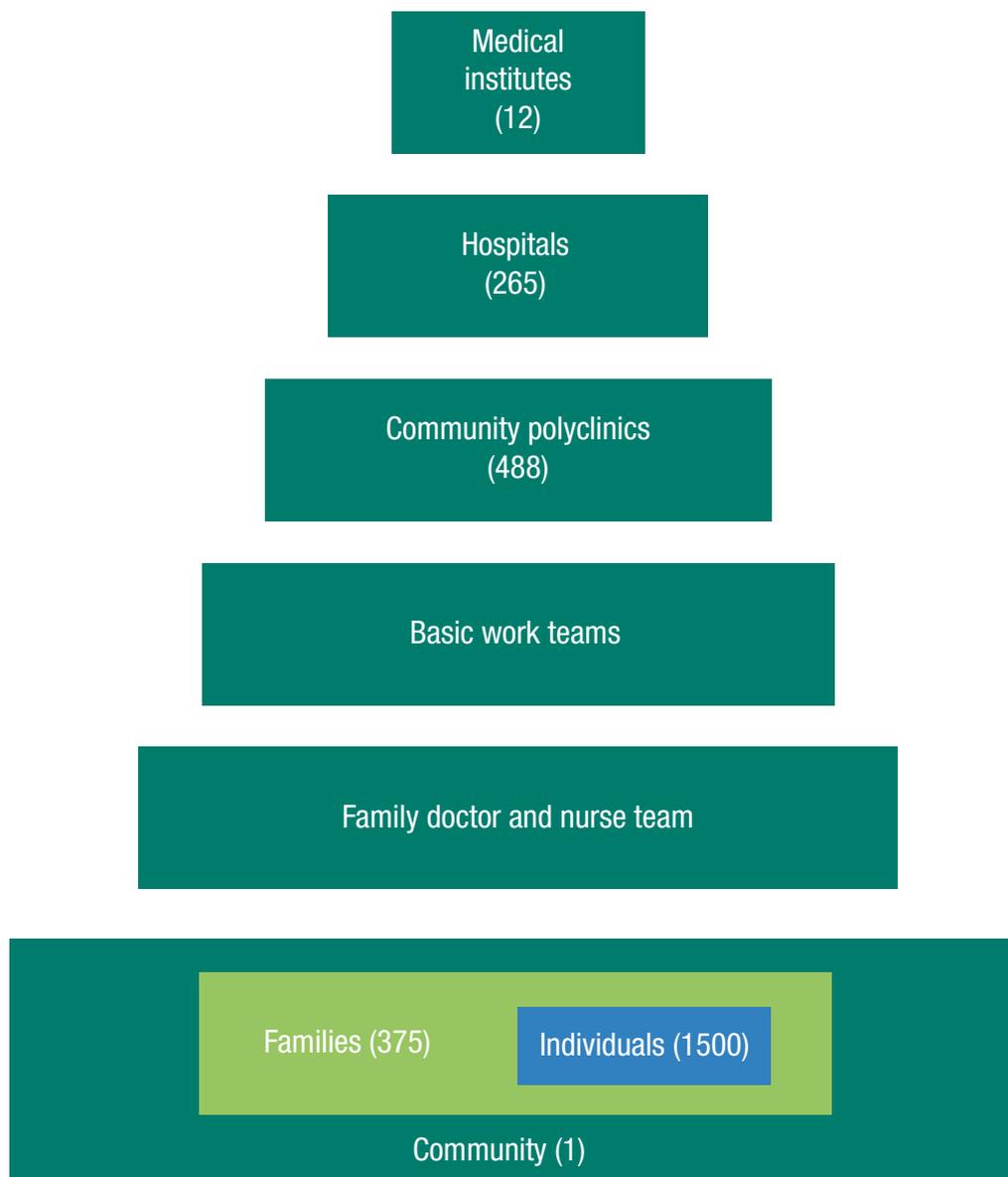
The Cuban health-care system

Figure 2 shows the different elements of the Cuban health-care system. Individuals seek medical care from their family doctor and nurses. Family physicians and nurse teams (caring for up to 1,500 people) live and practise in their communities. Family doctors refer patients to specialists. Family doctor and nurse teams are evaluated by community members through popular councils and neighbourhood organisations. Basic work groups are composed

of a leader from a polyclinic, a nursing supervisor, an internist, (i.e. doctors specially trained to treat adults), a paediatrician, an obstetrician-gynaecologist, a psychologist, and often a social worker. The next service tier is provided by polyclinics, which offer physician specialists, more advanced laboratory testing, diagnostic procedures, dentistry, and rehabilitation services. Municipal hospitals provide the next level of care. Above this are the medical institutes, which provide clinical care and carry out research.

Swanson et al. (1995) argued that Cuba's health-care system (see Figure 2) meets the WHO definition of primary health care: it is universal and provides services for primary, secondary and tertiary care and prevention. It involves the community in planning and delivery of services (e.g. through neighbourhood groups and health promotion programmes) and integrates health services with development activities. Additionally, researchers at health sciences universities are under the jurisdiction of the Ministry of Public

Figure 2 The Cuban health pyramid



Source: Demerst et al., 1993, cited in Keck and Reed, 2012

Health (MINSAP), which helps feed research findings back into practice (Artiles, 2012). The Cuban government has implemented international health activities abroad, e.g. helping restructure health-care systems and providing assistance in emergencies. This has generated an economic benefit and helped Cuba build alliances; however, in 2010, there were cutbacks in the domestic health system to allocate staff to overseas work (Baggott and Lambie, 2018).¹⁰

The Ministry of Health has no explicit gender policy. But some centres focusing on specific thematic areas promote a gender perspective on health care, including the National Health Promotion and Education Center (CNPES), the National STI/HIV/AIDS Prevention Center (CNPITS/VIH/SIDA); the National Center for Sex Education (CENESEX); the National School of Public Health (ENSAP) and the 14 medical universities across the country (Artiles, 2012). CSOs doing work on gender and health include

¹⁰ Recently, Cuba has withdrawn 8,300 doctors working in poor regions of Brazil after Brazil's far-right president Jair Bolsonaro threatened to cut relations with Cuba (Phillips and Augustin, 2018). Some of the Cuban doctors have also defected to Venezuela (Pentón, 2018).

the Gender and Health Network, the Cuban Society of Public Health, the Cuban Society of Family Medicine, and the Menopause Division of the Cuban Obstetrics and Gynecology Society (ibid.). However, Mariela Castro, head of CENESEX, argues that ‘a gender perspective in Cuban health is still a slogan, not a reality. It is an aspiration, which we haven’t yet managed to implement’ (Reed, 2012: 7).

According to PAHO (2012), the Cuban health programme prioritises care for adolescents (aged 10–19). Mortality in this age group fell from 0.4 per 10,000 persons (in 2006) to 0.2 per 10,000 persons (in 2010). The main causes of death among adolescents – accidents and malignant tumours – also declined during that time. However, intentional self-harm among adolescents has increased (ibid.), which might be linked to increasing mental health problems that young people face due to a lack of employment opportunities pushing them to rely on prostitution, black market activities, hustling or dollar remittances from abroad (Gonzalez and McCarthy, 2004).

Although the public sector is the main health-care provider in Cuba (Artiles, 2012), there are private clinics for tourists that are of a better standard and have better access to the latest medicines. The Cuban government is encouraging ‘health tourists’ to be treated in Cuba (Baggott and Lambie, 2018). Some have criticised the development of a two-tier system, while others see health tourism as an important source of resources that can strengthen health services for ordinary Cubans (ibid.). Johnson (2006) also observed differences in health care between rich and poor Cubans. She gave the example that dentists will perform restorative dental work if Cubans are able to acquire exterior material from abroad, which usually only rich people are able to do. This relates to the cuts in government funding for the health-care service in recent years (e.g. Nolen, 2017). In some situations, this means that doctors ask patients to pay for some services like x-rays (Molyneux, personal communication, 2018).

Treatment and support for HIV and other STIs

UNAIDS (2010) advocates ‘combination prevention approaches’ to HIV, including

behavioural intervention (e.g. sex education, counselling, programmes to reduce stigma and discrimination), biomedical interventions (condoms, treatment, needle exchanges, testing for prevention of mother-to-child transmission (PMTCT)) and structural prevention (e.g. addressing inequality, decriminalising sex work, and strengthening laws and education).

In Cuba, HIV testing is free and anonymous for those who seek it (Gorry, 2008). Testing is usually done through the family doctor or a polyclinic. Clinics can request that someone has an HIV test, but the individual can refuse (Anderson, 2009). HIV cases are confidentially registered with the National Centre for Epidemiology. Testing is targeted at pregnant women, health workers, blood donors and those who have travelled to areas with high HIV prevalence. By 2003, about 1.6 million HIV tests had been conducted (ibid.). According to UNAIDS data (2017), 24,000 people with HIV are estimated to know their status, which represents 80% of infected people.

If someone tests positive, a private interview with the patient takes place during which they are asked for contact information for all sexual partners in recent years. The sexual partners are then contacted by the family doctor or nurse and asked to get tested (Anderson, 2009).

HIV-positive people get information about drug therapy, support groups, self-help strategies, nutrition, hygiene, responsible sex and legal matters through ‘Living with HIV’ courses run by voluntary peer educators (Anderson, 2009). The government also provides counselling services, including a confidential telephone helpline, accompaniment and sharing of experiences (Gorry, 2008). There is also support for families of HIV-positive people, including a booklet and course, ‘Living Together with HIV’, also run by community volunteers (Anderson, 2009). The government also provides a national support network for families, friends and co-workers of HIV-positive individuals (Gorry, 2008). The website of the National STI/HIV/AIDS Prevention Center (CNP ITS-VIH/sida, 2016) lists the following types of support for people affected by HIV: counselling (face-to-face and helpline), training for health professionals and youth advocates/counsellors, development

of educational programmes, evaluation of prevention activities, and promotion of volunteerism. According to recent data from the Multiple Indicator Cluster Survey (MICS) in Cuba, 60.9% of young women aged 15–24 and 58.6% of young men of the same age group have knowledge about HIV prevention (MICS, 2014, cited in UNAIDS, 2017).

According to UNAIDS data (2017), 66% of infected adults and children receive ART (49% of women aged 15 and older, 72% of men aged 15 and older and 66% of children aged 0 to 14 years). Some patients also receive high nutrition food from the government (Gorry, 2008). But linked to the economic crisis, not all Cubans with AIDS received treatment in the 1990s. In 1998, Cuba started producing its own drugs (Anderson, 2009).

In 2015, Cuba was the first country in the world to have achieved the goal of dual elimination of mother-to-child transmission of HIV and syphilis (PAHO, 2017). Until 1993, most HIV-positive women chose to terminate their pregnancies. In 2003, outpatient care for people living with HIV was introduced, which increased the number of HIV-positive women giving birth (Castro et al., 2007). The birth rate among HIV-positive women has doubled between 2002 and 2006. If a pregnant woman is HIV positive, special measures are taken to make sure that the virus does not pass on to the baby (González, 2010). Only 26 of the 266 children born to HIV-positive mothers since 1985 have been HIV-positive, leading UNAIDS to describe Cuba's PMTCT programme as 'among the most effective in the world' (ibid.). Recent data show that more than 95% of HIV-positive pregnant women receive antiretrovirals (ARVs) (UNAIDS, 2017).

Cuba's HIV strategy has been praised for its involvement of people with HIV or AIDS in programme design, implementation and evaluation (Gorry, 2008). The 1996 Inter-sectoral Plan for the Prevention of STIs and HIV/AIDS has included most ministries, the police, courts, prosecutors, student groups, radio, television, sports institutes and farmers groups (Anderson, 2009). The STI/HIV/AIDS operational multi-sectorial group (GOPELS) is responsible for the systematic evaluation of initiatives in relation to HIV (Guerrero Borrego, 2014). Cuba has

also collaborated with international bodies and NGOs to strengthen its HIV programme, including *Médicos del Mundo España*, HIVOS Holanda, Doctors without Borders (Holland, Spain), the Global Fund, the WHO and PAHO, and UN agencies (UNAIDS, UNDP, UNICEF and UNESCO) (Gorry, 2008).

Some have praised Cuba's HIV strategy. For example, an Oxfam report (Gorry, 2008) suggests that Cuba's HIV strategy based on an integrated rights-based approach provides a good example for other countries. However, others have criticised Cuba's HIV strategy. For instance, a CENESEX report (Guerrero Borrego, 2014) notes that there is not enough information about STIs and HIV/AIDS for Cuban youth. Cuba has especially been criticised for its policies of isolation (Anderson 2009). From 1986 to 1989, HIV-positive people were forced to stay in quarantine in 'health resorts' or sanatoria (ibid.). They provided free medical care, food and salaries for those who stopped work. Residents also received education to reduce unsafe sexual contact with peers. Couples who were both HIV-positive were allowed to live together but partners or children who were unaffected were not allowed in the sanatoria. Residents were only allowed to leave for educational events. In 1993, residents were allowed to spend weeknights and weekends away. In the same year, the majority of people were given the choice to remain in sanatoria or to leave. 68% decided to stay, often because of the comforts of living, the diet and community (Spear, 2016). Today, patients can decide whether they want to stay in a sanatorium and receive free accommodation, food and medication (Anderson, 2009). In 2003, about 40% of HIV-positive people remained in sanatoria (Pérez et al. 2004, cited in Gorry, 2008).

Figure 3 taken from Gorry (2008) provides an overview of Cuba's HIV/AIDS strategies since 1983.

Contraceptive provision

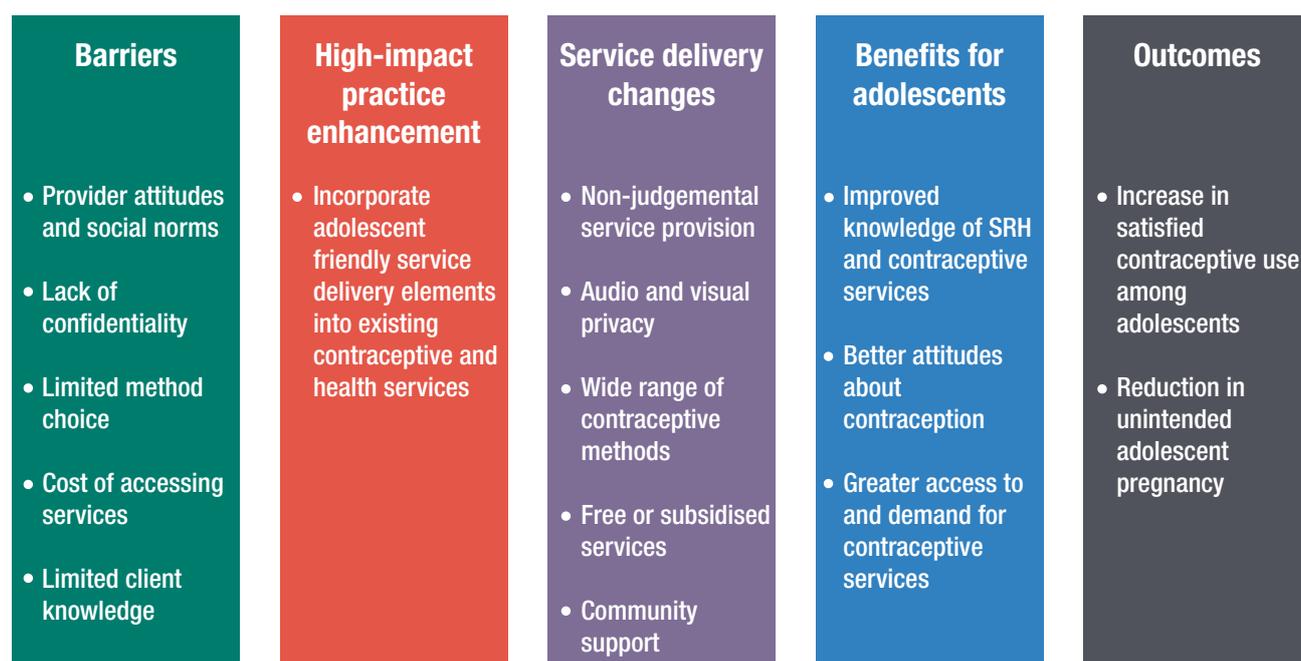
USAID (2015) provides a framework for improving access to and use of contraception for adolescents (see Figure 4). The theory of change encourages integrating adolescent-friendly service delivery elements in health services, such

Figure 3 Timeline of response to HIV/AIDS in Cuba

1983	National AIDS Commission convened
1985	First case of HIV in Cuba clinically diagnosed
1986	National Program for the Prevention and Control of HIV/AIDS launched Working Group for Confronting and Fighting AIDS (GOPELS) established Government announces HIV-infection has been detected in the population First Cuban dies of AIDS-related complications All donated blood is tested for HIV
1987	Zidovudine (AZT) recommended as monotherapy for AIDS patients
1989	First case of pediatric HIV detected 1991 AIDS Prevention Group (GPSIDA) officially established
1993	Mandatory sanatorium policy amended to allow alternative known as the Ambulatory Care System
1995	Laboratories nationwide using Cuban-manufactured HIV test kits
1996	Children with HIV and their mothers begin receiving anti-retroviral treatment Cuba joins the International NAMES Project
1997	Pregnant women with HIV begin receiving AZT to prevent mother-to-child transmission
1998	Day Hospital alternative expands on Ambulatory Care System. National STI/HIV/AIDS Prevention Center opens Support Line (Línea de Apoyo) network for people with HIV/AIDS founded
2000	MSM Project (Proyecto HSH) created
2001	Cuba begins manufacturing antiretroviral drugs and distributing them free to those needing them National STI/HIV/AIDS Strategic Plan 2001–2006 launched
2003	Universal Antiretroviral Treatment achieved First Global Fund to Fight AIDS, Tuberculosis and Malaria award approved
2005	Ministry of Public Health and GOPELS refine Sanatoria Care and Ambulatory Care Systems
2006	Second Global Fund to Fight AIDS, Tuberculosis & Malaria award approved
2008	Third Global Fund to Fight AIDS, Tuberculosis & Malaria award approved

Source: Gorry, 2008

Figure 4 Improving adolescent access to and use of contraception through adolescent-friendly services: theory of change



Source: USAID, 2015

as non-judgemental service provision, privacy, improved choice of contraceptive methods, free services and community support. The framework incorporates social norms and attitudes at different levels, including barriers (provider attitudes and social norms), service delivery changes (non-judgemental service provision) and benefits for adolescents (better attitudes about contraception).

In Cuba, the state provides contraception, through methods that include IUDs, condoms and oral contraceptives (Bélanger and Flynn, 2009). For older women with children, sterilisation is a common means of contraception, provided in public health-care facilities free of charge (Härkönen, 2014). As part of its HIV strategy, the government provides free and subsidised condoms at cafeterias and bars, and from pharmacies, hospitals, polyclinics, family doctors, AIDS Prevention Centres, Centres for Health Promotion and Education, and counselling services (Gorry, 2008). Access to emergency contraception is also said to have improved (Acosta, 2019). However, supplies of some contraceptives and contraceptive choices are limited (UN, 2002). Free condoms are not always available. Härkönen (2018) found that people complained about contraceptives not being available from pharmacies or having to pay for them. The domestic production of contraceptives

has been limited and especially during the US embargo, there were problems sourcing contraceptives from elsewhere (van Curen, 2018). A recent study from the Center for Demographic Studies (CEDEM) at the University of Havana has also identified difficulties with the distribution and absence of contraceptive methods, including condoms, in particular seasons in eastern parts of the country (Acosta, 2019).

Abortion

The 2017 Guttmacher report, *Abortion Worldwide* (Singh et al., 2018), suggests that legalising abortion is the first step toward safer abortion, but that legal reforms must be accompanied by political will and implementation to ensure that women who seek abortion do not face stigma and financial barriers.

In Cuba, abortion and menstrual regulation are provided free of charge in public health facilities (Bélanger and Flynn, 2009). In the first five weeks of pregnancy, menstrual regulation is used (a procedure that involves manual vacuum aspiration of endometrial tissues from the uterus) (ibid.). Menstrual regulation does not require parental consent or confirmation of the pregnancy (UN, 2002). It has been common since the 1980s (ibid.). To reduce menstrual

regulation rates, pregnancy tests were distributed nationwide (de Gil, 2014).

For an abortion, confirmation of the pregnancy is required. Girls under 18 need parental consent and girls younger than 16 need parental consent and authorisation by a medical committee. Women seeking an abortion are examined by a gynaecologist and receive counselling from a social worker. Abortions after 10 weeks of pregnancy need approval from a formal evaluation committee usually comprised of doctors, gynaecologists and a psychologist. Abortion is usually only allowed on the grounds of foetal malformation or risk to the woman's physical or psychological wellbeing (Andaya, 2014). The Committee on the Elimination of Discrimination against Women (2006) has expressed concerns about Cuba's high abortion rates. It notes that Cuba should raise awareness about risks related to abortion and provide abortion data disaggregated by age and geographical location (rural vs urban areas).

Linked to demographic trends of an ageing and declining population (Härkönen, 2014), the government has recently tried to reduce the abortion rate through sex education and the promotion of contraceptives (Bélanger and Flynn, 2009). During field research in Havana, Härkönen (2014) heard reports that the government had restricted women to no more than two abortions a year. Teenage girls in her neighbourhood were reportedly refused abortion on that basis.

Fertility treatment

Even though several policy documents of international organisations recognise the importance of prevention and appropriate treatment of fertility problems, in practice infertility is often not perceived as a public health issue in LMICs, linked to concerns about overpopulation, life-threatening conditions and scarcity of resources. Gerrits (2012) recommends exploring new types of partnerships, existing insurance mechanisms and alternative ways of health financing, and developing low-cost and simplified assisted reproductive technology procedures (such as a one-day diagnostic procedure of infertility).

Cuban policy supports in vitro fertilisation (IVF) and other treatments for people who have

difficulties conceiving. However, due to resource constraints, assisted reproduction is not freely available to all. There are no other methods to assist having children such as sperm banks, egg donation, surrogacy or adoption (Browne, 2018).

Antenatal care

WHO guidelines on antenatal care for pregnant women and adolescent girls (WHO, 2016d) include 39 recommendations on five types of interventions: (1) nutritional interventions; (2) maternal and foetal assessment; (3) preventive measures; (4) interventions for common physiological symptoms; and (5) health system interventions to improve utilisation.

According to Libby (2011), Cuba's maternal and child health programme received more funding than any other government health initiative. Expectant mothers are seen by a family doctor and are referred to a nearby gynaecological hospital (González, 2010). Antenatal care includes regular, almost weekly medical checks. The coverage rate (at least four visits) is 100% (UNICEF, 2016b). Women are also seen by a dentist, have two interviews with a psychologist and are given medical advice on diet and sexual health (Härkönen, 2014). Local community groups, such as the *Comités de Defensa de la Revolución* (CDRs), the *Federación de Mujeres Cubanas* (FMC), *Federación de Estudiantes Cubanos* (FEC), encourage women to attend antenatal appointments (Libby, 2011).

Women considered to be 'high risk' – including those who have experienced miscarriages, are expecting twins or suffer from anaemia (González, 2010) – are referred to a state-run maternity home or hospital where they stay for free until their baby is born, with a good diet and full-time medical care (Härkönen, 2014). Aside from women with pregnancy-related complications, women experiencing domestic violence, in inadequate housing or with insufficient/inadequate nutrition are also referred to maternity homes (ibid.). Women who live far from the hospital are also admitted to the maternity homes close to their due date (González, 2010). Those in maternity homes attend classes on breastfeeding and infant care (Andaya, 2014). Andaya, however, found that women often considered maternity homes

depressing and complained about conditions, including having to share a room and not being allowed to have family visits. She also found that some doctors used the option of maternity homes as a threat to encourage pregnant women to adopt healthier behaviours (e.g. better diet). Härkönen's (2014) study respondents also reported that maternity homes had crowded rooms, bad food and unsatisfactory toilets.

Some have criticised the Cuban antenatal care system for being 'paternalistic', as it intervenes with women's agency and restricts women's decisions about pregnancy and delivery (Kath, 2010, cited in Härkönen, 2014). But Nigenda et al. (2003), in a study of antenatal care in four countries, found that Cuban women wanted to have many antenatal appointments. Their preference was to visit health professionals 18 times during the pregnancy – the highest number of the four study countries. Cuban women were found to have a preference for modern, technically complex antenatal care by specialist doctors. They did not express being shy towards male doctors. The study found that Cuban women were satisfied with the amount of information they received, but would like to receive more information on emotional and psychological changes during pregnancy.

Delivery and postnatal care

WHO guidelines on intrapartum care provide a comprehensive international framework for delivery and postnatal care. The guidelines promote 'positive childbirth' that involves women in decisions and avoids unnecessary medical interventions.

Delivery and postnatal care in Cuba usually takes place in health-care institutions (UNICEF, 2016b) attended by health professionals (UNDP, 2018b) (see Table 11). Unlike other LMICs, Cuba has officially turned away from the use of

midwives. Some midwives retrained as obstetric nurses and still practice in rural areas (Libby, 2011).

In Cuba, until the baby is at least six months old, their mother takes them for regular check-ups to the local health clinic or a nurse visits them at home (Härkönen, 2014). New mothers also often receive support from family members, especially from their mother's relatives (ibid.).

3.3.3 Empowerment interventions

The global literature on interventions to improve adolescent SRH suggests that improving the situation of girls in other spheres can positively affect their SRH. We could not find studies investigating the effect of empowerment strategies on adolescent SRH in Cuba.

Some interventions have aimed to improve girls' and young women's economic empowerment (for example, through microcredit) to reduce their vulnerabilities to SRH problems. Improving girls' economic status can reduce the risks of their engaging in transactional sex, which can in turn improve SRH outcomes (Svanemyr et al., 2015).

Another approach has been to provide cash transfers to adolescent girls and young women to reduce risky sexual behaviour. For example, a study of the Rewarding STI Prevention and Control in Tanzania (RESPECT) project, which offered rewards to people who stayed free from STIs, found that incidence reduced after just one year (Svanemyr et al., 2015). A systematic literature review of interventions to prevent unintended pregnancies among young people in LMICs (Hindin et al., 2016) finds that conditional and unconditional cash transfers were the most successful type of intervention for decreasing adolescent pregnancies. However, the authors questioned whether cash transfers were sustainable and could bring about long-term change.

Table 11 Delivery and postnatal care in Cuba

Indicator	Source	
Proportion of births attended by skilled health personnel (%)	99.9	(UNDP, 2018b)
Delivery care (%) 2008–2012 institutional delivery	99.9	(UNICEF, 2016b)
Birth registration (% under age 5)	100	(UNDP, 2018b)
Maternal mortality ratio, 2010, lifetime risk of maternal death (1 in:)	1,000	(UNICEF, 2016b)

Some have argued that improving girls' access to education can also improve their SRH outcomes. Secondary school education, in particular, is correlated with better SRH outcomes such as contraceptive use, age at marriage, number of births, and use of health services. A review from eastern, southern and central Africa found that secondary education is also associated with decreased HIV rates and less risky sexual behaviour (Svanemyr et al., 2015).

Many adolescent girls have few possibilities to seek information and support and express their SRH concerns in a non-judgemental environment. To address this issue, some interventions have provided physical spaces for girls to meet regularly, also offering mentoring, life skills or vocational and financial literacy training (ibid.). BRAC's Empowerment and Livelihood for Adolescents (ELA) clubs in Uganda provide girls with vocational skills, life skills and a safe space to meet and socialise with their peers. The clubs have helped to decrease teen pregnancy rates and fewer girls report having sex against their will (Bandiera et al., 2013). A review of 63 studies on the empowerment impacts of 44 girls' or youth development clubs and life skills programmes (Marcus et al., 2017) finds evidence of the positive impacts of these programmes. However, Austin (2018) and Denno et al. (2015), in their literature reviews on SRH services for adolescents, find that youth centres on their own have not been effective in improving adolescent SRH.

3.3.4 Social norms and awareness-raising interventions

Addressing unequal and harmful gendered norms is key to creating enabling environments for good adolescent SRH (Svanemyr et al., 2015). Approaches outlined in the previous sections can indirectly affect social norms related to SRH, as follows:

- **Legal and policy change** can drive norm change (Marcus and Harper, 2014). For example, international organisations and agreements can influence international norms on family planning and contraception (Herbert, 2015).
- **Facility-based interventions** can reduce stigma, as in Cuba, where medical

advancements made it possible for HIV-positive mothers to give birth to HIV-negative children, which profoundly reduced HIV/AIDS-related stigma and discrimination against pregnant HIV-positive women.

- **Empowerment interventions:** Girls' own agency and actions play an important role in transforming gendered norms and practices (Marcus and Harper, 2014).

As well as having indirect effects on social norms, some interventions have had more direct intentions of shifting social norms around SRH. Most approaches that directly target social norms involve training sessions, awareness-raising and community reflection. These interventions not only have the potential to change social norms, but also often improve young people's knowledge on SRH. Box 2 highlights some key attributes of social norms interventions.

Sex education can improve knowledge on SRH and tackle gender-inequitable norms (Herbert, 2015). For example, comprehensive sexuality education has been found to be successful in delaying age at first intercourse, reducing risk-taking and increasing use of contraception (Austin, 2018).

In Cuba, sex education has challenged machismo gender roles and contributed to reducing stigma around homosexuality (Hippe, 2011). The national sex education policy evolved with an emphasis on women and was later extended to include gender diversity (Báez and Soto-Lafontaine, 2015). Sexual education campaigns have been in the Cuban public discourse since the mid-1970s (ibid.). In 1972, the multidisciplinary National Sex Education Working Group (GNTES) was set up to establish the National Programme of Sexual Education (Rojas, 1978, cited in Báez and Soto-Lafontaine, 2015). In 1989, CENESEX was established under the Ministry of Public Health. Its purpose was to coordinate the national sex education programme, involving the state and CSOs. CENESEX has established a network of working committees across the country to carry out and monitor sex education activities (Báez and Soto-Lafontaine, 2015).

Box 2 Key attributes of social norms interventions

Yaker (2017) identifies the following key attributes of social norms interventions related to SRH:

- **Seek community-level change:** try to achieve change at community rather than individual level
- **Community-led:** community should actively participate rather than being recipients
- **Create a safe space for critical community reflection:** create spaces that promote reflection in creative and engaging ways
- **Engage wide range of people at multiple levels:** the most effective social norms interventions involve different people at different levels
- **Organised diffusion:** this technique means beginning change with a core group who then engage others
- **Address power imbalances:** to achieve long-term change in social norms, power imbalances, especially those related to gender and marginalisation, need to be addressed
- **Accurate assessment of social norms:** assess which norms affect behaviour (might be more than one)
- **Present the actual behaviour norm:** present the actual behaviour in cases where there is a discrepancy between what we think others do and what others actually do
- **Create positive new norms:** new ideas need to be presented from a trusted, credible source
- **Rooting the new norm in value systems:** new norms should be rooted in existing value systems

Based on these characteristics, Yaker (2017) argues that not all community-based interventions address social norms. For example, programmes that work with community members might still not change social norms if they aim to change knowledge, attitudes and behaviour at the individual level, but do not create opportunities for reflection at family or community level.

Sex education in schools and universities

In the 1970s, the Cuban government took steps to integrate sex education into curricula at school and universities. For example, the National Sexual Education Work Group was established in 1977 to develop training on sex education for doctors, psychologists, the FMC, youth organisations and others (Martínez de León et al., 2013). In 1996 the Sexual Education Programme in School was officially established under the name of 'For a Responsible and Happy Sex Education' (Báez and Soto-Lafontaine, 2015). Subjects related to reproduction were included in textbooks during the 1970s and 1980s (ibid.). Each school is responsible for developing and implementing its own sex education programme (ibid.). Sex education in schools includes the distribution of educational material about sex and HIV prevention (González, 2010). Some teenagers are trained to become 'health ambassadors', learning about HIV and other STIs and condom use so that they can pass this knowledge on to their communities

(Härkönen, 2014). According to González, (2010), there has been a decline in school dropout rates due to pregnancy in the provinces where the programme was implemented. However, Martínez de León et al. (2013) argued that teachers are insufficiently trained to implement sex education across disciplines.

Every university in Cuba has a health and sexuality department (González, 2010). Around 2007, CENESEX and other organisations introduced a new sex education strategy focusing on university students. The programme includes talks, conferences, film debates, theatre sessions and other activities in the capital and some provinces (Martínez de León et al., 2013). CENESEX is also organising courses for medical school students on a comprehensive approach to sexual health promotion (Reed, 2012).

Educating health professionals

Training health professionals can improve the quality of services and challenge negative attitudes and practices among providers. Barker

et al. (2007), analysing data from 58 evaluations of interventions that sought to engage men and boys in achieving equity in health, emphasised the importance of training health professionals in how to deal with men. However, Denno et al. (2015), in their review, found limited evidence on the effectiveness of simply training health workers on adolescent-friendly services without addressing other issues.

In Cuba, doctors, dentists and other health professionals caring for people living with HIV have been trained about sensitivity and clinical matters (Gorry, 2008). The National STI/HIV/AIDS Prevention Center provides training for health professionals, while the FMC trains health promoters and social workers on working within the community and with people with HIV (ibid.). A recent study from the Center for Demographic Studies (CEDEM) at the University of Havana has identified challenges with incorporating perspectives of sexual rights, reproductive health and gender in the training sessions aimed at health professionals (Acosta, 2019).

Educating parents

Interactions between adolescents and their parents about SRH are often limited due to social norms. Recent recommendations from WHO (2018d) on adolescent SRHR emphasise the important role that parents play in preparing girls and boys for puberty and building more equitable norms. Other global literature reviews have also emphasised that sex education programmes that involve parents are more successful in improving adolescents' sexual knowledge and health (Salam et al., 2016; Austin 2018). For instance, a parent-centred programme encouraging parents to talk to their teenagers about SRH decreased the likelihood that low-income Latinos in the United States would contract STIs and practise unprotected sex (Svanemyr et al., 2015).

Libby (2011) argued that in Cuba, the family unit is an important source of education on sexual health for adolescents, which means that interventions with parents have considerable potential. According to Andaya (personal communication, 2018), the government is organising parenting classes. A report by UNICEF (2016a) notes that parenting classes

are implemented under the Educate your Child programme (targeting children from birth to age 6), and aim to build parents' ability to provide a safe and nurturing home environment.

Group learning and peer support

Group education can lead to attitudinal and behavioural change (Herbert, 2015). Reviews of the literature find that 'interpersonal approaches' such as one-on-one or small group education (Herbert, 2015) or life-skills training (Hindin et al., 2016) can be effective in transforming social norms related to SRH. Barker et al. (2007), reviewing literature on how to engage boys and men in SRH interventions, found that group education sessions about social norms and SRH, lasting between 2 and 2.5 hours for 10–16 weeks, were most effective in changing behaviour.

Peer education is another common strategy for changing behaviour and attitudes around SRH. Svanemyr et al. (2015), in their literature review, find that peer education among adolescents can change norms, increase SRH knowledge, delay first sexual intercourse and reduce STIs. But Austin (2018) finds limited success of peer education models, while Chandra-Mouli et al. (2015) find that peer education programmes often benefit the peer educators themselves through training and supervision, but do not improve health outcomes for the groups they are supposed to educate.

The Cuban government provides safe-sex education for targeted groups including women, transvestites, transsexuals, and men who have sex with men (Gorry, 2008). Girls aged 10–20 can also attend *circulos de adolescents*, which are forums run by family doctors to address issues of sexuality, contraception and sexual health (Libby, 2011). But Libby (2011) argues that in practice, these forums are infrequent, and that Cuban adolescents generally lack knowledge on sexual health and contraception. The FMC also runs Orientation Houses for Women and the Family (*Casas de orientación a la mujer y a la familia*). These centres offer women the possibility to see psychologists, lawyers and doctors. Primarily designed to support women experiencing domestic violence, they also provide more general support. They also provide various courses for women, though Härkönen (2014)

reports that respondents complained about long waiting times for courses and difficulties being able to speak with professionals.

Community mobilisation

Community mobilisation – such as community meetings, training or sensitisation sessions, street theatre and other cultural activities (Barker et al., 2007) – can encourage intergenerational communication and understanding about adolescent SRH and lead to attitudinal change. For example, in Bihar, India, a programme that engaged community members in discussions about the health benefits of delaying birth among young married women led to an increase in contraceptive use among married adolescents (Daniel and Nanda, 2012, cited in Plourde et al., 2016).

Working with community ‘gatekeepers’ – such as parents, community leaders or religious leaders – can be especially effective in changing social norms around SRH (Denno et al., 2015; Svanemyr et al., 2015). For example, the teenage mother project in eastern Uganda was successful in reducing stigma towards unmarried teen mothers. Leerlooijer et al. (2013, cited in Austin, 2018) argued that involving influential community leaders at the project’s inception was critical to its success.

In Cuba, CENESEX has organised annual parades opposing homophobia (Kirk, 2011), and undertaken community-based cultural projects for HIV/AIDS prevention, through music, dance, theatre and other arts-based activities (Pérez et al., 2014).

Mass media campaigns

Media campaigns can raise awareness about adolescent SRH issues (Svanemyr et al., 2015) and encourage norm change (Herbert, 2015). For example, soap operas in Mexico have conveyed messages about family planning, contraception, responsible paternity, family integration, male chauvinism and sex education (Díaz Bravo, 2013).

Using mass media is a key strategy for sex education in Cuba. CENESEX has worked with the Cuban Institute of Radio and Television for more than 20 years (ibid.), broadcasting TV shows, soap operas and radio call-in programmes (Andaya, 2018). TV campaigns have included commercials encouraging condom

use or discouraging domestic violence. In 2007, the Juvenil programme targeted youth with messages encouraging condom use and discouraging stigmatising people on the basis of sexuality. Recent campaigns have focused on promoting greater tolerance for diverse sexual practices (Härkönen, 2014). The government has also placed advertisements in shops and public buildings and produced pamphlets addressing cultural attitudes and stigma against homosexuality and HIV (Anderson, 2009). Cuban music stars have also helped to promote safe sex – for instance, through the national HIV magazine (Anderson, 2009). However, Härkönen (2018) finds that study informants did not seem to have taken much from national campaigns on gender equality.

Targeting men and boys

Research and interventions on SRH have tended to focus on women and girls rather than addressing the role of masculinity in contributing to gender inequities (Herbert, 2015). But recently, an increasing number of SRH interventions are engaging men and boys to promote alternative norms and understandings of masculinity (Svanemyr et al., 2015). Barker et al. (2007) found that interventions combining education, media activities and community mobilisation with men and boys have the potential to promote more gender-equitable norms, improve SRH, reduce HIV infection rates, improve maternal and child health, and reduce gender-based violence. They argue that community outreach and mass media campaigns involving men and boys were especially successful in changing behaviour. For example, the *Somos Diferentes, Somos Iguales* (We are Different, We are Equal) programme in Nicaragua (which included an edutainment telenovela, call-in radio shows and community-based activities for young men and women) led to greater support for gender-equitable attitudes, increased communication about HIV and sexual behaviour, increased condom use, and increased first-ever HIV test (Solórzano et al., 2006, cited in Barker et al., 2007).

In Cuba, linked to social norms about men’s unwillingness to use condoms, state campaigns to tackle STIs usually target women (Härkönen,

2014). However, there have been media campaigns targeting men to address gender equality more generally (Andaya, 2014).

3.3.5 A holistic approach to addressing adolescent SRH

After a decade of interventions on adolescent SRH, it has become clear that services alone do not improve health outcomes, but that social, cultural and economic factors have a strong influence on adolescent SRH. Svanemyr et al. (2015) proposed creating an enabling environment that addresses these broad structural factors. Based on the ecological framework (see Figure 5), they suggest four areas of interventions to improve adolescent SRH:

1. **Individual level:** Empower adolescents and improve their economic and social assets and resources.
2. **Relationship level:** Build relationships that support and reinforce positive health behaviours among adolescents, including targeting parents, intimate partners and other sexual partners and peers.
3. **Community level:** Create positive social norms and community support for adolescents to practise safer behaviours and access SRH information and services,

including targeting family, neighbourhoods, schools and workplaces.

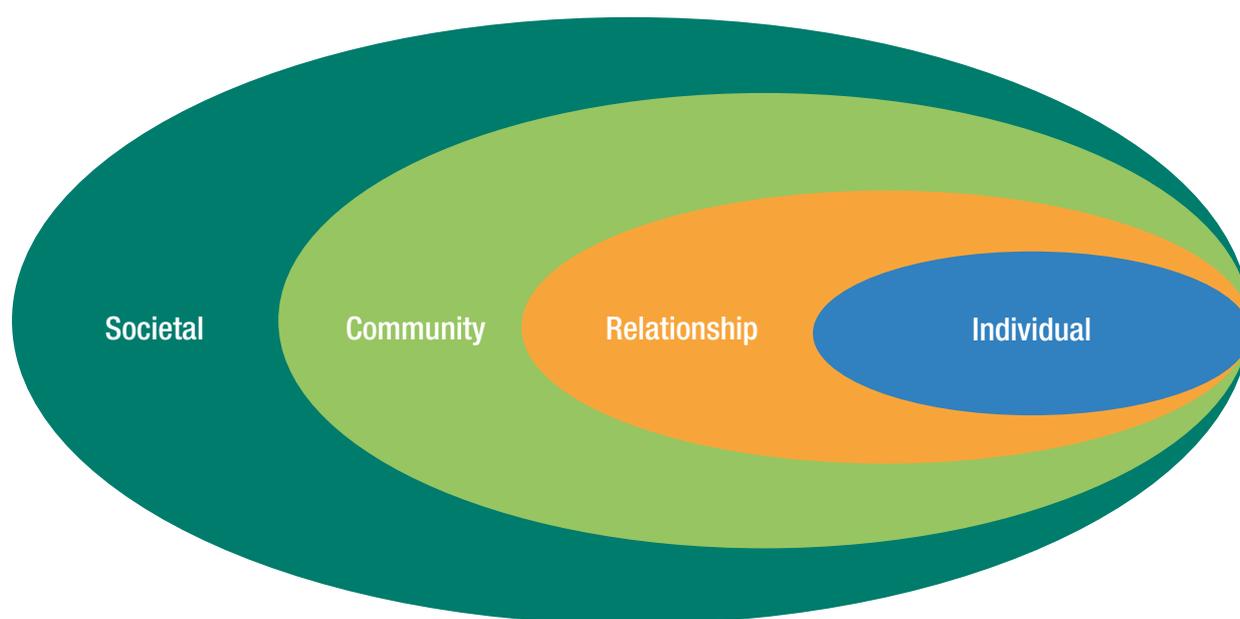
4. **Societal level:** Promote laws and policies related to the health, social, economic and educational spheres to improve adolescent SRH.

Other research has also recognised that a combination of the activities listed in the previous sections (policies and laws, facility-based interventions, empowerment interventions, social norms and awareness-raising interventions) are likely to be most effective in improving SRH and addressing gendered norms (e.g. Barker et al., 2007; Kågesten et al., 2014; Denno et al., 2015; Austin, 2018). The recent WHO recommendations on adolescent SRHR call for a ‘package of actions’ that includes: building knowledge and skills; building individual and social assets; providing a safe and supportive environment; and providing health and counselling services (WHO, 2018d: 2).

Research has also suggested that a life course approach – reaching individuals at different points in the life course and over a longer period – is likely to be more effective in changing norms and behaviours (Barker et al., 2007).

This review has shown that Cuba’s approach to SRH combines facility-based interventions, embedded in a family doctor system, with a variety of awareness-raising and education

Figure 5 Ecological model for an enabling environment for shaping adolescent SRH



Source: Svanemyr et al., 2015

campaigns. The key challenge facing the Cuban government in its attempts to address adolescent SRH and related norms seems to be a lack of resources for sustaining health services and SRH

education. The evidence suggests that despite significant efforts, the government has not yet succeeded in addressing persistent gender inequalities that disadvantage women.

4 Social norms and women's economic empowerment

In the following sections of this literature review, we examine the current situation of Cuban women in the labour force, focusing on social norms that have either promoted or discouraged economic empowerment. We pay particular attention to the situation of older adolescent girls and young women when there is available literature.

We first present a very brief description of the Cuban labour context and the main changes that have taken place since 2008. We then present data on female labour force participation in Latin America to contextualise the situation in the region, and then present available data on the situation of Cuban women (including their participation by sector, and monthly incomes). We go on to present data on the labour situation of adolescents and youths, first in Latin America and then in Cuba, focusing on girls and young women. This is followed by a section on existing policies and laws on women's economic empowerment. Subsequent sections examine the literature on the role of social norms in facilitating or constraining women's economic activity, followed by the interventions, policy and legal changes introduced to promote women's economic empowerment and tackle gendered norms that affect adolescent girls and young women.

4.1 The Cuban labour context and recent economic reforms

When Raúl Castro took over from his brother Fidel in 2008, he began a series of structural reforms to address the socioeconomic challenges facing Cuba. According to Mesa-Lago (2017), some scholars have argued that Cuba is transitioning to a mixed economy. However, the official view (ratified at the PCC's Seventh Congress in 2016) is that central planning will predominate over the market, and state property over private property.

Echevarría (2014: 66) notes that, according to the PCC, 'today, similar to the 90s, the intention is to design new pathways that respond to national interests' with the purpose to 'guarantee the continuity and irreversibility of socialism, the economic development of the country and to increase the standard of living of the population'. A main reform goal included firing 1.8 million workers in the state sector to reduce its size – a reform that had never occurred in revolutionary Cuba. According to the National Office of Statistics and Information (ONEI, 2017), Cuba's state sector (71% of the labour force) encompasses all workers in public administration, major industries, state companies, health, education, utilities and research institutes, as well as most of those who work in public transportation, the environment, tourism, communications and culture. It is made up of all state entities: commercial companies,

unions, state economic organizations, political and mass organisations and others.

Those fired from the state sector would find employment in the non-state sector (NSS), which is divided into two sub-sectors: ‘private’¹¹ and cooperative, both of them with differences around how long they have been in existence, property rights, their relationship with the state, the market’s role, their size, and growing or shrinking trends (Mesa-Lago et al., 2016). Mesa-Lago et al. (2016: 8) also explain these two sub-sectors in detail.

The ‘private’ sub-sector includes four groups:

1. **Owners of small parcels of land (small famers):** They own the land but have certain obligations to the state (including sale of part of their harvest to the state at a price fixed by government and below the market price, known as a procurement quota or *acopio*). This limits what they can sell at market prices, although reforms have loosened these restrictions.
2. **Self-employed workers:** Also known as *cuentapropiistas* or *trabajadores por cuenta propia*, ONEI (2017: 6) describes this group as ‘those who being or not owners of the means of production, do not have a labour contract with legal entities and are not paid wages’. According to Granma (2018a), the self-employed sector has grown by a staggering 375% between 2010 and 2018, operating across 201 state-determined occupations. Self-employed workers must be Cubans or foreign permanent residents, over 17 years old, and work in authorised occupations. They must obtain a license, punctually pay all taxes, enrol on social security pensions and pay their contributions. Most of them are owners of small businesses or involved in individual economic activities; their products and services are sold at market price. Self-employed workers are registered in the National Tax Administration Office (ONAT) where they pay their taxes as established by the current legislation. To

practise any of the authorised occupations, the self-employed must obtain a licence or permission, which requires official stamps bought at banks. With the licence, they register with ONAT and obtain an ‘ID card’ or certificate that allows them to work as self-employed. When earnings are lower than the cost of the licences, taxes and other expenses, self-employed workers tend to return their licences (Mesa-Lago et al., 2016; Echevarría et al., 2018). Generally, they fix market prices for the sales of their products or services. They can also contract a limitless number of salaried employees (including family members), although with previous authorisation. They can also open bank accounts. Finally, by paying a contribution, they have a right to monetary benefits for maternity leave, and social security pensions for old age, disability or death.

3. **Usufruct farmers on state-owned idle lands:** These are people who received lands to work according to legal rules (including *acopio*), and their numbers have increased since 2008. They do not own the land but cultivate it and appropriate what they produce. Once they have fulfilled *acopio*, they can sell whatever is left over at market price.
4. **Workers hired by the three aforementioned groups:** These are not owners or lessees but salaried employees.

The cooperative sub-sector, situated between ‘private’ and state property, comprises three groups:

1. **Agricultural production cooperatives:** Including the basic units for cooperative production (UBPC) (created in 1994 by the transformation of large state farms) and agricultural production cooperatives (CPA). Members do not own the land but work it collectively. The state keeps the property, authorises indefinite leasing contracts to members, and keeps most of their production to set prices.

11 The term ‘private’ is not usually used in Cuba and was not mentioned in official media until 2014; terms such as ‘non-state’, ‘small farmers’, ‘self-employed workers’, ‘dwellings built by the population’, etc., are used instead. The PCC guidelines in 2016 used the word ‘private’ for the first time (Mesa-Lago et al., 2016: 7).

2. **Credit and services cooperatives (CSC):** Private farmers join these cooperatives to obtain credit, purchase inputs wholesale, and share some equipment. They are the most independent and are increasing in number and membership.
3. **Non-agricultural and service cooperatives (CNA):** Examples include barbershops (created in 2013), but membership is low; they lease from the state, which retains the property, but members sell their products/ services at market prices.

Mesa-Lago (2017) identifies that within the NSS, the most dynamic groups are self-employed workers (507,342), usufruct farmers (312,296), and members of new non-agricultural and service co-ops, (7,700). Together, these groups represent 17% of the labour force, out of a total 29% in the entire NSS. Except for the most recent non-agricultural and service cooperatives, the other forms of NSS groups were legalised during the Special Period crisis of the 1990s but did not expand considerably until much more recently. Likewise, selling and buying of private dwellings, banned in 1960, was reauthorised in 2011, involving at least 200,000 transactions in 2013 but still only accounting for 5% of the total housing stock, while the rest remains state-owned.

Another characteristic of the Cuban socialist economic model is low salaries, which help explain the low performance of state enterprises. As a result, in Cuba – unlike other LAC countries – self-employment and informal sector work is more lucrative than a job in the formal sector. This causes most people to have to look for other means of income. The state sector, on some occasions, is also unable to meet all the consumption needs of the population. This leads to a black market, outside the state, to

complement salaries. Therefore, as Ferragut and Piza (2016) argue, the two markets (state and non-state) coexist.

4.2 Women's participation in the labour force: Latin America and Cuba

This section briefly examines the changes in female labour force participation, first presenting data on Latin America from 2007 to 2017 and then on Cuban women from 2012 to 2016.

4.2.1 Latin America¹²

The ILO (2017b) highlights that Latin America is showing some improvement in economic growth (growing at a moderate 1.2%) in a context still characterised by market decline due to the 2011–2015 global economic slowdown. The average unemployment rate for the region rose from 8.2% to 9.7% between 2016 and 2017.

Table 12 shows differences in labour indicators (unemployment rate, labour force participation rate and employment-to-population ratio)¹³ between men and women over the past 10 years in 24 LAC countries, including Cuba. According to the ILO, women have had higher unemployment rates than men, with a gender gap of more than 2%. Likewise, the employment-to-population ratio is much higher for men (68.9%) than for women (45.0%). However, between 2016 and 2017, women's labour force participation increased and the employment-to-population ratio improved and, for the first time, women's labour participation surpassed the 50% mark (2017).

The ILO also looks at the structure of urban employment by wage and non-wage employment. Although data is not disaggregated by sex, it shows that job creation in the formal, wage sector has been declining (from 65.3% in 2013 to 63.4% in 2016), while own-account

12 This section relies heavily on the 2017 Labour Overview of Latin America and the Caribbean (ILO, 2017b).

13 The unemployment rate measures the percentage of unemployed individuals in the labour force (persons actively seeking employment and who are available to work). The labour force participation rate measures the percentage of people in the working-age population who are employed or who are seeking work (ages 15 and over) whereas the employment-to-population ratio measures the percentage of employed persons in the working-age population (ILO, 2017b).

Table 12 Latin America and the Caribbean (24 countries*): key indicators of the national labour market for annual and quarterly periods, by gender (2007 and 2012–2017) (%)

	2007	2012	2013	2014	2015	2016	2016	2017
							Average to 3rd quarter	
Unemployment rate	6.7	6.5	6.3	6.1	6.6	7.9	8.2	8.7
Men	5.4	5.4	5.4	5.3	5.7	6.9	7.2	7.6
Women	8.7	7.9	7.6	7.3	7.9	9.2	9.9	10.4
Labour force participation rate	61.6	62.3	62	61.9	62.0	62.0	61.7	61.8
Men	75.8	75.8	75.5	75.3	75.2	75.0	74.5	74.4
Women	48.7	49.7	49.6	49.4	49.6	49.9	49.8	50.2
Employment-to-population ratio	57.6	58.3	58.2	58.1	57.9	57.2	56.7	56.5
Men	71.5	71.7	71.4	71.3	70.9	69.9	69.2	68.9
Women	44.6	45.8	45.8	45.8	45.8	45.4	44.9	45.0

* Countries included are Argentina, Bolivia, Brazil, Chile, Colombia, Costa Rica, Cuba, Dominican Republic, Ecuador, El Salvador, Guatemala, Honduras, Mexico, Nicaragua, Panama, Paraguay, Peru, Uruguay Venezuela, the Bahamas, Barbados, Belize, Jamaica, Trinidad and Tobago.

Source: ILO (2017b)

employment increased¹⁴ (from 21.6% to 23.6%). This pattern is similar to the Cuban labour market (see next subsection). From 2011 to 2016, the share of employment in service sectors increased, particularly in community, social and personal services (where more than a third of total urban employment is concentrated), and in trade. The positive trend observed in the services sector (where more than half of regional urban employment is concentrated) is also the sector that employs more women. Nevertheless, in relative terms, the ILO observes that this sector has more precarious working conditions, and the increase in employment could be associated with a deterioration in the quality of employment (although the report does not offer more detail on this).

In terms of the gender pay gap in the region¹⁵ (Cuba is not included in these figures), bearing

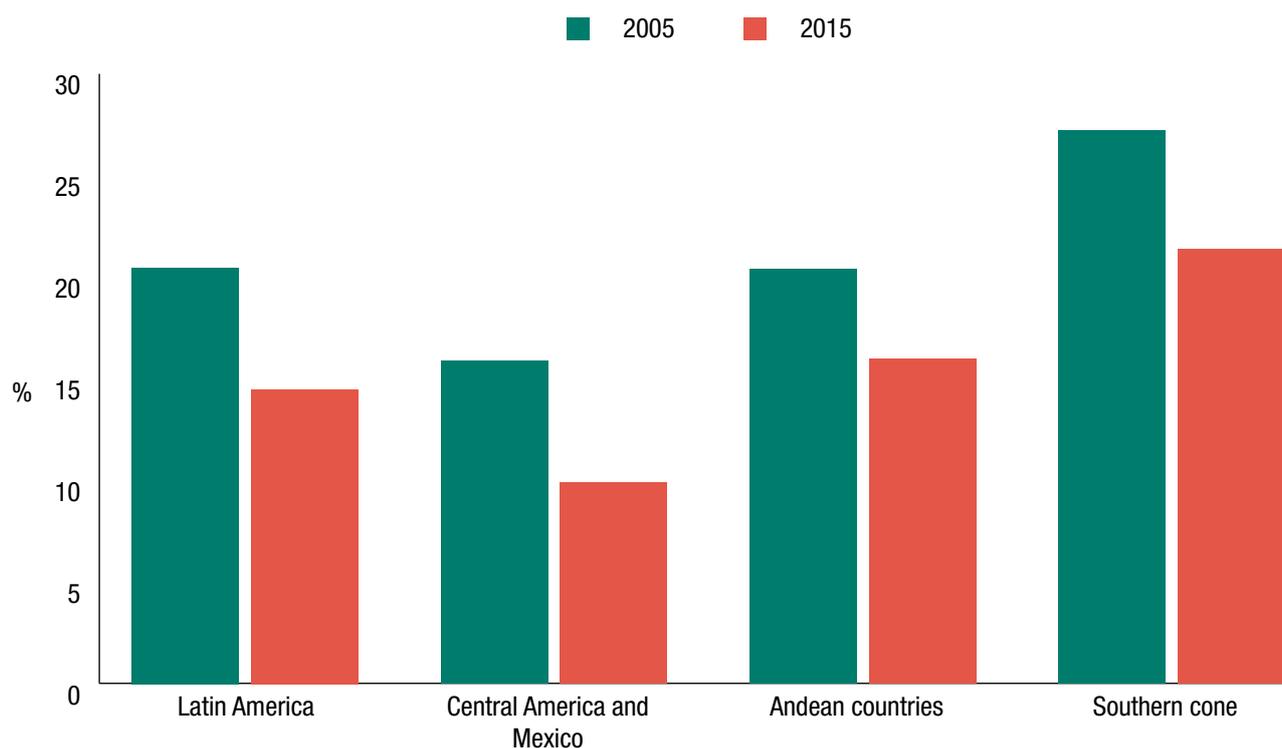
in mind that detailed data on remuneration between women and men for each job is not always available in surveys, the ILO (2017b: 71) defines it as ‘the percentage difference between the average wages of women and men, as a basic approximation for estimating the magnitude of this inequality’. ILO data shows that the monthly wage gap decreased from about 20% to 15% between 2005 and 2015 (see Figure 6). The highest wage gaps persist in the Southern Cone, with intermediate gaps in the Andean countries and the smallest gaps in Central America and Mexico.

The ILO calculated that in the case of the monthly gender pay gap, three-quarters of the improvement was due to wage growth, while changes in the composition of employment (reduced burden of domestic work and increased private-sector employment) were responsible for the other quarter.

14 The ILO uses the term ‘own-account employment’, which also refers to the ‘self-employed’. Own-account workers are working for profit or family income (includes contributing family workers), or not working independently due to a temporary absence during the reference period. This category is considered different from wage or salaried employment or those who worked during the reference period for a wage or salary, or who were employed but without work due to a temporary absence during the reference period, during which time they maintained a formal tie with their job.

15 The data is based on official information of household surveys of the following countries: Argentina, Honduras, Peru, Dominican Republic, El Salvador, Bolivia, Brazil, Chile, Ecuador, Colombia, Guatemala, Mexico, Nicaragua, Uruguay, Costa Rica, Panama and Paraguay.

Figure 6 Latin America: gender monthly wage gap, by sub-region, 2005–2015 (%)



Source: Own elaboration based on ILO data (ILO, 2017b)

4.2.2 Cuba

The availability of public data on the situation of women in Cuba is limited. CEDAW (2013), in its concluding observations on the last report submitted by Cuba in 2011, confirmed a lack of updated statistical data, disaggregated by sex, as well as qualitative data.

The data that does exist shows that the female labour force is highly qualified. Most women have studied the ‘medio superior’ level¹⁶ (881,800), followed by ‘superior’ or higher education level (576,900), ‘secundario’¹⁷ level (198,300) and primary school or less (37,500). According to Álvarez-Tabío Albo (2017), women make up 63.6% of university graduates. They represent 49.8% of students pursuing careers in natural sciences and mathematics, 70% of those graduating in economics, 74.7% of graduates in medicine, and 53.4% of teaching staff in higher education (ONEI, 2017).

Both males and females are considered part of the labour force¹⁸ from 17 years old until 59 years old (women) and 64 years old (men) (ibid.). Table 13 gives a breakdown of the labour force by gender.

The data shows that between 2012 and 2017, employment levels (for men and women) have decreased, as have levels of participation in the labour force overall. ONEI does not provide an explanation as to why the labour force has been declining without showing an increase in unemployment.

Declines could be due to the recent economic reforms, which affected public sector workers in particular. For example, in 2010, the state sector provided 84% of total employment, but this fell to 71% in 2016 (Echevarría et al., 2018). Women have been affected more by this decline, partly due to social norms that have given preference to men (as ‘breadwinners’) to maintain their jobs

¹⁶ Equivalent to high-school or A levels

¹⁷ Equivalent to secondary school

¹⁸ Includes all individuals who fulfil the requirements to be included in the category of employed or unemployed individuals according to ONEI (2017).

Table 13 Labour force, employed and unemployment rates, 2012–2017

Year	Female labour force participation (thousands)	(% of ages 15 and older)	Female employed (thousands)	Female unemployed (thousands)	Female unemployment (% of labour force)
2017	1,694.5	49.4	1,667.0	27.5	1.6
2016	1,747.7	50.9	1,709.6	38.1	2.2
2015	1,810.6	52.6	1,762.9	47.6	2.6
2014	1,908.1	56.3	1,848.9	59.2	3.1
2013	1,906.2	57.3	1,838.6	67.6	3.5
2012	1,870.3	57.4	1,802.6	67.7	3.6
Year	Male labour force participation (thousands)	(% of ages 15 and older)	Male employed (thousands)	Male unemployed (thousands)	Male unemployment (% of labour force)
2017	2,855.5	76.2	2,807.8	47.7	1.7
2016	2,938.5	78.2	2,881.5	57.0	1.9
2015	3,022.1	80.4	2,950.8	71.4	2.4
2014	3,197.4	86.2	3,120.9	76.5	2.5
2013	3,179.8	87.1	3,080.2	99.6	3.1
2012	3,207.6	89.5	3,099.6	108.0	3.4

Sources: ONEI (2013–2018)

(Alfonso, 2016; Nuñez, 2018; Wehrli, 2010), as we explain later. According to Abad (2017), from 2009 to 2015, approximately 82,000 women left their jobs on the government payroll.

Other reasons that could explain reductions in the labour force and unemployment rates could be data inconsistencies or international migration. In 2014, former US President Barack Obama began a process that gradually thawed diplomatic tensions and reduced commercial and travel restrictions between the USA and Cuba and allowed embassies to reopen. This could have given Cubans more opportunities to apply for visas and re-unite with their families in the USA. According to ONEI, net international migration in Cuba was -46,662 in 2012, which means that more people were leaving than entering. This decreased to -26,194 in 2017, although it still shows net emigration.

Women's labour force participation has been declining, from 57.4% in 2012 to 49.4% in 2017. That number includes women who were employed or who were unemployed but had a job in the previous year, or women who

looked for a job in the past year (Echevarría et al., 2018). This means that the other half were women who were of working age but who probably dedicated themselves (full-time or most of the time) to undertake unpaid work, as also suggested by Echevarría et al. (2018). However, some Cuban women might be unwilling to report their paid work in the illegal market,¹⁹ as we discuss in section 4.5.1.

ONEI data also shows that the gender gap in the labour force has improved, declining to 27% in 2017 compared to 32% in 2012. Women's labour force participation and unemployment rates differ by race; as Echevarría et al. (2018) noted, for example, in 2012, white women represented 37% of the labour force compared to black women (46.9%) and mestizas (41.5%). Mestiza women had a higher unemployment rate (4.4%), while white and black women had a lower unemployment rate than the national average for both sexes (2.5%).

Table 14 shows that women are quite fairly represented in the state sector (45%),

¹⁹ These activities are defined by Wehrli (2010: 110) as 'activities which are appreciated by others and help to generate incomes on a micro-level'.

while in all other sectors their participation is substantially lower than men, suggesting that women might face challenges in accessing jobs in the non-state sector. Although self-employed women have not accounted for more than 35% of all self-employed workers since 2013 (Díaz and Echevarría, 2016a), Echevarría (2014: 69) described how the reforms in the self-employed sector have increased women's participation:

In 2011, the female presence in the TPC [self-employed] sector was three times higher than in the previous year – it increased from 29,500 to 95,900 – possibly related to the expansion of activities authorized to promote self-employment, as well as the conversion of some state companies into private businesses, as in the case of hairdressers.

However, obstacles to women's participation remain. Fundora (2015) (cited in Mesa-Lago, 2017), based on a study of 52 self-employed residents of Havana province from 2010–2013, found that out of the 201 activities approved for self-employed workers (TPC), 65% had a male profile (although the author does not specify which types of activities this refers to). Likewise, Mesa-Lago et al. (2016), in a review of the licences granted to self-employed workers in the same period, found that women received an average of 34%, while the number of men being granted licences was increasing. Not only are women underrepresented in this sector, but their activities reproduce their roles in domestic life, typically working in cafeterias, food preparation, manicure, make-up, or as seamstresses. There may be other reasons though; Díaz and Echevarría (2016) reported that women in their study were not interested in becoming self-employed as most of the TPC activities approved by government were usually undertaken by men and were low profit (e.g. truck drivers, messengers, transporters), while other women stated that the approved activities

Table 14 Females employed by sector of economic activity, 2017

Concept	Total (thousands)	Females (thousands)	Females (%)*
State	3,087.5	1,409.1	45
Non-state	1,387.3	257.9	18
Cooperatives	183.6	49.7	27
Agriculture	165.0	46.2	28
Non-agriculture	18.6	3.5	18
Private	1,203.7	208.2	17
Self-employed	583.2	193.7	33
Total	4474.8	1,667.0	37

* Compared to the total, both men and women

Sources: ONEI (2018)

did not correspond with their levels of education. We provide more evidence on the social norms that affect women's situation in section 4.5.

Table 15 shows the incomes earned in the state-owned and mixed enterprises²⁰ as well as the proportion of women employed in each sub-sector.

The data shows that almost 70% of those employed in the public health and social assistance sector are women, followed by the education sector – both with average monthly incomes below 1,000 CUP (USD\$40). Other sectors where women are employed include banking (monthly income equivalent to USD\$41); hotels and restaurants (monthly income equivalent to USD\$21); business services, real estate and rental activities (monthly income equivalent to USD\$29); science, technology and innovation (monthly income equivalent to USD\$39); and culture and sport (monthly income equivalent to USD\$21).

Other studies (Mesa-Lago et al., 2016; Torres, forthcoming) have highlighted that these salaries are insufficient to cover basic needs, excluding education and health. Thus, other sectors beyond the state sector have been contributing most to households' needs – sectors that women have not been able to access as easily as men (Table 16).

20 According to Randolph Brewer (n.d., cited in Mesa, 2017: 3–4), mixed-enterprises can be defined as 'associations with public and private capital for the exploitation of a commercial or industrial activity... Both capitals generally share the management of the company, although usually with a preponderance of public interests.'

Table 15 Females employed in each economic activity and monthly income*, 2017

Concept	Monthly salary (average, pesos)	Total (thousands)	Females (thousands)	Females (%)
Agriculture, livestock, forestry	1,027	782.9	123.5	15.77
Fishing	850	23.8	4.1	17.22
Exploitation of mines and quarries	1,219	21.8	4.4	20.18
Sugar industry	1,236	50.4	10.8	21.42
Manufacturing industries	1,037	361.1	98.4	27.25
Supply of electricity, gas and water	800	83.1	21.0	25.27
Construction	971	262.3	28.6	10.90
Trade, repair of personal and household goods	722	465.4	169.1	36.33
Hotels and restaurants	546	287.9	135.8	47.16
Transportation, storage and communications	828	295.9	54.9	18.55
Banking/financial services	1,048	35.4	22.3	62.99
Business services, real estate and rental activities	730	60.4	27.9	46.19
Public administration, defence, social security	549	297.2	116.8	39.30
Science and technological innovation	987	22.4	9.8	43.75
Education	533	484.3	326.5	67.41
Public health and social assistance	833	483.1	336.2	69.59
Culture and sport	531	167.7	68.4	40
Community, social and personal services	532	289.7	108.5	37.45
Total	767	4474.8	1667.0	37.2

* Average monthly salary in state-owned and mixed enterprises for each type of economic activity in Cuban pesos

Source: ONEI (2018).

For example, Echevarría et al. (2018) observed that since 2012, women have decreased their participation in ‘typically masculine’ sectors such as construction, agriculture and transportation, which pay higher salaries than the sectors in which women are typically employed (such as health and education). Likewise, CDA (2013) argued that Cuban women earn less than half of what men earn (on average), not because of wage discrimination but because men have access to better-paid jobs. We discuss the impact of norms on women’s income in more detail later.

It is important to mention that average monthly income varies according to geographical area (province), as incomes of women in rural areas and southern provinces appear lower than those in urban areas and northern provinces. For example, in 2017, while the average monthly income in Cuba was CUP767 (equivalent to USD\$30), higher monthly incomes can be earned

in Havana (848 CUP, equivalent to USD\$33), Ciego de Avila and Pinar del Rio (818 and 813 CUP respectively, equivalent to USD\$32). In contrast, some areas have lower monthly incomes, including Guantanamo (624 CUP, equivalent to USD\$24), Santiago de Cuba (659 CUP, equivalent to USD\$26) and Granma (677 CUP, equivalent to USD\$27) (ONEI, 2017).

Table 16 shows employment according to occupational category and sex. The Cuban government considers five categories: manual workers (e.g. metal workers, masons, mechanics, carpenters); technicians (e.g. doctors, engineers, economists, sociologists, lawyers, teachers, nurses); administrators (e.g. secretaries, typists, clerks, office assistants); service workers (postmen, barbers, hairdressers, catering staff); and managers (e.g. ministers, presidents, vice-presidents, directors, heads of departments, section heads).

Finally, the Cuban literature has identified other important indicators for women's participation in the labour market. For example, according to Torres (forthcoming), official data shows that 44.1% of women over 15 years old were heads of households, compared to 28.2% in 1981. Only 39.17% considered themselves to have a stable, formal job. Thus, the author identifies that more than 60% of female heads of households were unemployed or not participating in the labour force. The data shows that 65.4% of male heads of household were employed. According to Torres, although no more data is available, it is expected that this gap has remained steady or even increased.

Regarding time spent doing unpaid domestic and care work, the National Survey of Gender Equality (ENIG) found that working women spend on average 32.23 hours a week doing unpaid work, including care work, while working men spend 21.61 hours (*Centro de Estudios de la Mujer*, CEM and *Centro de Estudios de Población y Desarrollo*, CEPDE, 2017, in Castañeda, 2018). The same source showed that women spent 8 hours a week on average caring for dependants, while men spent 3 hours a week.

4.3 Adolescents and youth participation in the labour force: Latin America and Cuba

This section describes the current situation of adolescents and youths in the labour force, first in Latin America, then in Cuba. The Cuban data is limited but is complemented by other quantitative and qualitative studies on the topic.

4.3.1 Latin America

The recent global economic crisis has affected youths more than adults in Latin America, according to ILO data (2017b). For the first time in more than a decade, the youth unemployment rate (those aged 15–24 years) reached nearly 20% (see Table 17) – leaving one in every five young people unemployed. The data is skewed by Brazil though; if that country is excluded, youth unemployment actually decreased from 13.7% to 12.7% (data excludes Cuba).

Moreover, the ILO (2017b) identified that the youth unemployment rate has remained

Table 16 Employed population according to occupational category and sex, 2017

Occupational Category	Total (thousands)	Female (thousands)	Female participation (%)
Manual workers	1,954.1	304.6	15
Technicians	1,110.7	702.3	63
Administrators	318.6	208.8	65
Service workers	811.1	352.0	43
Managers	280.3	99.3	35
Total	4,474.8	1,667.0	37

Sources: Oficina Nacional de Estadística e Información. (2018) Anuario Estadístico de Cuba 2017. Edición 2018. Empleo y Salarios. Habana: Oficina Nacional de Estadística e Información.

around three times the rate for adults and is even higher in most countries. Although the data was not disaggregated by gender, the same report identifies that 'young women are at more risk [of unemployment] because their employment-to-population ratio are lower, their unemployment rates are higher, and they are disproportionately affected by the prevalence of precarious jobs' (ILO, 2017b: 40).

4.3.2 Cuba

As noted, young Cubans are considered part of the labour force from age 17, and ONEI data indicates that this can also include adolescents between 15 and 16 years old who have been 'exceptionally' authorised to work by the authorities. Those who are authorised to work below the age of 17 need to prove one of the following requirements: they have completed the required compulsory education; have provided a medical certificate which shows they cannot continue studying; or they have been disconnected from the national education system due to low academic performance or due to guidance from the Ministry of the Interior (Guillen, 2007).

In 2017, out of 4,474,800 workers, 883,000 were youths aged 15–29, representing almost 20% of workers according to the ONEI (2017). That same source shows a gradual annual decline of youth participation in the economy.

Table 17 Latin America (16 countries*): key indicators of the labour market by age group, January to September 2016 and 2017 (%)

Region	Labour force participation rate		Employment-to-population ratio		Unemployment rate	
	2016	2017	2016	2017	2016	2017
Latin America and the Caribbean	61.7	61.8	56.7	56.5	8.2	8.7
15–24	47.7	47.8	38.9	38.7	18.9	19.5
25 and over	66.9	67.0	63.0	62.7	6.0	6.5
Latin America and the Caribbean (excluding Brazil)	61.9	61.8	58.1	58.3	6.1	5.8
15–24	46.5	46.2	40.2	40.3	13.7	12.7
25 and over	68.5	68.5	65.3	65.4	4.6	4.4

* Countries included are Argentina, Brazil, Mexico, Ecuador, Costa Rica, Jamaica, Paraguay, Belize, Chile, Guatemala, Peru, Honduras, Panama, Colombia, Paraguay and Uruguay
Source: ILO, 2017b.

For example, in 2016, youths accounted for 940,700 of workers, down from 1,030,500 in 2015. Likewise, data shows that more males than females aged 15–29 participate in the labour force (Table 18). For example, in 2017 there were 300 boys working between the ages of 15 and 16, but no girls; 48,000 boys compared to 15,000 girls working between the ages of 17 and 19; and 505,200 young men compared to 314,500 young women working between the ages of 20 and 29 years. This could be because women are aware that they have fewer employment opportunities than men, are more motivated to continue studying to improve their chances of getting a good job, or because they are obliged to do or are more dedicated to doing household chores, as suggested by Ortega (2016) and Castañeda (2018).

Table 18 also shows interesting changes in the participation of adolescent girls and young women in the labour force by category. For example, in 2015, the number of authorised working adolescent girls aged 15–16 years was higher than boys (900 and 400 respectively) for the first time in five years due to their participation as manual workers. The reasons for this are not clear from the available literature.

Likewise, from 2015, women aged 17–19 years outnumbered males of the same age working as technicians (those with a professional qualification such as lawyers, teachers, nurses,

doctors). Another important sector for young women of this age is the service sector, probably because they prefer to do such work while completing their studies. However, from 2016 to 2017, the number of young women working as technicians decreased, and fewer young women than men were working as administrators, service workers and managers.

In the 20–29 age group, women have outnumbered men working as technicians and administrators in the past five years, while males outnumber women working as manual workers, services workers and managers. Overall, Table 18 shows that young women prevail in sectors that require higher levels of education.

Although data on what Cuban youths study or the pathways they take after achieving certain levels of education are not available through ONEI, a few studies provide some insights (Dominguez, 2005; Oxfam, 2010; Dominguez and Castilla, 2011; Ortega, 2016; Echevarría et al., 2018).

A study by Oxfam (2010: 38), although it did not specify the ages/age range of the youth population, outlined that participation in the formal labour force could be characterised in three ways:

- ... (1) very unstable participation, often linked to school drop-out levels and low job retention rates; (2) late

Table 18 Workers classified by age, working category and sex, 2013–2017 (thousands)

Ages	Total	Manual	Technicians	Administrators	Service	Managers
2017						
Females						
15–16	–	–	–	–	–	–
17–19	15.0	2.12	4.1	2.9	5.7	0.2
20–29	314.5	34.8	155.1	40.7	71.4	12.5
Males						
15–16	0.3	0.3	–	–	–	–
17–19	48.0	32.3	2.5	6.3	6.0	0.9
20–29	505.2	293.2	88.4	21.7	86.0	15.9
2016						
Females						
15–16	–	–	–	–	–	–
17–19	18.4	3.5	5.9	2.8	5.9	0.3
20–29	340.6	38.5	172.3	44.7	72.4	12.7
Males						
15–16	0.5	0.5	–	–	–	–
17–19	56.6	35.3	3.6	7.7	8.9	1.1
20–29	524.6	293.2	96.8	23.6	93.4	17.6
2015						
Females						
15–16	0.9	0.9	–	–	–	–
17–19	20.8	3.5	6.7	4.0	5.1	1.5
20–29	372.0	40.3	193.3	53.1	71.9	13.4
Males						
15–16	0.4	0.4	–	–	–	–
17–19	62.6	36.5	5.2	8.4	10.8	1.7
20–29	573.8	321.3	105.3	29.7	97.8	19.7
2014						
Females						
15–16	0.1	0.1	–	–	–	–
17–19	26.9	4.4	10.5	4.7	6.6	0.7
20–29	381.5	36.5	209.9	48.5	73.6	13.0
Males						
15–16	2.7	2.6	–	–	0.1	–
17–19	67.0	32.0	14.6	8.3	9.7	2.4
20–29	579.6	301.3	131.9	22.8	102.5	21.1

Table 18 (cont.) Workers classified by age, working category and sex, 2013–2017 (thousands)

Ages	Total	Manual	Technicians	Administrators	Service	Managers
2013						
Females						
15–16	0.2	0.1	–	–	0.1	–
17–19	27.2	4.1	11.7	4.2	6.7	0.5
20–29	380.9	36.4	220	46.5	65.8	12.2
Males						
15–16	2	1.8	–	–	0.2	–
17–19	53.1	25.8	14.7	4.7	6.6	1.3
20–29	580.4	296.4	136.4	23.4	104.3	19.9

Sources: ONEI (2013–2018)

participation, after long periods of inactivity; and (3) participation in more informal and less productive sectors of the economy.

The study noted that low participation in the formal sector went alongside increasing participation in the informal sector and underemployment in family and private businesses, where incomes were higher than in the state sector. There were other challenges regarding the participation of young women. Although the previous data showed that women in the 17–29 age group outnumbered men working as professionals, Oxfam suggests a different perspective. Based on a survey conducted by the FMC (2007), in all parts of the country there was a high rate of young women who did not study or work, reaching 23,529 women or 46% of the total youth female labour force. The study suggested that scholarship programmes generated little interest in studying (although it did not give reasons why) and noted a lack of positive influence from family members. It also noted cases of youths who abandoned school or jobs. Although further information on this was not provided, it reflects a very weak labour market with few incentives to offer to Cuban youths.

Dominguez and Castilla (2011), based on a sample of youths aged 14–30 years in Havana (43% men and 57% women) who were either studying or combining work and

study, found that although 59% recognised they had the opportunity to access free education (including university), only 11% considered they were offered access and opportunities to work, although again the authors offered no explanations why. The authors also mentioned that a major problem facing youths was lower salaries (owing to recent entry into the market) and high prices of goods and services.

The same study also describes the higher education system in Cuba and the pathways that university students follow once they have completed their degree. Their sample also included higher education students aged 18–27 studying natural sciences, social sciences and technical sciences at the University of Havana and the Higher Institute of Science and Technology (Instec). Most youths in the sample were women (106 women, 88 men); however, the study suggests that more men were studying at Instec because of its technical specialties, although the authors did not offer more detail on women's choices of degree. Most students were white (67%), followed by mestizos (24%) and black (16%); most of their parents (around 60%) had a higher education degree.

Although the study did not describe graduates' routes into employment, the authors examined the labour allocation system in Cuba, under which the state has to guarantee a work placement to each university graduate. Different institutions participate in this placement including universities, the Ministry of Higher

Education, the Ministry of Labour and Social Security and the Ministry of Economy and Planning. Certain groups (including youths and women) are prioritised when allocating placements, according to the Labour Code (Guillen, 2007).

Dominguez and Castilla (2011) also observed that students themselves and their representative body (Federation of University Students, FEU) have an important role in this allocation system. Results show that 42.3% of students considered that they participated directly in the placement process and 51% participated in it through the FEU. Only 7.2% considered that the student was involved in placement decisions and 9.3% that the FEU could decide on allocations. Participants in the study described how they perceived the allocation of their future jobs:

There are work placements that are made from 3rd or 4th year because there are centres that are interested in some students and they are working [with them] during their studies and their professional practices ... And if they have met all the other requirements they go to those centres. There are others who have not worked, so a meeting is held with the students, the FEU, the UJC [Unión de Jóvenes Comunistas de Cuba²¹], the [higher education] institution so their personal development is taken into account and not only their academic level. (Male student, sixth grade in Agronomy, leader of FEU)

From the little I know I can tell you that [the placement process] is too selective and that they take little account of what you really want. The students have little participation; in the end, other people decide, the vice-dean, the dean, according to the needs of the country, if there is a need to send you

here or there, there you go, like it or not. (Female biology student)

The above quotes show different perceptions from male and female students, however the study showed that most of students felt 'satisfied' or 'in part satisfied' with their involvement in the life of their university, which they considered important for preparing them for their future careers. However, another study (Castilla et al., 2009, cited in Dominguez, 2011) with university students in six provinces (including 373 higher education students) found that although women's participation in political activities was higher than men's (79% and 70% respectively), their participation in extracurricular scientific activities was lower. They were also less likely to hold significant leadership positions, although the author does not offer a detailed explanation why.

Looking at youths who are self-employed, Echevarría et al. (2018) observed that in 2017, of the 567,982 people that were self-employed (representing 12% of the total population employed), 32% were young (although the authors do not specify ages) and 33% were women. There is no more detail but Cuban press sources give some insights. The newspaper *Juventud Rebelde* (2017) revealed that its study, *Retrato del Adolescente Cubano* (Portrait of the Cuban adolescent), found that the expansion of self-employment has resulted in youths working illegally and generally for short periods of time. Many adolescents (including those aged below 17, the official working age) are involved in informal contracts (Mesa Redonda, 2017). The same source found that self-employed Cubans also hired male adolescents in the horse-drawn wagon industry, and that of 539,952 registered as self-employed, around 3,000 were under 20 years old. The *Retrato del Adolescente Cubano* study also found that only 10% of adolescents (aged 10–19 years) in their sample were working; however, it also shows a relatively large proportion of adolescents joining the labour force before the legal age of 17. The study identified that 15–16-year-olds who were

21 The *Union de Jovenes Comunistas* (Communist Youth Union) is a youth political organisation, with selective membership for young people aged between 14 and 30 (Dominguez and Castilla, 2011).

working were largely in the service sector or doing manual work.

Other press articles focus on adolescent girls and young women who work. As Table 18 showed, many work in the service sector, and are recruited because of their age and gender. As an article from CubaDebate²² presented by Balán (2018) highlighted, employers often advertise jobs with requirements such as being young, tall, good-looking and white. Women with those physical characteristics have more chance of finding work at bars, restaurants, coffee shops, hotels and places frequented by tourists. Figure 7 illustrates the importance attached to age and appearance (rather than experience) when applying for a job in *paladares*.²³ Being single and not having children is also an advantage in the sector, as well as being under 35 years, according to the same source.

Ortega (2016) analysed the occupational situation of Cuban youths based on data from the ONEI and National Survey of Youth published by the Centre for Youth Studies (CESJ) and ONEI in 2011. While this survey (as well as other subsequent surveys) is not in the public domain, Ortega's analysis shows the situation of youths in Cuba according to the different age groups (Table 19).

The same study found that among youths aged 15–29 years who were not in education, employment or training (NEET) (17.3% of all youths), 22% were looking for a job for the first time or because they had lost their job (mainly men) while 41% were dedicated to household chores (mainly women), 27% were not looking for a job at the time of the survey, and 10% did not specify their labour intentions. The same study also found that working youths were concentrated in four sectors: agriculture (20%); education (16%); health and social assistance (11%); and public administration, defence and social security (11%). Women prevail in the

Figure 7 Job advertisement of a famous *paladar* in Havana

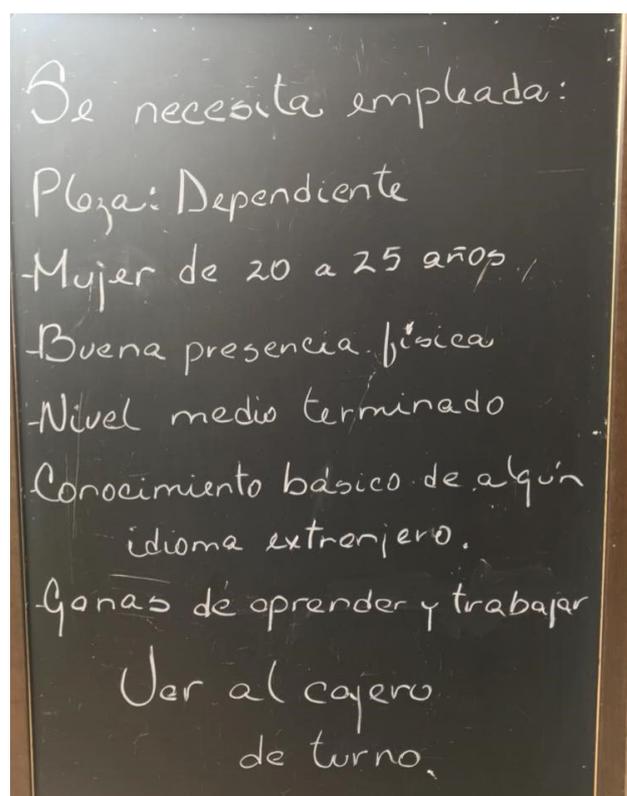


Table 19 Occupations of youths aged 15–29 years in 2012 (%)

Youths 15–29	Total %
Studying	32.5
Working	42.5
Studying and working	7.7
Not in education, employment or training (NEET)	17.3
Adolescents 15–19	
Studying	77.4
Youths 20–24	
Working	70.0
Studying	19.0
Youths 25–29	
Working	67.1

Source: Ortega (2016).

22 CubaDebate is a newspaper that describes itself as an alternative information media, which raises awareness about defamatory campaigns against Cuba.

23 The English translation of the advertisement reads: 'In need of a [female] employee; type of work: assistant; woman between 20–25 years; good physical appearance; secondary school completed; basic knowledge of any foreign language; willing to learn and to work; speak to the cashier.'

health and educational sectors, while men prevail in the agricultural sector.

Ortega's study (2016) also highlighted that more than half (53%) of youths working in the state sector aspired to work in other sectors such as tourism, mixed enterprises, private companies or self-employment. The author did not provide explanations for such aspirations, but they are probably related to higher incomes than available in state sector jobs.

4.4 Social norms and women's economic empowerment in Cuba

Harmful social norms are widely identified as detrimental to women's economic empowerment, affecting both their access to decent work and their experiences within workplaces (Marcus, 2018). Discriminatory norms are one reason why women are typically concentrated in jobs and sectors that are less well-remunerated, and men's predominance in leadership positions with better salaries and prospects. As Marcus also stresses, gendered norms – along with stereotypes about the different capabilities of women and men – negatively affect resources, opportunities to develop human capital, livelihood opportunities and time use. In the Cuban context, Díaz (2010) described how Cuban women face two main problems in increasing their participation: the heavy burden of domestic and family responsibilities, and limited access to senior positions.

There are some important drivers of norm change in the Cuban context that could increase women's economic empowerment. For example, as discussed in section 4.2.2, Cuban girls and young women have high levels of education. Economic reforms, if successful, could increase their economic opportunities through creating decent jobs. Greater education and job opportunities could enhance girls' and young women's bargaining power in their household and workplace. As Marcus and Harper (2014) and Kabeer (2018) have observed, global evidence suggests that increased levels of education and the growth in economic opportunities for young women are important drivers of norm change.

However, other literature has identified important constraints on women's economic

empowerment that are also present in the Cuban context. Kabeer (2018) identifies two groups of 'structures of constraint'. The first includes norms, beliefs and values that define ideals of masculinity and femininity within a society. These norms have led to a gendered division of labour whereby women are considered as responsible for unpaid reproductive work (e.g. caring for relatives and doing household work), while men are expected to be the main earners (breadwinners) of the household. Kabeer also suggests that these norms are detrimental for women's economic empowerment as women are expected to dedicate more time to unpaid work than to remunerated livelihood activities. These norms are very evident in Cuban society (Romero Almodóvar, 2011; Álvarez et al., 2017). Other norms that could limit women's economic empowerment include restrictions on women's mobility in public spaces (although this does not affect Cuban women, as we will show) and norms that differentiate the type of work considered appropriate for men and women. As we go on to describe, occupational segregation is very present in Cuban society (Díaz and Echevarría, 2016a).

The second set of constraints identified by Kabeer (2018) concern norms prevalent in formal institutions of society, sometimes embedded in official regulations, that limit women's livelihood capabilities (e.g. laws restricting women's ownership of land and other forms of property). Such norms can also be evident in the actions of those employed in such institutions, be they government officials, employers or trade unions.

In the following sections we aim to disentangle whether social norms in Cuba have enabled or constrained the participation of adolescent girls and young women in the labour market, and the implications of this.

For our analysis, we use the framework developed by Marcus (2018), which distinguishes norms specifically related to gender and economic activity and more general norms about appropriate behaviour of men, women, boys and girls. This framework is useful as it allows us to explore women's roles and the norms that influence their workplaces and households, focusing on how they affect their economic empowerment. The norms identified

in the Cuban literature include: (1) norms about whether women should undertake paid work; (2) norms about whether women should occupy leadership positions; (3) norms about what constitutes suitable work for men and women (including women in non-traditional occupations); (4) norms about respectability, decorum and mobility; (5) norms about care/ domestic work and time use; (6) norms around ownership and control of assets; and (7) norms around sexual harassment and violence in the workplace. We now look at each of these in more detail.

4.4.1 Norms about whether women should undertake paid work

According to Wehrli (2010: 208), Cuban society has supported the idea that both men and women should have an active role in the labour market, since women overall have achieved more years of education than men and have also worked full-time, influenced by the ideals of the revolution:

A revolutionary and emancipated woman had therefore to work full time, raise children – who were taken care of in child-care centres during the day – and deal with all the domestic housework.

Thus, the image of the ideal Cuban woman is one who supports the family through paid work combined with household chores and caring for children. However, according to the literature, whether women prefer to work in state or non-state jobs, in illegal activities, in a combination of the two, or to dedicate themselves to unpaid work seems to depend on the economic situation of their household, available job opportunities, gendered norms, and their geographical location.

Some literature suggests that women prefer not to do paid work due to agreed divisions of labour and responsibility within the home but also because of norms about women's responsibilities for the household and men's own expectations of their roles. For example, women in Romero Almodóvar's (2011) study, all housewives aged 17–69 and living in Havana, reported having learned to wash, clean, iron, sew, cook and care for children from an early age, as they were expected to run their own households

once they left their parents' home. Indeed, half of the women in the study shared that they became housewives to support other members of the household, so that *they* could study or work. These women were mainly caring for their children, grandchildren, the elderly or relatives who were ill. They felt they could not refuse to undertake these tasks because that would call into question their status as 'good mothers, wives or daughters'. Similarly, rural women in other studies (Pino et al., 2017; Morales et al., 2018) faced similar or even stricter norms related to their role as carers and in charge of domestic chores that hindered their ability to take up paid work. However, since gender is a relational issue, men likewise are resistant to performing 'female' roles and see themselves as economic providers (Formental et al., 2015).

Other literature examines the norms that affect women undertaking paid work. For example, in Wehrli's (2010) study, women in Havana had abandoned their less well-remunerated state jobs to take up other activities such as providing manicures and hairdressing, selling coffee, preparing meals, or giving private classes. According to Wehrli, their earnings were five to 15 times higher than the average government salary.

In contrast, Echevarría (2014) identified that many Cuban women tend to remain in state employment due to the guarantees offered to them (these were not specified in the study but probably related to job security, labour protection and social benefits not available in the non-state sector), despite receiving low salaries that were insufficient to cover basic needs. Torres (forthcoming) identifies that the Labour Code in force does not provide equal rights and obligations for workers in the state and non-state sectors. State sector workers have extensive labour rights and social benefits, while non-state workers have only minimum standards. This is revealed in the types of contracts (definite time / indefinite), the number of days of paid holidays, benefits for sick pay (less than six months), or the rules for termination of the employment contract.

Curiously, in Cuban society, it seems openly accepted for women (especially adolescents and young women) to take up work in the sex industry. In contrast, SIGI (2014) identified in its review that the Cuban government

considers sex work as a form of exploitation and violence against women, though it is not illegal. *Jineterismo* has become an important part of the ‘expanding’ informal economy for youths, especially from the early 1990s, with the growth of international tourism after the collapse of the Soviet Union and the beginning of the Special Period. Most hotels allow tourists to take their ‘dates’ to their rooms or even facilitate sexual liaisons between tourists and locals (Cabezas, 2004). Although Fidel Castro was initially sympathetic to *jineteras* and said they did it for pleasure and for money, he called for the Special Troops to eradicate sex work in 1992. However, more young women and men continued working as *jineteros* and *jineteras* (some migrating to tourist areas) due to the lack of work and dependence on foreign exchange (Cabezas, 2004; Pope, 2005). Cabezas (2014: 992–993) identified that young participants in her study were motivated to work in the sex industry not only because they could have access to higher incomes but also to other opportunities:

Liaisons with tourists provide recourse to get by and to get ahead: not just to supplement low wages but also to procure opportunities for recreation, consumption, travel, migration, and marriage. Because of these opportunities, any liaison, sexual or not, is perceived as a potential boon ... Therefore, sex tourism is more than an illicit activity; it involves socially acceptable behaviours and values.

Part of the reason why the profession is socially acceptable is because it creates profits not only for the young *jineteras* but also for others, including shopkeepers and traders who benefit from tourism. Kummels (2005) included in her sample *jintereas* who migrated to Havana as adolescent girls. Her study suggests that the nature of their work was not questioned

by others because the wider society benefited economically from the relationships that *jineteras* built with tourists:

House-owners, crafts-men, artists and tradespeople in general, rely on them [*jineteras*] and pay them a commission in exchange for the customers they attract.

Jineteros and *jineteras* are often seen in the streets selling everything from cigars to alcohol and they also act as tourist guides, escorts, brokers of sexual services and romantic companions (Cabezas, 2004). Pope (2005) observed that girls and young women in her study (*jineteras* aged 15–27 who had at least high school education) rented a room from Cuban landlords at dollar-only rental rooms, which meant they could bring customers and lodge without a government permit.²⁴ The study of Kummels (2005) also found that partners or husbands of *jineteras* encouraged them to undertake this paid work as their *chulos*²⁵ (pimps) because they also benefited from the profits, as one *jinetera* noted:

Back home at last, the husband of a *jinetera* waits her. If you can indeed call him a ‘husband’! Sometimes I go out with the tourist and my *chulo* and tell the tourist that he is my cousin or brother. The *chulo* sells him cigars, takes him along to a *paladar* (private restaurant) and earns his money in this way. During the time that you are f... the tourist, the *chulo* enjoys himself with your money, even inviting a friend! (Kummels, 2005: 22).

Interestingly, the role of the *chulo* is not gender-specific; Pope (2005) observed that *chulos* of her participants could be mothers, fathers, boyfriends, spouses, neighbours or landlords.

Although the previous authors show examples of open-mindedness about the types of paid work

24 According to Pope (2005), Cubans must acquire a government permit to move from one part of the country to another, and once there, must stay with family members.

25 According to Pope (2005), ‘*chulo*’ is an accurate term for ‘pimp’. *Chulo* implies more of a business negotiation discussing prices or services to be exchanged for sex.

women undertake, especially when women's earnings benefit the household, the literature also suggests that paid work is acceptable as long as it does not threaten the position of males in the household or in the workplace. For example, Nuñez (2005; 2010) explored the gender attitudes of 30 professionals living in Havana (15 women, 15 men). Women had achieved higher levels of education compared to men and had participated in more scientific conferences. Male respondents considered women as their colleagues and they also confirmed sharing work responsibilities or distributing vacation periods. However, Nuñez (2010) observed that men also felt threatened by women because they felt women had to demonstrate that they were better trained, and they had to impose their leadership to 'assure their official power'. Two-thirds of the women in the study admitted that men felt threatened by them at their workplace for the following reasons:

... (1) professional women have higher educational levels than men; (2) professional women who are not managers spend more time upgrading their skills and acquiring knowledge, which could lead to conflicts between them and the managing men who dedicate more time to bureaucratic tasks; (3) accustomed to fitting in tasks at their workplace and at home, professional women are better trained than men to organize their work schedules; (4) women could snatch managerial jobs away from men; (5) annual evaluations at the workplace show that women perform more activities than men; (6) working women depend less on men; and (7) men depend on women's contribution to the family income. (Nuñez, 2010: 86)

These norms have deterred women from accessing certain types of jobs, especially those that involve leadership positions, as the next subsection shows.

4.4.2 Norms about whether women should occupy leadership positions

One example of Cuban women in leadership positions is their presence in Parliament and other

government agencies. Cuba stands second among 187 countries in the proportion of seats held by women in national parliaments, occupying 322 seats out of 605 (55.3%) in the National Assembly (Inter-Parliamentary Union, 2018). Likewise, of the National Assembly's 10 Permanent Commissions of Work, four are led by women (Anton, 2018). Furthermore, the National Survey of Gender Equality (2016, in Álvarez et al., 2017) found that 73% of men and 75% of women considered that both men and women were equally able to do a managerial role.

However, other studies show that even if women are more qualified than men, more men than women are employed in leadership positions (Nuñez, 2005; Dominguez, 2011; Morales et al., 2018) and across different sectors such as enterprises (Echevarría, 2011; Díaz and Echevarría, 2016b), agriculture (Romero, 2011; Alfonso, 2016), the health sector (Calixto and Castañeda, 2015), and as *cuentapropistas*. For example, in a press article, Acosta (2011) stated that men hold the majority of executive positions in joint ventures with foreign capital and the tourism industry, and many of the jobs that offer hard currency bonuses. Women were better qualified, but tended to hold intermediate management positions. This is similar in political life as the National Assembly only meets twice a year and it is difficult for women to exercise their level of influence as laws are drafted by influential legislators and a 'no' vote is nearly unheard of (Lopez, 2015).

Furthermore, other evidence suggests that women are not willing to occupy managerial positions. For example, Nuñez (2005; 2010) found that only 3 of the 15 professional women in the sample had worked as managers and only 5 would like to hold such a position; of the 15 men in the sample, 8 had held managerial positions and 11 would like to do so. Reasons given by the women included: 'it would rob me of too much time and pays very little'; 'it would overload the second shift [care work and household chores]'; 'it would take time from looking after my child'; 'being a manager would not add anything to my personal aspirations'. Nuñez (2010) noted that for these women, it was not lack of confidence but rather their perception that occupying managerial positions

would be an obstacle to their primary goals such as continuing to upgrade their professional knowledge. However, Nuñez (2010: 83–84) observed that part of this decision was related to gendered norms and the institutional culture that discouraged women from undertaking managerial positions:

Cuban managerial culture has been designed by men and for men, and this has to be changed to convince women to become managers ... Women's access to managerial positions cannot be postponed until the patriarchal cultural patterns in Cuba are completely transformed.

The difficulties that women face in taking up leadership positions have been documented by the literature on women in business. Echevarría (2011) selected eight companies in Havana in the domestic wholesale, retail and foreign trade sectors on the basis of their having an equal representation of men and women in top leadership positions. Based on 127 surveys and interviews with equal numbers of men and women, the author found that selection and promotion processes prioritised persons with time availability as well as 'rational' and 'objective' decision-making. These expectations restricted women's ability to access managerial jobs as they were perceived as having to fulfil other gender roles, as the author described:

Women frequently found themselves trapped in a double bind, not meeting social expectations in their role as mother, wife, or daughter while trying to demonstrate that they can occupy the public space (management) 'as well as men', with consequences for both their professional and their personal lives ... In the case of men, those values did not operate in the same way, given that it was socially understood, accepted, and expected that men devoted fewer hours to personal and family life because of their work. The public space, in effect, belonged to them. (Echevarría, 2011: 102)

As managerial posts required individuals to always be 'available and to work long hours as a symbol of efficient management', women in the same study in managerial jobs either did not have children or their children were grown-up. Furthermore, women had to adopt manly traits that were considered as acceptable and appropriate in leadership, as the author observed:

Those women who 'despite' their sex did move up in their organizations, breaking the glass ceiling, through mechanisms of sexist (re)socialization, then began to bring their behaviour in line with what was expected of a manager: that is, a masculine-type behaviour that rejected anything different as a deviation from the norm. This expectation viewed as normal traits associated with men (i.e., rationality, authority, competitiveness), which women had to adopt in taking on what was essentially a masculinized profession. (ibid.: 102–103)

Calixto and Castañeda (2015) in their study of the health sector observed that promotions tended to favour behaviour patterns associated with male traits, such as long working hours, being always available, having a 'hard hand', and taking risks. For this reason, women reported that they could stay for years within an organization without being promoted or being offered an opportunity, even when they had successful technical and professional performance. However, the authors also remarked that women themselves believed that they were not capable to occupying certain management positions, which meant they did not aspire to do so.

Romero-Bartolo's (2011) study of the agriculture sector compared two cooperatives in the province of Pinar del Rio and focused on six young women under 30 years old (although the study does not specify their age) who attained high levels of education (12th grade). The author identified that they did not perceive themselves as having the capacity to take up positions of greater responsibility. Their (male) managers reported a general lack of trust in women's

leadership capacities as there was no tradition of offering young women work in management roles in agricultural cooperatives.

Thus, the literature suggests that perceptions about women's lack of leadership skills, women having to develop masculine traits and behaviours to occupy leadership roles, or that these positions would clash with their domestic chores (see next subsection) seem to influence expectations about whether women should occupy leadership positions.

4.4.3 Norms about suitable work for men and women

This section examines the literature that describes the types of work that are perceived to be suitable for men and women as well as non-traditional jobs for women.

Álvarez et al. (2017), using preliminary data from the ENIG (2016), surveyed almost 20,000 Cuban men and women in urban and rural areas to examine perceptions about suitable jobs for men and women. Respondents identified the most suitable types of work for women as those related to their traditional role in the public sphere (e.g. secretarial positions, caring for others, cleaning assistant, nurse, or preschool teacher). Types of work considered not suitable for women included: plumbing, carpentry, masonry, mechanics and electrician (mentioned by 39% of respondents), alongside fisherman/sailor, bus driver, and piloting aircrafts (mentioned by 50%). Interestingly, there were no notable differences between the responses of men and women.

The clustering of women and men into certain occupations is also illustrated by the literature on the self-employed sector. Díaz and Echevarría (2016a) showed that most women requested licences to work as: manicurists (includes eyebrow shaving); weavers and embroiderers; caregivers of children, elderly or sick individuals; hairdressers and make-up artists (including face and make-up cleaning); rental of costumes and other items related to clothing;

launderers or ironers; domestic staff; and dentists ('stomatologists'). This indicates that women have selected jobs that might be considered more appropriate to their gender, domestic roles and perceived abilities. Female self-employed participants in the study by Ferragut and Piza (2016), conducted in Havana, were also working as taxi drivers (although most drivers were men), owners of restaurants (again, most owners were men), with some running a room rental business,²⁶ although the authors do not specify the ages of those in their sample. Regarding room rentals, Pañellas et al., (2015, cited in Mesa-Lago, 2017) found that while women rented rooms mostly for Cuban pesos (CUP), men renting rooms charged in the more advantageous convertible pesos (CUC), although the reasons behind this were not mentioned. The findings of their study also showed that women undertook activities related to their roles in domestic life, and that age, gender, education, and location were important factors in determining quality of occupation, access to capital, and earnings of those who were self-employed.

Morales et al. (2018) found that most women who registered themselves as self-employed in Pinar del Rio requested licences to work in the following professions or sectors: restaurants; artisans; cafeterias; hairdressing and beauty parlours; sellers of household and religious items; shoe sellers; sellers of birthday items; and sellers of plants and flowers. That study further emphasises that most of the activities chosen by self-employed women reproduce their roles in domestic lives. Furthermore, Echevarría et al. (2018) observed that women who returned the most licences in the previous years of their study were domestic workers and manicurists, suggesting that they have probably found the costs of the licence and payment of taxes higher than the profits they make. The employment of domestic workers (as well as employment of women to care for children and the elderly) is becoming more privatised, with the rise of a wealthier elite and growing socioeconomic

26 Mesa-Lago et al. (2016) explain that with the housing reform (Decree Law 288, 2011), it became accepted that dwelling owners acting as self-employed workers could lease the dwelling or rooms to tourists – an activity that is greatly expanding. The reform legalised swaps and since 2015, this activity has come under the control of the Ministry of Justice. Both parties must execute the transaction before a public notary (Decree Law 322, 2014).

inequality in Cuba (Romero Almodóvar, 2015; Nolen, 2017).

One qualitative study looked at self-employed women engaged in infant care (Romero Almodóvar, 2015), accounting for 37% of the total female labour force. The author also observed that in November 2011, of 1,460 licences granted for childcare, all but 15 of them were requested by women. Based on 18 interviews in the town of Cojímar (in Havana) in 2013, Romero Almodóvar (2015) found that all those self-employed in infant care were women, and half of them had previously worked as informal domestic employees. All participants reported that their attraction to this work was higher income. However, the author also observed that norms on what constitutes suitable work for women were also part of their motivation for choosing that job:

This decision also appears associated with the skills that they have developed throughout their lives, different than that received by men ... They are being educated to be good daughters, wives and mothers ... In fact, these caregivers are required to follow a pattern established by the labour office and inspectors very similar to the one followed in day care centres. (Romero Almodóvar, 2015: 264–265)

The pattern that the author refers to involves playing games with the children, feeding them, and complying with their sleeping schedule, among other feminised duties. Although participants were earning three times the mean average salary in the state sector, they complained of exhausting work (10–11 hours a day, including Saturdays) and great responsibility, with a monthly salary of 200 CUP per infant, with a maximum of five infants, equal to \$40. Although the author does not specify what type of work the women study participants were doing, she describes them as the ‘main person responsible’ for caring but with stable jobs that allowed them to employ other women in a more disadvantaged position in the labour market due to their migrant status (domestic or international), their level of education, or family issues, among other disadvantages.

Regarding the types of jobs most suitable for men, the preliminary data of the ENIG (2016, cited in Álvarez et al., 2017) found that 99% of respondents considered as most suitable those professions and trades traditionally perceived to be masculine: carpentry, high-level leader, plumbing, mechanics, police/soldier, fisherman, sailor, fireman, bus driver, airplane pilot, electrician, bricklayer and agricultural worker. In contrast, jobs identified as not suitable for men included: cleaning assistant (47.1%), secretary (31.1%), caring for others (26.3%), pre-school teacher (13.2%) and nursing (11.8%).

Formental et al.’s (2015) study gives some insights into men’s perceptions of their economic role and the type of work they think they should undertake, based on a sample of 125 Cuban men (aged 21–60) from a construction company in Havana, with minimum education of 12th grade. Participants shared the importance of feeling powerful and economically successful in order to maintain high self-esteem. As such, professional success was associated with values of masculinity and self-esteem was based on achievements in the financial and working spheres. Males also perceived themselves as providers and in charge of leading romantic and sexual relationships with women. In contrast, participants shared that when women played those roles, men questioned their own manhood and felt depressed.

Women in non-traditional occupations

The literature reveals that small numbers of women are moving into ‘male’ areas of work, but with no significant change in norms about suitable types of work for men and women. This is illustrated by the literature on women who work in agriculture (Romero-Bartolo, 2011; Pino et al., 2017), the construction sector (Fortune, 2010) and in non-agricultural cooperatives (Caballero, 2018).

As already mentioned, the government has been promoting women’s participation in agriculture recently, reflecting concerns about the small and declining number of women in agricultural cooperatives. However, the literature identifies the prevalence of norms around masculinity as a deterrent to women entering the sector, because they are perceived as less capable than men (Romero-Bartolo, 2011; Alfonso,

2016). Other literature on this sector gives some insights on women's participation, their normative perceptions, and the challenges they have faced in agriculture.

Romero-Bartolo's (2011) study with young women under 30 years old working in agricultural cooperatives found that women tended to consider it normal to carry out less demanding 'women's work'. Indeed, the study suggests they were contemplating continuing to study since they felt that high educational attainment was important, as it would enable them to undertake 'intellectual or office work', rather than demanding physical work.

Alfonso (2016) examined the gender perceptions of 276 members (only 15% of whom were women) of a rural credit cooperative according to their gender and age. Using 35 statements about gender and work roles,²⁷ participants were asked whether they 'totally agreed', 'partially agreed' or 'totally disagreed'. There were no female respondents aged 15–29 working at the cooperative. Male respondents of that age group illustrated how the persistence of gendered norms keeps young women away from agricultural work. None of the males aged 15–29 disagreed with the statement 'Men should do the work that needs physical effort in the field, they are more productive'. Similarly, most men aged 60 or over agreed with the same statement, while most men aged 30–44 disagreed. In the case of women, those who disagreed most with the statement were aged 45–59. Regarding the statement 'men should receive technical training because they do the agricultural work', most women of all ages agreed. Men in the 15–29 age group had the highest level of agreement with that statement.

One study (Fortune, 2010) explored another male-dominated activity in which small numbers of women have participated – the construction sector. The women interviewed ranged from skilled professionals (architects, engineers) to skilled tradespeople (plasterers, carpenters,

labourers), although the author did not specify their ages. All women interviewed agreed that their pay for this work was better than if they had worked in education or public services, and that this was a strong motivation. All women stated that they were paid the same as men, although the author noted some uncertainty on the part of women labourers. Indeed, compared to skilled professionals, female manual labourers were perceived to be treated patronisingly because they were considered physically weaker than men and in need of help with heavy work (e.g. lifting blocks). This led women to undertake more monotonous/tedious work such as sifting aggregates (e.g. sand, rocks) by hand. However, male managers appreciated their gender-related skills such as attention to detail or 'approaching a task with gentleness'.

Finally, Caballero (2018) analysed five non-agricultural cooperatives in the provinces of Havana and Matanzas oriented to three sectors: gastronomy (three cooperatives), hairdressing (one cooperative) and interior design services (one cooperative). The author suggested that women's participation in these cooperatives had not been significant because until 2011, cooperatives in Cuba were mainly oriented towards activities considered traditionally masculine. The authors found that of 76 cooperative members in their sample, most were white men with pre-university education. Only a few were women, and although the author does not specify their age, it seemed these women were not old. However, in one cooperative (providing hairdressing services), more than 70% of members were women. The author also observed that women were less represented in the other four cooperatives due to their social networks

Social networks and the time that individuals invest in them appear to influence the chances of becoming a member of a cooperative. Thus, to be able to join a cooperative, men and women need the appropriate social networks and connections. While men's social activities

27 Other examples of statements included in the study are: 'men are better than women when making decisions'; 'men are more qualified than women to make scientific advances'; 'guidance on the use of agricultural machinery or equipment should be given to men'; 'the positions of responsibility in organizations must be represented by men because they have more time and interest'; 'men have the greatest economic responsibility of the home'; 'a man cannot give proper care to the baby'; and 'the man must be the head of the household'.

involved other male co-workers, neighbours and other male friends that invited each other to participate in the cooperatives, women usually socialised with other relatives who had no connections to cooperatives. Within cooperatives, women typically have a lesser role in decision-making and occupy lower-status positions (Caballero, 2018).

4.4.4 Norms about mobility and appropriate behaviour in the public sphere

Some of the Cuban literature reports that women do not face restrictions on their mobility as they participate in paid work within the state and non-state sectors (i.e. Cabezas, 2004; Nuñez, 2010; Echevarría, 2014; Echevarría et al., 2018). Moreover, Cuban women have begun to take advantage of the economic changes and recent policies that allow them to travel abroad more easily, as Nuñez (2018: 3) observes:

Many young women still pursue careers in the public sector because they know an alternative for supplementing their low salaries is to travel abroad – on scholarships, to attend or present at professional congresses or to give classes as visiting professors ... Health professionals, meanwhile, have the opportunity to serve in medical missions overseas, which is another way to augment their public-sector income.

However, other literature suggests that norms related to compliance with social/moral rules in the public sphere exist. For example, Ferragut and Piza (2016) noted that in spite of women's important role from the early years of the revolution and their higher levels of education compared to men, women's economic empowerment is still limited by norms that place women within the household. For example, in their study, women who decided to become self-employed undertook activities such as room rentals or food selling – activities not necessarily undertaken in the public sphere, and which allowed them to combine their paid and unpaid (household) work more easily. In contrast, men were self-employed as taxi drivers and

owners of *paladares*, placing themselves firmly in the public sphere.

Similarly, Formental et al. (2015: 235), based on semi-structured interviews with 125 Cuban men (aged 21–60 years) from a construction company in Havana, noted that:

... financial success and leadership are perceived as social virtues of public life and that is, undoubtedly, considered to be a masculine domain, par excellence.

Thus, men perceived that professional and work-related achievements were indicators of masculinity, and self-esteem was based on accomplishments in the financial and working spheres, all of which takes place in the public space. In contrast, men considered housing and childcare as priority jobs for women.

Looking at how these norms play out in the case of professional women, Nuñez (2005) included in her sample women aged 30–60 living in Havana, and observed that even if their husbands approved of them working in professional jobs, they still needed to follow norms expected of them in the workplace and the public sphere, as one participant observed:

At the personal level, men acting according to patriarchal behaviours do not have to put on a mask, because in this scenario they do not have to obey the social rules or institutions prevailing in the sphere of labour or in other public ones, which prohibit such behaviours. (Nuñez, 2005: 178)

Furthermore, some women in the same study described that their husbands were jealous because they dressed up to go to work where they were also meeting other men. Some women reported feeling permanently monitored and judged by their partners with jealousy expressed both directly and indirectly.

In the case of *jineteras*, although some research suggests their work is accepted or even facilitated by others who take economic advantage of these women's interactions with foreigners (Cabezas, 2004; Kummels, 2005), some evidence suggests that *jineteras* have also been affected

by perceptions that they are contravening social norms about morality. For example, Pope (2005: 111) observed that young *jineteras* felt stigmatised by Cuban society:

Social stigmatization often causes as much fear as physical intimidation. At the heart of this fear of identification as a *jinetera* was not only the threat of incarceration but also being exposed publicly for selling sex. This can be noted by the authorities and placed in the individuals' permanent work dossier, perhaps leading to restricted job and social opportunities in the future.

The stigmatisation of this profession also comes from feminist organisations, as Pope (2005: 109) also noted that the FMC stated that: 'the only women involved in selling sex or companionship had low moral standards'.

Jineteras in Pope's study also expressed their desire to behave according to certain norms related to traditional ideas of romance, as they described 'falling in love with a foreigner' and ideals of marriage or long-term relationships with them, as described by the author:

Women were straightforward about having sex with foreigners for economic gain, but they often used the phrase, 'falling in love', to describe a potentially long-term relationship with tourists ... While the participants were realistic about love not being the primary goal in a sexual encounter, they were also bound by intertwined traditional paradigms of sex and romance, with marriage as a possible outcome. (Pope, 2005: 110)

However, as the author highlights, the motivations to marry a foreigner derived more from a transactional calculation that would allow them to avoid the economic hardships of Cuba.

4.4.5 Norms about care/domestic work and time use

Even though women increased their participation in the labour force from the early years of the

revolution, the literature indicates that gender prejudices and stereotypes have persisted, and domestic unpaid work has remained entirely women's responsibility (Nuñez, 2010; Ferragut and Piza, 2016; Álvarez-Tabío Albo, 2017; Pino et al., 2017; Castañeda, 2018).

In this section we examine whether social norms about unpaid domestic and care responsibilities have changed or persisted, as well as the impacts of care and household chores on women's economic empowerment.

Change and continuity in norms about unpaid care

Oxfam's study (Ruiz and Sobrino, 2018) of attitudes among young men and women aged 15–25 years in eight Latin American countries, including Cuba, found that 56% of younger men and 34% of younger women aged 15–19 believed it is better for the man to be the family breadwinner and for the woman to take care of children. Likewise, 25% of women and 46% of men believed that in the event of firing someone, it is best to keep the man's job because he usually generates most of the family income. Moreover, 79% of women and 76% of men aged 15–25 thought that their friends believed that all women should be mothers. The idea of compulsory motherhood was most prevalent among young people aged 15–25 in Cuba and Dominican Republic.

According to Álvarez (2015: 131), the role of Cuban women as caregivers and in charge of the household is assumed as natural but with little economic value:

... historically considered as minor or of a second order, and therefore, no remuneration is received for it under the criterion that it does not contribute to the economy.

A study by Álvarez et al. (2017) suggests that the unequal division of household work between men and women persists. Based on a sample of almost 20,000 people aged 15–75 years (55.8% women and 44.2% men), female participants reported that the unpaid activities they undertook most often included: cleaning and washing (89%); cooking (86%); ironing (84%);

taking children to the doctor (34%); caring for children when they were sick (34%); caring for other adults who were in the hospital (32%); and caring for the elderly (16%). Male respondents in the same survey reported that the unpaid activities they undertook most often included: taking out the trash (79%); and household repairs (76%). The same study found that 11.7% of women (compared to 9% of men) considered that not sharing household work was the main cause of arguments with their partners in the previous 12 months.

As well as economic factors, patriarchal norms in Cuban society also explain the persistence of the unequal gender division of household labour (Nuñez, 2010). That study noted that Cuba has a housing deficit which forces three or four generations to live in the same house, where females (mothers, grandmothers, aunts) share the household work among themselves. Younger male members of the family do not do household work because they consider that ‘it erodes their virility’ (ibid.: 80). Likewise, women in the study considered they were better at saving scarce resources than men, as one participant explained:

At home men waste the scarce things we have and mess up everything when they perform household chores. That is why I prefer to do them myself, even if I take up the whole burden.

Social norms about unpaid care and domestic work seem more persistent in rural areas (Romero-Bartolo, 2011; Alfonso, 2016; Pino et al., 2017). For example, Alfonso’s (2016) study of men and women in a rural agricultural cooperative found that women clearly perceived their role in caring for children as more important than the role of men in caring for children, due to their own perceptions about having better maternal instincts. Similarly, based on a sample of 20 rural women with children under 6 years old, Pino et al. (2017: 240) observed that:

... in rural areas there still survive entrenched ideas, beliefs, traditions that assign to women the greatest responsibilities related to the

upbringing and education of children, the administration of the home, domestic tasks and an infinity of tasks necessary to ensure the reproduction and welfare of the family group.

In terms of how Cuban men perceive norms, participants in Romero Almodóvar’s (2011) study (husbands aged 17–60 years in Havana) reported that the distribution of domestic work in the household was fair, even though they did not do household chores: ‘if I have to do it, I do it, but [here] I’m served, and I eat’; ‘all household chores are left to them [women] even if we had the time to do them’; ‘it’s a matter of tradition that women undertake these activities, I think that in our case it is our daughter who should cooperate more’; and ‘I help but I don’t wash or iron, that was not instilled in me’ (Romero Almodóvar, 2011: 91).

The literature shows that norms on care and domestic work have been transmitted from parents to children. The studies by Álvarez et al. (2017) and Romero Almodóvar (2011) observed that most respondents reported that their daughters and other women tended to do household work while sons and men were responsible for household repairs and taking the trash out. Rural women in Romero-Bartolo’s (2011) study reported aspiring for their sons to be like their fathers and their daughters to be like their mothers. Similarly, Alfonso (2016) and CEM and CEPDE (2017, cited in Castañeda, 2018) observed that daughters in rural areas helped their mothers most with household chores after school or during weekends, while sons or other males helped with traditionally masculine tasks such as working in the fields, carpentry or electricity. The same study identified that this gender division of labour also applied to care of the elderly, disabled people, the chronically ill and younger siblings – all of whom were mainly cared for by mothers and older girls or female relatives.

There is some evidence to suggest some gradual changes in norms about unpaid care among professional and young couples. Díaz (2010: 145–146) observed that among young couples (though age was not specified), women are beginning to demand a more gender-equitable

division of household labour. The author observed that young women:

... are typically more skilled and have experiences of participation [in the labour market] that allow them to demand new relationships with their partners at home. In young couples, women have little choice but to demand progressive collaboration of other family members, thus introducing changes in family dynamics. Overall, a relatively optimistic prognosis can be given in regard to this challenge, especially among younger adults who matured under different parameters.

Likewise, Nuñez (2010) observed some generational differences, although changes do not seem to have taken place more broadly. The study identified that husbands of professional women began to take on some unpaid care work, such as waking earlier to take children to day care centres or buying food and other supplies on the way home. However, professional men and women mostly agreed with the phrase ‘women have to be mothers first, then workers and lovers’. Of 15 men surveyed, 13 reported this was true because ‘the most important role of a woman is to take care of their children’ (ibid.: 186). Women expressed that the three roles allotted to females could be fulfilled simultaneously and that everyone in the household must ‘help’ women, reflecting perceptions that women were indeed responsible for household work.

Impact of norms about responsibility for care work on women’s economic opportunities

The Cuban literature has largely discussed the impact of gendered norms that assign care responsibilities to women on their economic opportunities (Ferragut and Piza, 2016; Pino et al., 2017; Castañeda, 2018; Torres, forthcoming). The literature suggests that despite the law guaranteeing equal wages, women’s salaries are lower than men’s because they have more time off work to take care of children, sick relatives and elderly people. For example, a study by the Institute for Labour Research (cited in Oxfam,

2010) examined salary levels of men and women working in the same positions, from January to December 2006, in 10 organisations. The study found that women received 2% lower salaries than men due to absence from work caused by illness (60%), childcare and care of other family members (22%), and maternity leave (18%). Of the total absences recorded by gender, 77% were reported by female employees, confirming that men are hardly absent for reasons other than illness. Oxfam (2010) suggests that the income gap affects women’s contributions to social security, which means their pensions might be lower than men. Similarly, Echevarría (2014) found that women earned wages equivalent to 80%–85% of what men earned as they worked fewer days due to their caring responsibilities. Torres (forthcoming) finds that 119,000 women reported not looking for work in the past four weeks because they were caring for an elderly relative, according to the official press based on data from the *Encuesta Nacional de Ocupación* (2016), which is not in the public realm.

Breto-Fernandez (2011) and her study at Marianao municipality in Havana found that women spent fewer hours doing paid work and gave up better positions due to their unpaid household commitments:

... the care of children and the house, together with work responsibilities, makes working in other remunerated occupations or to excel professionally a challenge that she [women in general] is often not willing to take on. However, men perform these [remunerated] activities without any problem; it is for this reason that it is often he [men in general] who brings the greatest amount of income to the home. (ibid.: 284)

Likewise, as noted in section 4.5.2, some literature suggests that women are not considered by their managers as able to work in more senior positions because they are not perceived as capable of undertaking such roles due to their caring responsibilities (Echevarría, 2011).

Calixto and Castañeda (2015) based on a survey with 25 men and 31 women working in managerial positions in the health sector (more

than half of them aged 36–45 years), found that most participants considered that women struggled more in their managerial positions due to a combination of their household responsibilities and the demands of the work, including long hours and limited flexibility. They also reported that women had less time for social and recreational activities as well as personal care.

In CDA's study (2013: 51), one female participant shared how women perceived having a family and being professionals as contradictory tasks:

I've had the sad experience of a male boss telling me 'Hey, don't even think about having a baby, because you're going to throw your career out the window. Don't have a baby and don't get married.' The culture is still very *machista* [male chauvinist]. At the same time, choosing to have a family is not an option for women; it's something you're programmed for since childhood. That's why it's something that isn't correlated with professional success.

Other authors have highlighted some of the negative consequences of the recent economic changes on women working in the state sector, influenced in part by norms related to their caring responsibilities. Echevarría (2014) identified that more women than men have been reducing their participation in the state sector. In 2011, 239,000 women stopped working compared to 138,000 men. The number of women leaving their job is double the number of women who retired in the same year, a trend that was not observed among men. The author suggests this is due to economic reforms in the state sector that aimed to reduce the number of state workers, but also notes that women have been perceived as not being able to dedicate themselves full-time to their jobs due to their care responsibilities, while men (reflecting norms of their role as 'breadwinners') have been given preference to maintain their positions:

... to establish the permanence or availability of an employee ... subjective factors may prevail, related

to the androcentric, patriarchal and productivity culture, which require total availability in time and interest in the company, without considering the needs and demands of care for the worker and his family. In addition, prejudices linked to phenotypic or social characteristics (such as skin colour, sex, sexual orientation, care of children or the elderly, among others) condition the expected effectiveness of these people to certain job responsibilities. (Echevarría, 2014: 68)

Those most affected by redundancies have been women aged 30–39 years and those over 55 who work in the service sector and in managerial positions (ibid.).

Looking at women in rural contexts, studies have also identified the difficulties those women face when combining paid and unpaid work. Participants of the study by Pino et al. (2017) reported their perception of being overworked, and undertook household work during their 'free time', which was when they got home from work. Some also reported taking their children to work with them, as they did not have anyone who could look after them. Similarly, Romero-Bartolo (2011: 110) identified that women in agricultural cooperatives who had recently entered relationships and had small children were considered by their managers as:

... not in a position to take on technical work, and on multiple occasions they [women] were relegated to work that was less demanding physically and therefore less well remunerated.

Furthermore, although women in the same study worked in the areas where they lived, they perceived that the distance between home and work interfered with their domestic 'obligations'.

4.4.6 Norms around ownership and control of assets

Social norms that affect female ownership of financial and physical assets such as businesses, land and agricultural inputs have been identified in the Cuban literature (CDA, 2013; Echevarría,

2014; Ferragut and Piza, 2016; Álvarez et al., 2017; Hernandez, 2017).

Regarding financial and property assets, Álvarez et al. (2017) outlined that 21% of women and 19% of men in their survey considered that men would feel at a disadvantage if their female partner earned more money. Similarly, 23% of women and 22% of men reported that men would feel at a disadvantage if the woman was the owner of the house. Thus, some men still reported feeling more threatened when women were in control of such assets compared to other areas where it was accepted for women to have a stronger say in decisions (e.g. about their children's education).

Another aspect that the Cuban literature has focused on is the ownership of small businesses by women, especially since the recent economic reforms promoting self-employment. Most women who have joined the self-employed sector do not own their own business, but work as independent workers. This was noted by economist Teresa Lara in a recent interview in the *Havana Times* by Abad (2017):

In Cuba, not every independent labourer is a business owner. Independent labour means that you don't work in the state sector ... The majority of women aren't business owners but are employed instead to offer services for those who have capital, men generally speaking. For example, if you rent out a room for tourism, the guest house might belong to the man. In the private transport sector, another service which has progressed quite well because of the public sector's deficiencies, there are hardly any women, or female car owners or drivers.

Likewise, Echevarría and Lara (2012, in Torres, forthcoming) identified that 67% of self-employed women in 2012 were not owners of their businesses nor were they independent workers, but were in fact salaried employees. Men tended to be employers, and women employees, thus resulting in lower incomes and a lesser role in decision-making for women.

The literature has identified the barriers and challenges that women face in owning their own business (CDA, 2013; Echevarría, 2014; Díaz and Echevarría, 2016a; Ferragut and Piza, 2016). Access to credit was identified as an important limitation. Díaz and Echevarría (2016a), studying a sample of 66 owners of small-businesses (of whom 36% were women), found that women's access to bank loans requires them to meet a set of conditions that women find difficult, such as having a co-signatory or carrying out a feasibility study, among others. The same study found that men and women alike mostly relied on their savings to open their own business, but men usually received greater financial support from relatives living abroad (42% of men compared to 22% of women). The authors also observed that men's social networks were also in their favour as they reported sharing their business projects with relatives but also with other men in their network with high economic status such as other colleagues, potential business partners or clients from former jobs who may be able to help them, including financially. In contrast, women shared their business ideas mainly with other relatives. Women also considered that it was not easy for them to access legal or financial advice because consultants underestimated their knowledge, although the authors did not specify what type of knowledge women were referring to. Women emphasised more than men the lack of a state policy for the promotion of entrepreneurship and the lack of access to credit, legal advice and accounting services. This may be because men had their own sources of information, financing and advisory networks – resources that were not equally available to women – echoing the findings of Ferragut and Piza (2016) on the important role of social networks. As a result, some women in the study by Echevarría (2014) preferred to work as employees, re-sellers or intermediaries in the black market rather than entrepreneurs. These studies also suggest that women's social capital and networking ability is far more restricted than men's.

The CDA (2013: 59) highlighted that another challenge preventing women owning a small business was the abuse from local authorities and the lack of clarity on regulations, as expressed by one female participant in the study:

Things have improved since the 1990s, but it remains an uphill battle for *cuentapropistas*. We're constantly dealing with inspectors. Some are honest and try to enforce the regulations, while many others are simply trying to 'catch you' or 'confuse you' to solicit a bribe. In my specific category of business, which is to sell articles of clothing, there is somewhat of a grey area about whether the clothes need to be produced locally and what exactly qualifies. This ambiguity leads to difficulties for us. Additionally, taxes continue to be high and we have a very difficult time acquiring our products.

Norms around ownership of land and inputs in the agricultural sector have been identified as another constraint for Cuban women. Acosta (2011) identified that more than 11,000 women have benefited so far from the government initiative to distribute idle land to farmers (launched in 2008 as part of reforms to strengthen agriculture and boost food production). However, the CDA (2013) found that women constitute only 10% of the leaseholders given parcels of state land. In addition, the parcels of private land were often covered in marabú, a shrub that is difficult to remove, and covers 1.7 million hectares of Cuba's productive land. However, a recent commercial accord between Cuba and the USA allows US citizens to purchase this variety, although the process to export it has started with agricultural cooperatives (Vigezzi, 2017).

Likewise, Hernandez (2017) identified that compared to men, women have less control of land and less access to technology and inputs for agricultural production. The author suggests this could be due to women's inability to make greater investments (due to their lower incomes) and because growing crops might also require hard physical work. However, social norms also influenced women's reduced control of land and leadership positions in cooperatives, as one key stakeholder in CDA's study (2013: 42) explained:

There are women heading cooperatives, they tend to be more disciplined,

more effective, more humane ...
[however] there is a lot of machismo,
more so in agriculture.

4.4.7 Sexual harassment and violence in the workplace and the domestic sphere

Although the literature has identified gender-based and intimate partner violence in Cuba (Grogg, 2015; Becker et al., 2016; Álvarez et al., 2017; Hernandez-Garcia, 2017; Oxfam, 2018), sexual harassment and violence in the workplace has been less well-documented, apart from the literature on *jineterismo*.

Álvarez et al. (2017) highlight public perceptions of violence against women based on a sample of nearly 20,000 people in rural and urban areas. Their survey found that 51.8% perceived levels of violence against women to be low, while 29.7% thought levels were high – women more so (32.3%) compared to men (26.4%). This means that 81.5% of the people interviewed identified the presence of violence against women to some extent. Regarding norms around violence, the same study found that between 70% and 85% of respondents disagreed with the following statements: 'Women must endure violence for their economic security and the wellbeing of their children'; 'women are raped because they provoke men'; 'violence is only exercised by people of low cultural level'; and 'the woman is to blame if the man mistreats her'. In contrast, 77% of men and 80% of women agreed with the following statements: 'the woman who endures the abuse must like it, otherwise she would have already broken up the relationship' and 'the consumption of alcohol is the cause of violence'. The survey also showed that 77.6% of men and 80.1% of women thought that violence against a woman or man was not justified at any time. Although the survey did not explain what was defined as violence, it found that psychological violence was the most predominant form, encompassing feelings of being controlled, being ignored, shouting and offensive language.

In the same study, women reported that the most frequent causes of arguments with their partners in the past 12 months included jealousy (26%), economic problems (14%) and dedicating too much time to their work (12%). The study

by Oxfam (Ruiz and Sobrino, 2018) found that although Cuba was one of the countries where young people aged 15–25 believed that normalisation of male violence against women was due to men’s inherently violent nature, it was also the country where ‘the highest percentage of young women and men would consider getting involved [in the conflict] if they witnessed a situation of violence’ (ibid.: 19).

The only profession where harassment and violence against young women has been discussed in the literature is the work of *jineteras*. According to Pope (2005: 111), young *jineteras* have been exposed to physical violence from foreign clients, pimps and the police. All participants in her study mentioned ‘ticketing’ and ‘incarceration’ while others were ‘cited’ by the police, as one young girl explained:

One time an officer stopped me, and since I hadn’t given him the money I already promised him, he was going to take me to jail if I didn’t sleep with him. Unfortunately, I did it because I would do anything not to go to jail. (ibid.: 112)

Cabezas (2004) observed that young *jineteras* in her study reported having been abused, beaten, robbed and even raped by the police. The author described the experience of a young *jinetera* who was arrested by the police:

She attributed her arrest to the way she was dressed, with white spandex pants and high heels, and to the fact that she was walking alone late at night. She recalled going home from a party at around midnight when some Spanish tourists called out to her. The police were watching nearby. When the tourists walked away, she was arrested for ‘harassing foreigners’ and taken to prison. For the next three days, she was subjected to police interrogations, a gynaecological exam, blood tests for sexually transmitted diseases, and psychological counselling. She was given a *carta de advertencia* [letter of warning]; with three such arrests and a *carta de advertencia*, she could be

incarcerated in a rehabilitation centre for up to four years. (ibid.: 1005)

The author also described that as part of the state’s efforts to mitigate the negative impacts of tourism on Cuban society and culture, it had implemented a system to criminalise and rehabilitate women of ‘questionable morality’. Rehabilitation centres were established with assistance from the FMC, where authorities can institutionalise so-called ‘dangerous women’ for up to four years. Although prostitution is not illegal, the state uses a law defined as ‘state of dangerousness’ (defined in articles 73 to 84 of the Cuban Criminal Code) to incarcerate women. This literature review identified no women’s or human rights organisations which have denounced such policies, apart from CEDAW (2013).

4.5 Policies and interventions

This review identified few programmes that directly discuss the process of change in norms that affect women’s economic empowerment. Here, we present the existing evidence on programmes and interventions that either aim to promote women’s economic empowerment or that aim to tackle harmful norms that to some extent also affect empowerment. We first briefly present interventions that have been implemented in LMICs, then focus on the Latin American region. We then examine programmes and interventions implemented in Cuba by the government and NGOs, which also include support from United Nations agencies and, finally, from foreign governments.

4.5.1 Policies and laws

Given the country focus of this review, the literature we looked at has identified certain policies and laws that have promoted economic empowerment in Cuba from the early 1960s until the present day. As Box 3 shows, however, their benefits have been perceived differently across different generations. This section summarises laws and policies relevant to social norms and women’s economic empowerment.

Table 20 summarises policies and laws on women’s economic empowerment (see Annex 2 for

Box 3 Perceptions of laws promoting economic empowerment across different generations of respondents

Nuñez (2005) selected relevant measures or actions enacted since the early 1960s to promote Cuban women's participation in society and explored how men and women of different generations perceived the benefits. Twenty participants were on average 32 years old and the other 10 ranged from 50–62 years. Measures that benefited women's economic empowerment included: daycare centres for infants from 45 days old up to 5 years (1961); free education, from nurseries to postgraduate level (1961); the right of all those working for the state to a paid month's holiday every year; scholarships for all students needing them; maternity leave for working women (Maternity Law of 1974, modified in 1993 to extend the length of time given to mothers to look after their newborns, from three to six months; and the Family Code (1975). The author disaggregated responses according to respondent's age group: older than 50 and around 32 years. Members of the first group (who were around 6 years old in 1959) reported benefiting from the changes (especially those from low-income families), which aimed to promote social mobility. Those older than 50 years:

‘... knew these policies and profited from them. Their answers show that these policies or measures helped them finish high school and even graduate from universities in the ex-socialist countries. They used them also to join the work force and stay in it. They saw how much the quality of life in Cuba increased, and they observed the gains and obstacles in the struggle against women's discrimination.’ (Nuñez, 2005: 184).

In contrast, women and men from the younger age group perceived that they had benefited from these measures to a lesser extent:

‘They barely answered with a “yes, it benefited me,” and that was all. I infer that they used these measures as something they were entitled to, and they did it in a natural way. I add that their parents contributed to these attitudes, since they wanted their children to continue climbing the social ladder, even more than they did, and they tried to make sure that their children did not suffer from the scarcities they lived through.’ (ibid.: 18)

more detailed information on these laws and how they have been perceived by different authors).

4.5.2 Interventions in Latin America and the Caribbean

According to the ILO (2009), there is increased awareness that in order to promote decent employment for young women, governments need to implement two basic elements: an integrated strategy focused on growth and job creation; and targeted interventions to help youths to overcome the constraints and unfavourable circumstances they face in entering and remaining in the job market. Interventions that promote economic

empowerment as well the elimination of harmful norms that affect young women and adolescent girls are crucial. Stavropoulou (2018) showed that interventions such as provision of technical or business skills, financial training and assets, mentor-led peer groups, life skills training and the inclusion of community awareness activities can lead to positive changes in norms related to adolescent girls and young women's economic empowerment.

In Latin America and the Caribbean, interventions promoting girls' and young women's economic empowerment include job and vocational training programmes, conditional cash transfers, interventions to sensitise men on the

Table 20 Cuban policies and laws on women's economic empowerment

Policy/law	Main considerations
Committee on the Elimination of Discrimination against Women. Concluding observations* on the combined seventh and eighth periodic reports of Cuba, 2013. (CEDAW, 2013)	<ul style="list-style-type: none">• The Committee expressed its concern about the 're-education' of women involved in prostitution without clear and transparent objectives and procedures, as well as the lack of information on the number and conditions of women in detention.• Regarding 'stereotypes', CEDAW emphasised the following: 'While noting the State party's efforts to combat patriarchal attitudes and deep-rooted stereotypes regarding the roles and responsibilities of women and men in all spheres of life, the Committee is concerned by the lack of information on the outcome of those efforts and the fact that such customs and practices perpetuate discrimination against women and girls, resulting in women's disadvantaged and unequal status in many areas' (CEDAW, 2013: 5)
National Action Plan for Follow-up to the Beijing Conference. (República de Cuba, 1999)	<p>The Plan calls for:</p> <ul style="list-style-type: none">• Periodic evaluations of women's participation in the country's economy, with an emphasis on young women. It also stresses the need to continue analysing the needs and possibilities of employment across the country and in the different sectors of the economy, to work with women who are not employed, orienting them towards agricultural activity, local industry, services and other labour activities that could create new sources of employment.• The creation of minimum conditions for the care of children and the elderly to especially benefit female heads of household and women working in essential roles for the development of the country• To study women's participation in the self-employed sector, to give the issue better attention and improve regulation and organisation.• The design of specific qualifications and programmes for women affected by redundancies, as well as for those seeking employment, in order to facilitate their job relocation, in urban and rural areas.• To conduct meetings with women workers by sector and use other ways to explore their motivations, needs, interests and aspirations, while stimulating the most positive attitudes and results.• To continue to stimulate the participation of women in the biotechnology, medical-pharmaceutical and tourism industries (all priorities in the country's development strategy).• To promote the participation of rural women, especially young women, in different jobs within agriculture, given the need to increase their participation in this sector.
1975 Family Code (República de Cuba, 1975)	<ul style="list-style-type: none">• Article 2 grants equality of rights and duties to both spouses and article 83 provides that parental authority be jointly exercised.• Recent legislation attributed economic value to housework, which is to be shared equally within the family, according to article 27.• Establishes no discrimination against women with regard to inheritance; sons and daughters – regardless of the marital status of the parents – have the same rights to inherit.

* The Committee invited Cuba to submit its ninth period report in July 2017. By October 2018 this report had not been published on CEDAW's website. https://tbinternet.ohchr.org/_layouts/TreatyBodyExternal/Countries.aspx?CountryCode=CUB&Lang=EN

Table 20 (cont.) Cuban policies and laws on women's economic empowerment

Policy/law	Main considerations
Article 24 of the Constitution and land ownership	<ul style="list-style-type: none">• Cuban women have the same land ownership rights as men.• In 2008, President Raúl Castro undertook further reforms by distributing land to revive the economy and boost food production. However, Grogg (2014) observed that these measures have failed to boost gender equality because it was mostly men who gained the land, owned farm machinery and accessed credits. Grogg also identified that men remained in decision-making roles in rural areas, while women fell back into their traditional roles as caregivers.
Guidelines of the Social and Economic Policy of the Party and the Revolution (2016-2020) (Congreso del Partido Comunista y Asamblea Nacional del Poder Popular 2016)	<ul style="list-style-type: none">• The Guidelines proposed to develop a comprehensive policy that encourages the incorporation, permanence and stability of the workforce in the countryside, especially of young people and women, as well as the recovery and development of agricultural communities. (ibid.: 34)
1987 Civil Code (República de Cuba, 1987)	<ul style="list-style-type: none">• States that women have the same legal capacity as men to own non-land assets with no legal discrimination.• Spouses must obtain their partner's consent if they wish to acquire, administer or transfer jointly owned property, and this applies to both men and women.• Property acquired individually before or during marriage can be freely used by one spouse without needing to seek agreement from the other.• Upon termination of the marriage, community property is divided equally between the spouses, regardless of the amount each has contributed. In the latter case, domestic goods necessary for the education and development of children are awarded to the spouse that has their custody and care.
2014 Labour Code (República de Cuba, 2014)	<ul style="list-style-type: none">• For the first time the figure of the 'employer' is recognised as a natural or legal person, subject of an employment relationship.• The Code establishes that training, 'except for cases of special interest of the state', is the responsibility of the worker in his/her free time (article 40) and those who study in higher education will have up to 15 days of training a year.• It contains a provision regarding the principle of equal pay for work of equal value.• It contains no provisions on sexual harassment in the workplace or on complaints related to gender-based discrimination.
2017 Maternity leave and parental leave (República de Cuba, 2017)	<ul style="list-style-type: none">• The law provides protection to women during pregnancy, as well as antenatal and postnatal paid maternity leave.• The state-sponsored leave covers 18 weeks (6 weeks before birth and 12 weeks after) with an economic benefit equal to 100% of the average income that a working woman has received as salary during the previous 12 months, providing that the person has worked at least 75 days in that time. After postnatal leave, the working mother can choose to join the workforce or to take care of the child and is paid a social benefit of up to 60% until the child's first birthday.• Maternity leave is extended to grandparents or another family member.

Table 20 (cont.) Cuban policies and laws on women’s economic empowerment

Policy/law	Main considerations
2017 Paternity leave and parental leave (República de Cuba, 2017)	<ul style="list-style-type: none"> • The father’s right to care for his children is recognised once the breastfeeding period is finished and in later periods through paid and unpaid leave, preserving his rights as a worker based on the principle of sharing parental responsibility throughout the first year of life. • However, the law has not had important consequences beyond legal recognition. Only 104 families have chosen this alternative (Nuñez, 2018). • Once the periods of paid leave conclude or not, he has the right to reincorporate into his workplace and to occupy his post (Article 9). • Until the child is one year of age, the father (as well as the mother) incorporated to work, depending on the case, has the right to enjoy one daily paid hour for breastfeeding in the case of the mother and one day of paid leave per month to go to the paediatric health care centre (Article 31).
Project of the New Republic of Cuba Constitution (Parliament of Cuba, 2018)	<ul style="list-style-type: none"> • Article 45 states that women and men enjoy equal rights and responsibilities in the economic, political, cultural, social and family spheres. The same article notes that the State encourages the full participation of women in the development of the country and protects her against any type of violence.

impact of harmful norms, and interventions that promote young women’s entrepreneurial potential.

Kabeer (2018) observes that in the region, many job and vocational training programmes aiming to facilitate young people’s entry into formal waged work have been implemented and evaluated. These programmes have usually targeted urban unemployed or underemployed youths from poor regions with low levels of education. For instance, the Colombian *Jóvenes en Acción* programme targeted unemployed men and women aged 18–25 years, covering their daily transportation costs and lunch. It also recognised women’s childcare expenses and paid a higher stipend to women. Graduates performed better in the labour market compared to the control group, while women increased their likelihood of paid employment as well as hours of work and monthly wages (Attanasio et al., 2011 cited in Kabeer, 2018).

Another type of intervention implemented in the region is conditional cash transfers (CCTs), which have reduced the number of girls dropping out of school and increased school attendance, which have in turn helped girls enter the labour market. Examples include Mexico’s *Oportunidades* and Colombia’s *Familias en Acción* (ILO, 2008). CCTs have also been

accompanied by educational sessions on tackling harmful social norms. For example, Robbins (2014) identified CCTs that also worked with men as part of the activities to change gender attitudes and behaviours at the community level.

The ILO (2008) has stressed that another important intervention for young women is programming that promotes women’s entrepreneurship. The organisation also recognises that young women with small children need specific services and encourages the provision of childcare facilities where there is a high concentration of female workers, as there are few public childcare services available in the region.

4.5.3 Interventions in Cuba

This subsection first looks at government interventions to promote women’s economic empowerment (such as supporting working mothers with childcare or helping women acquire skills to set up their own small business). Other interventions also have aimed to address gender-based violence and gender stereotypes that deem women responsible for care and household work. It then looks at NGO interventions that have addressed harmful social norms within the household – such as the unequal division of household labour, or gender-based violence – as

well as helping women develop voice and agency. Other NGO interventions have tried to increase women's participation in non-traditional jobs and activities such as joining cooperatives.

Government interventions

Providing childcare to facilitate paid work.

Torres (forthcoming) observes that an important government programme to support working mothers has been the *círculos infantiles* (children's circles), which began in 1961 (a national network of nursery schools for working mothers at very low cost). It was expected that women would 'join' salaried work and other tasks of the Revolution and that that would be a means to 'emancipate' women. According to Castañeda (2018), the *círculos infantiles* are popular as they support children's education and development and because they have contributed to women's greater economic independence. Likewise, Nuñez (2010) noted that at the *círculos infantiles* boys and girls are persuaded to exchange gender roles in their games. However, they tend to play with children of the same sex when they have no guidance of their teachers, which continues in primary school. Thus, although the *círculos infantiles* aim to provide a balanced socialisation that challenges traditional social norms, Arés (2002, cited in Nuñez, 2010) argues that from an early age, boys are not taught to adjust to the changes in norms.

To enrol a child, the mother has to be working, either in the state or non-state sector. Parents or guardians who fulfil the same conditions may also benefit, as long as they have custody and care of the minor. Preference is given to children with special educational needs. For mothers with two children, the fees are reduced by 50%; for mothers with more than two children, the first two pay 50% and the third child is enrolled free (Castañeda, 2018). However, Torres (forthcoming) also observes that the *círculos'* quality has decreased, their supply does not cover the actual number of mothers who request the service, and they lack necessary infrastructure. For example, Castañeda (2018) observed that in Boyeros municipality, they only provided services to just under a quarter (24.69%) of mothers who requested to enrol, while in Guanabacoa, this

figure was just 18.93% (both municipalities are in Havana).

Another intervention, the *Edúca a tu hijo* (Raise your child) community-based programme, covers almost all children who do not attend *círculos infantiles*. This programme emerged in response to insufficient availability of day care centres for working mothers (Díaz, 2010). The programme is targeted to families with the aim that they can carry out educational actions in the home with their children between 0 and 6 years of age, as well as prepare pregnant women and their partners for the care of the baby (Castañeda, 2018). It offers educational guidance in the communities with the help of trained staff and is also coordinated by representatives from different sectors including education, health, culture, sports, and community organisations such as the FMC. D'Emilio and Laire (2016) describe it as the non-institutional alternative to early childhood education, preparing families to stimulate their children's development through activities in the home. The programme provides care for almost all (98.3%) preschool-age children nationally (Castañeda, 2018), though as that same study shows, the figures were lower in the municipalities of Guanabacoa and Boyeros (in Havana), at 80.3% and 79.7% respectively. That same study also identified that another drawback of the programme is that children are still under their mother's supervision as the programme more than offering childcare focuses on offering educational guidance to mothers who continue caring for their children at home.

Caregiver at home. Romero Almodóvar (2011) identifies the 'caregiver at home' programme, introduced in the mid-2000s through the national programme of assistance to the elderly and the disabled and the social work programme aimed at single mothers of children with severe disabilities. 'Caregiver at home' provided paid caregivers for those who needed them in order to free up family members to go to work. The study noted that although the programme employed 13,537 people (mostly women) as paid caregivers, it did not adequately challenge norms related to care of the elderly and children. Furthermore, as the author notes, men's caring responsibility was also unacknowledged, as the full name of the programme 'Social work

programme for single mothers of children with disabilities' automatically excludes males, as fathers, who may also be in the same situation of needing support.

Casas de la Mujer. The Cuban government, in its National Report to the Regional Conference about Latin American and Caribbean Women (Informe de Cuba, 2013) organised by the Economic Commission for Latin America and the Caribbean (ECLAC), mentions the existence of 174 Casas de Orientación a la Mujer y a la Familia (Orientation Houses for Women and the Family) to develop awareness within the family about equitable and fair intra-household relationships. These centres are run by the FMC in every municipality, providing services and engaging in different activities such as work on violence against women. Likewise, according to Molyneux (1996: 25), the Casas in Cuba:

... differed radically from those established by women's movements in other countries. They were, as their name suggested, designed principally to 'guide' (orientar) women; they offered a drop-in social, psychological and legal advice service and organised a range of courses, some of which aimed to help women to acquire a trade and set up their own small businesses.

Daniel (2011) observed that the FMC has requested financial support from Oxfam to continue working on issues of interest to the *Casas*, specifically violence against women.

Media interventions and campaigns to tackle gender stereotypes and improve women's economic empowerment. Díaz (2010) identified the educational programme *Para la vida* (For Life), which includes television adverts addressing topics such as domestic overburden, adolescence, ageing and ethnic prejudice.

The government's National Report to the Regional Conference about Latin American and Caribbean Women (Informe de Cuba, 2013) mentions other interventions in the media, stating that:

The number of campaigns and communication products aimed at

deconstructing stereotypes has grown, especially those targeted towards the family in general and in particular towards children and adolescents. Public campaigns have been prepared ... training to media communicators has been broadened and deepened. These actions have been developed jointly by the Cuban Institute of Radio and Television ... the FMC, CENESEX, the Ministry of Justice and the Union of Journalists of Cuba, which has enabled the training of hundreds of specialists, managers and professionals of the media.

However, the report does not mention any specific interventions that might improve women's economic empowerment.

The IPS (2018b) reported one media initiative, the *Padre desde el principio: la primera infancia importa* (Father from the Beginning: Early Childhood Matters), organised in collaboration with UNICEF and the *Tele Rebelde* state channel. The campaign was shown during the 2018 World Cup, aiming to:

... reach the [football] fans with essential contextualized information about which there is great ignorance: their rights and responsibilities [as fathers], the services available, but also the benefits of being a parent.

Messages and information about the role of fathers in supporting the development and wellbeing of children were shown during the football matches. The campaign also involved a contest in which participants were asked to describe, in less than 400 words, 'how does a father support his children from the beginning to achieve the best start of life?' (Any individual could enter, irrespective of age or gender.)

Relevant to women's economic empowerment, part of the message of this campaign, as shared by the media, was: 'To encourage them [the fathers], to change the traditional discourse on obligation and burden, to then focus it on the enjoyment [of being a father]', according to a UNICEF representative (IPS, 2018a).

Youth training or employment programmes. Dominguez (2005) reported that the government had implemented a number of programmes to engage unemployed youths in work and study. Although the author did not specify the kinds of programmes, their aim was to restore a sense of the value of education, to provide opportunities for continuing education and to incorporate youth into ‘socially worthy jobs’. The programmes offered intensive vocational and technical education to prepare youth for work as well as for advanced studies at municipal-level universities that facilitate study through specially designed, student-centred programmes. The author claimed that these programmes significantly reduced youth unemployment, although no data was provided.

According to Díaz (2010), programmes aimed at young people who neither study nor work have increased, with the example of the School of Social Workers (graduating 40,000 social workers in 2007) in which young women were fully represented, although again, the authors did not provide the actual data on what proportion of graduates were female.

Likewise, Oxfam (2010) observed that the FMC initiated proposals to orient youth and incorporate them into training programmes through the *Casas*, echoing the observations of Molyneux (1996). Various employment options were offered by FMC programmes with the Cuban National Association of Small Farmers (ANAP) and other government associations such as the Cuban Association of Animal Production and the Cuban Association of Agricultural and Forestry Technicians. Oxfam reported that the FMC also responded to the Education Department’s request ‘to train Informal Track Volunteer Promoters as Educators in Children’s Circles’ (Oxfam, 2010: 39), although the study does not provide more detail on this programme.

Promotion of women in management positions. In its National Report to the Regional Conference about Latin American and Caribbean Women (2013), the Cuban government stated that it had ‘organised diverse mechanisms to encourage greater participation of women in management positions, particularly as decision-makers. The Meetings of Women Directors, the Courses for Women Leaders,

and the incorporation of gender issues into training programs [no specific programmes were mentioned], the elaboration of Gender Strategies, the creation of Gender Committees, among others, are the most frequent actions taken’ (ibid.: 4). However, the document does not mention how norms were approached or what topics were addressed, or the results achieved by these programmes, or if male managers also participated.

Non-governmental organisations

The Suburban Agriculture and Cooperative Strengthening project and the ‘Ya Basta!’ campaign (Oxfam). Oxfam has been an important implementer of interventions with a focus on gender equality in Cuba since 1997. Some of its gender and women’s economic empowerment interventions have been conducted with ANAP to support the implementation of a gender strategy across the country. This strategy represents an important step for ANAP, as only 17% of its members are women, according to Grogg (2014).

According to one Oxfam representative in an interview conducted by Daniel (2011), Oxfam supports the strategy in five (unnamed) provinces. The same representative described that some outcomes of the strategy included women’s economic empowerment and tackling certain gendered norms in the workplace and at home:

We are talking about an increase in the number of women members in cooperatives and an increase in the number of women at all levels of this nation-wide organization [ANAP], which has four hundred thousand affiliates. We are talking about undertaking jobs analysis and the creation of jobs in each cooperative to increase women’s participation, and about using a community-based approach to look at problems at the family level, such as sharing of household work, violence, alcoholism, [and so on] ... Gender equality has been firmly placed on ANAP’s agenda, with more women joining the

cooperatives and taking on decision-making positions at different levels. (ibid.: 54)

Becker et al. (2016) analysed one of Oxfam's interventions: the Suburban Agriculture and Cooperative Strengthening project funded by the European Union (EU) from 2011 to 2015. The authors based their analysis on Oxfam's reports (not available online), women's testimonies, communication materials produced by Oxfam and key informant interviews. The project covered 89 cooperatives across 10 municipalities in three of Cuba's eastern provinces, aiming to improve the food security situation through sustainability and gender equality. The authors evaluated the project's special focus on empowerment and gender equality, which was implemented in 10 of the 89 cooperatives. It gave women the chance to create and manage businesses of their preference, ranging from laundrettes, handicraft and cheese production to cultivation and marketing of flowers, beauty salons, and laundry and tailoring shops. The creation of these initiatives was undertaken through ANAP.

The study observed that many of the women who participated in the project before its implementation were dissatisfied with being confined at home, were responsible for household work and food provision, and depended on their husbands financially. Others were raising animals in their backyards or helping their husbands in agricultural labour without receiving any salary in exchange. To change the perceptions of traditional gender roles, Oxfam ran a range of workshops for women on issues such as 'increasing awareness on gender equality for women'; 'the gender activist'; 'learning from the leadership of rural women in the farming and agricultural sector'; 'exchange of experiences with women at an international level'; and 'economic initiatives for women: routes for their sustainability'. There were no workshops for men, which seemingly influenced men's feelings of exclusion. As a result, Oxfam began to consider including men in future projects.

The authors identified the following contributions of the project to women's lives:

Women became more independent and were able to contribute to the family's financial situation through their jobs; women participated more in local groups, improved their networking and were not bound to their home anymore as OXFAM provided a platform for workshops and training sessions for their businesses and personal development; women achieved more decision-making power in the household and husbands accepted their wives as equal partners; women have learned more about their rights through workshops provided by OXFAM which have taught women about domestic violence and about gender equality. (Becker et al., 61)

The study also observed the challenges faced by the programme and participants, through their testimonies:

And after nearly 20 years, it was not easy for him to accept that I worked. People said many things, like 'his wife is out there working, learning new things, he is going to lose her' ... and then it started, he had the typical macho reaction, but, I gradually calmed him down and I explained and told him to have confidence in me. And he did.

As the quotes reflected, men were afraid about women taking a man's place, revealing one lesson from the project: 'the need to work with men from the perspective of masculinities' – a concern raised by the manager of the project. Other testimonies from participants revealed conflicts with sons, daughters and husbands, after women decided to take part in the programme. However, conflicts decreased with time and, according to the authors:

Nowadays some families share household work more equally, there is more respect for the needs of women and more support in activities related to the initiatives. (ibid.: 55)

However, the study does not go into detail on how changes in behaviour and attitudes regarding gendered norms took place. Moreover, the manager of the project recognised that the goal of gender equality was not fully achieved:

Honestly, I could not say that this project has achieved empowerment and gender equality in the region. I think that the project contributed with a small grain of sand to the awareness and to the personal empowerment of some women in a very specific context. I would say that this project was a very small sample in such a large universe as is the Cuban countryside. (ibid.: 56)

Another intervention implemented by Oxfam in 2017 was the *Ya Basta!* (Enough!) campaign, targeting women and men aged 15–25 years and aiming ‘to transform the belief systems and gendered norms which reinforce violence against women’ (Ruiz and Sobrino, 2018: 6). The campaign was implemented in eight countries, including Cuba. Although that report focuses more on the results of a survey on young women and men’s beliefs and attitudes about gender, in its recommendations, Oxfam reinforces the importance of education to tackle harmful norms:

People responsible for education within the family and in the education system must rethink the language used in communications, in private conversations and in public spaces. We must all scrutinize our behaviours, because this is what builds our culture. Education systems can make an enormous contribution to building alternative belief systems and progressive gender norms ... It is essential that we continue to promote processes which enable young women to grow in confidence and become agents for change in their own lives and in their community. Women and girls must overcome their fears and sense of helplessness. (ibid.: 21)

Programme for Ecological Agriculture and Communal Rural Studies (CDA). The study

by CDA (2013) identified the Programme for Ecological Agriculture and Communal Rural Studies implemented by the Christian Reflection and Dialogue Centre (CCRD) as linked to women’s economic empowerment. Although it did not focus exclusively on harmful norms and economic empowerment, it offered practical workshops for rural women and young people on organic farming and food preservation, sewing and crafts, and computer skills. The CCRD also holds workshops that promote dialogue and debate on gender relations, focusing on domestic violence. One example is the ‘Promoting peace, in defence of children and women victims of violence in Matanzas’ workshop (CCRD, 2017). The Centre has also established an annual day of reflection and action against domestic violence.

Manual of responsible parenting – UNICEF and CENESEX. The ministries of Education and Health, with assistance from UNICEF and CENESEX, recently produced the *Guia Padre* (Father’s Manual), which aims to promote ‘the rights, benefits and responsibilities of men from the first stage of fatherhood, so that they are informed and can participate in the protection, care and stimulation of their children’. The manual also highlights that responsible fatherhood helps both men and their offspring to ‘reach their maximum development’ and contributes to favouring ‘a more equitable relationship with the mother’ or other family members. The *Guia Padre* also includes topics that teach boys how to connect with their affections and with housework and care (IPS, 2018b).

The *Guía Padre* was part of the sensitisation campaign called ‘Maternity and paternity: equal in law and responsibilities’, which was rolled out nationwide in February 2018, organised by CENESEX. It was part of a broader campaign by CENESEX, ‘Educating on self-reliance helps us grow’. The umbrella campaign, which runs until 2019, aims to promote the skills of children to become independent from an early age. As Mariela Castro, CENESEX Director, emphasised:

Working symbolically from the concept of self-reliance not only helps children acquire that capacity, but also that mothers and fathers recover other

spaces of their daily life ... The best inheritance that we can leave to the new generations is self-reliance, that ability to take care of themselves in life, in each of the different contexts where they develop. (IPS, 2018b)

Other NGO interventions funded by foreign governments. The government of Canada, through Global Affairs Canada (GAC), funds a range of projects in Cuba to promote women's economic empowerment and tackle violence against women. For example, CARE International in Cuba will benefit from GAC support on a project to incorporate women into new employment related to livestock, through training, capacity building, creation of home enterprises, and renovation of childcare and elder care facilities. Likewise, GAC is planning to support CSOs in Cuba to implement an initiative called Breaking the Silence, which provides tools for community groups and educators to raise awareness and promote prevention and action on violence against women and girls. Another project supported by GAC is Cultivating Skills for Employment and Growth in Cuba, which aims to cultivate a skilled and competitive labour force that reflects emerging economic requirements, focusing on developing and delivering a strong national vocational training programme through technical assistance. One of its activities includes developing a gender-inclusive national vocational training strategy.

Another NGO supporting women's economic empowerment is *Acsur Las Segovias*, with its 'Incorporation of local women entrepreneurs in local socioeconomic development from an adequate gender perspective in three provinces of Cuba' programme. This intervention benefited 24 Cuban women in the provinces of Artemisa, Camaguey and Granma. It aimed to: teach them how to efficiently conduct their business; create

capacities to produce radio and audio-visual material with a gender focus; and sensitise local actors about the situation of women (Díaz and Echevarría, 2016b; IPS, 2014). The project was funded by the EU and implemented by *Acsur Las Segovias* and ANAP. Although Díaz and Echevarría did not examine the programme, IPS (2014) mentions that it included an economic management and planning module with a gender focus to help women develop their productive initiatives. The module included topics such as 'women's entry in the Cuban agricultural environment'; 'agro-ecological practices'; and 'technological novelties in production'. Furthermore, one member of *Acsur* mentioned that the programme aimed to:

... strengthen the capacities of local actors with a gender approach, incorporating the presence of women in productive, economic and decision-making processes. (IPS, 2014)

Grogg (2014) found that women 'entrepreneurs' participating in *Acsur Las Segovias*' programme reported benefiting from courses in developing a business plan and management and gender. Benefits went beyond purely economic ones, as women expressed their ability to challenge gendered norms that had previously not allowed them to work:

I stood up to my husband, to do what I like to do, and now I am setting up a business in my home, to sell what I make and to teach young girls to sew and embroider.

However, there is no detail on how the programme was effective in tackling gendered norms. Indeed, it might have reinforced such norms as other topics in the module included 'cooking recipes, peasant traditions and culture'.

5 Conclusion and recommendations for further research

This rapid literature review has provided evidence about how social norms shape SRH and women's economic empowerment in Cuba. We find that the revolutionary period favoured norms that promoted social equality and women's emancipation, with a regime that took steps to address discriminatory gender norms, sexual health and work opportunities for women. However, there remain substantial challenges in addressing discriminatory norms and tackling the persistent gender inequalities that disadvantage women and girls in Cuban society. In this final section we summarise the evidence on social norms and SRH and women's economic empowerment, and highlight gaps in the literature.

5.1 Summary of findings

5.1.1 Social norms and sexual and reproductive health

Social norms and gendered perceptions shape people's access to SRH. First, we found that social norms related to sexual behaviour can expose women and men to risks and vulnerabilities. In Cuba, attitudes of machismo can encourage some men to have sex early, to have multiple partners and to use condoms inconsistently (if at all). Norms that emphasise women as submissive can encourage a passive role in sexual decision-making and reduce girls' ability to negotiate safe sex. Second, social norms have been found to shape fertility choices, including the number, timing and sex preference of children, and who to have children with. In Cuba, social norms might explain the

high adolescent fertility rate, as having children confers respect and status on women and men and their mothers. Cuban girls are often initiated into womanhood through *quinceañera* (a major celebration marking their 15th birthday). Furthermore, norms related to contraception, abortion, pregnancy and birth can influence whether individuals access these services. In Cuba, abortion rates are high and abortion is often used as a means of fertility control. Researchers have also observed scepticism towards the use of contraceptives. Lastly, the review has shown that norms related to specific groups can affect their SRH outcomes; in particular, LGBTQ people and illegal workers may face stigma and discrimination that can prevent them from accessing SRH services.

The evidence suggests that policies and laws, facility-based interventions and empowerment interventions can all improve women's and girls' access to SRH services, and can indirectly transform the social norms related to SRH. In Cuba, the state provides various SRH services free of charge. Social norms and awareness-raising interventions – including sex education at school, university group learning and peer support, community mobilisation, mass media campaigns and interventions targeting men and boys – can improve knowledge on SRH and contribute to shifting social norms. The Cuban government has implemented a comprehensive sex education campaign, focusing on the use of mass media and community centres. However, the evidence suggests that despite significant efforts, it has not yet succeeded in addressing persistent gender inequalities that disadvantage women and girls.

A key challenge facing the Cuban government in its attempts to address adolescent SRH and related norms is a lack of resources for sustaining health services and SRH education. Generally, our findings suggest the need for a holistic approach to shifting social norms on SRH – including interventions in the fields of policies and laws, SRH services, women’s and girls’ economic empowerment, and awareness-raising about SRH throughout the life course.

5.1.2 Social norms and women’s economic empowerment

The literature review observed that social norms influence and constrain women’s participation in the labour force and their chances to generate an adequate income and enjoy economic autonomy. In Cuba, women earn less than men because they do not have the same access to better-remunerated and ‘typically masculine’ jobs, such as in the more lucrative end of the self-employed sector, or access to leadership and managerial positions (Oxfam, 2010; Breto-Fernandez, 2011; Echevarría et al., 2018).

Indeed, the Cuban literature echoes the findings of global evidence showing that there are different types of norms that are interrelated and which affect and reinforce each other (Marcus and Harper, 2014; Kabeer, 2018; Marcus, 2018). For example, norms about what is suitable work for men and women are related to norms about care, and about ownership and control of assets. Such norms are also linked to unpaid care and household work undertaken by men and women. Norms also interact with gender inequalities related to women’s involvement in the state and non-state sectors in less well-remunerated jobs, where they have more limited control and ownership of assets than men. Women participate in the labour force but also shoulder most family responsibilities in line with gendered norms that constrain their economic empowerment. Overall, the literature on women’s economic empowerment and social norms suggests that social norms in Cuba are deeply rooted in gender identity and culture, and cannot be changed merely through legislation (Fortune, 2010).

Although women in Cuba, including adolescent girls and young women, have achieved high levels of education and have continued

participating in the workforce in greater numbers (with some fluctuations), we identified the following social norms that constrain their economic empowerment.

First, regarding norms about whether women should undertake paid work, the evidence suggests that women tend to do paid work as long as it meets certain conditions – namely, that it: benefits the household (Cabezas, 2004; Kummels, 2005; Wehrli, 2010); does not threaten the position of men (Nuñez, 2005; 2010); and does not interfere with the caring and household work that women are expected to provide (Romero Almodóvar, 2011).

Second, regarding norms about whether women should occupy leadership positions, the evidence suggests that most leadership positions are occupied by men because women are perceived by their male colleagues as less available, less efficient, or unwilling to occupy such roles (Nuñez, 2005; Dominguez, 2011; Morales et al., 2018). Those women who were able to take up managerial or leadership roles adapted to exhibit more masculine-type behaviours as were expected of a manager.

Third, regarding norms about suitable work for men and women, the reviewed studies showed that women tend to undertake types of work that reflect their domestic roles (Romero Almodóvar, 2015; Díaz and Echevarría, 2016a; Álvarez et al., 2017; Morales et al., 2018). Indeed, jobs that are better remunerated (such as ownership of *paladares*) are also male-dominated, while women earn less money even when they participate in similar activities (Echevarría, 2014; Romero Almodóvar, 2015; Morales et al., 2018). With room rentals, for example, women rent rooms mostly in Cuban pesos while men charge the more profitable convertible pesos, although the reasons for this divergence are not clear (Pañellas et al., 2015, cited in Mesa-Lago, 2017).

Fourth, the literature on norms about compliance with social and moral values in the public sphere shows that although many women actively participate in the labour force, public life is still considered a masculine domain (Formental et al., 2015). Likewise, the evidence suggests that women remain in – and seem to prefer to keep control of – the home and family

while they also generate an income, as they undertake various remunerated activities either in or from their homes (such as food selling and room rentals) (Ferragut and Piza, 2016). In the case of women who participate in the sphere of labour and public life, they are still expected to adhere to social norms such as dressing properly in the presence of men (Nuñez, 2005) or avoid stigmatisation and being exposed publicly for selling sex, as in the case of *jineteras* (Pope, 2005).

Fifth, the literature on norms about care and domestic work and time use shows that persistent norms regarding women's responsibility for household work and care are very present in Cuban society (Nuñez, 2010; Ferragut and Piza, 2016; Pino et al., 2017). While women spend their time undertaking most of the household work, men are usually in charge of household repairs and taking the trash out. Although there are laws promoting greater equality in the home and workplace, surveys conducted in Cuba since the 1990s show that women spend three times the number of hours on household work compared with men (Nuñez, 2010). These norms have detrimental consequences for women's economic opportunities as they have little choice other than to reduce their paid working hours (Echevarría, 2014), reject more senior positions, or quit (Álvarez, 2015; Torres, forthcoming).

Sixth, regarding norms about ownership and control of assets, the evidence suggests that there remain limitations on women owning assets, evidenced by the finding that most self-employed women do not own their own business but are instead independent workers.

Finally, the literature identified norms around gender-based violence in the public sphere and in the family. For example, according to Álvarez et al. (2017), based on a sample of almost 20,000 people, a large proportion of Cubans (around 80%) recognise that violence against women exists to some extent. The same study found that important causes of arguments include jealousy but also economic problems and dedicating too much time to work. Likewise, there is some evidence regarding sexual harassment and violence in the workplace, mainly directed at women who work as *jineteras* (Cabezas, 2004).

5.2 Gaps and research questions

The literature review has identified the following gaps and suggestions for research on how social norms affect SRH and women's economic empowerment in LAC, with a particular focus on Cuba. This section focuses on the gaps and possible future research in Cuba.

5.2.1 Social norms and sexual and reproductive health

Focus on adolescents and young women

Most of the literature on SRH in Cuba is about women in general rather than adolescents and young women. Further research could make an important contribution by highlighting the sexual health challenges facing adolescent girls and young women and the specific social norms that are related to their sexual and reproductive health. Young people in Cuba face particular challenges that need to be better understood. Little is also known about young people's mental health.

Focus on vulnerable and under-researched groups

Vulnerable adolescents require special support and services. However, because of their vulnerabilities, they are often stigmatised and have difficulty accessing services (PAHO, 2013). In the Caribbean region, health systems are failing to reach marginalised adolescents – a problem that is linked to the lack of relevant data on the needs of different marginalised groups (PAHO, 2013). In the field of adolescent SRH, several literature reviews (Chandra-Mouli et al., 2015; Denno et al., 2015; Austin, 2018) note a lack of research on vulnerable adolescents, including adolescents living with HIV, street youth, adolescents with disabilities, refugee and internally displaced youth, young people in prisons or other closed settings, LGBTQ youth, adolescents engaged in sex work, and young people who inject drugs (Austin, 2018).

Gender-based violence

More research is needed on the linkages between gender-based violence and SRH (Salam et al., 2016). Research on gender-based violence seems particularly lacking for Cuba (UNDP, 2018b), where gender-based and domestic violence

have largely been absent from the media and public discussions (Reed, 2012). Oxfam Canada (Daniel, 2011) and UNFPA in Cuba (UNFPA, 2011) have cited gender-based violence as a priority for their future programming in Cuba.

Norms around adolescents' childbearing intentions

Darroch et al. (2016) found that interventions to reduce early pregnancy often overlook the fact that many adolescent births are intended; they thus recommend research into the social norms that influence adolescents' decisions to have children early. Investigating adolescents' childbearing intentions could be especially interesting in Cuba, where fertility rates are low for middle-aged women but high for younger women. It would be particularly interesting to explore the role of the *quinceañera* celebration in shaping social norms around childbearing age. Another interesting area to explore would be the cohabitation of adolescent couples linked to Cuba's unusual legal age for marriage (14 for girls, 16 for boys). Although there is no official statistical data, some studies have found that cohabitation among under-aged couples is increasing in Cuba, resulting in unintended pregnancies and high rates of abortion (Darias, 2013).

Norms among service providers

Global literature (e.g. USAID, 2015) has shown that norms, attitudes and practices among SRH service providers can negatively affect adolescents' access to such services and therefore their SRH outcomes. We could not find literature on norms among service providers in Cuba. It would be informative to investigate whether women, men or vulnerable groups face barriers in accessing SRH services that are related to provider attitudes and behaviours.

State media campaigns

The Cuban government has used TV and radio to promote messages about gender equality and SRH – for example, through TV shows, soap operas and call-in programmes (Andaya, personal communication 2018). Research is needed on the government's current messages about gender equality and SRH (e.g. promoted

through radio, TV, official documents) and the responses to these messages.

Information and communications technology

Globally, new media is transforming sexual behaviour, health and related social norms. For example, 'sexting' (sending sexual messages or photos via mobile phones) and online pornography tend to convey stereotypes about sex to young people (Austin, 2018). At the same time, social media provides an important platform to reach adolescents and promote gender-equitable social norms. Research is needed to explore the best ways of using social media to promote better adolescent SRH outcomes (Austin, 2018).

In Cuba, the percentage of mobile cellular subscriptions has drastically increased in the past 20 years, from 0.1% in 2000 to 40.2% in 2017 (World Bank, 2017). Similarly, internet use is on the rise (0.4% in 2000 and 43% in 2017). Usually, adolescents are among the first to use new social communication opportunities (PAHO, 2013). Little is known about the use of new communication technologies and media among vulnerable groups in the Caribbean region (*ibid.*). It would be interesting to see how this change in use of ICT has transformed access to and information about SRH among adolescents in Cuba.

Influence of international NGOs

The amount of net official development assistance (ODA) that Cuba has received has increased over recent decades (World Bank, 2017). Härkönen (2018) also notes that there are more international NGOs in Cuba now than before – organisations that might shape public discourse around gender equality. The increasing influence of international NGOs in Cuba might be a theme that could be explored in the context of SRH and women's economic empowerment.

5.2.2 Social norms and women's economic empowerment

The main gap in the literature on social norms and women's economic empowerment concerns adolescent girls and young women, as the focus has been on women in general. Most of the identified literature has focused on: (1) sex workers (some studies with a focus on young

women); (2) the challenges that women face in accessing or performing well in managerial positions; (3) the ‘double burden’ when undertaking paid and unpaid work; and (4) the challenges that women face in the emerging self-employed sector. Very few studies have examined the social norms affecting young women in rural areas of Cuba (Pino et al., 2017; Morales et al., 2018). Although the review identified the norms that affect women in general, more research is needed on how these norms shape the aspirations of adolescent girls and young women and the decisions they take, including decisions to continue studying, join the labour force, or other options they might be contemplating. Furthermore, we identified gaps and further research questions on the following topics.

Focus on vulnerable and under-researched groups

Two vulnerable groups in particular have not been explored in the existing literature. The first is adolescent girls and young women who work in the informal sector (partly due to the expansion of the self-employed category of workers). Some of these girls and young women might be working at *paladares*, beauty parlours, stores, hotels or in other services or sectors. There has been no research into their motivations to work illegally, the risks they face, the types of jobs they undertake, whether they continue studying, as well as the role of norms in their economic empowerment. Related to this, the role of tourism in influencing social norms on women’s economic empowerment is another topic that needs more attention beyond what is known about the role of *jinetteras* (Kummels, 2005; Pope, 2005).

The second vulnerable group that needs more attention is black adolescent girls and young women. Black women appear under-represented in higher education (Dominguez and Castilla, 2011) and in the private sector (Abad, 2017; Torres, forthcoming). Whether black young women are able to compete in equal circumstances is unknown. Likewise, the evidence suggests that their participation in certain jobs is restricted (e.g. tourism, restaurants). None of the studies from this review mentioned adolescent or young black women in their sample, even though as a group, black women’s labour force

participation is higher than white and mestizo women (Echevarría et al., 2018). Only a few studies mentioned black young women working as *jinetteras* (Kummels, 2005; Pope, 2005) or as domestic workers, seamstresses, midwives and nurses (CDA, 2013). Their social mobility strategies and the role of social norms in their economic empowerment need to be explored further.

Effects of economic reforms on adolescent girls and young women and the role of social norms

Most recent literature has focused on the effects of the recent economic reforms on women in general, so there is a pressing need to explore how social norms shape the options and opportunities available to adolescent girls and young women. For example, some evidence suggests that 30% of self-employed workers are youths (Echevarría et al., 2018) but the literature on this group of workers has not addressed the participation of adolescent girls and young women specifically. Furthermore, although the evidence suggests that the economic reforms have mostly affected women aged 30–39 years and over 55 years (Echevarría, 2014), there have been no studies exploring how the loss of jobs among working women in those age groups might have affected the entire household, including adolescent girls. Whether these young women now need to work to contribute to household income or if they join the job market to have access to material items or to achieve economic independence are potential questions of interest to be explored, as well as the types of jobs they have to do and their effects on their lives.

Economic empowerment of adolescent girls and young women in the state sector, non-state sector and illegal market

Some evidence suggests that adolescent girls and young women have increased their participation in the service sector (Juventud Rebelde, 2017), and as ONEI data showed, this sector has been an important source of jobs for this group even before Cuba’s economic reforms. However, whether they have joined as salaried workers, self-employed workers, or employed illegally to avoid tax regulations remains unclear. Important topics regarding their economic empowerment

need further research, such as their overall experiences working in this sector, their working conditions, their salaries, their ability to apply their skills, to voice their concerns and opinions, and the norm-related challenges that they face in their workplace. There are also research gaps on those topics with regards to professional young women working as technicians or administrators in the state sector, where (according to ONEI) they are also present in substantial numbers.

Girls who do not study or work and the role of social norms

Another topic that needs more research is the case of girls who neither study nor work – a phenomenon which, according to some perhaps outdated evidence (FMC, 2007), is relatively common. One of the causes cited then was the lack of positive influence from family members, but other factors might be at play. Topics that could be further explored to provide insights are the aspirations of these girls, the opportunities they perceive as available to them to fulfil their aspirations, and the perceived constraints such as lack of employment opportunities or gendered norms about their responsibilities in the household. As already noted, Cuba has been experiencing a long-term low in fertility levels, which means it must also address the needs of an ageing population. For example, one topic to be explored is the effect of these girls' family duties (e.g. in caring for elderly relatives and/or siblings when both parents are working) and whether they prevent them from working and/or studying.

Work and educational transitions of adolescent girls and young women

There is a lack of evidence on the important transitions in adolescent girls' lives, such as from high school to university/work or from university to work. Some evidence suggests that job decisions after university are highly influenced by the state (Dominguez and Castilla, 2011), but there is little evidence on how young women see their future and their role as working women, wives or mothers. Furthermore, although the

literature review identifies some programmes that have been implemented to support young women and adolescent girls during these transitions, we know little about their effects, whether girls and young women perceive them as appropriate and useful, and especially whether these programmes also aim to tackle harmful social norms or strictly focus on employment issues.

Policies and interventions to promote young women's economic empowerment and to change harmful norms

It is unclear if the identified programmes and interventions had an outcome on norms related to the social organisation of care or greater involvement of women in decision-making, among other potential outcomes that would benefit women's economic empowerment. Furthermore, research is needed on the extent of older adolescent girls' participation in such programmes.

Sexual harassment and violence

Looking at the existing evidence on norms and economic empowerment, most of the literature has focused on the persistence of norms about what are suitable jobs for men and women (Álvarez et al., 2017; Caballero, 2018), the persistence of norms about care and domestic work (Pino et al., 2017; Torres, forthcoming) and women's double burden in combining paid and unpaid work (Nuñez, 2010; Breto-Fernandez, 2011; Romero Almodóvar, 2011). However, the literature did not examine how sexual harassment and gender-based violence might be affecting women's economic empowerment. For example, more research is needed on the presence and effects of harassment and violence in the workplace (in addition to existing evidence regarding the situation of *jineteras*) or travelling to and from work (i.e. on public transport). Similarly, there were no studies exploring women who experience violence from their partners due to their decisions to undertake paid work or whether fear of such violence deterred them from seeking work.

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Annex 1 Search strategy

This rapid literature review explores the relationship between sexual and reproductive health (SRH) and women's economic empowerment (WEE) and norms, with a particular focus on adolescent girls and young women aged 15–24 years. The review combines three tracks, explained briefly here:

1. **Bibliographic database search:** Searching previously agreed upon list of academic databases and journals, using consistent search engines (see below) that have been tested beforehand.
2. **Hand-searching:** Searching previously agreed (and identified from first searches) on websites for relevant studies using similar search terms as for the bibliographic databases. This also includes a Google search for other grey literature.
3. **Expert advice and snowballing:** Contacting experts in the field and asking them for relevant sources on the topic research question. Also, looking at a small number of selected references and searching their bibliographies.

All relevant studies that could be downloaded were saved on Google Drive.

Bibliographic database

Sexual and reproductive health and social norms

The research question: What is the relationship between sexual and reproductive health (SRH) and social norms, with a particular focus on adolescent girls and young women?

The aim of this literature review is to first identify and synthesise key evidence on the linkages between SRH and social norms in low- and middle-income countries (LMICs) globally and regionally, and then focus and provide comprehensive evidence on these issues in Cuba. The review should identify key knowledge but also research gaps. Key sub-questions included:

- What models and approaches are used in SRH service provision – formal/informal, government, NGO, private?
- What are best practices of programming on SRH? (Age/youth and gender friendly – effectiveness, barriers)
- What social norms are there around SRH service use/uptake – from perspective of users and providers?
- What is the policy and legal environment in relation to SRH in Cuba?

Key search terms

We established a long list of search terms that we used in our search. For the SRH theme, the key search terms that were used were “Sexual and Reproductive Health AND Social Norms AND Adolescents”; “Sexual and Reproductive Health AND Social Norms AND Adolescents AND Cuba”; “Sexual and Reproductive Health AND Cuba”. We also searched added terms to search for specific aspects, such as contraception, family planning, birth control, abortion, early marriage, adolescent fertility, youth friendly services, and LGBTQI.

Women's economic empowerment and social norms

The research question: What is the relationship between women's economic empowerment and social norms, with a particular focus on adolescent girls and young women?

The aim of this literature review is to identify the key evidence on the linkages between women's economic empowerment and social norms globally and regionally, summarise the evidence, provide comprehensive evidence on these issues in Cuba, and to identify the research gaps. Key sub-questions included:

- What are the main types of employment and work in which women are mostly engaged, including main formal employment sectors?
- What are the terms of employment (qualifications required, pay/ gender pay gap, working hours, social security, professional progress, pension age), disaggregated by age and gender)?
- Do women face workplace-related discrimination, including harassment? Are there avenues for recourse/unions?
- How do women balance paid work and other work (non-paid, domestic, care), including parental policies?
- Who uses and controls earnings and other assets? Who makes decisions in the household? What influences decision-making power?
- What social norms are there around women's work (what types of work women should do, whether mothers of children under 5 years of age should work or stay at home), including attitudinal surveys and media, and identifying any generational and gender differences?
- What is the policy and legal environment in relation to women's economic empowerment in Cuba?

Key search terms

Key search terms were combined for the search (for example, Women's Economic Empowerment AND Social Norms AND Adolescent Girls AND Cuba). Other key search terms included: wage employment, self-employment, labour participation, income-generating activity, informal work, NEET, training, casual labourer, vulnerable employment, workplace violence, care, paid work and unpaid work.

Inclusion criteria

The following inclusion criteria will be applied:

1. Date: 2000 onwards and before-2000 key sources for relevant context
2. Language: English, Spanish
3. Population: the focus is on adolescent girls and young women, aged 15–24
4. Geographic locations in order of priority: Cuba, Caribbean, Latin America, and LMICs
5. Study design: All literature is acceptable including empirical studies (e.g. based on data and or fieldwork), qualitative or quantitative, literature reviews, policy reports and grey literature
6. Outcome: any outcome related to SRH or women's economic empowerment

List of databases and journals

The literature review will include published and grey materials and will also examine NGO and other programming websites.

Databases

- JSTOR
- PubMed
- SAGE journals
- SCOPUS
- Solo Bodlein (University of Oxford)

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- Web of Science

Journals

- Cuban Studies
- Development and Change
- Feminist Economics
- Gender and Development
- Gender & Society
- Gender, Work and Organization
- International Journal of Cuban Studies
- International Perspectives on Sexual and Reproductive Health
- Journal of Development Studies
- Journal of Latin American Anthropology
- Journal of Latin American Studies
- Latin American Perspectives
- Poverty and Public Policy
- Reproductive Health Matters
- Revista Sexología y Sociedad <http://revsexologiaysociedad.sld.cu/index.php/sexologiaysociedad/issue/view/8>
- Sexuality Education
- Social Science & Medicine
- Studies in Family Planning
- The Journal of Adolescent Health
- World Development

Hand-searching/sources to search

The following websites/search engines were consulted, using the same search strings as for the academic databases:

International websites

- ODI (especially reports on social norms)
- Learning Collaborative to advance Normative Change, Georgetown Institute for Reproductive Health <http://irh.org/projects/learning-collaborative-to-advance-normative-change/>

UN agencies

- ILO
- UN Women
- UNAIDS
- UNDP
- UNESCO
- UNFPA
- UNICEF
- UNRISD
- WHO
- World Bank (gender data portal Cuba: <http://datatopics.worldbank.org/gender/country/cuba>)

International NGOs

- ActionAid

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- Advocates for Youth
 - CARE
 - Comic Relief
 - Engender Health
 - FHI360
 - Guttmacher Institute
 - IAWG – Adolescent Sexual and Reproductive Health <http://iawg.net/areas-of-focus/adolescent-reproductive-health/>
 - ICRW (WEE and SRH topics)
 - International Coalition for Women's Health
 - International HIV/AIDS Alliance
 - IPAS
 - IPPF
 - LSHTM
 - Marie Stopes
 - OXFAM
 - PAHO
 - Pathfinder
 - Plan International
 - Population Council
 - Promundo
 - PSI
 - Save the Children

Regional websites

- CEPAL: Observatorio de igualdad de género de América Latina y el Caribe <https://oig.cepal.org/es> and <https://oig.cepal.org/es/paises/cuba>
- Consejo Latinoamericano de Ciencias Sociales <https://www.clacso.org.ar/?idioma=esp>
- Facultad Latinoamericana de Ciencias Sociales <https://www.flacso.org/>
- Inter-American Development Bank
- ONU Mujeres <http://www.unwomen.org/es> and <http://www.unwomen.org/es/where-we-are/americas-and-the-caribbean>
- Population Council (Mexico and Guatemala)

Cuban websites

- Oficina Nacional de Estadísticas de Cuba <http://www.one.cu>
- Sistema de Naciones Unidas en Cuba <http://onu.org.cu/>
- Index mundi (data on Cuba <https://www.indexmundi.com/facts/cuba/contraceptive-prevalence>)
- NGOs that operate in Cuba:
- Centro Nacional de Educación Sexual en Cuba @CENESEX
- Federacion de Mujeres Cubanas
- Centro Oscar Arnulfo Romero <https://romerocuba.org/>
- Asociacion Latinoamericana de Medicina Social <http://www.alames.org/index.php/paises/cuba>
- Cosude Igualdad de genero en Cuba https://www.eda.admin.ch/dam/countries/countries-content/cuba/es/Todo_lo_que_hace_ver_ve_es.pdf
- Instituto Cubano de Investigación Cultural Juan Marinello
- Centro de Estudios Demográficos (CEDEM) de la Universidad de la Habana
- Martin Luther King centre - Centro Memorial Marthin Luther King J.R

Snowball technique

A number of people were contacted and asked for relevant studies on the research question. We also spoke to some individuals by phone. Heidi Härkönen, post-doctoral researcher at the University of Helsinki: <http://www.heidi-harkonen.com/> and Elise L. Andaya, cultural anthropologist, University of Albany, <https://www.albany.edu/anthro/andaya.php>

Annex 2 Cuban policies and laws related to women's economic empowerment

CEDAW (2013) on discrimination against women and human rights regulations

CEDAW (2013) observed in its most recent concluding observations that although Cuba's legislation includes the prohibition of discrimination based on sex (article 42 of the Constitution) and stipulates that all citizens have equal rights (arts. 41 and 44), the Committee expressed its concerns regarding Cuba's failure to incorporate in that legislation a comprehensive definition of discrimination against women in accordance with article 1 of the Convention, including both direct and indirect discrimination. CEDAW expressed its concern about 'the absence of a complaint mechanism to report cases of discrimination and violations of women's human rights and about the lack of an independent national human rights institution in the State party' (ibid.: 4).

Tackling gender stereotypes was also observed by CEDAW in 2006 and both concluding observations reports urged Cuba to implement strategies that modify 'stereotypes' which discriminate against women, including that: 'Such measures should include efforts, at all levels, in collaboration with civil society, to educate and raise awareness on existing sex-based stereotypes that operate at all levels of society' (CEDAW, 2013:5).

National Action Plan for Follow-up to the Beijing Conference

In 1997 the Council of State passed the National Plan of Action, following the agreements of the Fourth United Nations World Conference on Women, held in Beijing in 1995. The Cuban Plan of Action summarised in 90 articles the political will of the State to continue promoting women's equality. These articles are mandatory for all public institutions and progress is monitored through workshops organised by the Federation of Cuban Women.

The Family Code

The Family Code is an important law that has established principles that promote women's economic empowerment. Article 2 grants equality of rights and duties to both spouses and article 83 provides that parental authority be jointly exercised. Nuñez (2010) noted that these articles are read in all marriage ceremonies, but no one has used them in arguing for divorce. Recent legislation attributed economic value to housework, which is to be shared equally within the family according to article 27:

The spouses are obliged to contribute to the satisfaction of the needs of the family that they have created with their marriage, each according to their faculties and economic capacity. However, if any of them contributes to that subsistence only with their work in the home and in the care of the children [i.e. domestic work], the other spouse must contribute alone to the expressed [i.e. monetary] subsistence, without prejudice to the duty to cooperate in said work and care.

Under recent updates to the Family Code, widows cannot be disinherited. Likewise, if divorcing parents cannot reach an agreement regarding custody of the children, the courts award custody based on the best interests of the child. In most cases, according to SIGI (2014), children stay with their mother.

The Penal Code and CEDAW on physical integrity

There do not appear to be any laws regarding physical integrity in the workplace. However, studies conducted in Cuba have indicated that gender-based violence is a widespread problem, with domestic violence being the most prevalent form (CDA, 2013). According to SIGI (2014), in 1997 the Decree Law 175 of the Penal Code included specific language on domestic violence. The Working Group for the Prevention and Treatment of Violence in the Family was also established that year, following Cuba's National Beijing Platform for Action Plan. This Working Group is still in operation and continues to be overseen by the national women's machinery and the FMC in six areas: training, education and prevention, care, research, legislation and dissemination.

Decree Law 175 of 1997 of the Penal Code addresses sexual harassment specifically, although there has been no indication in reports provided by CEDAW of how this law has been implemented in practice. This Decree Law does not make specific reference to sexual harassment in the workplace. CEDAW (2013) expressed the following concerns regarding violence against women:

The Committee is concerned at the persistence of violence against women, including domestic violence, in the State party, which remains underreported owing to the prevalence of discriminatory social and cultural norms and the denial by the State party of the existence of different types of violence. The Committee is also concerned by the absence of specific legislation on violence against women criminalizing all its forms, as well as of an effective complaints mechanism. It is also concerned that the existing legislation does not contain a specific definition of domestic violence as a criminal offence. (ibid.: 6)

Likewise, the Committee refers to the lack of information and statistical data on violence against women. However, the media has reported that violence against women is a widespread problem, including the need to educate society about non-patriarchal and non-sexist values as identified by Cuban activists and academics:

Women themselves often do not know that they're the victims of violence in the family, in the workplace, in the community. Ignorance leads us to turn a blind eye to this problem. (Grogg, 2015)

Article 24 of the Constitution and Guidelines of the Social and Economic Policy of the Party and the Revolution (2016-2020) on resources and assets

Under Article 24 of the Constitution, Cuban women have the same land ownership rights as men. There was no discrimination based on gender when land was redistributed in 1959 but in practice few women obtained land. According to Grogg (2014), 40% of the farmland was in private hands by 2013. The number of women with access to land has been increasing through inheritance and,

according to SIGI (2014), in 2011 there were 10,916 women land owners and 759 women tenants –an increase of 1,000 since 2006. However, SIGI did not show this increase in comparison to male land ownership. Grogg (2014) suggests that these measures have not been wholly successful as it is still mostly men who have gained land, own farm machinery and access credit.

It is important to note that the Guidelines of the Social and Economic Policy of the Party and the Revolution (2016-2020) has highlighted as an outcome:

... to develop a comprehensive policy that encourages the incorporation, permanence and stability of the workforce in the countryside, especially of young people and women, as well as the recovery and development of agricultural communities, so that simultaneously with the introduction of new technologies in agriculture, an increase of agricultural production is guaranteed.

Whether young women and girls have benefited from this policy, which aims to boost their participation in agriculture as well as their ownership of land and agricultural inputs, remains to be seen. Concerning financial services, under Cuban law, women have the capacity to enter into contracts, to administer property, and to obtain credit. Private credit according to SIGI (2014) remains mostly non-existent. However, SIGI (2014) noted existing recent reports of a possible microcredit system in Cuba. However, there is no indication as to whether women will be targeted and how widespread any system would be.

The Labour Code 2014

In 2014, Cuba published its new Labour Code, which extends gender equality in employment, protecting women from discrimination.

It brought in some important changes. As mentioned, Cuba did not favour individual entrepreneurial activities, but rather suppressed them through high taxes or suspending the issue of new licences (Wehrli, 2010). The Labour Code of 2014 illustrates the changes that are occurring in labour relations after the economic reforms. For the first time the figure of the ‘employer’ is recognised as a natural or legal person, subject of an employment relationship. At the same time, the diversity of current forms of ownership and management is legitimised in the special provisions for regulating work relationships between persons and with non-state forms. The right to free association of non-state sector workers in trade unions that defend and represent their interests is ratified.

However, challenges remain for women. For example, Echevarría et al. (2018) identified that the Code establishes that training, ‘except for cases of special interest of the state’, is the responsibility of the worker in his or her [sic] free time (article 40) and those who study in higher education will have up to 15 days of training a year. This measure gives greater responsibility to workers in their personal training, which could be detrimental for women who may not be able to take time off to attend training due to their caregiver roles. The author also observed the challenges faced by young people who graduate from technical and vocational education – although the State remains responsible for the placement of university graduates, this does not apply to graduates of technical and vocational education and the Code recommends that they join the non-state sector (unless they are requested to work by State entities).

CEDAW (2013) noted that the previous Code of 1985 did not contain any provision on the principle of equal pay for work of equal value, as well as on sexual harassment in the workplace. It also noted its concern regarding the absence of complaints related to gender-based discrimination and sexual harassment in the workplace. The new Code only establishes equal pay for work of equal value but does not address the previous recommendations.

Decree Law on maternity leave

According to the IPS (2017), based on the latest Cuban population census from 2012, just 49% of children in Cuba lived with both parents, 38% lived only with their mother or their father (most of them with their mother), while 13% were at the time being cared for by other relatives. As a result of this, new regulations to strengthen the maternity rights of working women including both maternity and maternity leave were developed.

Maternity leave is covered by the Decree Law 239 of 2017. The law provides protection to women during pregnancy, as well as antenatal and postnatal paid maternity leave. The state-sponsored leave covers 18 weeks (6 weeks before birth and 12 weeks after) with an economic benefit equal to 100% of the average income that a working woman has received as salary during the previous 12 months, providing that the person has worked at least 75 days in the 12 months preceding. After the postnatal leave, the working mother can choose to join the workforce or to take care of their child and is paid a social benefit of up to 60% of the average wages received in the 12 months prior to the cessation of her work, until the child's first birthday (Álvarez-Tabío Albo, 2017).

Nuñez (2018) noted that maternity leave was extended to grandparents or another family member to provide more flexibility for the family to decide as a unit how best to balance childcare with work and other responsibilities. As she observes: 'This was a top-down (governmental) response to what policy makers were hearing from their base [the people] and is an example of the two working together towards women's advancement' (ibid.: 7).

However, Torres (forthcoming) identified that maternity leave operates in different ways when the woman works in the non-state sector.

Decree Law on paternity leave

The father's right to care for his children is recognised through paid and unpaid leave, preserving his rights as a worker based on the principle of sharing parental responsibility throughout the first year of life (Álvarez-Tabío Albo, 2017). As such, when an infant reaches six months, the family can decide whether the mother or father stays at home to care for him or her. Torres (forthcoming) claims that this policy aims to question gender roles and the sexual division of labour, especially regarding the early stages of the infant's life when the mother takes care of the child. However, the law has not had any significant impact beyond legal recognition. Only 104 families around the country have chosen this alternative (Nuñez, 2018).

One reason could be related to the high costs of public day care centres. The IPS (2017) identified that monthly fees per child at day care centres average 40 CUP (equivalent to \$1.6) but vary depending on the family's income. With differences by region, some private day care costs about 100 CUP (equivalent to \$4) while some exclusive childcare centres in the capital cost more and require payment in US dollars. Other reasons might be related to norms that consider the Cuban woman's role as a mother and as an 'essential framework for the feminine condition ... [A Cuban woman] is still considered in relation to men as dependent ... "being tender, good and devoted to the family", while men inhabit the role of worker, provider, protector, who is independent and holds economic power' (Dominguez, 2011: 13).

Parental and maternity leave

Those who work in the state sector can request unpaid leave to carry out family care activities for a specific period of time. The worker does not lose his or her job, even if he or she does not receive remuneration. However, this does not happen in the non-state labour market, where there is no unpaid leave entitlement, according to Torres (forthcoming). Torres also observes that women in the

non-state sector struggle to take maternity leave as there are no procedures and clarity as to what that might entail.

Filiation and parent–child relations

The Civil Registry Law establishes that there are no longer differences between legitimate and illegitimate children, and for purposes of parent–child rights or succession, all are legitimate. Filiation is established by juridical acts of registry and recognition of the child, whether voluntary or forced, and in the latter case is imposed by courts, even regarding a child conceived in a casual relationship (Álvarez-Tabío Albo, 2017). However, the right of the mother to impute paternity has corresponding rights for the father, such as the right to challenge such as imputation in a judicial process within a year of registration.

Project of the new Republic of Cuba Constitution

Article 45 states that women and men enjoy equal rights and responsibilities in the economic, political, cultural, social and family spheres. The same article stipulates that the State encourages the full participation of women in the development of the country and protects women against any type of violence.



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