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Practices, Dilemmas and Causes of Chile's Population Aging Countermeasures— Also on the Enlightenment to China

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Abstract— *As a pioneer economy in global pension privatization reform, Chile is currently in the transition period of deep population aging. The adaptability of the original individual account pension system to the labor market structure continues to decline, and problems such as old-age poverty and social exclusion have become increasingly prominent. Carrying out relevant country-specific research has clear practical necessity. Based on the social exclusion theory and the multi-pillar old-age security analysis framework, this paper adopts policy text analysis and data research methods, combines official Chilean statistical data and two authoritative aging survey datasets, systematically sorts out Chile's aging response policy system, and analyzes the implementation dilemmas and underlying causes of the policies. The study finds that Chile has built a four-in-one policy framework covering legal protection, pension system, elderly care services and governance support. However, it still faces dilemmas such as low public institutional trust, unbalanced elderly security structure, multidimensional social exclusion of the elderly, and significant group security gaps. The causes stem from the multiple superposition of institutional path dependence, political fragmentation, fiscal constraints and age stereotypes. This research can provide Latin American perspective experience and policy enlightenment for China to improve its aging governance system and optimize the elderly security system.*

Keywords— ***Chile, population aging, dilemma, cause, countermeasures***

I. INTRODUCTION

In February 2019, according to local Chilean media reports, a 94-year-old man in the Chilean capital Santiago shot and killed his 86-year-old wife before committing suicide. According to his suicide note, the reason for the suicide was that the two elderly people were living in

extreme financial hardship and had to rely on their children for financial support. Finally, they chose to end their lives because they could no longer bear to continue to be a burden to their children. Such incidents are not isolated cases. According to statistics from the Chilean Ministry of Health in 2022, the suicide rate among people aged 70 and above in Chile is the highest across all age groups, and the suicide mortality rate among men aged 80 and above reaches 39.5 per 100,000 people, making elderly men the group with the highest suicide risk. Cross-national comparative studies further show that the suicide mortality rate of elderly men in Chile is at a relatively high level in Latin America and the Caribbean. Taking men aged 75 and above as an example, the suicide mortality rate in Chile reached 38.5 per 100,000 people in 2015, ranking only below Cuba and Uruguay among the 8 countries compared (Cárdenas, 2021, p.18). In addition, the 8th National Survey on Social Inclusion and Exclusion of the Elderly in Chile shows that the public's overall evaluation of the country's aging response work is relatively low.

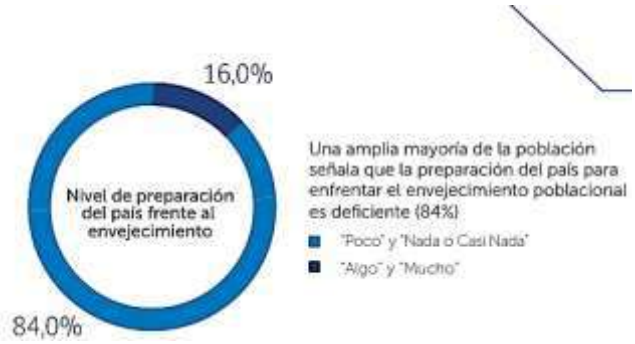

Fig.1 National Aging Response Capacity Evaluation

Source: The 8th National Survey on Social Inclusion and Exclusion of the Elderly in Chile, 2025

However, as the fifth largest economy in Latin America, Chile ranks among the top in the region in terms of per capita gross domestic product, and it is the first country in the world to carry out pension system reform, with remarkable reform results that many countries have competed to follow. Nevertheless, there is a clear gap between the institutional reputation and the actual security effect. According to data from Chile's Pension Regulator, the average monthly pension received by retirees in Chile in March 2019 was about 259,000 pesos. As of March 2026, the average monthly pension for normal retirement age in Chile has only slightly increased to 261,000 pesos. Among them, the average pension of the most widely adopted Retiro Programado (Programmed Withdrawal) method is only about 169,000 pesos, which is below the national minimum wage standard. The quality of life of many elderly people cannot be guaranteed, which has further triggered social dissatisfaction with the pension system and the government's aging response measures.

At present, Chile is in an irreversible transition of deep population aging, and fundamental changes have taken place in the population age structure and family form, which constitutes the long-term demographic background for pension policies. According to the 2024 population census data from the National Institute of Statistics of Chile, the proportion of the population aged 65 and above in the total population has reached 14.0%, more than doubling from 6.6% in 1992; during the same period, the proportion of the population aged 14 and below dropped from 29.4% to 17.7%, and the population structure shows a clear aging trend. According to statistics from Chile's National Service for the Elderly (SENAMA) in 2025, the population aged 60 and above in Chile is growing steadily, reaching about 3.995 million in 2025; it is expected to approach 7 million (6.958 million) by 2050, and the pressure of population aging will continue in the long run. At the same time, the family structure has also changed simultaneously: 11.6% of all households in the country are composed entirely of people aged 65 and above, and the average household size has shrunk from 4 people in 1992 to 2.8 people in 2024, which has continuously weakened the supporting function of traditional family elderly care. This long-term transition will continue to exert pressure on policies such as the pension system, public healthcare, long-term care and

elderly employment.

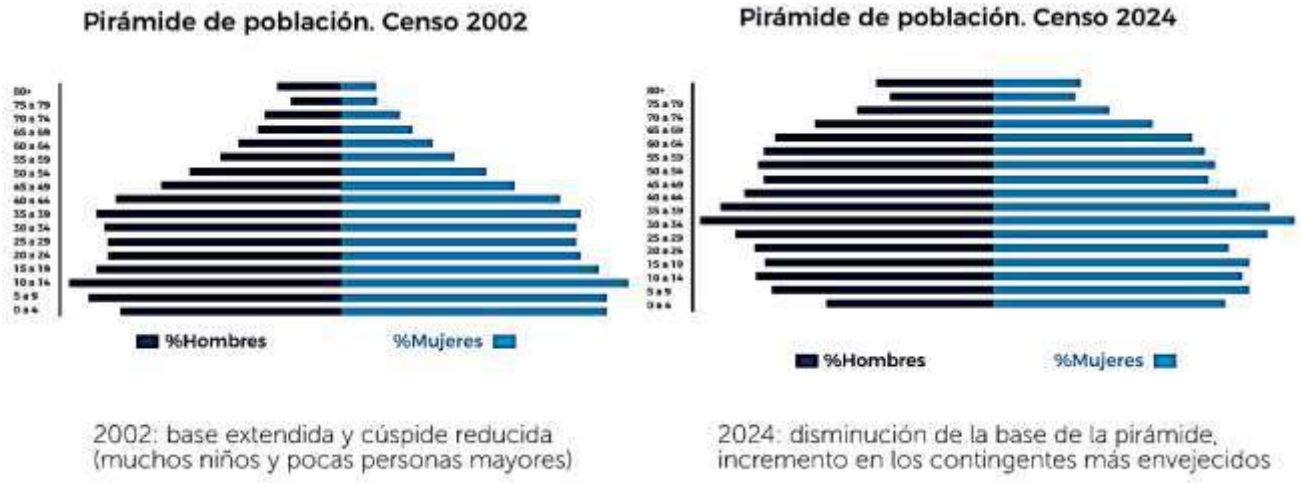

Fig.2 Population Pyramid Structure from the 2002 and 2024 Censuses

Source: The 8th National Survey on Social Inclusion and Exclusion of the Elderly in Chile, 2025

Guaranteeing the rights and interests of the elderly group and improving their quality of life are of great significance to Chile's social stability and long-term development. The 2023 Latinobarómetro public opinion survey shows that compared with young people who show support for authoritarianism or indifference to the political system, the elderly in Chile have higher recognition and maintenance of democratic ideas and systems. A stable elderly security system is an important foundation for maintaining social, political and stable operation. At the same time, the continuously expanding elderly group is not only the key target of people's livelihood security, but also a potential force for social participation, consumer market and economic development. The effectiveness of aging governance is directly related to social equity and long-term development potential.

Facing the intensifying aging pressure, successive governments including those of Bachelet, Piñera, Boric and Kast have adjusted the elderly care system and aging policies: from the establishment and improvement of non-contributory safety-net pensions, to the legislative promotion of the mixed pension system, and then to the legislative exploration of the long-term care system and comprehensive elderly rights protection. Chile's aging policy system has gradually evolved from fragmentation to systematic institutionalization. However, restricted by multiple factors such as economic fluctuations, party game and accelerated population aging, the overall progress of the elderly care cause is relatively slow, and there is still a considerable gap between the policy implementation effect and public expectations. In particular, the fiscal austerity policy implemented by the Kast government after taking office in 2026 has aroused widespread social concerns about cuts in welfare expenditures such as the Universal Guaranteed Pension, which further increases the uncertainty of the development of the elderly care cause.

As a pioneer of pension privatization reform and a typical sample of deep aging, Chile's practical experience and practical dilemmas in aging policies have strong reference value. This paper focuses on analyzing the implemented aging policies and measures in Chile, including legal protection, policy formulation, social security, healthcare, etc., and explores the problems and their causes encountered in the current development of

Chile's elderly care cause. On the one hand, it can supplement the country-specific studies on aging governance in Latin America, and on the other hand, it can provide cross-national experience reference and policy suggestions for China to cope with the challenge of population aging, improve the elderly security system and enhance aging governance capacity.

II. CHILE'S MEASURES TO COPE WITH POPULATION AGING

Chile protects the rights and interests of the elderly in the fields of welfare, health, family and social integration through legislation. In 2002, Chile promulgated Act No. 19828 to establish the National Service for the Elderly, ensuring that the elderly in Chile can enjoy appropriate social care, support and services. In 2010, Act No. 20427 was passed to incorporate the issue of elder abuse into national law. In 2015, Act No. 20864 was promulgated, which exempted retirees aged 65 and above from paying health insurance premiums, simplified the procedures for receiving pensions and other benefits, and provided other welfare benefits. In 2021, Act No. 20375 was passed to incorporate palliative care as a universal right, providing hospice care for patient groups dominated by the elderly. In 2022, Act No. 21419 was promulgated, which replaced the old Basic Solidarity Pension with the Universal Guaranteed Pension (PGU) to improve the level of pension benefits. In March 2025, Chile officially promulgated Act No. 21735 to establish a new mixed pension system and contributory social insurance, and improve the Universal Guaranteed Pension. In February 2026, Act No. 21805 was passed, which for the first time established the "right to care" as a fundamental civil right at the national level, filling the top-level institutional gap in the elderly care service system. In June 2026, Act No. 21822 was promulgated, which established a comprehensive basic law for the cause of aging in Chile, replacing the previous scattered provisions on elderly protection. On the whole, Chile's aging legislation follows the evolution path from single-item regulation to system construction. In the early stage, it focused on short-board supplement contents such as institutional establishment and special rights protection. After 2025, it gradually expanded to deep institutional fields such as pension structural reform, long-term care system and comprehensive rights protection, with legislative density and institutional level improving simultaneously.

In terms of policies, the national government has put forward reforms and innovations in response to the increasingly prominent aging social problems. The privatized pension system with the individual account system as the core is no longer adapted to the current economic development status and labor market structure in Chile. During his term of office, President Boric promoted the completion of the pension structural legislation, created a mixed pension system, focused on improving the pension level, and jointly funded by the state, employers and workers based on the principle of shared social security, so as to solve the problems of the existing pension system. The Boric government once included the postponement of the statutory retirement age in the initial concept of reform, but due to the political differences in the Congress and large social controversies, the mandatory delayed retirement plan was not finally included in the official legislation. However, based on the actual changes in the labor market, the phenomenon of voluntary delayed retirement has gradually emerged in Chile. In addition, the National Elderly Fund was established to fund projects conceived, planned and carried out by elderly organizations through competitive grants. Nevertheless, the Kast government, which took office in March 2026, has implemented a fiscal austerity policy, which adds new uncertainties to the scale of elderly welfare expenditure and the implementation rhythm of existing reforms. On the whole, the core main line of Chile's elderly care policies is to revise and supplement the traditional privatized pension model, and the reform direction of introducing employer responsibility and public

safety net conforms to the development trend of multi-shared security under deep population aging. However, affected by multi-party political games and party rotation, the policy continuity is insufficient, and the policy shift of fiscal austerity also makes the implementation rhythm and security intensity of existing reforms face new variables, and the policy expectation stability of elderly security needs to be further strengthened.

In terms of social security, relevant institutions are set up relying on platforms such as the government, research centers, communities and hospitals, and with the intensive advancement of aging legislation in recent years, the system architecture has been continuously improved. On the government side, institutions such as the Pension Regulator and the National Service for the Elderly (SENAMA) have been established; on the research center side, the University of Chile has set up the Chilean Observatory on Aging and Social Wellbeing of the Elderly, while the Pontifical Catholic University of Chile, in cooperation with Banco Los Andes, released the 6th "National Survey on Quality of Life in Old Age" in 2022. The purpose of this survey is to study and evaluate the quality of life of the elderly population in Chile, so as to understand their needs and challenges. Relying on communities and hospitals, long-term elderly care institutions such as elderly residences, nursing homes and welfare homes, geriatric hospitals and day care centers have been established. On the whole, this support system with the participation of multiple subjects not only guarantees the executive supervision capacity of elderly security and welfare services through full-time administrative institutions, but also realizes dynamic tracking of the living status and needs of the elderly through academic research in universities. At the same time, it builds a physical carrier for service implementation relying on primary medical care and community networks, providing a full-chain support of implementation, monitoring and services for aging governance. However, the current service supply side is still dominated by scattered institutional sites, and a continuously connected care service network integrating home, community and institution has not yet been formed. The synergy between different subjects and the overall service efficiency of the system still need to be further improved.

III. PRACTICAL DILEMMAS AND CAUSE ANALYSIS OF POLICY IMPLEMENTATION

Based on the empirical data from the 2025 "8th National Survey on Social Inclusion and Exclusion of the Elderly" released by Chile's National Service for the Elderly and the 2022 "6th National Survey on Quality of Life in Old Age" from the Pontifical Catholic University of Chile, combined with the actual operation of policies, this chapter systematically sorts out the practical dilemmas in the implementation of Chile's aging policies from five dimensions: social environment impact, security system efficiency, group fairness, service supply-demand matching, and health policy adaptation, and analyzes the underlying structural causes.

3.1 Policy Effectiveness is Disturbed by Social and Political Environment, and Institutional Trust Remains at a Long-term Low Level

The implementation effect of Chile's aging policies has always been highly bound to the social and political situation, and the stability and continuity of policy effectiveness are insufficient. According to the 6th National Survey on Quality of Life in Old Age in 2022, before 2016, with the government's reforms on social security systems such as medical care and pensions, the satisfaction of the elderly with their quality of life showed an upward trend. However, with the outbreak of nationwide protests in Chile in 2016, the satisfaction of the elderly with their quality of life showed a downward trend, and rebounded after 2019 (see Figure 3). Therefore, social unrest will have a certain impact on the implementation effectiveness of aging

measures.

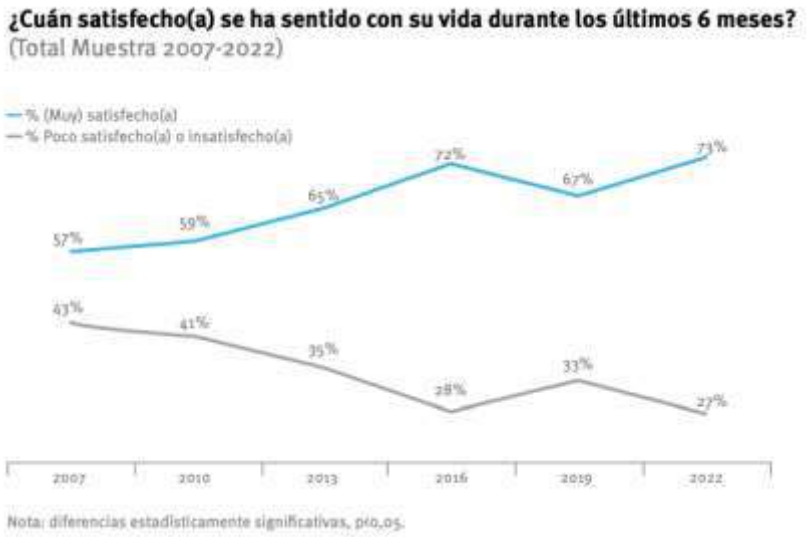

Fig.3 Survey on Chilean Elderly's Satisfaction with the Quality of Life in Old Age

Beyond short-term social shocks, the public's institutional confidence in aging governance has shown a long-term downward trend. Data from SENAMA's 2025 survey shows that the proportion of people who believe that the country is insufficiently prepared to cope with population aging has continued to rise from 59.5% in 2008, remained above 75% after 2011, and reached a historical peak of 84% in 2025; at the same time, 81.1% of respondents believe that politicians and public decision-makers rarely or never take the actual needs of the elderly into account in the process of policy formulation.

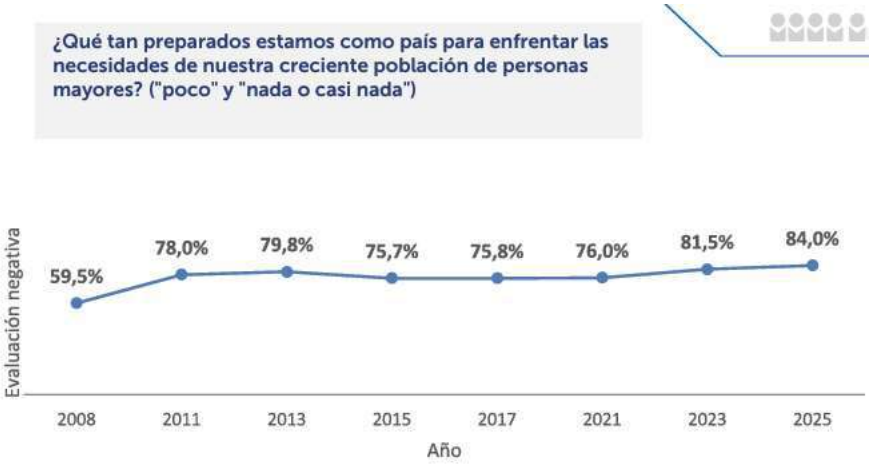

Fig.4 Proportion of People Who Believe the Country is Insufficiently Prepared for Population Aging

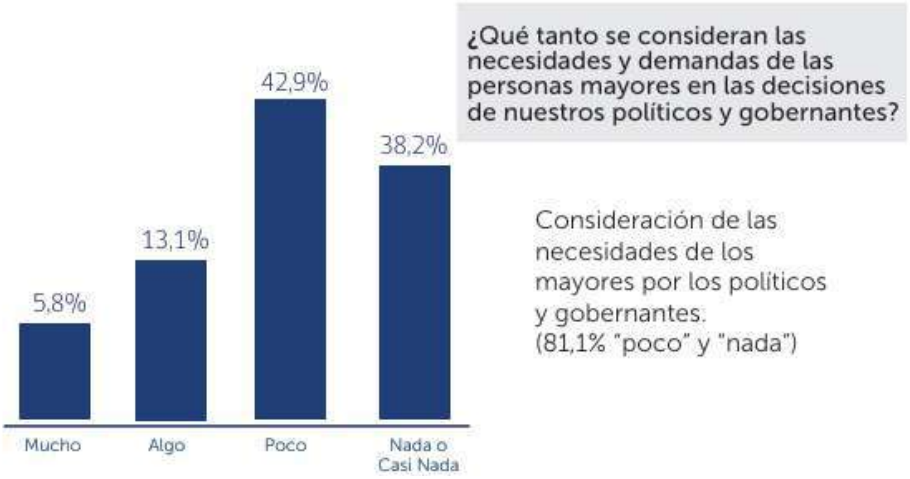

Fig.5 81.1% of Respondents Believe That Politicians and Public Decision-makers "Rarely" or "Never" Consider the Actual Needs of the Elderly When Formulating Policies

This situation results from the superposition of two factors. In the short term, social unrest will directly interrupt the continuous advancement of policies, crowd out the space for people's livelihood investment, and weaken the actual effect of policy implementation. In the long run, the accelerated evolution of population aging and the lag of policy supply form a continuous contrast, coupled with the swing of policy direction brought about by party rotation, which makes the public's expectation of aging governance fail to meet the reality for a long time, and it is difficult for institutional trust to accumulate effectively.

3.2 The Pension System Reform Process is Slow, and There are Structural Shortcomings in the Security System

With the improvement of people's living conditions and the extension of life expectancy, the demand for pensions is growing rapidly. However, threatened by inflation and the decline of commodity prices in the international market, Chile's economy has cooled down significantly, and there is a large gap between the rich and the poor in Chile, which leads to a large income distribution gap in pensions, and the pensions of most elderly people in Chile can only meet their basic daily needs (see Figure 6).

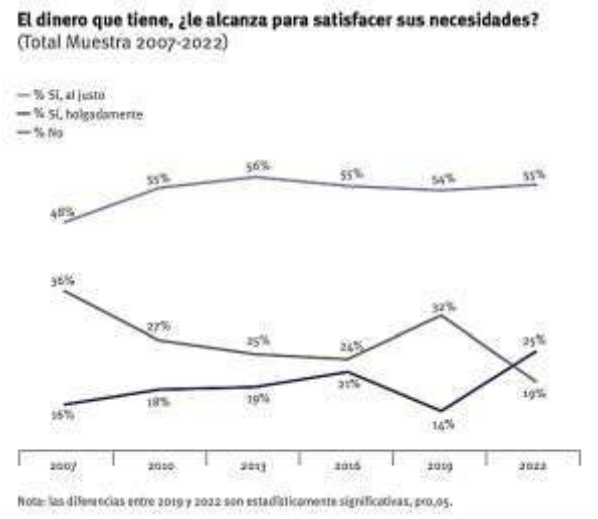

Fig.6 Survey on Whether the Income of the Elderly in Chile Can Meet Their Needs

In addition to pensions, the main income sources of the elderly in Chile include government subsidies, work or business, and financial support from family members (see Figure 7). Since 2019, the proportion of government subsidies in the income sources of the elderly has been increasing, while the proportion of pensions such as retirement wages and private pension plans has been declining. This phenomenon indicates the change of the labor market structure, and the supporting force of the contributory system is weakening. The 2025 survey by

SENAMA further confirms the coverage gap of the system from the contribution side: currently, only 35.2% of the working-age population participates in mandatory pension contributions, and only 24.8% carries out voluntary pension savings, and a large number of self-employed people and non-standard employment groups are outside the system. A large number of self-employed people and flexible employment groups in the informal sector have emerged in Chile in recent years, which shows that pensions alone are no longer sufficient to support the elderly, and additional government subsidies are required.

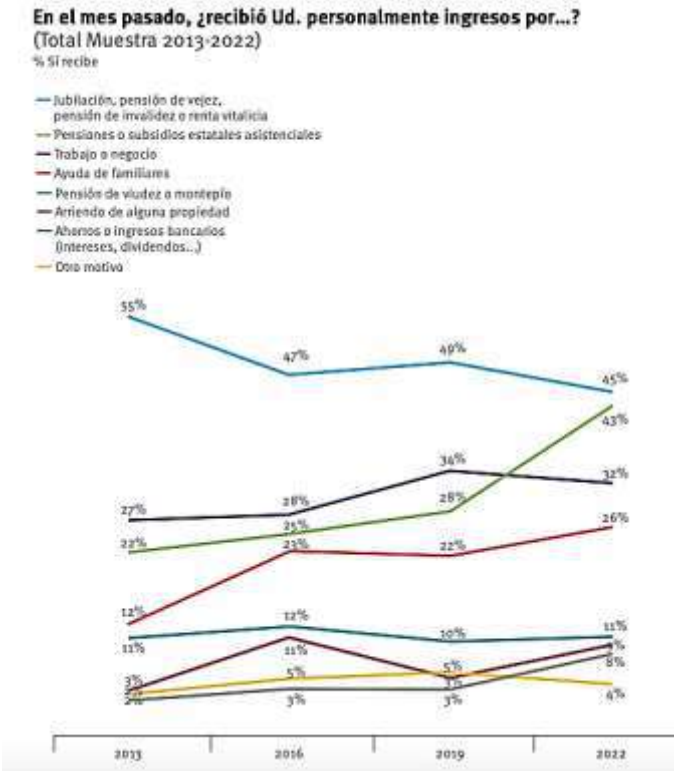

Fig.7 Survey on Income Sources of the Elderly in Chile

In addition, due to the limited pensions and government subsidies, the elderly in Chile spontaneously extend their retirement age or choose to re-enter the labor market after retirement (see Figure 8). Therefore, the protection and supervision of the elderly labor market and the rights protection of elderly workers need to be further emphasized by the government.

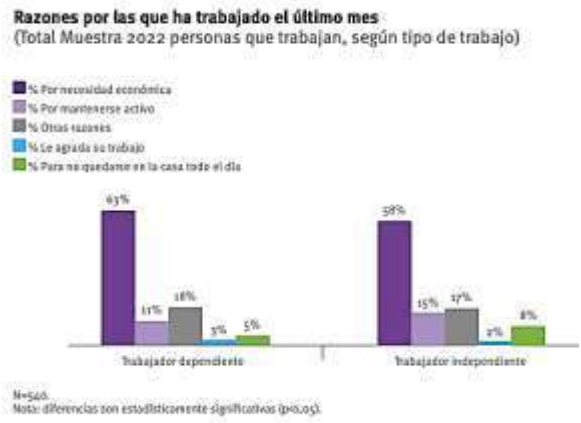

Fig.8 Survey on Reasons Why the Elderly in Chile Work

The root of this dilemma lies in the resonance between institutional path dependence and the change of labor market structure. On the one hand, after more than 40 years of operation, the original individual account system has formed a solidified interest pattern, and systematic reform faces multiple games, resulting in a slow promotion rhythm, and the treatment improvement cannot be implemented quickly. On the other hand, the informalization trend of the labor market continues to weaken the insurance participation foundation of contributory pensions, and economic downturn and fiscal constraints further compress the space for treatment adjustment, making the gap between the system's security capacity and the needs of the elderly group exist for a long time.

3.3 Policy Gains Show Obvious Group Differentiation, and the Equity of Elderly Resource Allocation is Insufficient

Compared with male groups, groups with higher education and groups in formal employment, female groups, groups with basic education and groups in non-formal employment have lower satisfaction with the quality of life in old age (see Figure 9), which to a certain extent reflects the uneven distribution of elderly care resources, and measures need to be taken to further tilt towards vulnerable

groups.

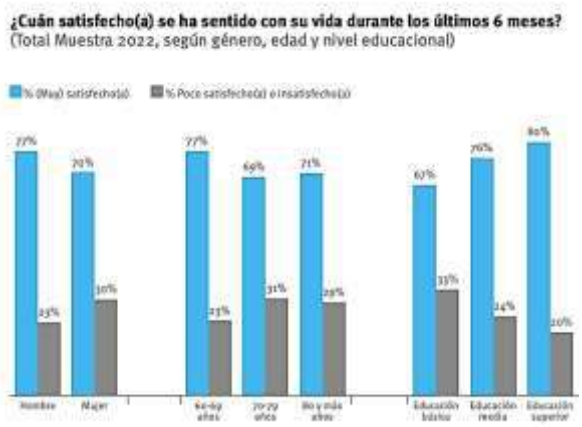

Fig.9 Survey on Different Groups' Satisfaction with the Quality of Life in Old Age

This differentiation is essentially the extension and amplification of original social inequality in the elderly care field. The contributory pension system is based on formal employment, which naturally benefits high-income and stably employed groups more. Women are at a disadvantage in the stage of pension accumulation due to factors such as career interruption and heavy family care burden; elderly care service resources are more concentrated in urban and middle-high-income groups, and the accessibility of elderly groups in rural and low-income areas is insufficient. The institutional design fails to make up for the structural differences, but forms a superposition effect with the existing social inequality, which further widens the security gap between different groups.

3.4 There is a Mismatch Between Supply and Demand of Elderly Care Services, and the Recognition of Socialized Care is Relatively Low

In the survey on whether the elderly in Chile participate in or are willing to participate in day care centers, only in 2022, more than half of the elderly are unwilling to participate, and compared with 2019, their willingness to participate in such services has decreased significantly (see Figure 10). According to statistics, 55.8% of the elderly over the age of 75 prefer to stay at home rather than enter a nursing home. This trend is affected by many factors such as the setting and charging of elderly care institutions, the economic status of the elderly, family factors, health factors, traditional culture, and the service quality of professional personnel.

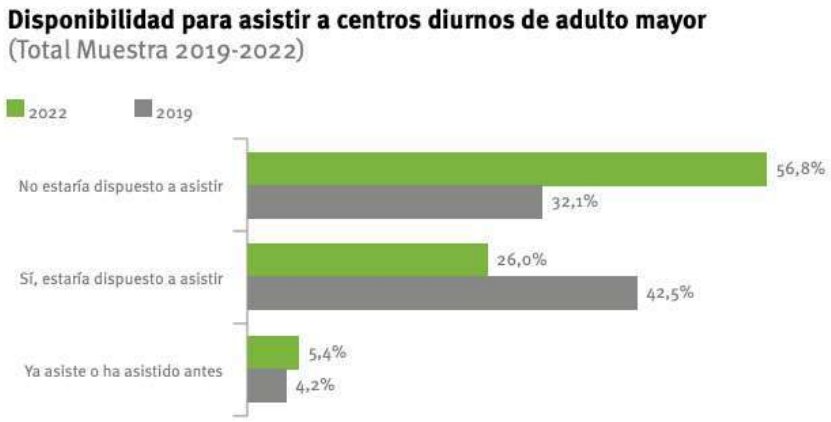

Fig.10 Survey on Chilean Elderly's Acceptance of Day Care Centers

At the same time, the supply gap of care services has formed a social consensus. The 2025 survey by SENAMA shows that 82% of respondents believe that the care and support officially provided for the elderly with functional loss and major chronic diseases are seriously insufficient.

The formation of supply-demand mismatch results from the two-way effect of demand-side preferences and supply-side shortcomings. At the demand level, influenced

by traditional cultural concepts and family elderly care habits, the elderly in Chile generally have a strong willingness to age in place, and there is a cultural threshold for their acceptance of socialized care services. At the supply level, elderly care institutions generally have problems such as high charges, uneven service quality and insufficient professional care capabilities. The long-term shortage of home-based and community care services makes it difficult to match the diverse needs of the elderly, which further reduces the recognition of socialized care among the elderly group.

3.5 Health Policies are Not Well Adapted to Aging, and Mental Health and Age Discrimination Problems are Prominent

Chile's aging policies have long taken economic security such as pensions as the core, and the attention to elderly health, especially mental health, is relatively insufficient. The adaptation degree of medical and public health policies to aging needs to be improved. Relevant studies in 2026 confirmed that the suicide risk of the elderly is closely related to structural factors such as poverty, loneliness, rural living environment, fragile care system, fragmented medical services and age discrimination in the medical field. The 2025 survey by SENAMA reveals the widespread existence of age discrimination at the social and cultural level: 58.4% of respondents believe that the mass media mainly presents negative images of the elderly, and the stereotype that "aging is equivalent to disability and dependence" is deeply rooted in the society. This cultural prejudice penetrates into the medical service scenario, which aggravates the age unfriendliness of health services.

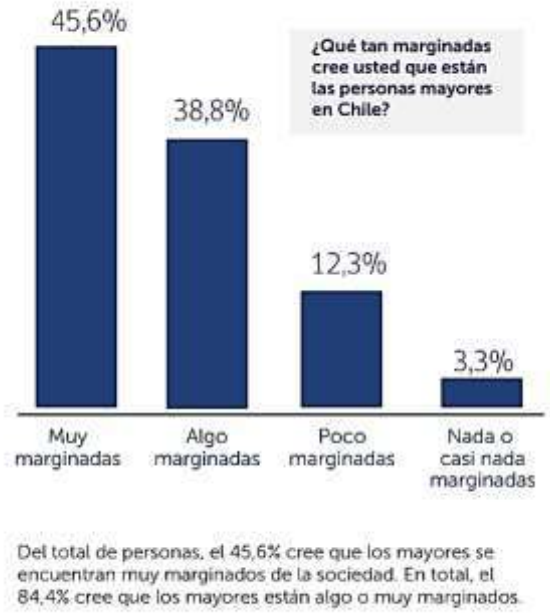

Fig.11 45.6% of Respondents Believe That the Elderly Are "Very Marginalized" in Chilean Society, and a Total of 84.4% of People Believe That the Elderly Are "Somewhat or Very Marginalized"

The core of this problem lies in the structural imbalance of the focus of aging governance. Policy resources have long been tilted towards economic security, and the construction of elderly mental health, psychological support and suicide prevention system lags behind. At the same time, the widespread age stereotypes at the social level are difficult to dispel in a short period of time, which makes medical services and public health policies lack a sufficient elderly-friendly perspective, and the psychological demands, personal dignity and independent rights of the elderly cannot be fully responded to.

On the whole, the dilemmas faced by Chile's aging policies are not partial problems in a single field, but structural and multidimensional old-age social exclusion. The underlying causes can be summarized into three deep-seated contradictions: first, the public's lack of trust in the efficiency of the use of elderly care fiscal funds, which forms a two-way restriction between tax willingness and

fiscal supply; second, the public's long-term low institutional confidence in aging governance, and the policy supply has long been mismatched with the speed of population aging; third, the deeply rooted social stereotype of "dependent old age" restricts the promotion of active aging. The three are intertwined and mutually causal, which jointly restricts the full play of policy effectiveness.

IV. ENLIGHTENMENT FOR CHINA'S MEASURES TO COPE WITH POPULATION AGING

Chile's current measures to cope with population aging and the problems encountered in the implementation process have very important reference value for China's increasingly growing elderly population and increasingly severe pension payment problems.

First, China should ensure the endogenous driving force of economic development, and strengthen economic and trade exchanges with countries around the world relying on the Belt and Road Initiative, so as to lay a solid economic foundation for the pension system reform.

Second, combined with the situation of China's labor market, build a diversified pension system, encourage individuals to use reserve accounts, and provide more comprehensive elderly security to meet the needs of people at different levels.

Third, on the premise of ensuring the sustainability of funds, appropriately increase the pension level in light of the actual situation, so as to ensure that the retirement wages of the elderly can meet their living needs.

Fourth, conduct a comprehensive investigation on the population structure and labor market, gradually postpone the retirement age, and strengthen the supervision and protection of the elderly labor market.

Fifth, attach importance to the feedback and attitudes of different gender groups, groups with different education levels and groups in different occupations towards the implementation of aging policies, and carry out communication and adjustment in a timely manner.

Sixth, improve the medical system serving the elderly, attach importance to the development of health care and physiotherapy undertakings. Universities can widely offer geriatric care majors and expand the enrollment of relevant majors, improve the treatment and salary of professional nursing staff, and strengthen the supervision of elderly care nursing staff by the government and employers, so as to enhance the elderly's understanding and trust in elderly care institutions. China should not only build "elderly medical services", but also build an "elderly-friendly medical system", attach importance to elderly mental health and anti-age discrimination, and promote the construction of active aging.

Seventh, set up universities for the elderly, increase social participation opportunities and community support, so as to promote the social interaction and quality of life of the elderly and reduce their sense of loneliness and isolation. Finally, advocate exchanges and mutual learning among countries in the field of elderly care, encourage research and investigation, and promote the exchange of elderly care policies.

V. CONCLUSION

As one of the first countries to enter deep population aging in Latin America, Chile has gone through more than 20 years of policy exploration, and has built an aging policy framework covering legal protection, pension system, elderly care services and rights support. Through the 2025 mixed pension reform and the long-term care system and comprehensive elderly protection legislation in 2026, it has promoted the system to develop in the direction of systematization and inclusiveness. However, restricted by multiple factors such as privatized institutional path dependence, political fragmentation, fiscal constraints and age cultural prejudice, Chile's aging governance still faces

deep-seated dilemmas such as insufficient institutional trust, unbalanced security structure, multidimensional social exclusion and significant group gaps, and problems such as old-age poverty, elderly suicide and lack of care have not been fundamentally solved.

Chile's practice shows that population aging is a systematic challenge involving economy, society and culture. Relying solely on market-oriented pension reform or fragmented welfare policies cannot effectively cope with it. Only by building a comprehensive governance system with complete laws, shared responsibilities, continuous services and inclusive culture can we realize the fairness and sustainability of elderly security. In the process of promoting the active aging strategy, China can fully learn from the experience and lessons of Chile, base itself on its national conditions, improve the multi-pillar security system, improve the long-term care services, attach importance to elderly mental health and anti-discrimination, and promote the modernization of the aging governance system and governance capacity.

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