

## SOCIAL CONNECTEDNESS OF THE OLDER ADULTS IN NON-URBAN SETTINGS: AN EMPIRICAL EVIDENCE

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### Abstract

*The study was conducted to unveil social connectedness of the older adults in non-urban societies in Ghana, and the ecological and social inclusion theories underpinned the study. The descriptive cross-sectional survey was undertaken based on the positivist school of thought. Older adults who were 60 years or more, participated in the study. Older Adults' Social Connectedness Questionnaire (OASCQ) was designed to gather data to answer the research questions and test the hypothesis. Frequency counts and percentages, mean and standard deviation and independent samples t-test were the analytical tools employed for the data analysis. The study unveiled, inter alia, that the older adults tend to enjoy moderate level of social connectedness and the major groups of people they frequently socially interact with are relatives, religious group members, neighbours and friends. The study also unveiled that religious activities, phone calls, cultural and social activities are the principal conduits for the older adults' social interaction with significant others. Finally, the study established a difference in the level of social connectedness of the male and female older adults. It is reckoned that the older adults in the rural settings need more and intensive social interactions to serve as impetus for longevity.*

**Keywords:** Older adults, social connectedness, social interaction, means of social interaction, non-urban setting

### Introduction

Although all people need to enjoy social life via good social interactions with significant others in their lives, the elderly need it the more. As Holt-Lunstad, Smith and Layton (2010)<sup>1</sup> put it, all age groups reckon the essence of feeling socially connected, yet, it is more important for older persons. This is because social connectedness serves as a protective mechanism for their overall health (Saravanakumar Garrett, Wissan, Montayre & McBride, 2021)<sup>2</sup>. In buttressing this point, Fratiglioni, Pailard-Borg and Winblad (2004)<sup>3</sup> posited that social interaction has effects on the elderly's health and wellbeing

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<sup>1</sup> Holt-Lunstad, J., Smith, T. B. & Layton, J. B. Social Relationship and Mortality Risk: A Meta-analytic Review. *PLoS Med*, (2010), 7(1).

<sup>2</sup> Saravanakumar, P., Garrett, N. K., Wissan, K. V., Montayre, J. & McBride, K. Social Connectedness and Self-Perceived Health of Older Adults in New Zealand. *Health and Social Care in the Community*, (2021), 1-10.

<sup>3</sup> Fratiglioni, L., Pailard-Borg, S. & Winblad, B. An Active and Socially Integrated Lifestyle in Late Life Might Protect Against Dementia, *The Lancet Neurology*, 3(6), (2004), 343-353.

while Horner and Boldy (2008)<sup>4</sup> contended that social connectedness affects the wellbeing of older people. For older adults, social connectedness is an issue and a feeling demonstrated as the kind which permits them to feel physically active and access services in a community supported by family and neighbours or paid attention to by government and local administration concerning their needs (Sato, 2020)<sup>5</sup>. It has also been discovered that social connectedness promotes activeness of older persons (Franke, Tong, Ashe, Mckay & Sims-Gould, 2013)<sup>6</sup>. Holt-Lunstad, Smith and Layton (2010)<sup>7</sup>, on their part, assert that people who enjoy adequate social relationships possess greater chances of surviving as opposed to those with scarce social relationships. Consistent with these assertions, it has been unraveled that social connectedness and participation are related to higher survival rates and greater sense of value and inclusion (Gilmour, 2012)<sup>8</sup>. Silverman (2021)<sup>9</sup> also believes that social connectedness has the potency to serve as a protective factor against psychological disorders and enhances psychological distress tolerance and improves individuals' overall sense of self. Social connectedness is thus reckoned to be very essential for older people because they change through an intricate and complex life stage, which may have unfavourable impact on their social relations and consequently their wellbeing (OECD, 2019)<sup>10</sup>. Social connectedness is undoubtedly linked to prolonged life and strong mental health (Mountain, 2018)<sup>11</sup>. Although adequate relationship increases older adults' survival chances as opposed to those who do not it, a study discovered that women's close associations tend to be more intimate and supportive and that loneliness was particularly problematic for women in retirement (Barnes & Parry, 2004)<sup>12</sup>.

### Literature Review

Social connectedness is said to be enjoyed in friendly communities. Hence, the communities we live in ought to be congenial; especially, there should be opportunity for good interpersonal relationships among the inhabitants. The elderly need aged-friendly communities to enable them enjoy healthy living and consequently longevity as older persons are at risk of social cessation (Smith & Victor, 2019)<sup>13</sup>. An elderly-friendly

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<sup>4</sup> Horner, B. & Boldy, D. P. The Benefit and Burden of 'Ageing-In-Place' in Aged Care Community, *Australian Health Review*, 32(2), (2008), 356-365

<sup>5</sup> Sato, M. Understanding Social Connectedness amongst Older People in Low-Income and Middle-Income Countries Belonging to Moldova: An Exploratory Case Study. *Samuel Centre for Social Connectedness*, (2020), 1-33.

<sup>6</sup> Franke, T., Tong, C., Ashe, M. C., Mckay, T. & Sis-Gould, J. The secrets of highly active older adults. *Journal of Ageing Studies*, 27(4), (2013), 398-409.

<sup>7</sup> Holt-Lunstad, et.al. (2010), *Op.cit.*

<sup>8</sup> Gilmour, H. Participation in Social Activities by the Aged in Canada. *Reports on the Aged*, 23(4), (2012), 3-13.

<sup>9</sup> Silverman, A. B. *Social Connectedness, Community Participation and Health*. Ph.D. Dissertation. (Montana: University of Montana, 2021).

<sup>10</sup> OECD, *OECD Measurement of Social Capital Project and Questionnaire Databank*. (Washington: OECD, 2019).

<sup>11</sup> Mountain, G. Social Connectedness in Older Persons: Who is Responsible? *The Lancet Public Health*, 3(9), (2018), 412-413

<sup>12</sup> Barnes, H & Parry, J. Renegotiating Identity and Relationship: Men and Women's Adjustments to Retirement. *Ageing and Society*, 24, (2004), 213-233

<sup>13</sup> Smith, K. J. & Victor, C. Typology of Loneliness, Living Alone and Social Isolation. *Ageing and Society*, 39(8), (2019), 1709-1730.

community is where “people can live their entire lives, if they so desire, rather than having to relocate and lose their social capital” (Yen, Barker, & Martinez, 2012, p.6)<sup>14</sup>. As age is not only a physical process but also a psycho-social process embedded in the community and cultural setting (Li & Au, 2019)<sup>15</sup>, so as people age, they ought to have a friendly-setting to reside in. This opportunity would aid in prolonging people’s life on earth. It needs to be recognised that the world has been experiencing increase ageing population and in 2015 it was predicted that the world’s population over 60 years may almost double from 12% to 22% by the year 2050 (WHO, 2015b)<sup>16</sup>. This tells how relevant we need to study issues such as social connectedness that have the propensity to prolong older persons’ lives.

Studies have been conducted on social interactions, connectedness and activities of older adults in elderly-friendly communities. For instance, Yen, Barker and Martinez (2012)<sup>17</sup> explored how older people perceive and navigate their neighbourhood as well as the implications of social interactions and activities for their health. The qualitative study disclosed that the older people valued mobility, active lives and social connectedness. Similarly, a study of the younger and older adults to unearth the importance of social relationship and social connectedness in creating and maintaining elderly-friendly communities for older people in the United States of America came out with three important themes; social reciprocity, meaningful interactions and structural needs and barriers. The outcomes of the study strengthened the importance of social connectedness in an elderly friendly community (Emlet & Mocerri, 2012)<sup>18</sup>. The relevance of social connectedness for older adults triggered a recommendation by O’ Rourke, Collins and Sidani’s (2018)<sup>19</sup> after a scoping review of adults’ social connectedness with significant others that there is the need to promote social connectedness for this category of people in the society. Lai, Lein, Lau and Lai (2016) observed that social connectedness has the potential to mediate the link between social environment and active ageing.

Studies have also unearthed that older adults immensely recognise aged-friendly communities as pivotal in inducing social interactions and connectedness (Cho & Kim, 2016)<sup>20</sup>. In addition, Ming-Ming, Shi-Ying, Siok-Hwa and Ming-Ling (2016) undertook a study to test the eight key features of WHO’s guidelines to aged-friendly community. The study found out, among other things, that community support was significant in creating an aged-friendly environment. It also found significant positive relationship between aged-friendly environment and active-ageing. The relationship was mediated by social connectedness. The findings of the study then bolster the essential role that social

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<sup>14</sup> Yen, I. H., Barker, J. C. & Martinez, A. D. Older People and Social Connectedness: How Place and Activities Keep People Engaged. *Journal of Ageing Research*, (2012), 1-10.

<sup>15</sup> Li, W. & Au, A. Successful ageing and community. In *Sage Handbook of Applied Social Psychology*, (Eds.), K. O’Doherty and B. Darrin. (London: Sage Publication, 2019).

<sup>16</sup> WHO, *Measuring age-friendliness of cities: A guide to using core indicators*. (Geneva: WHO, 2015b)

<sup>17</sup> Yen, *Op.cit*

<sup>18</sup> Emlet, C. A. & Mocerri, J. T. The Importance of Social Connectedness in Building Age-Friendly Communities. *Journal of Ageing Research*, 21(2), (2012), 351-360.

<sup>19</sup> O’Rourke, H. M., Collins, L. & Sidani, S. Interventions to Address Social Connectedness and Loneliness for Older Adults: A Scoping Review. *BMC Geriatrics*, 43(7), (2018), 43-52.

<sup>20</sup> Cho, M. & Kim, J. Urban Regeneration with Age-Friendliness in Jangsu Village. *Cities*, 58, (2016), 107-114.

connectedness plays in the life of the elderly. Furthermore, Kadoya (2013) explored social interactions between the elderly and the community in Akita city in Japan. The study unveiled that living arrangement and mobility significantly affected the older adults; and social interaction was paramount to them. Again, a study of the elderly in Rotterdam revealed that enjoying social support and having interdependent neighbourhoods were vital to the elderly, which enhanced their wellbeing (Camm, van Dijk & Neiboer, 2013)<sup>21</sup>. Participation in social activities can help prevent social isolation among older men (Ejiri, Kawai, Fuji & Kojima, 2018)<sup>22</sup>. A comprehensive study by Sato (2020)<sup>23</sup> did a global analysis of how older adults comprehend and value social connectedness. The exercise revealed that the older adults valued social connectedness as phenomenal which helps them to be active.

From the foregoing studies, it is observed that there is dearth of empirical evidence of studies on social connectedness of the elderly in non-advanced economies and non-urban settings (Neville, Adams, Napier, Shannon & Jackson, 2018)<sup>24</sup>. A scoping review of empirical studies on social connectedness of older persons revealed that out of the 39 studies that met the inclusion criteria, almost 40% were done in the US (O'Rourke, et al, 2018)<sup>25</sup>. Keating, Eales and Philips (2013)<sup>26</sup> had early on observed that aged-friendly communities' studies had been skewed in favour of the elite communities, neglecting the diversity of rural communities. This situation denies the research community data on the potential or otherwise of the unique advantage that rural areas could provide the older people who live there (Davey, 2017)<sup>27</sup>. Consequently, there was gap in literature about social connectedness of the older people in rural societies. The need for research to include ethnicity and diverse population of older people was felt. The step also is a fulfilment of the WHO's recommendation that an effective policy reformation should take into account aged-friendly concepts and research which seek to analyse aged-friendly communities to include participants from varied backgrounds (Menec, Hutton, Newall, Norwich, Spina & Veselyuk, 2015)<sup>28</sup>. UNECE (2017)<sup>29</sup> quotes two comments of the 2002 Regional Implementation Strategy of MIPAA that draw attention to the need to study issues concerning older persons domicile in rural settings. They are, Comment 2, which says that "to ensure full integration and participation of older persons in society, programmes should aim at rural and remote areas where older persons might find themselves isolated,

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<sup>21</sup> Camm, J. M., van Dijk, H. M. & Neiboer, A.P. Relationship between Frailty Neighbourhood Security, Social Cohesion and Sense of Belonging among Community-Dwindling, *Geriatrics and Gerontology International*, 13(5), (2013), 739-763.

<sup>22</sup> Ejiri, W., Kawai, H., Fugiwara, Y & Kojima, I., Social Participation Reduces Isolation among Japanese Older People in Urban Areas: A 3-Year Longitudinal Study. *PLoS One*, (2019), 14.

<sup>23</sup> Sato, M. *Op.cit*.

<sup>24</sup> Neville, S., Adams, J., Napier, S., Shannon, K. & Jackson, D. Engaging in my Community: Perceptions of People Aged 85 Years and Over, *International Journal of Qualitative Studies on Health and Wellbeing*, 13(1), (2018), 402-412.

<sup>25</sup> O'Rourke, et.al. *Op.cit*

<sup>26</sup> Keating, N., Eales, J. & Philips, J. Age-Friendly Rural Communities: Conceptualising 'Best Fit'. *Canadian Journal of Ageing*, 32(4), (2013), 319-332.

<sup>27</sup> Davey, J. A. *A Review for the Office for Seniors*, (Wellington: Ministry of Social Development, 2017).

<sup>28</sup> Menec, H. H., Hutton, L., Newall, N., Nowicki, S., Spina, J. & Veselynk, D. How Age-Friendly are Rural Communities and What Community Characteristics are Related to Age Friendliness Environment? The Case of Manitoba, Canada. *Ageing and Society*, 35(1), (2015), 203-223.

<sup>29</sup> UNECE Older Persons in Rural and Remote Areas, *UNECE Policy Brief on Ageing*, No.18, (2017)

without access to their immediate families or to social and other types of infrastructure” and Comment 7, which stipulates that “ to strive to ensure quality of life at all ages and maintain independent living including health and wellbeing, special attention should be paid to older persons living in rural or remote areas, who often have difficulties accessing health and social services”. Nonetheless, little is known about the social connectedness of older persons in rural communities. These observations precipitated the conduct of this study to garner empirical evidence to answer the questions and test the hypothesis:

### **Research questions**

1. To what extent do older adults feel socially connected?
2. Who do the older adults mostly socially interact with?
3. What avenues are available for the older adults’ social interaction?

### **Hypothesis**

H<sub>0</sub>: There is no statistically significant difference in the level of social connectedness of male and female older adults.

### **Objectives**

The following are the main objectives the study set out to accomplish:

1. To gauge the extent to which older adults feel socially connected.
2. To find out the people older adults mostly socially interact with.
3. To identify the avenues available for older adults’ social interaction.
4. To compare the level of social connectedness of male and female older adults

### **Theoretical framework**

The two theories that undergird the study of social connectedness of older adults are the ecological and social inclusion theories. Bronfenbrenner’s ecological theory recognises the shared relationship between people and their environments at different levels such as behavioural, cognitive and emotional<sup>30</sup>. People interact with others at various levels<sup>31</sup>. The older adults interact with people at different levels as depicted in the ecological theory.

The second theory is the social inclusion concept, which shows the degree to which views and contributions of all people are cherished and valued. The system allows members to develop and maintain significant relationships and participate in personally and socially meaningful manner. Social inclusion idea has three distinct features at the interface of people and their environment: social integration, social support and access to resources.<sup>32</sup> Social inclusion concept could have different budding benefits such as reciprocal exchange that encourages liberation instead of inequality; social recognition from

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<sup>30</sup> Wahl, H. & Oswald, F. Environmental Perspectives on Ageing, D. Danefur & C. Phillipson (Eds.). *In International Handbook of Social Gerontology*, (2010), 11-24

<sup>31</sup> Bronfenbrenner, U. Toward an Experimental Ecology of Human Development, *American Psychologist*, 32(7), (1977), 513-531

<sup>32</sup> Menec, et.al. *Op.cit*

community members; and self-efficacy and perceived control of oneself and one's environment.<sup>33</sup>

### **Materials and Methods**

The study was conducted in line with the positivist school of thought. In view of that, quantitative data collection methods and analytical tools were employed for the study. The approach was deemed appropriate for the study as it sought to make statistical inferences about the social connectedness of all older adults in the study area. Consequently, descriptive cross-sectional survey design was employed to gather quantitative data to answer the research questions and test the hypothesis.

The study utilised older adults who were 60 years and above at the time of data collection and were permanently living in the rural communities in the chosen rural setting. In all, 366 older adults in eight rural communities in the Gomoa Central District of the Central region of Ghana were recruited to participate in the study. Stratified and convenience sampling techniques were adopted to select the study participants. Thus, the two inclusion criteria are: being 60 years or older and permanently staying in the rural communities in the study area. Those who met the criteria were selected to participate in the study.

Questionnaire was the tool developed to gather data from the research participants. It was segmented based on the socio-demographic data and the study objectives. The items derived from literature on social connectedness of the older adults informed the design of the research tool. The research instrument was tagged "Older Adults' Social Connectedness Questionnaire" (OASCQ) and it was pilot-tested on 45 older adults in a rural community in the same district, which did not form part of the main study. Cronbach alpha reliability co-efficient was used to analyse the data gathered from the pilot testing, which yielded a high reliability of  $r = 0.87$ . Given that the reliability co-efficient is high, the instrument was deployed to generate data for the main study.

The questionnaires were administered by the researcher and two trained assistants. The researcher moved with the assistants at different times during the data collection period and as most of the inhabitants in the rural communities have no or low formal education, who were incapable of reading, comprehending and providing responses appropriately, while one was asking the questions, the other was ticking the responses. This process hugely aided in recording a high return rate of 97%.

The study respondents participated willingly and gave verbal consent prior to administration of the questionnaire. The participants were offered the right to opt out of the exercise, at any time they wanted without prior permission. The data gathered was analysed via Excel and SPSS software. The data was first entered into Excel and later transported to SPSS version 25 before the analysis. While the socio-demographic data was analysed using frequencies and percentages, those on social connectedness, groups the participants socially interact with and means of social interaction were analysed using mean and standard deviation. With the dissimilarities of the level of social connectedness

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<sup>33</sup> Davey, J. A. *Op.cit*

between the male and female older adults, independent samples *t*-test was employed to do the analyses.

### **Discussion of Results**

This section of the paper presents the outcomes of the data analysis on the socio-demographic data, the research questions and the hypothesis. Table 1 concerns the results on the socio-demographics of the study participants, Tables 2, 3 and 4 present results that answered the research questions while Table 5 provides outcomes of the hypothesis testing.

**Table 1**  
**Socio-demographic Information**

Variable	Response	Frequency	Percentage
<b>Sex</b>	Male	220	60.1
	Female	146	39.9
<b>Age</b>	60-65	71	19.4
	66-70	172	47.0
	71-75	90	24.6
	Above 75	33	9.0
<b>Marital status</b>	Married	148	40.4
	Divorced	55	15.0
	Separated	73	19.9
	Single	69	18.9
	Widow	21	5.7
<b>Level of Education</b>	No formal education	120	32.8
	Basic education	127	34.7
	Secondary education	50	13.7
	Tertiary education	69	18.9
<b>Living status</b>	Living alone	50	13.7
	Living with partner alone	96	26.2
	Living with partner and close relatives	124	33.0
	Living with partner, close and distant relatives	96	26.2
<b>Employment status</b>	Full time	117	32.0
	Part time	145	39.6
	Not working	104	28.4

Source: Field data (2021)

Of the 366 older adults who partook in the survey, there was a higher representation of men (220) vis-à-vis the women (146). The age range of the older adults span 62 and 85 age bracket with the majority of them falling between 66 and 70 years of age.

The results further indicate that the majority of the older adults were still in marital relationship. Every two of them were in a marital relationship. This is consistent with the realisation that marital status and marital quality contribute to people's wellbeing during retirement (Kim & Moen, 2006). Those without spouses were either divorced, separated or had lost their partners. With respect to formal educational attainment, a

disproportionate chunk of the older adults had received some form of formal education. However, their level of education is not high as the majority of them had less than secondary education.

The results also point to the direction that only a few of the older adults live alone; a vast majority of them live with others. This implies that most of the other adults live with others who might facilitate their social interactions with other people. Further, the results evince that the majority of the older adults are still doing some kinds of job which earn them some income. They are either in a full time or a part time job, which also could provide an avenue for them to socially interact with other people. It needs to be noted, however, that full time work in the rural and farming communities in the Ghanaian society does not necessarily mean working in groups or with other people as it is the case in formal sector employment. The older adults who are into farming, fishing, craft and similar jobs, most of whom work alone, do consider themselves as being in full time work.

It is gleaned from the background information about the participants that the study used varied sets of older adults from different ages, educational backgrounds and others. Therefore, the richness of the information provided on their social connectedness with significant others is unparalleled.

***RQ1: To what extent do older adults feel socially connectedness?***

The study sought to determine the extent to which the older adults are socially connected to other people. Being socially connected is considered a good omen as it enables people to share their concerns with them and receive all sorts of assistance when the need arises. The mean of determination of this result is 3.0. The outcomes of the data analysis on social connectedness of the older adults are presented in Table 2.

**Table 2**  
**Social Connectedness of Older Adults**

	<b>N</b>	<b>Mean</b>	<b>SD</b>
I feel more connected	366	3.64	1.06
I talk to more people	366	3.63	1.02
I participate in activities and events	366	3.53	1.06
I feel lonely	366	3.22	1.20
I go out with people	366	2.87	1.06
I know community activities	366	3.34	1.04
I use more community services	366	3.15	1.06
I get more assistance from others	366	2.67	1.14
<b>Overall</b>		<b>3.26</b>	<b>1.08</b>

Source: Field data (2021)

The results of the study unveiled that the older adults seem to enjoy moderate level of social connectedness with their kits and kins as well as other significant others in their lives. This stems from the fact that the results disclosed that the total mean, 3.26, is slightly above the mean of determination (3.0), with a standard deviation of 1.08 indicating variability in their responses. This finding is at variance with a study which unraveled that older people tend to have huge social networks and a more active social life.<sup>34</sup>

Regarding the individual items that make them socially connected, aside from the items, “I go out with people” and “I get more assistance from others”, which had means lower than 3.0 with wide variability in the responses; the rest had means above the cut-off point. In effect, it can be averred that the older adults felt slightly socially connected with significant others in their lives. It could be averred that a good number of the older adults are experiencing social cessation as also observed by Smith and Victor (2019)<sup>35</sup>. Social connections and friendship are support that individuals need in stressful times and older adults need it the more.<sup>36</sup> However, the results imply that the older adults in the area do not enjoy social connectedness as they should.

H<sub>0</sub>: There is no statistically significant difference in the level of social connectedness of male and female older adults in the rural settings.

<sup>34</sup> Edwards, L. T., Spencer, L. H., Bryning, L. & Anthony, B.F. Living Well for Longer: The Economic Argument for Investing in the Health and Wellbeing of Older People in Wales. *Centre for Health Economics and Medicine Evaluation*. (2017)

<sup>35</sup> Smith and Victor, *Op.cit*

<sup>36</sup> Wahl, H. & Oswald, F. *Op.cit*.

**Table 3**  
**Social Connectedness of Male and Female Older Adults**

	<b>N</b>	<b>Mean</b>	<b>SD</b>	<b>Df</b>	<b>t</b>	<b>P</b>
<b>Male</b>	220	3.57	1.42	364	2.359	.021
<b>Female</b>	146	3.78	1.03			

Source: Field data (2021)

The outcome of the data analysis demonstrates statistically significant difference in social connectedness experienced by male and female older adults. Per the results of the analysis,  $p=.021$ , there is statistically significant difference in social connectedness experienced by the male and female older adults in the study area. Female older adults feel more socially connected ( $M=3.78$ ,  $SD=1.03$ ) than do the male older adults ( $m=3.57$ ,  $SD=1.42$ ). Based on the result, the null hypothesis is rejected. The finding does not support the notion that both male and female older adults in the rural setting experience same moderate level of social connectedness.

***RQ2: Who do the older adults mostly socially interact with?***

Having established how socially connected the other adults are, the need to find out the categories of people they did have social interactions with emerged. The results of the data analysis of the groups of people that the older adults frequently socially interact with are displayed in Table 4.

**Table 4**  
**Groups of People the Older Adults Socially Interact With**

	<b>N</b>	<b>Mean</b>	<b>SD</b>
Nuclear family members	366	4.11	1.11
Extended family members	366	4.02	1.05
Religious groups	366	3.89	1.31
Neighbours	366	3.42	0.98
Friends	366	3.40	1.08
Association members	366	2.97	1.32
Other group	366	1.99	0.29

Source: Field data (2021)

From the results, the older adults tend to socially interact with members of their nuclear families the most, followed by their extended family members. The older adults' high rating of their social interaction with members of the nuclear and extended families is an indicative of the fact that, the family reigns supreme in the life of the adults in the Ghanaian rural societies. This may be due to the fact that the majority of them are still in marriage and also live with partners and other people. The probability of an older adult

receiving social support and counting on a family member for support when the need arises is high. This also drums home the point that the extended family system is still relevant in the rural communities in the country.

Again, the results revealed that the older adults have good social interaction with members of their religious groups, exemplifying the role of religion in the social life of the older adults. It is also worthy to note that per the results, the older adults tend to have good social interactions with their neighbours and friends. Social connections with friends and neighbours guide against functional health of older men<sup>37</sup> and that the older adults in the rural communities might be experiencing this gain. The relatively low rating of the older adults' social interactions with friends corroborates the idea that older persons are vulnerable to loss of friends. Loss of friends can render older persons vulnerable to social isolation<sup>38</sup>, which is not good for their health and life.

***RQ3: What avenues are available for the older adults' social interaction?***

The means through which the older adults get socially interacted with the significant others in their lives were sought. The responses to that effect are presented in Table 5.

**Table 5**  
**Means of Interacting with Others**

	<b>Mean</b>	<b>SD</b>
Religious activities	4.30	0.34
Phone calls	4.17	0.91
Cultural activities	3.99	1.23
Social activities	3.95	1.10
Home visits	1.07	1.02
Associations	0.34	1.45
Leisure activities	0.12	1.22

Source: Field data (2021)

The results demonstrate that with the mean of 4.30 and a standard deviation of 0.34, religious activities and events serve as the major means for the older adults' social interactions with significant others. This finding insinuates that the older adults take their religious activities seriously and this is consistent with the notion that "the African is highly religious". Religious activities, events and celebrations are solid avenues for the older adults to socially interact with others.

Contacting others socially via phone calls also received a high mean of 4.17 and a standard deviation of 0.19. Technology has, thus, become a major contributor to increased social

<sup>37</sup> Murata, C., Saito, T., Tsuji, T., Saito, M. & Kondo, K. A 10-Years Follow-Up Study of Social Ties and Functional Health among the Old: The AGES Project. *International Journal Environment Research on Public Health*, 14, (2017), 717.

<sup>38</sup> Windle, K., Francis, J. & Coomber, C. Preventing Loneliness and Social Isolation: Interventions and Outcomes. *Research Briefly*, (2014)

connectedness among older adults. The emergence of mobile phones has become a viable means through which the older adults socially interact with family and friends. With the mean of 3.99 and a standard deviation of 1.23, cultural activities also serve as a good means for the older adults to socially interact with others. Cultural events such as funerals and festivals are aiding the older adults to interact and fraternise with significant others in their lives. Social activities also attracted a mean of 3.95 and a standard deviation of 1.10. Social activities like communal meetings, association activities, family meetings and walking with neighbours also afforded older adults the chance to socially interact with others.

An astounding result which emerged from the data analysis is the low mean score (1.07) and a standard deviation of 1.02 for home visit as a means of social interactions of the older adults. The finding means that home visit is not extensively used by family members, neighbours, friends and others to socially interact with the older adults in the rural setting. This situation could be attributed to the restriction on movement as a measure to curtail the spread of the dreaded and deadly Covid-19 pandemic. As the nation and the entire world fight the feared disease, people have been highly advised to remain in-doors if they do not have any serious activity doing outside their homes. This restriction reduced movements of citizens in various settings in the country, which could have contributed to the low levels of home visits to the older adults.

Although per the results, associations and leisure activities had minute means, 0.34 with SD 1.45 and 0.12 with a SD 1.22 respectively, it is not surprising. This is due to the fact that there are usually not many associations and their activities in rural settings, hence, the very limited use of that avenue for social interactions by the older adults. In rural communities, there are few associations for older adults to utilise to encounter other people. Leisure activities are also uncommon and least patronised in rural settings.

### **Conclusion**

The study revealed a moderate level of social connectedness of the older adults in the rural communities through reliance on informal networks of relatives, religious group members, neighbours and friends. The findings tie in with the ecological idea and that the older adults had relation with people at different levels in the ecology albeit inadequate. Their interactions with family members were more intense with family members, religious group members, neighbours and friends. In other words, the elderly in the communities enjoy limited social closeness with varied groups of people. The need for the older adults to have and maintain a great social connection with others is imperative as social interaction or connectedness promotes the wellbeing of older adults (Camm, et al, 2013; Sato, 2020)<sup>39</sup>.

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<sup>39</sup> Camm, J. M., van Dijk, H. M. & Neiboer, A. P. Relationship between Frailty Neighbourhood Security, Social Cohesion and Sense of Belonging among Community-Dwindling. *Geriatrics and Gerontology International*, 13(5), (2013), 739-763.

The older adults really need to have a feel of belongingness. The moderate level of social connectedness of the older adults also smacks of an appreciable level of social isolations, which may require attention and further studies.

### **Recommendations**

There is the need to study the level of social isolation of the older adults in the rural settings as well as factors accounting for that. Stakeholders also need to work out mechanisms that would help increase social connectedness of the elderly in the society. Especially, increase social connectedness of older adults via technology (which is user-friendly for both the lettered and the unlettered). In this time and age, increased social connectedness through technology needs to be intensified in the rural communities. Online socialising events to improve older adults' social connectedness would be a laudable idea as it has the strength to improve their healthy living and longevity. This will help older persons to use online platforms to socially connect with others (Challands, Lacherez & Obst, 2017)<sup>40</sup>.

There should also be an increase in professionals specialising in ageing studies. There is the need for more research using all three paradigms to investigate and unpack the issues bedeviling the social connectedness of the elderly in the emerging Ghanaian communities. Besides, more ideal dissemination techniques need to be adopted for research outcomes on ageing and for proper utilisation. More research and appropriate dissemination of research outcomes especially to the aged is non-negotiable in the fledging communities.

Replication of more studies in plenty rural areas as well as a comparative study of the phenomenon in rural, peri-urban and urban communities is imperative. Lastly, a study to gauge the extent of use of the adults' competencies and skills in community development is suggested.

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