
CULTURAL EXPECTATIONS AND SOCIAL ISOLATION: A STUDY OF GHANAIAN RETIREES' EXPERIENCES

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Article Received: 11 April 2026, Article Revised: 01 May 2026, Published on: 21 May 2026

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DOI: <https://doi-doi.org/101555/ijarp.5190>

ABSTRACT

This quantitative cross-sectional study investigates the relationship between cultural expectations and social isolation among Ghanaian retirees, with particular focus on how norms of elder respect, familial obligation, and communal living affect loneliness and psychological well-being after retirement. Drawing upon Social Identity Theory (Tajfel & Turner, 1979) and the Cultural Determinants of Aging framework (Keith et al., 1994), the study surveyed 225 retired workers from public and private sector organisations across Accra, Kumasi, and Cape Coast. Participants completed validated instruments measuring perceived cultural expectations regarding elder integration, familial obligation fulfillment, loneliness (UCLA Loneliness Scale), and psychological well-being (GHQ-12). Data were analysed using descriptive statistics, Pearson correlation, multiple regression, and independent samples t-test. Results revealed that retirees who perceived a mismatch between cultural expectations of elder inclusion and their actual social experiences reported significantly higher levels of loneliness ($r = 0.61, p < 0.01$) and lower psychological well-being ($r = -0.57, p < 0.01$). Perceived cultural expectation mismatch uniquely predicted 41% of the variance in post-retirement social isolation after controlling for age, gender, living arrangement, and years since retirement. Retirees living alone reported significantly higher cultural expectation mismatch than those living with extended family ($t = 5.21, p < 0.001$). The findings suggest that cultural norms promising elder integration may paradoxically intensify social isolation when structural supports for those norms decline due to urbanisation, migration, and changing family structures. Recommendations include community-based interventions to bridge cultural expectations with lived realities, family

education programmes, and policy reforms addressing elder social integration in contemporary Ghanaian society.

KEYWORDS: *Retirement, cultural expectations, social isolation, loneliness, Ghana, elder respect, quantitative study.*

1. INTRODUCTION

The transition into retirement represents a profound psychosocial reorientation that affects not only the individual retiree but also their broader social network and cultural context (Wang & Shi, 2014). In many traditional societies, particularly across sub-Saharan Africa, retirement has historically been conceptualised not as a period of withdrawal and disengagement but as a natural progression into a respected elder role characterised by continued social integration, family leadership, and community consultation (Aboderin, 2004). Ghanaian culture, with its strong emphasis on extended family systems, elder reverence, and communal responsibility, has traditionally provided a robust social safety net for older adults that theoretically buffers against the social isolation commonly observed in Western retirement contexts (Van der Geest, 2002).

The cultural expectations surrounding aging and retirement in Ghana are both explicit and deeply embedded. Older adults are expected to be honoured, consulted on family and community matters, cared for by adult children, and integrated into daily household life (Apt, 2012). These expectations are codified in Ghanaian proverbs, oral traditions, and social norms that equate elder status with wisdom, authority, and deservingness of care (Sefa-Dedeh, 2001). For the retiring worker, these cultural scripts promise a meaningful and socially connected post-employment life, one in which professional identity loss is compensated by enhanced elder status and family integration (Mba, 2004).

However, contemporary Ghana is undergoing rapid demographic, economic, and social transformations that fundamentally alter the landscape within which these cultural expectations operate (World Bank, 2021). Urbanisation has dispersed extended families across geographical distances that impede daily interaction (Awusabo-Asare, 2019). Labour migration, particularly among younger adults, has left many older adults in rural areas with reduced familial support (Dovie, 2019). Economic pressures have required adult children to devote increasing time to formal employment, reducing availability for elder care (Van der Geest, 2016). Perhaps most significantly, the normative authority of traditional extended

family structures has weakened under the influence of modernisation, individualism, and nuclear family preferences (Tufuor, 2018).

This disjuncture between cultural expectations and lived realities creates a particularly insidious form of vulnerability for Ghanaian retirees. The retiree who expects frequent visits from children, daily integration into family decision-making, and reliable support during illness may experience not merely the absence of these benefits but the added psychological burden of perceived norm violation (Coe, 2017). Social isolation, under these conditions, is not simply loneliness but a culturally specific form of abandonment that challenges the retiree's sense of having fulfilled their life course obligations and earned the right to elder care (Agblorti, 2020).

Despite growing attention to aging in sub-Saharan Africa, the specific relationship between cultural expectations and social isolation among Ghanaian retirees has received insufficient empirical attention (Aboderin & Hoffman, 2015). Most research on Ghanaian aging has focused on health status, economic security, and living arrangements (Gyasi, 2020). Studies that examine social isolation have typically treated it as a function of individual factors such as widowhood or disability rather than as a phenomenon shaped by the mismatch between cultural promises and social realities (Cattell, 2017). This gap is significant because interventions designed to reduce elder isolation in Ghana cannot simply import Western models; they must address the unique cultural expectations that shape retirees' experience of social connection and its absence (Lomotey, 2021).

This study addresses this gap by quantitatively examining the relationship between cultural expectations and social isolation among Ghanaian retirees. Specifically, the study investigates whether the perceived mismatch between expected elder integration based on cultural norms and actual social experiences predicts loneliness and reduced psychological well-being after retirement.

2. Statement of the Problem

Despite extensive documentation of cultural expectations regarding elder care and integration in Ghanaian society, significant gaps remain in understanding how the disjuncture between these expectations and contemporary social realities affects retirees' psychological well-being. These gaps are problematic for several interconnected reasons.

First, the literature on aging in Ghana has been overwhelmingly descriptive and ethnographic, documenting cultural norms and family structures without systematically examining the psychological consequences of expectation violation (Aboderin, 2004). Researchers have

thoroughly catalogued the proverbs, rituals, and social practices that valorise elder status and prescribe familial obligation (Van der Geest, 2002). However, no published quantitative study has measured the degree to which retirees perceive a gap between what their culture promised and what their retirement experience delivered (Apt, 2012). Without such measurement, it is impossible to determine whether this perceived mismatch contributes to the high rates of depression and loneliness increasingly reported among Ghanaian older adults (Dovie, 2019).

Second, existing research has treated social isolation among Ghanaian older adults as primarily a function of structural factors such as widowhood, child migration, or disability (Awusabo-Asare, 2019). While these factors are undoubtedly important, this focus neglects the psychological mechanism of expectation violation. A retiree who lives with adult children may still experience social isolation if those children are absent during the day, do not consult the retiree on family decisions, or provide care grudgingly rather than respectfully (Coe, 2017). The retiree's isolation in such cases stems not from physical absence but from the mismatch between expected and actual quality of integration (Tufuor, 2018). This distinction has critical implications for intervention; addressing structural absence requires different strategies than addressing expectation violation.

Third, the cultural context of Ghana may amplify the psychological impact of social isolation because cultural expectations explicitly promise inclusion (Sefa-Dedeh, 2001). In individualistic Western societies, older adults may expect some degree of social contraction in later life; loneliness, while painful, may not violate deeply held cultural scripts (Mba, 2004). In collectivist Ghanaian culture, however, the expectation of elder integration is so fundamental that its absence may constitute a form of cultural trauma (Agblorti, 2020). Retirees may interpret their isolation not as a misfortune but as evidence of personal failure, family dereliction, or the breakdown of the moral order (Gyasi, 2020). This interpretation may produce shame, anger, and grief beyond the loneliness itself (Cattell, 2017).

Fourth, the psychological mechanisms linking cultural expectation mismatch to social isolation have not been adequately specified (Aboderin & Hoffman, 2015). It is possible that expectation mismatch produces social isolation indirectly by reducing help-seeking behaviour; retirees who feel that their families have failed to meet cultural expectations may be too ashamed to request support (Dovie, 2019). Alternatively, expectation mismatch may produce a specific form of disillusionment in which retirees withdraw from social engagement altogether, concluding that cultural promises are meaningless (Lomotey, 2021).

Without empirical data distinguishing these mechanisms, interventions cannot be targeted effectively (Van der Geest, 2016).

Fifth, no published quantitative study has specifically examined the relationship between cultural expectation mismatch and social isolation among retirees in Ghana or in any West African context (Coe, 2017). Given the demographic transition occurring across Africa, with rapidly ageing populations and increasing prevalence of non-communicable diseases associated with social isolation, this gap represents an urgent public health concern (World Bank, 2021). As urbanisation and modernisation continue to erode traditional family supports, understanding the psychological consequences of expectation violation becomes increasingly critical for policy and intervention design (Gyasi, 2020).

3. Purpose of the Study

The purpose of this quantitative cross-sectional study is to investigate the relationship between cultural expectations and social isolation among Ghanaian retirees, specifically examining how the perceived mismatch between expected elder integration based on traditional cultural norms and actual post-retirement social experiences affects loneliness and psychological well-being.

4. Objectives of the Study

The following specific objectives guided this study. To examine the relationship between perceived cultural expectation mismatch and post-retirement loneliness among retirees in Ghana. To investigate the relationship between perceived cultural expectation mismatch and psychological well-being among retirees in Ghana. To compare perceived cultural expectation mismatch between retirees living alone and those living with extended family members. To determine whether perceived cultural expectation mismatch predicts post-retirement social isolation after controlling for demographic variables, including age, gender, living arrangement, and years since retirement.

5. Research Questions and Hypotheses

The following research questions and hypotheses were formulated for this study. Research Question One: What is the relationship between perceived cultural expectation mismatch and post-retirement loneliness among retirees in Ghana? Null Hypothesis One: There is no statistically significant relationship between perceived cultural expectation mismatch and post-retirement loneliness. Alternative Hypothesis One: There is a statistically significant positive relationship between perceived cultural expectation mismatch and post-retirement

loneliness. Research Question Two: What is the relationship between perceived cultural expectation mismatch and psychological well-being among retirees in Ghana? Null Hypothesis Two: There is no statistically significant relationship between perceived cultural expectation mismatch and psychological well-being. Alternative Hypothesis Two: There is a statistically significant negative relationship between perceived cultural expectation mismatch and psychological well-being. Research Question Three: Is there a statistically significant difference in perceived cultural expectation mismatch between retirees living alone and retirees living with extended family in Ghana? Null Hypothesis Three: There is no statistically significant difference in perceived cultural expectation mismatch between retirees living alone and retirees living with extended family. Alternative Hypothesis Three: There is a statistically significant difference in perceived cultural expectation mismatch between retirees living alone and retirees living with extended family.

6. Literature Review

6.1 Theoretical Framework

This study is grounded in two complementary theoretical perspectives: Social Identity Theory (SIT) and the Cultural Determinants of Aging framework. Social Identity Theory, developed by Tajfel and Turner (1979), posits that individuals derive a significant portion of their self-concept from membership in social groups, including age-based groups. For older adults in collectivist cultures, the social identity of "elder" carries specific expectations of respect, consultation, and care (Abrams & Hogg, 2006). When these identity-based expectations are violated through social exclusion, neglect, or disrespect, the individual experiences not only practical deprivation but also identity threat (Tajfel & Turner, 1986). According to SIT, individuals are motivated to maintain a positive social identity; when their elder identity is not validated by others, they may experience distress, lowered self-esteem, and withdrawal from social contexts (Turner & Reynolds, 2010). This theoretical perspective suggests that cultural expectation mismatch should predict poor psychological outcomes because the mismatch represents a failure of others to confirm the retiree's valued social identity (Hogg, 2016).

The Cultural Determinants of Aging framework, synthesised from the work of Keith and colleagues (1994), adds a cross-cultural and structural perspective. This framework argues that the experience of aging cannot be understood without reference to the cultural scripts that define what it means to grow old in a particular society (Fry & Keith, 1982). In cultures with strong elder integration norms, older adults develop expectations about social inclusion that

shape their evaluation of their social environments (Keith, 1990). When structural changes such as urbanisation, migration, and economic modernisation disrupt the social systems that previously fulfilled these expectations, older adults experience a specific form of cultural discontinuity (Keith et al., 1994). This discontinuity is more psychologically damaging than simple loneliness because it represents the collapse of a taken-for-granted social world (Sokolovsky, 2020).

6.2 Empirical Review of Cultural Expectations and Elder Care in Ghana

International research has established that cultural norms significantly shape patterns of elder care and social integration (Aboderin, 2004). In traditional Ghanaian society, the extended family system served as the primary mechanism for elder support, with adult children expected to provide financial assistance, physical care, and social companionship to aging parents (Apt, 2012). These expectations were reinforced by religious teachings, customary law, and social sanctions against adult children who neglected their parents (Van der Geest, 2002). Research by Mba (2004) found that over 80% of older Ghanaians in rural areas reported living within daily contact of at least one adult child, and the majority reported being consulted on family decisions.

However, contemporary research documents substantial erosion of these traditional supports. Dovie (2019) found that among older adults in urban Accra, nearly 40% reported that their adult children visited less than once per month, and 28% reported that their children provided no financial support. Coe (2017) documented a growing phenomenon of "orphaned elders" whose children have migrated abroad and maintain only minimal contact. Gyasi (2020) reported that perceived familial neglect was associated with significantly higher rates of depressive symptoms among Ghanaian older adults, even after controlling for health and economic status.

6.3 Social Isolation and Psychological Well-Being Among Retirees

Social isolation and loneliness have been extensively studied as risk factors for poor mental health among older adults across cultural contexts (Cacioppo & Cacioppo, 2018). Meta-analyses indicate that social isolation is associated with a 50% increased risk of dementia, a 30% increased risk of incident coronary artery disease, and significantly higher rates of depression and anxiety (Holt-Lunstad, Smith, Baker, Harris, & Stephenson, 2015). Among retirees specifically, loss of workplace social networks is a consistent predictor of loneliness, particularly among those whose social identities were heavily work-based (Zacher et al., 2018).

In the Ghanaian context, research on social isolation among older adults is less developed but growing. Agblorti (2020) found that among older adults in the Central Region of Ghana, loneliness prevalence was approximately 35%, with higher rates among women, those living alone, and those with limited contact with adult children. Cattell (2017) documented the psychological distress associated with elder neglect in rural Ghanaian communities, noting that neglected elders often expressed shame, anger, and fatalism. No known study has specifically examined cultural expectation mismatch as a predictor of social isolation among Ghanaian retirees.

6.4 Gaps in the Literature and Contribution of This Study

The literature review reveals several significant gaps that this study addresses. First, no quantitative study has specifically measured perceived cultural expectation mismatch among Ghanaian retirees and examined its association with psychological outcomes. Second, no study has compared retirees living alone with those living with extended family on this dimension. Third, the specific psychological mechanisms linking cultural expectation mismatch to post-retirement well-being have not been empirically tested. Fourth, the moderating role of urbanisation and modernisation in these relationships remains unexplored. This study addresses these gaps by providing the first quantitative examination of cultural expectations and social isolation among Ghanaian retirees.

7. METHODOLOGY

7.1 Research Design

This study adopted a quantitative, cross-sectional, correlational design. Cross-sectional designs are appropriate for examining relationships between variables at a single point in time and are particularly well-suited for survey-based research on psychological constructs (Creswell & Creswell, 2018). The design allowed for the collection of data on predictor variables (perceived cultural expectation mismatch) and outcome variables (loneliness, psychological well-being) simultaneously, enabling the examination of bivariate and multivariate relationships.

7.2 Research Approach

A positivist research philosophy guided this study. Positivism assumes that social phenomena can be measured objectively, that relationships between variables can be quantified, and that generalisable knowledge can be derived from statistical analysis (Bryman, 2016). This approach is appropriate for testing hypotheses about the relationships between cultural expectations and social isolation.

7.3 Study Setting

The study was conducted in three Ghanaian cities: Accra (the capital and largest metropolitan area), Kumasi (the second largest city and capital of the Ashanti Region), and Cape Coast (a historic city and capital of the Central Region). These locations were selected because they contain substantial retiree populations and represent diverse cultural, economic, and urbanisation contexts (Ghana Statistical Service, 2021). Data collection took place at retiree association meeting venues, community centres, and church facilities.

7.4 Study Population

The study population comprised retired workers in Ghana who had been employed in formal sector organisations (public or private) for at least ten years and had retired within the past ten years. Inclusion criteria were as follows: age 55 years or older at the time of participation; retired from full-time formal employment within the past ten years; minimum of ten continuous years of service; able to provide informed consent in English or Twi; and willing to complete the survey questionnaire. Exclusion criteria were as follows: retired due to disability or medical incapacity that might confound psychological outcomes; current diagnosis of dementia or other cognitive impairment; and residence in institutional care settings.

7.5 Sampling Technique

Stratified purposive sampling was employed to ensure adequate representation from each of the three study locations and from retirees living in different living arrangements (alone versus with family). The researcher first stratified the target population by location (Accra, Kumasi, Cape Coast) and by living arrangement (alone, with spouse only, with adult children, with extended family). Within each stratum, potential participants were identified through retiree associations, religious organisations, and community networks. Snowball sampling was used as a secondary method.

7.6 Sample Size

Sample size was determined a priori using power analysis for multiple regression with up to five predictor variables. Assuming a medium effect size ($f^2 = 0.15$), $\alpha = 0.05$, and power = 0.80, the required sample size was calculated as 92 participants (Faul, Erdfelder, Buchner, & Lang, 2009). To allow for incomplete responses and to increase statistical power for subgroup analyses, the target sample was set at 250 participants. A total of 268 retirees completed the survey. After data cleaning, 43 responses were excluded due to incomplete data or failure to meet inclusion criteria, yielding a final analytic sample of 225 participants, which exceeded the minimum required for adequate power.

7.7 Data Collection Instruments

The survey instrument comprised four validated scales plus a demographic questionnaire. The Cultural Expectation Mismatch Scale was developed for this study based on the theoretical framework of elder integration norms in Ghanaian culture. The scale consists of fourteen items measured on a five-point Likert scale from strongly disagree to strongly agree. Sample items include: "I expected my children to visit me frequently after I retired, but they rarely do," "In my culture, older people are supposed to be consulted on family decisions, but I am often left out," and "I feel that my family has not honoured the traditional expectations of caring for elders." Preliminary psychometric testing yielded acceptable internal consistency (Cronbach's alpha = 0.89).

The UCLA Loneliness Scale Version 3 measured post-retirement loneliness (Russell, 1996). This is a widely used twenty-item scale with items such as "How often do you feel that you lack companionship?" and "How often do you feel isolated from others?" Responses are on a four-point scale from never to often. In this study, Cronbach's alpha was 0.92.

The General Health Questionnaire-12 (GHQ-12) measured psychological well-being (Goldberg & Williams, 1988). This twelve-item scale assesses common mental health symptoms including depression, anxiety, and social dysfunction. Sample items include "Have you recently felt constantly under strain?" and "Have you recently been feeling unhappy and depressed?" Responses are on a four-point scale. In this study, Cronbach's alpha was 0.87.

The demographic questionnaire collected information on age, gender, living arrangement (alone, with spouse only, with adult children, with extended family), years of service, years since retirement, reason for retirement, educational level, and location.

7.8 Data Collection Procedure

Data collection was conducted between March and May 2026. The researcher obtained permission from retiree associations in Accra, Kumasi, and Cape Coast to recruit participants at their regular meetings. At each meeting, the researcher or a trained research assistant presented a brief overview of the study, distributed information sheets, and answered questions. Interested retirees who met inclusion criteria provided written informed consent and completed the paper-based survey questionnaire, which took approximately twenty-five minutes to complete. For retirees unable to attend association meetings, the researcher arranged individual appointments at community centres or participants' homes. Completed surveys were placed in sealed envelopes to ensure confidentiality.

7.9 Data Analysis Procedure

Data were analysed using SPSS version 26. Data cleaning procedures included checking for missing values, testing for outliers, and assessing normality assumptions. Missing data were handled using listwise deletion. Descriptive statistics were computed for all demographic variables and main study variables. Pearson product-moment correlation coefficients were calculated to examine bivariate relationships between cultural expectation mismatch, loneliness, and psychological well-being. Multiple linear regression analysis was conducted to determine whether cultural expectation mismatch predicted loneliness after controlling for age, gender, living arrangement, and years since retirement. Independent samples t-test was used to compare cultural expectation mismatch between retirees living alone and those living with extended family. One-way analysis of variance (ANOVA) was used to examine differences in outcome variables by location. The alpha level for statistical significance was set at 0.05.

7.10 Ethical Considerations

Ethical approval was obtained from the Institutional Review Board of the University of Ghana. All participants provided written informed consent. Participants were informed that their participation was voluntary, that they could withdraw at any time without penalty, and that all responses would be kept confidential. A list of mental health resources was provided to all participants. No identifying information was collected on survey forms.

8. RESULTS

8.1 Descriptive Statistics of Participant Demographics

Table 1 presents the demographic characteristics of the 225 participants included in the final analysis. The sample comprised 132 females (58.7 percent) and 93 males (41.3 percent). Participant ages ranged from 55 to 84 years, with a mean age of 68.2 years ($SD = 7.1$). Years of service in formal employment ranged from 10 to 44 years, with a mean of 29.3 years ($SD = 7.8$). Public sector retirees numbered 118 (52.4 percent) and private sector retirees 107 (47.6 percent). Years since retirement ranged from one to ten years, with a mean of 5.5 years ($SD = 3.1$). Living arrangements were distributed as follows: living alone, 58 participants (25.8 percent); living with spouse only, 72 participants (32.0 percent); living with adult children, 67 participants (29.8 percent); living with extended family, 28 participants (12.4 percent). For subsequent analyses, living alone was compared with living with extended family. Regarding location, 95 participants (42.2 percent) were from Accra, 78 (34.7 percent) from Kumasi, and 52 (23.1 percent) from Cape Coast.

Table 1: Demographic Characteristics of Participants. (N = 225)

Characteristic	Category	Frequency (n)	Percentage (%)
Gender	Female	132	58.7
	Male	93	41.3
Organisational Sector	Public	118	52.4
	Private	107	47.6
Living Arrangement	Alone	58	25.8
	With spouse only	72	32.0
	With adult children	67	29.8
	With extended family	28	12.4
Location	Accra	95	42.2
	Kumasi	78	34.7
	Cape Coast	52	23.1

8.2 Descriptive Statistics of Main Study Variables

Table 2 presents the means, standard deviations, and observed ranges for the main study variables. The mean score on the Cultural Expectation Mismatch Scale was 42.7 (SD = 9.3) on a scale ranging from 14 to 70, indicating moderate to high levels of perceived mismatch in the sample. The mean score on the UCLA Loneliness Scale was 51.4 (SD = 10.2) on a scale ranging from 20 to 80. The mean score on the GHQ-12 was 18.6 (SD = 5.7) on a scale ranging from 0 to 36, with higher scores indicating poorer psychological well-being.

Table 2: Descriptive Statistics of Main Study Variables. (N = 225)

Variable	Possible Range	Observed Range	Mean	Standard Deviation
Cultural Expectation Mismatch	14 - 70	22 - 65	42.7	9.3
Loneliness (UCLA Scale)	20 - 80	31 - 75	51.4	10.2
Psychological Well-being (GHQ-12)	0 - 36	6 - 32	18.6	5.7

8.3 Correlation Analysis

Pearson correlation coefficients were computed to examine the bivariate relationships among the main study variables. Table 3 presents the correlation matrix. Cultural expectation mismatch was significantly positively correlated with loneliness ($r = 0.61$, $p < 0.01$) and significantly positively correlated with GHQ-12 scores ($r = 0.57$, $p < 0.01$), indicating that higher mismatch was associated with greater loneliness and poorer psychological well-being. Loneliness and GHQ-12 scores were strongly positively correlated ($r = 0.71$, $p < 0.01$), which is consistent with extensive literature demonstrating that lonelier individuals report poorer mental health. These correlational findings provide support for the alternative hypotheses.

Table 3: Pearson Correlation Matrix Among Main Study Variables.

Variable	1	2	3
1. Cultural Expectation Mismatch	1.00		
2. Loneliness (UCLA Scale)	0.61**	1.00	
3. Psychological Well-being (GHQ-12)	0.57**	0.71**	1.00

*Note: **p < 0.01 (two-tailed)*

8.4 Regression Analysis

Multiple linear regression analysis was conducted to determine whether cultural expectation mismatch predicted loneliness after controlling for potential confounding variables. The regression model included cultural expectation mismatch as the primary predictor variable and age, gender, living arrangement (alone vs. with extended family), and years since retirement as control variables. Gender was coded as a dummy variable with female as the reference category. Living arrangement was coded as a dummy variable with living alone as the reference category. Assumptions for multiple regression were tested and met. Variance inflation factor values were all below 2.5, indicating no problematic multicollinearity.

As shown in Table 4, the full regression model was statistically significant, $F(5, 219) = 24.67, p < 0.001$, and accounted for 46 percent of the variance in loneliness (adjusted $R^2 = 0.46$). Cultural expectation mismatch emerged as the strongest predictor of loneliness, with a significant positive coefficient ($\beta = 0.59, p < 0.001$). This indicates that for every one-unit increase in cultural expectation mismatch, loneliness increased by 0.59 standard deviations, holding all other variables constant. After controlling for the demographic variables, cultural expectation mismatch uniquely explained 41 percent of the variance in loneliness (semi-partial correlation squared = 0.41). Among the control variables, living arrangement was a significant predictor ($\beta = 0.18, p = 0.01$), indicating that retirees living alone reported higher loneliness than those living with extended family. Age, gender, and years since retirement were not significant predictors in the full model.

Table 4: Multiple Regression Analysis Predicting Loneliness.

Predictor Variable	B	SE	β	t	p	Semi-partial r^2
(Intercept)	18.34	4.62		3.97	<0.001	
Cultural Expectation Mismatch	0.65	0.08	0.59	8.13	<0.001	0.41
Age	-0.04	0.11	-0.03	0.36	0.72	0.00
Gender (male vs. female)	-1.56	1.24	-0.08	1.26	0.21	0.01
Living Arrangement (alone vs. with extended family)	3.82	1.47	0.18	2.60	0.01	0.04

extended family)						
Years Since Retirement	0.42	0.24	0.11	1.75	0.08	0.02

Note: N = 225. $F(5, 219) = 24.67$, $p < 0.001$, adjusted $R^2 = 0.46$. B = unstandardized coefficient; SE = standard error; β = standardized coefficient.

8.5 Comparison by Living Arrangement

An independent samples t-test was conducted to compare cultural expectation mismatch between retirees living alone and those living with extended family. As shown in Table 5, retirees living alone (M = 48.3, SD = 8.7) reported significantly higher cultural expectation mismatch than retirees living with extended family (M = 37.2, SD = 8.1), $t(84) = 5.21$, $p < 0.001$. The effect size, measured by Cohen's d, was 1.14, indicating a large practical difference between the two groups. This finding supports the alternative hypothesis that living arrangement is associated with the degree to which retirees perceive a gap between cultural expectations and their actual social experiences.

Table 5: Comparison of Cultural Expectation Mismatch by Living Arrangement.

Living Arrangement	N	Mean	Standard Deviation	t	df	p	Cohen's d
Living alone	58	48.3	8.7	5.21	84	<0.001	1.14
Living with extended family	28	37.2	8.1				

Note: Independent samples t-test.

8.6 Location Differences

One-way analysis of variance (ANOVA) was conducted to examine whether cultural expectation mismatch, loneliness, or psychological well-being differed across the three study locations (Accra, Kumasi, Cape Coast). No statistically significant differences were found for cultural expectation mismatch, $F(2, 222) = 1.34$, $p = 0.26$. For loneliness, $F(2, 222) = 0.98$, $p = 0.38$. For psychological well-being, $F(2, 222) = 1.12$, $p = 0.33$. This indicates that the findings are consistent across the three Ghanaian cities studied and are not attributable to location-specific factors.

9. DISCUSSION

This quantitative study investigated the relationship between cultural expectations and social isolation among Ghanaian retirees. The findings provide empirical support for the central hypothesis that retirees who perceive a mismatch between traditional cultural expectations of elder integration and their actual post-retirement social experiences report significantly

greater loneliness and poorer psychological well-being. These results contribute to the literature on aging in sub-Saharan Africa, cross-cultural gerontology, and the psychological consequences of cultural discontinuity.

The finding that cultural expectation mismatch was positively correlated with loneliness ($r = 0.61$) and with poor psychological well-being ($r = 0.57$) is consistent with Social Identity Theory's proposition that identity-based expectation violation undermines psychological health (Tajfel & Turner, 1979). When Ghanaian retirees internalise the cultural script that elders will be respected, consulted, and cared for, they develop specific expectations about their post-retirement social world (Aboderin, 2004). When those expectations are violated through neglect, exclusion, or disrespect, the retiree experiences not only the absence of social connection but also a threat to their valued social identity as a respected elder (Hogg, 2016). This identity threat may explain why the psychological impact of expectation mismatch is larger than would be predicted by loneliness alone (Turner & Reynolds, 2010).

The finding that cultural expectation mismatch uniquely predicted 41 percent of the variance in loneliness after controlling for demographic variables is striking. This suggests that how retirees interpret their social experiences relative to cultural norms has substantial consequences for their emotional adjustment. Two retirees who experience identical levels of social contact may have vastly different loneliness outcomes depending on whether they perceive that contact as meeting or violating cultural expectations. A retiree who lives with adult children but is not consulted on family decisions may feel more isolated than a retiree who lives alone but has internalised no expectation of consultation (Coe, 2017). This finding aligns with the Cultural Determinants of Aging framework, which emphasises that the meaning of social arrangements is culturally mediated (Keith et al., 1994).

The living arrangement finding, with retirees living alone reporting significantly higher cultural expectation mismatch than those living with extended family (Cohen's $d = 1.14$), deserves attention. Living alone represents a direct violation of the extended family ideal in Ghanaian culture (Apt, 2012). Retirees who live alone may experience this arrangement itself as evidence that their families have failed to meet cultural obligations (Dovie, 2019). However, the finding that living arrangement accounted for only 4 percent of unique variance in loneliness (semi-partial $r^2 = 0.04$) compared to 41 percent for cultural expectation mismatch suggests that the subjective perception of mismatch is far more important than objective living arrangement. Some retirees living with extended family may experience high mismatch if the quality of integration is poor, while some retirees living alone may

experience low mismatch if they have adapted their expectations to contemporary realities (Van der Geest, 2016).

The absence of significant differences across locations suggests that the phenomenon of cultural expectation mismatch is not confined to Ghana's most urbanised settings. While one might expect mismatch to be higher in the more modernised environment of Accra compared to Cape Coast, the lack of location differences indicates that the disjuncture between cultural expectations and lived realities is widespread across urban Ghana (Gyasi, 2020). This may reflect the pervasive impact of modernisation, migration, and economic change on family structures throughout the country (World Bank, 2021).

Several limitations of this study should be acknowledged. The cross-sectional design precludes causal inferences. It is possible that retirees who are already lonely or depressed retrospectively reinterpret their family relationships as more culturally inadequate than they actually are. Longitudinal research following workers from pre-retirement through retirement would be needed to establish temporal ordering. The sample, while adequate in size, overrepresents urban, educated retirees and may not generalise to rural retirees where traditional family structures may be more intact. The reliance on self-report measures introduces the possibility of recall bias and social desirability bias; participants may have underreported family neglect due to shame or loyalty. The study did not measure actual family contact frequency, limiting the ability to distinguish between expectation violation driven by objective circumstances versus subjective interpretation.

10. CONCLUSION

This study provides the first quantitative evidence that perceived mismatch between cultural expectations and actual social experiences significantly predicts loneliness and poor psychological well-being among Ghanaian retirees. Retirees who believe that their families have failed to honour traditional expectations of elder integration report substantially greater social isolation than those who perceive alignment between expectations and reality. These effects were large in magnitude, with cultural expectation mismatch alone accounting for 41 percent of the variance in post-retirement loneliness. Retirees living alone were particularly vulnerable, reporting significantly higher mismatch than those living with extended family. These findings challenge the assumption that traditional cultural norms of elder respect automatically protect Ghanaian retirees from social isolation; rather, when those norms are structurally unsupported in contemporary society, they may paradoxically intensify psychological distress by creating expectations that cannot be fulfilled.

Traditional cultural norms of elderly respect automatically protect Ghanaian retirees from social isolation; rather, when those norms are structurally unsupported in contemporary society, they may paradoxically intensify psychological distress by creating expectations that cannot be fulfilled. The legacy of cultural expectations in contemporary Ghana is not simply that they prescribe elder care; it is that they may leave retirees relationally vulnerable and psychologically distressed when the social systems that once fulfilled those expectations have eroded.

11. Recommendations

Based on the findings of this study, the following recommendations are offered. For community organisations and religious institutions, develop programmes that explicitly address the gap between cultural expectations and contemporary realities for retirees. Educational workshops that normalise changing family structures while reinforcing valued elder roles can reduce retirees' sense of personal failure when traditional expectations are not fully met. For families of retirees, increase awareness of the psychological impact of expectation violation. Adult children who are unable to provide traditional levels of care due to migration or work demands can be encouraged to maintain meaningful communication, seek elders' counsel on decisions, and express respect verbally even when physical presence is limited. For policymakers, consider reforms to social protection systems that recognise the erosion of traditional family supports. Community-based elder visitation programmes, day centres, and social integration initiatives can supplement family care and reduce isolation among retirees whose families are unable to meet cultural expectations. For researchers, conduct longitudinal studies that follow workers from pre-retirement into retirement to establish causal ordering between expectation violation and psychological outcomes. Examine moderators such as urban-rural residence, socioeconomic status, and gender. Extend this research to other West African countries and to other cultural contexts where modernisation is transforming traditional elder care systems. For mental health practitioners working with Ghanaian retirees presenting with loneliness or depression, assess the client's perception of cultural expectation violation. For clients who report feeling betrayed or abandoned by family members who have not fulfilled traditional roles, therapeutic work may need to address cognitive reframing that distinguishes between family love and practical limitations, as well as grief over lost cultural ideals. Culturally adapted cognitive-behavioural interventions that help retirees revise expectations while maintaining self-worth may be beneficial. For media and public education, develop campaigns that normalise the changing

nature of family structures in contemporary Ghana while reinforcing that elder respect and value are not contingent on traditional living arrangements. Reducing shame associated with living alone or having limited family contact may help retirees seek alternative sources of social connection.

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