

The Role of Cultural and Family Values on Social Connectedness and Loneliness among Ethnic Minority Elders

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Statement of Ethical Approval

Ethics approval for this study was obtained from Western University Health Science Research

Ethics Board.

File Number: 105468

Declaration of contribution of authors

L. Garcia Diaz and M. Y. Savundranayagam designed the study, collected and analyzed the data, and wrote the manuscript. M. Kloseck and D. Fitzsimmons advised on the study design and contributed to data analysis interpretations and writing of the manuscript.

Statement of Conflict of Interest

None.

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Abstract

Objectives: Ethnic minority elders have high levels of social isolation and loneliness.

Assumptions about the family providing enough social support exist in the literature, contradicting ethnic minority elders' reported levels of isolation and loneliness. While structural barriers influence feelings of isolation and loneliness, limited information exists about the role of cultural factors such as acculturation and family values. Accordingly, this study investigated the roles of acculturation and family values on loneliness and social isolation among ethnic minority elders.

Methods: Ethnic minority elders ($N = 123$) completed a questionnaire that assessed their social connectedness, measured by social network and levels of loneliness, and structural factors such as income.. Additionally, cultural and family values were assessed by acculturation and the 'family as referents' dimension of familism, which refers to the belief that family members' behaviour should meet with familial expectations.

Results: Statistical analysis using hierarchical regression indicated that 'family as referents' and acculturation predicted loneliness, but not social network.

Conclusions: This study raises the importance of considering cultural values when investigating predictors of loneliness among ethnic minority elders.

Clinical implications: The finding highlight the importance of addressing familial expectations in programs aimed at alleviating loneliness among ethnic minority elders.

Keywords: ethnic minority elders, loneliness, social isolation, familism, cultural values, family values

Introduction

Immigration, and a growth in the ageing population are two demographic trends contributing to the increasing population of ethnic minority elders in Canada (Durst, 2005). Individuals from an ethnic minority group are defined by the *Employment Equity Act* (1995) as ‘persons, other than Aboriginal persons, who are non-Caucasian in race or non-white in colour.’ In 2006, ethnic minorities made up 16.2% of the total Canadian population; this number increased to 20.9% by 2011 (Statistics Canada 2006, 2011). Among adults aged 65 and over, 10.8% belonged to an ethnic minority group (Statistics Canada 2011). The number of ethnic minority elders is expected to grow as the ethnic minority population increases.

Ethnic minority elders face several challenges when living in Canada, including language barriers and economic disadvantage (Suwal, 2011). Furthermore, some ethnic minority elders become highly dependent on their relatives when language and cultural barriers make it difficult for them to socialize with the Canadian population (Casado and Leung, 2001). This dependency on family members, combined with language and cultural barriers, puts ethnic minority elders at a higher risk of being socially isolated and lonely.

Older adults who come from a different cultural background and whose native language differs from the dominant one report greater levels of loneliness than native-born Canadians (Gierveld et al., 2015). A better understanding of how cultural values may be related to

psychological health is needed to reduce feelings of loneliness and social isolation among ethnic minority elders.

Social Isolation and Loneliness

Social isolation is a condition in which the individual lacks a sense of belonging socially, has minimal number of social contacts, and lacks social engagement (Nicholson, 2009). Social isolation and loneliness, although related, are different social conditions. While social isolation refers to the *objective* physical separation from other individuals, loneliness is a *subjective* experience of feeling alone and apart from others (Tomaka, Thompson & Palacios, 2006).

Even though the relationship between loneliness and age is still unclear, the rising prevalence of loneliness in older adults is associated with increasing risk factors for loneliness that come with age, such as widowhood (Golden *et al.*, 2009). From a health perspective, loneliness has been linked to increased cortisol levels, poor sleep patterns and an increase in blood pressure (Cacioppo & Cacioppo, 2014; Hawkley, Burleson, Berntson & Cacioppo, 2003). Similarly, being socially isolated is associated with self-rated poor health and an increase in limitations in activities of daily living (de Belvis *et al.*, 2008). Additionally, loneliness and social isolation have both been found to be unique risk factors for depression in older adults (Cacioppo *et al.*, 2006), and with increased morbidity and mortality (Cacioppo *et al.*, 2006; Cacioppo *et al.*, 2011). The negative physical and mental health consequences of feeling lonely and socially

isolated highlight the importance of considering predictors of social isolation and loneliness.

Social Isolation and Loneliness in Ethnic Minority Elders

Family members are more likely to part of the social network of ethnic minority groups than Caucasians (Ajrouch, Antonucci, & Janevi, 2001; Kim & McKenry, 1998). Due to the central role that family plays in many ethnic minority cultures, it could be expected that ethnic minority elders have low levels of social isolation and loneliness. However, studies show that this is not always the case (Tomaka *et al.*, 2006; Gerst-Emerson, Shovali & Markides, 2014). Hispanic older adults report greater social isolation than Caucasian older adults, whereas Caucasian older adults report greater support from non-family sources than Hispanics (Tomaka *et al.*, 2006). These results suggest that Hispanic older adults depend on family for social support, and that their experience of social isolation might be due to not being socially connected to support outside the family.

Similarly, Chinese and Korean older adults have reported high levels of loneliness (Tam & Neysmith, 2006). Among older Korean women, women with a subjective identification with their ethnic group and lack of desire to socialize with other ethnic groups (Tam & Neysmith, 2006) reported having weak social networks and feeling extremely lonely (Kim 1999). Similarly, many Chinese immigrants reported isolation and loneliness due to high dependence on their children who are unable to meet all of their emotional and social needs (Tam & Neysmith,

2006). In addition, second-generation immigrants reported higher levels of loneliness than native-born Canadians (Wu & Penning, 2015). Second generation immigrants were born in Canada and were fluent in English, suggesting that language alone cannot explain reported loneliness.

Taken together, these studies suggest that many ethnic minority elders strongly believe that family is responsible for providing emotional and social support (Schwartz, 2007). However, familial support may not be enough to counteract feeling of loneliness and isolation. Consequently, a reliance on the family may result in a reluctance to expand one's social network outside of the family context, even when feeling lonely and isolated.

Contributors to Social Isolation and Loneliness among Ethnic Minority Elders: A Question of Structure or Culture

Structural Barriers. Structural barriers are factors beyond the control of the individual or part of the context/environment. The most common structural barriers to accessing programs that provide social interaction are: lack of transportation and accessibility (Aroian, Wu & Tran, 2005); a lower income (Stephens, Alpass, Towers & Stevenson, 2011); inadequate services (Gerts-Emerson *et al.*, 2014); and lack of awareness of services available (Giunta *et al.*, 2011; Tang & Pickard, 2008). All of these barriers prevent individuals from getting enough social interaction and are important contributors to the development of loneliness and isolation in

ethnic minority elders.

Cultural Barriers. Cultural barriers are associated with customs, beliefs and attitudes that influence how individuals feel, think or behave. Common cultural barriers to accessing programs that provide social interaction include: language barriers (Lai, 2008); lack of trust in service providers from different ethnic backgrounds (Sadavoy, Meier & Mui Ong, 2004); and belief that the family should provide the emotional and social support they need (Lai, 2004). Although very limited information is available regarding the role of cultural values on the development of feelings of social isolation and loneliness, family values have been speculated to influence the decision to participate in services that provide social interaction (Lai, 2008). To date, no studies have examined the role of cultural values related to family on feelings of loneliness and social isolation.

Familism

Many ethnic minority groups have a strong sense of solidarity among their family members (Wilmoth, 2001). This strong identification with the family is captured in the cultural value of familism, defined as a “strong identification and attachment of individuals and their families, and strong feelings of loyalty, reciprocity and solidarity among members of the same family” (Sabogal *et al.*, 1987). Those who endorse the value of familism view the family as the most important source of emotional, social and instrumental support (Heller, 1976; Sabogal *et al.*,

1987).

Although familism was primarily seen as being only applicable to Hispanic individuals, researchers have used familism to study other ethnic groups, such as African Americans, Asian Americans, and Caribbean Islanders (Knight *et al.*, 2002, Chamberlain, 2003; Youn *et al.*, 1999). As argued by Schwartz (2007), familism can be applicable to any ethnic minority group who holds a collectivist value system.

Familism is composed of three factors (Sabogal *et al.*, 1987): *familial obligations* assesses the perception that one has regarding the obligation to provide emotional, social and financial support to family members; *perceived support* measures the extent to which an individual expects to receive sufficient social, emotional and financial support from their family members; *family as referents* factor measures the view of relatives as behavioural and attitudinal referents.

Acculturation

Acculturation is a process that occurs when two different cultural groups are in contact, and the interaction between the two results in numerous cultural changes in one or both parties (Chiriboga, 2004). Higher levels of acculturation are associated with individuals having better mental health than those who have low levels of acculturation (Myers & Rodriguez, 2003). Moreover, minority elders and their caregivers have been found to utilize formal services more often when they have high levels of acculturation (Lai, 2004).

It is important to note that an increase in acculturation is not necessarily associated with a change in family values (Rodriguez & Kosloski, 1998; Schwartz, 2007). This suggests that even after residing in Canada for many years, individuals may still espouse cultural values that originate from their ethnic background, which could influence how they feel and behave throughout their life. Thus, years spent in Canada and acculturation are distinct constructs.

Familism and Social Connectedness

Most of what is known about the role of familism on social connectedness comes from studies that have looked at how family values influence the decision to expand social networks outside of the family context (Crist *et al.*, 2009; Lai, 2001; Lai, 2004; Sadovoy *et al.*, 2004). Ethnic minority elders hold strong beliefs about the family being responsible for providing the emotional and social support that they need (Lai, 2004; Sadovoy *et al.*, 2004), and report not wanting to cause family conflict by seeking help outside the home (Sadavoy *et al.*, 2004). Thus, cultural values surrounding familial expectations may prevent individuals from seeking social interaction outside the family context. Those who believe that family should look after emotional and social needs might be more inclined to seek support within the family.

Underpinning Theoretical Framework

Despite the importance of considering cultural values when studying ethnic minority elders, there is a dearth of theories and studies that include cultural values in their model (Durst

& Maclean, 2010). Ethnic minority status has been used across studies as a demographic variable without taking into consideration that cultural values greatly influence health related outcomes (Dilworth-Anderson & Cohen, 2009).

Theories that take into consideration cultural values have been used to study *caregivers* of ethnic minority elders. One of these theories is the updated sociocultural stress and coping model (Knight & Sayegh, 2009). The model hypothesizes that cultural values influence the use of social support by caregivers, how much support they receive, and how they perceive the social support given to them. The social support that caregivers receive, and how they perceive it, has then the possibility of either reducing or increasing the negative effects of caregiving on physical health outcomes. The updated sociocultural stress and coping model informed the present study by acknowledging that cultural values have the possibility of influencing reported social support. The quality and quantity of the social support can in turn affect reported feelings of social isolation and loneliness among ethnic minority elders.

Purpose of Study

It has been previously noted that there needs to be a better understanding of the diversity among older adults, avoiding assumptions that immigration per se is a risk factor for loneliness (Gerveld et al., 2015). The purpose of this study was to investigate if other factors beyond immigration status play a critical role in the understanding of loneliness among ethnic minority

elders. In particular, this study explored the relationships between the cultural factors and social connectedness, which includes loneliness and social isolation. Given that there are no previous studies that have looked at the influence of cultural values on social connectedness, the following research questions were posed in lieu of hypotheses.

(1) What is the relationship between familism and feelings of loneliness and social isolation?

(2) What is the relationship between acculturation and feelings of loneliness and social isolation?

Methods

Participants and Procedure

Inclusion criteria for this study were: being a member of an ethnic minority group, an age of 50 years or older, being literate, having the cognitive ability to participate in data collection, and the ability to read and understand intermediate-level English (a level of English that may still require some help with translation). The inclusion criteria of having cognitive ability to participate in data collection was satisfied by recruiting participants at places that held activities for individuals who did not have a cognitive impairment. Similarly, the ability to read and understand the letter of information served as an indicator of participant's English proficiency level.

The age cut-off was 50 years old to ensure that appropriate programs are available for this growing population upon retirement. The operational definition for an individual from an ethnic minority group, as defined by the *Employment Equity Act* (Statistics Canada, 2011), is ‘persons, other than Aboriginal persons, who are non-Caucasian in race or non-white in colour.’ Given that familism has been used to study individuals belonging to different ethnic minority groups (Knight *et al.*, 2002, Chamberlain, 2003; Youn *et al.*, 1999), it was decided to study ethnic minority groups as a unified group.

An *a priori* analysis, using G*Power 3.01 (Faul, Erdfelder, Buchner & Lang, 2009), was conducted to determine the number of participants needed to achieve adequate power with a medium effect size. Results from the *a priori* analysis with eight predictors indicated that a sample size of 114 was needed to achieve power of .80. Participant recruitment occurred in two cities in Ontario which have large populations of ethnic minority elders. Individuals were recruited at places that offer non-medical programs specifically to ethnic minority elders such as community centers and religious facilities. Individuals who demonstrated interest in participating were given a consent form. Once consent was provided, participants were asked to complete a questionnaire which included general socio-demographic questions, the Familism Scale (Sabogal *et al.*, 1987), a sub-scale of the Acculturation Rating Scale for Mexican-Americans-II (Cuellar, Arnold & Maldonado, 1995), the University of California Los Angeles Loneliness Scale

(Russell, Peplau & Ferguson, 1978), and the Revised Lubben Social Network Scale (Lubben, 1988).

Participants were observed to take an average of 30-40 minutes to complete the questionnaire. Participants spoke Spanish, Tamil, Arabic, Italian, and Russian. The research team consisted of individuals who spoke Arabic, Spanish and Tamil. They were trained on the research protocol by reviewing every item on the questionnaire, clarifying the meaning of the items, ensuring that the assistants knew how to translated each item, and explaining the importance of verbatim translation. During data collection, the team was available to assist with clarification when needed. Forty five percent of participants required some assistance with clarification. All participation was voluntary and participants were not provided with any compensation.

Measures

Independent Variables

The Familism Scale by Sabogal *et al.* (1987) was used to measure participants' familism score. The scale consists of fourteen questions answered on a scale ranging from one (strongly disagree) to five (strongly agree) that measure three factors: six questions *on familial obligations* (e.g., "Ageing parents should live with their relatives"); three questions *on perceived support from the family* (e.g., "When someone has problems s/he can count on help from his/her

relatives”); and five questions on *family as referents* (e.g. “Much of what a son or daughter does should be done to please the parents”). The internal consistency for the three factors was 0.66, 0.65, and 0.77 respectively. The internal consistency of the entire scale was 0.85. A higher mean score indicates higher endorsement of familism.

The Anglo marginality (ANGMAR) sub-scale of the Acculturation Rating Scale for Mexican Americans-II (ARSMA-II) (Cuellar, Arnold & Maldonado, 1995) was used for this study. The original scale was designed for Mexicans living in the United States. Since the sample of interest included individuals from various ethnicities living in Canada, the sub-scale was modified with references to any country of origin (i.e., not solely Mexico), and Canada as the comparison country. This measure was used by other ethnic groups, including Asian Indian families (Farver, Narang, & Bhadha, 2002) and Asian Americans (Lee, Yoon & Liu-Tom, 2006). The sub-scale consists of six questions with responses options ranging from zero (not at all) to five (extremely often or almost always). A sample question is “I have difficulty accepting certain attitudes held by Anglos.” Questions were modified as follows: “I have difficulty accepting certain attitudes held by *Canadians*.” The internal consistency of the scale was 0.87. A higher mean score reflects not being acculturated to the Canadian culture.

Dependent Variables

Loneliness was measured using Version 1 of the University of California Los Angeles

(UCLA) Loneliness Scale (Russell, Peplau & Ferguson, 1978). This scale has 21 questions with response options ranging from one (I often feel this way) to four (I never feel this way). A sample question is “I have nobody to talk to.” The internal consistency of the scale was 0.93. Scores ranged from 0-60, with a higher sum score indicating higher levels of loneliness.

Social Network was measured using the Revised Lubben Social Network Scale (LSNS-R). The LSNS-R scale (Lubben 1988) consists of 12 questions with an answer scale ranging from zero (none) to five (always). A sample question is “How many relatives do you feel close to such that you could call on them for help?” The LSNS-R consists of six questions regarding family, and six questions regarding friends. The internal consistency of the items was 0.79. Scores ranged from 0-60, with a higher sum score indicating a higher level of support from ones social network.

Demographic information

Income. Participants were asked to rate perceived income on a scale of one (not enough income to do what I want) to six (more than enough income to do what I want).

Number of years in Canada. Participants were asked to indicate in which year they arrived to Canada.

Education. Participants were asked to select their education level from five options: elementary school, high school, university/college, graduate school, or professional education.

Perceived English Proficiency. Participants were asked to indicate on a scale from one (I can say a few things in English) to four (I speak English completely fluently), how well they could speak English.

Employment Status. Participants were asked to indicate their employment status from eight options: works full-time, works part-time, retired but works part-time, fully retired, homemaker, unemployed or other.

Enjoy Spending Time Alone. Participants were asked to indicate if they enjoy spending time alone from five options: not at all, very little, moderately, almost always, very much.

Year of Birth, Gender and Ethnicity. Participants were asked to indicate their year of birth, gender and race/ethnicity.

Canadian residency status. Participants were asked to select their Canadian residency status from three options: Canadian citizen, Canadian resident or other.

Missing Data

Since only three percent of data was missing, expectation maximization (EM) was used to impute the values for missing data (Dempster, Laird & Rubin, 1977). The EM procedure was chosen because it generates realistic imputed estimates and preserves the relationship between variables (Little & Rubin, 1987; Dempster *et al.*, 1977).

Preliminary analysis

There was little variance on the familism mean score ($SD = 0.57$), creating a ceiling effect. Examination of each dimension of familism revealed that the ‘family as referents’ dimension had the highest variance among all three factors ($M = 3.88$, $SD = 0.80$) and the highest internal consistency ($\alpha = 0.77$). Given that hierarchical multiple regressions aim to explain some of the variance in measured constructs, we used ‘family as referents’ as the independent variable due to its variance and reliability. ‘Family as referents’ assesses the belief that relatives guide attitudes and behaviour, and it taps into the possibility of family values influencing social relationships by how individuals behave outside of the family circle.

Regression Analyses

Two hierarchical multiple regression analyses were run to examine the relationship between cultural factors of familism and acculturation, and outcomes of social network and loneliness. The following factors served as control variables: income, number of years in Canada, education level, English proficiency, employment status and enjoy spending time alone. . Most of these variables were used to control for the effect of structural barriers on the dependent variables. These control variables have been documented in the literature as being related to feelings of loneliness and of less supportive social networks (Lai, 2008; Aroain, Wu & Tran, 2005; Burnette, 1999; Scharlach et al., 2006). Control variables were entered in Step 1. Acculturation to Canada and ‘family as referents’ were entered in Step 2.

Results

Participant Demographics

Table 1 and Table 2 provide descriptive data on the 123 participants in this study.

Participants ranged from 50-93, with an average of 69 years. Of the total sample, 70.6% were female and 29.4% were male. In terms of ethnicity, participants in this study were predominantly Asian (40.5%) and Latin American (37.1%), with Black Canadian, European and Middle Eastern comprising the remainder of the sample. All participants were born outside of Canada. Most participants in this study had a high school or a university degree/college diploma (70.6%). Employment status varied, with 50% of participants fully retired, 17.5% homemakers, 11.4% unemployed, and the remainder employed on a full-or part-time basis. Most participants were Canadian citizens (83.9%), and the remainder were Canadian residents. The majority of participants came to Canada in the last twenty years (58%) and the remaining came between 1950-1994. Most participants reported being able to speak and understand “a few things in English” (56%), and the remaining being able to speak and understand English well. Forty percent of participants reported not having enough income to do the things they want to do, 43% having moderate income, and the remaining having a sufficient income to do the things they want to do.

<Insert Table 1 and Table 2 about here>

Predictors of Social Network

Table 3 outlines the results for the regression analysis on predictors of social network. In Step 1 of the regression analysis, years in Canada and ‘enjoys spending time alone’ were significant predictors of social network, $F(6,116) = 3.32, p < .05$. Enjoying spending time alone was associated with higher levels of support from one’s social network and more years living in Canada was associated with lower support from one’s social network. Neither acculturation nor ‘family as referents’ were significant predictors of social network in Step 2, $F(8,114) = 2.58, p < .05$. A third step was added to investigate if an interaction between acculturation to Canada, ‘family as referents’ and social network existed. The interaction was not statistically significant.

<InsertTable 3 about here>

Predictors of Loneliness

Table 3 outlines the results for the regression analysis on predictors of loneliness. Among the control variables, subjective income was a significant predictor of loneliness. Participants with lower incomes were more likely to report high levels of loneliness $F(6,116) = 3.56, p < .05$. In Step 2, acculturation to Canada and ‘family as referents’ were significant predictors of loneliness, $F(8,114) = 4.64, p < .05$. Participants who were not highly acculturated to Canada and who felt that the family was an extension of their identity reported higher levels of loneliness. A third step was added to investigate if an interaction between acculturation to

Canada, 'family as referents' and loneliness existed. The interaction was not statistically significant.

Discussion

The goal of this study was to examine the role of familism on feelings of loneliness and social isolation among ethnic minority elders. Informed by the updated sociocultural stress and coping model (Knight & Sayegh, 2009), the present study reinforces the idea there is a significant relationship between cultural values and loneliness. Study findings highlight the importance of considering cultural values when studying loneliness in ethnic minority elders.

It is not argued that cultural values play a more important role than structural barriers on feelings of loneliness. Rather, cultural values should be considered in conjunction with structural predictors of loneliness when studying reasons why ethnic minority elders report feeling lonely.

Social Isolation

The regression analysis revealed that more years spent in Canada was associated with lower levels of perceived support from one's social network. Family separation after migrating to a new country was a reason why Latin American women felt socially isolated (Hurtado-de-Mendoza, Gonzales, Serrano & Kaltman, 2014). It could be that, with many years of living in a country that values independence, family members began to put their own needs over the needs of the family, which could result in less support from families. Additionally, the findings also

revealed that enjoying spending time alone was a predictor of a larger social network.

Individuals who enjoy their solitude tend to be more selective about their friendships and experience high levels of empathy with the few close relationships that they have (Hills & Argyle, 2001). It could be that individuals who enjoy spending time alone take the time to build meaningful relationships within their social networks, resulting in higher perceived support from friends and family. This highlights the importance that older adults place on the quality of their social relationships and not on the quantity. The regression analysis did not find ‘family as referents’ or ‘acculturation’ to be unique predictors of perceived social network support. Participants were already attending programs designed to encourage social interaction and it is possible that attending the programs fulfilled their social network needs.

Loneliness

Both structural and cultural factors influence loneliness. Our study findings indicate that participants who are lonely tend to feel that they do not have enough income to do what they want, are less acculturated to Canadian culture, and view their family as an extension of themselves. This combination of factors can prevent ethnic minority elders from engaging with others, resulting in more loneliness. With respect to income, having a lower subjective income was a predictor of higher levels of loneliness in ethnic minority elders (Chang & Yang, 1999).. A

lower income may prevent ethnic minority elders from accessing programs and for participating in activities that require payment (such as going out to eat), preventing them from getting social interaction and from participating in social activities that would allow them to feel connected to others. If the cost of social activities is preventing ethnic minority elders from accessing the social support that they need, it is recommended for monetary help to participate in recreational programs to be available to those who meet criteria.

Furthermore, consistent with recent research (Lin & Kingminghae, 2014), not being highly acculturated to the Canadian culture was a predictor of high levels of loneliness. Cultural beliefs and values are more entrenched by the time people reach old age, making it harder for ethnic minorities to change their beliefs as they age (Cheung, Chudek & Heine, 2011). As ethnic minority elders grow older it will be harder to help them become acculturated to the Canadian culture, further increasing their risk for loneliness.

Findings also revealed that endorsing ‘family as referents’ was a predictor of loneliness. ‘Family as referents’ is defined as the belief that an individual should behave according to familial expectations. Those who endorse this belief view their family as an extension of themselves, and their behaviour as a reflection of their whole family (German, Gonzales & Dumka, 2009). One explanation is that believing that one’s behaviour is a reflection of the whole family could make some individuals cautious about how they behave in social situations. ‘Family

as referents' has been found to be associated with dysfunctional thoughts regarding high expectations about the care that individuals should be providing for their older relatives, resulting in depression among family caregivers (Losada *et al.*, 2010). Similarly, the 'family as referents' factor might be indirectly associated with loneliness through dysfunctional thoughts about how individuals should behave in social situations. Treas and Mazumdar (2002) found that ethnic minority elders reported feeling unhappy due to unmet expectations of traditional values such as family closeness and companionship, and feeling lonely due to things they felt they were obliged to do at home, such as house chores. These familial expectations may be creating dysfunctional thoughts about how others may perceive them if they felt the need to meet their social needs outside the home because they were not being met within the family. Ethnic minority elders may be surrounded by other people, but such dysfunctional thoughts may prevent them from forming meaningful relationships with other individuals, resulting in feelings of subjective loneliness. In other words, familial expectations may create an inability to form meaningful relationships, resulting in feelings of loneliness, despite being surrounded by other people.

It is also known that individuals who hold collectivist values report lower levels of loneliness when they have meaningful interactions with family members, but friendships have little or no association to feelings of loneliness (Lykes & Kemmelmeier, 2014). This highlights the importance of family ties for the well-being of individuals who endorse collectivist values,

and it is in accordance with previous studies that have found that non-family relationships are not as important among non-European immigrants (Gierveld et al., 2015). It could be that the friendships formed at community-based services may not be as highly valued as familial relationships.

Limitations

This is the first study examining the relationship between familism and social connectedness, and it has yielded valuable insights into the role of cultural values on social network and loneliness. However, there are limitations that must be addressed when interpreting the findings. Having the questionnaire in English restricted both the sample size and the composition of the sample. Moreover, although research assistants were provided with training on how to administer the questionnaire when translation was needed, the meaning of questions may not have carried over from language to language.

Additionally, as the population of interest was socially isolated and lonely ethnic minority elders, community centers may not have been the best place to recruit the sample of interest. Even though participants were recruited at places that offer social interaction, results showed a range in reported feelings of loneliness and in strength of social network (refer to Table 3).

Directions for Future Research

This study provides some initial support for the role of cultural values, specifically ‘family as referents’, on the development of feelings of loneliness. To better understand the findings, it is recommended that future studies explore the association between unfilled expectations of family members and reported feelings of loneliness among ethnic minority elders.

Sabogal *et al.*’s (1987) familism scale has been used primarily with caregivers. Many of the questions are about expectations that older adults have about their family members with limited questions about expectations regarding the older adult’s role within the family circle. Future research should focus on developing a familism scale that captures the reciprocal role of older adults within the family circle.

Additionally, dysfunctional thoughts guide behaviour in a maladaptive way by giving individuals unreal standards of behaviour (Marquez-Gonzalez *et al.*, 2007). Cultural values that negatively affect ethnic minority elders’ psychological health should be the focus of future research in search for therapeutic tools to help ethnic minority elders highlight the positive effects of cultural values, and reduce the impact of the negative effects on their feelings.

Lastly, the present study was informed by the updated sociocultural stress and coping model (Knight & Sayegh, 2009). This model was developed for the study of family caregivers. Given that the ethnic minority elder population is expected to keep growing, there is a pressing need for future research to focus on developing theories for the study of ethnic minority elders.

Conclusion

The results of this study address the importance of taking into consideration cultural factors when trying to understand why ethnic minority elders report feeling lonely. By understanding how family values affect ethnic minority elders, interventions, such as educational programs, that take into account cultural values can be implemented to reduce levels of loneliness. Educational programs are effective in decreasing loneliness in older adults (Cattan, White, Bond & Learmouth, 2005; Collins & Benedict, 2006). Findings from the present study are recommended to be used in educational programs for ethnic minority elders. It is particularly important that educational programs highlight the importance of having family members attend sessions along with the older adult, as our findings highlight the importance of familial relationships on feelings of loneliness.

Clinical Implications

- Subsidized recreational programs should be available for ethnic minority elders
- Dysfunctional thoughts regarding family expectations should be addressed in interventions aimed at alleviating feelings of loneliness
- Recreational programs aimed at alleviating loneliness should consider the impact of family expectations on participation rates among ethnic minority elders.

Acknowledgements

The authors would like to thank all the individuals who gave their time to participate in this study. We would also like to thank participating community centres for giving us the time and space to recruit participants.

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Table 1.
Description of Sample

Variable	N	%
Age		
50-64	51	32.9%
65-74	68	41.7%
75-84	26	19.6%
85+	10	6.2%
Gender		
Female	107	67.3%
Male	52	32.7%
Canadian Residency Status		
Citizen	125	84.5%
Resident	16	10.1%
Other	6	3.8%
Year arrived in Canada		
1950-1964	5	3.2%
1965-1979	13	8.2%
1980-1994	61	39.2%
1995-2005	36	23.1%
2005-2014	40	25.8%
Employment Status		
Work Part-Time	6	4.0%
Retired, but work part-time	6	4.0%
Work Full-Time	15	10.0%
Unemployed	18	12.0%
Homemaker	24	16.0%
Fully Retired	69	46.0%
Other	12	8.0%
Living Arrangement		
In a nursing home	1	0.7%
In a group environment	3	1.9%
Alone	21	13.7%
With other family members	64	41.5%
With a Partner	65	42.2%
Ethnicity		
Black Canadian	4	2.6%
European	11	7.7%
Middle Eastern	18	11.8%
Latin American	48	31.2%
Asian	71	46.7%
Subjective Health		
Not so good	71	44.7%
Good	85	55.3%

Table 2.

Intercorrelations Among Measured Variables and Descriptive Statistics

Variable	Loneliness	Social Network	Familism	Acculturation	English Proficiency	Income	Employment	Education	Years in Canada	Enjoy spending time alone
Loneliness	1.00									
Social Network	-0.30**	1.00								
Familism	0.18*	-0.08	1.00							
Acculturation	0.30**	-0.12	0.06	1.00						
English Proficiency	-0.21*	0.22*	-0.31**	-0.07	1.00					
Income	-0.35**	0.17	0.39**	-0.20*	0.43**	1.00				
Employment	0.18*	-0.14	-0.13	0.10	-0.40**	-0.39**	1.00			
Education	-0.05	0.25**	-0.34**	-0.10	0.56**	0.37**	-0.47**	1.00		
Years in Canada	-0.10	0.19*	0.19*	-0.09	0.11	0.12	0.03	0.12	1.00	
Enjoy spending time alone	-0.14	0.25**	-0.19*	-0.04	0.32**	0.13	-0.12	0.17	0.04	1.00
<i>M</i>	14.82	29.40	4.07	2.39	2.30	2.54	4.53	2.24	18.52	2.55
<i>SD</i>	13.02	9.09	0.57	1.00	1.19	1.27	1.34	1.16	13.85	1.27
Observed Range	0-55	7.47-52	2.21-5	1-5	1-4	1-5	1-7	1-7	0-93	1-5
α	0.93	0.79	0.85	0.87	--	--	--	--	--	--

Note: ** Correlation is significant at the .01 level

* Correlation is significant at the .05 level

Table 3.

Hierarchical Regression Analysis Predicting Loneliness and Social Network.

Predictor Variable	Loneliness ^a			Social Network ^b		
	<i>B</i>	<i>SE B</i>	<i>β</i>	<i>B</i>	<i>SE B</i>	<i>β</i>
Step 1						
Years in Canada	0.04	0.09	0.05	-0.14	0.06	-0.22*
Employment Status	0.94	1.01	0.20	-0.33	0.71	-0.05
Education Level	2.26	1.27	0.20	0.96	0.89	0.12
English Proficiency	-1.50	1.29	-0.14	0.75	0.90	0.10
Subjective Income	-2.76	0.84	-0.33*	0.48	0.59	0.08
Enjoys spending time alone	-0.87	0.93	-0.08	1.58	0.65	0.22*
Step 2						
Acculturation	3.11	1.10	0.24*	-0.50	0.81	-0.06
Family as Referents	3.31	1.51	0.20*	-0.76	1.11	-0.06

^a For the regression predicting loneliness, $R^2 = 0.11$ for Step 1 ($p < .01$); $\Delta R^2 = 0.19$ for Step 2 ($p < .01$).

^b For the regression predicting social network, $R^2 = 0.10$ for Step 1 ($p < .05$); $\Delta R^2 = 0.09$ for Step 2 ($p = .68$).