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# Beyond Independence: Experiences of Aging Well Among Community-Dwelling Oldest-Old Adults

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**ABSTRACT**

**Objective:** This study aimed to understand how community-dwelling adults aged 80 years and older experience ageing well and the meanings they attribute to these experiences. **Materials and Methods:** This qualitative study employed Interpretative Phenomenological Analysis (IPA). Twelve adults aged 82–100 years (six women and six men) were recruited using criterion and snowball sampling. Data were collected through in-depth interviews using a semi-structured interview guide, conducted in participants' homes, and analysed according to IPA principles. **Results:** Five interconnected themes emerged — living life on one's own terms, growing old without feeling alone, accepting life through faith, remaining active and productive, and finding meaning in life — which mapped onto three dimensions: autonomy, relationality, and meaning and purpose. Participants described ageing well not as the absence of disease or as complete independence, but as maintaining autonomy while receiving support when needed, sustaining meaningful relationships, adapting to age-related changes, and preserving a sense of purpose in everyday life. Ageing well was experienced as a dynamic process shaped by the interplay among autonomy, relationality, and meaning and purpose. **Conclusion:** Ageing well among the oldest-old can coexist with age-related limitations and the need for support. Rather than depending on complete independence, it involves continuing to live in personally meaningful ways as circumstances change. These findings broaden conventional understandings of ageing well by foregrounding the lived experiences of the oldest-old and support gerontological approaches that recognise both individual agency and the relational and contextual conditions that enable it.

**Keywords:** Ageing Well, Oldest-Old, Interpretative Phenomenological Analysis, Autonomy.

# Bağımsızlığın Ötesinde: Toplumda Yaşayan En İleri Yaşlı Bireylerde İyi Yaşlanma Deneyimleri

**ÖZ**

**Amaç:** Bu çalışmanın amacı, toplum içinde yaşayan 80 yaş ve üzeri bireylerin iyi yaşlanmayı nasıl deneyimlediğini ve bu deneyime yükledikleri anlamları anlamaktır. **Gereç ve Yöntem:** Nitel desende yürütülen bu araştırmada Yorumlayıcı Fenomenolojik Analiz (YFA) kullanılmıştır. Ölçüt ve kartopu örnekleme yöntemleriyle 82–100 yaş aralığında on iki birey (altı kadın ve altı erkek) çalışmaya dâhil edilmiştir. Veriler, yarı yapılandırılmış görüşme formu aracılığıyla yapılan derinlemesine görüşmelerle katılımcıların evlerinde toplanmış ve YFA ilkeleri doğrultusunda analiz edilmiştir. **Bulgular:** Araştırmada belirlenen birbiriyle ilişkili beş tema; yaşamının kontrolünü elinde tutma, yalnızlık hissetmeden yaşlanma, yaşamı inançla kabullenme, aktif ve üretken kalma ve yaşamda anlam bulma, üç boyutla; özerklikle, ilişkisellikle ve anlam ve amaçla ilişkilendirilmiştir. Katılımcılar iyi yaşlanmayı, hastalığın yokluğu ya da tam bağımsızlık olarak değil gerektiğinde destek alırken özerkliğini koruma, anlamlı ilişkilerini sürdürme, yaşa bağlı değişimlere uyum sağlama ve gündelik yaşamda amaç duygusunu canlı tutma olarak tanımlamıştır. İyi yaşlanma, özerklik, ilişkisellik ile anlam ve amaç arasındaki etkileşimle biçimlenen dinamik bir süreç olarak deneyimlenmiştir. **Sonuç:** İleri yaşlılıkta iyi yaşlanma, yaşa bağlı sınırlılıklar ve destek gereksinimiyle bir arada var olabilir. Tam bağımsızlığa bağlı olmaktan ziyade, koşullar değiştikçe kişinin kendisi için anlamlı olan biçimde yaşamını sürdürmesini içerir. Bu bulgular, 80 yaş ve üzeri bireylerin deneyimlerini merkeze alarak geleneksel iyi yaşlanma anlayışlarını genişletmekte ve hem bireysel eylemliliği hem de bunu mümkün kılan ilişkisel ve bağlamsal koşulları dikkate alan gerontolojik yaklaşımları desteklemektedir.

**Anahtar Kelimeler:** İyi Yaşlanma, En İleri Yaşlı, Yorumlayıcı Fenomenolojik Analiz, Özerklik.

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## INTRODUCTION

Living longer does not necessarily mean aging well. As life expectancy increases, more people are reaching very advanced ages, making it increasingly important to understand how they experience these later years. Although adults aged 80 years and over may encounter chronic illness, functional limitations, bereavement and increasing support needs, very advanced old age is not defined solely by these challenges (Baltes & Smith, 2003). Many continue to adapt to changing circumstances, maintain meaningful relationships and find purpose in everyday life.

Aging well is an umbrella concept encompassing different approaches to positive aging, including healthy, successful, active and productive aging (Seedsman et al., 2024). Despite conceptual differences, it is broadly understood as a multidimensional process involving physical, psychological, and social dimensions (Bowling, 2005; Waddell et al., 2025). Influential early models, particularly Rowe and Kahn's model of successful aging, emphasized avoiding disease and disability, maintaining physical and cognitive functioning, and continued engagement with life (Rowe & Kahn, 1997). However, such models have been criticized for placing excessive emphasis on health, functioning, and independence, and for failing to capture the experiences of older adults who age well despite chronic illness, functional limitations, or support needs (Holstein & Minkler, 2003; Katz & Calasanti, 2015). These limitations become particularly relevant in very advanced old age, when changing capacities and support needs may make complete independence an increasingly restrictive standard for aging well. Relational autonomy offers an alternative perspective by understanding agency as developed and exercised within relationships of support rather than through self-sufficiency alone (Mackenzie & Stoljar, 2000). From this perspective, receiving support need not negate autonomy; instead, it may enable older adults to continue making decisions and pursuing what matters to them. Adaptation is also central, as individuals reorganize goals and draw on available resources to maintain meaningful engagement as circumstances change (Baltes & Smith, 2003).

Studies based on older adults' own perspectives show that aging well extends beyond health and independence. In very advanced old age, meaningful relationships, adaptation to age-related changes, spirituality, and supportive environments become increasingly important (Jopp et al., 2015; Halaweh et al., 2018; Badache et al., 2023; Yılmaz et al., 2026). Cultural values, life histories, and social conditions also shape these experiences (Fernández-Ballesteros et al., 2010; Seedsman et al., 2024). However, non-Western perspectives remain comparatively underrepresented in the literature. This gap is particularly relevant in Türkiye, where population aging is accelerating. In 2025, adults aged 65 years and over accounted for 11.1% of the total population, while those aged 80 years and over accounted for 18.3% of the older population (TurkStat, 2026). In this study, adults aged 80 years and older are operationally defined as the *oldest-old*, consistent with recent studies that use an 80+ threshold (Chen et al., 2020; Rolandi et al., 2024). Baltes and Smith's (2003) conceptualization of the "fourth age" further highlights the distinctive challenges and adaptive processes that may become increasingly salient in very advanced old age. Despite this demographic shift, qualitative evidence focusing specifically on how the oldest-old experience aging well in Türkiye remains limited.

This study therefore explores aging well through the lived experiences of community-dwelling adults aged 80 years and over in Türkiye. By centering the perspectives of the oldest-old, it seeks to broaden understandings of aging well beyond predominantly biomedical and Western-oriented perspectives. The study asks: How do the oldest-old experience aging well, and what meanings do they attribute to this experience?

## MATERIALS AND METHODS

### Study design

This qualitative study employed Interpretative Phenomenological Analysis (IPA) to explore how community-dwelling adults aged 80 years and over experience aging well and the meanings they attribute to these experiences. IPA was selected because it seeks to understand how individuals make sense of important life experiences from their own perspectives while recognizing the researcher's interpretative role (Smith & Osborn, 2008; Smith et al., 2009). Given the experiential and contextual nature of aging well in very advanced old age, IPA offered an appropriate framework. IPA was considered particularly suitable for this study for three reasons. First, its idiographic commitment—analyzing each case in depth and in its own context before moving to shared patterns—enables examination of variation within a shared experiential context without premature generalization. Second, its double-hermeneutic stance, in which the researcher interprets participants' meaning-making, aligns well with the interpretative nature of aging well. Third, unlike approaches oriented towards generating categories or theory (e.g., thematic analysis or grounded theory) or towards describing the essence of a phenomenon (descriptive phenomenology), IPA preserves the particularity of each account while allowing convergence and divergence across cases to be explored.

### Participants

Participants were recruited using criterion sampling and snowball sampling, both purposive sampling strategies. Individuals were eligible if they were aged 80 years or older, had sufficient cognitive and communication abilities to participate in an in-depth interview, and were willing to take part voluntarily.

The researcher identified initial participants through professional and social networks and recruited additional participants through referrals. In total, 12 community-dwelling adults aged between 82 and 100 years participated. In IPA, homogeneity refers primarily to a shared experiential perspective rather than demographic uniformity. In this study, participants were community-dwelling adults aged 80 years and over within the same sociocultural context, while variation across the 82–100-year age range was retained for idiographic examination. Recruitment continued until the interviews provided sufficient experiential richness to address the research question and no substantially new insights emerged.

**Data collection**

The study was conducted in Balıkesir, a province in northwestern Türkiye. The researcher collected data through semi-structured, face-to-face interviews between 20 August and 15 December 2025. The interview guide was developed after reviewing the relevant literature and was reviewed by two gerontology experts to ensure clarity and relevance.

All interviews took place in participants' homes, providing a familiar setting for discussing personal experiences. With permission, we audio-recorded them, and field notes documented contextual observations. Interviews lasted approximately 55 minutes.

We removed all identifying information before analysis to maintain participants' confidentiality and assigned participants the codes K1–K6 (women) and E1–E6 (men).

**Data analysis**

Data were analyzed following the IPA principles described by Smith and colleagues (Smith & Osborn, 2008; Smith et al., 2009). A single researcher conducted the analysis. The researcher analyzed each transcript individually before cross-case comparison. Analysis involved repeated reading; detailed descriptive, linguistic, and conceptual noting; developing emergent themes; and exploring relationships between themes within each case. Shared patterns were then examined to develop superordinate themes while preserving the uniqueness of each participant's experience. Throughout, participants' accounts remained central to the interpretation and were illustrated with verbatim quotations.

**Ethical considerations**

Ethical approval for the study was obtained from the Akdeniz University Medical Scientific Research Ethics Committee (Date: 30.05.2024, Approval no: 395.The study followed the principles of the Declaration of Helsinki. Written informed consent was obtained from all participants before data collection.

**Rigour**

Rigour was enhanced through a systematic and transparent process. All interviews were transcribed verbatim and verified against the original recordings, and transcripts were interpreted alongside contextual field notes to support triangulation. Participants reviewed their transcripts to confirm factual accuracy; this process did not involve validation of the researcher's interpretations or themes.

Given IPA's interpretative nature (Smith et al., 2009), reflexivity was integral. The researcher's background in gerontology and qualitative research informed both data generation and interpretation. The researcher kept reflexive notes throughout data collection and analysis to examine how prior assumptions and professional background might shape interpretation and continually checked interpretations against participants' narratives to preserve fidelity to their experiences.

Each account was analyzed within its own context before similarities and differences across cases were examined, and verbatim quotations were used throughout the findings to make the relationship between accounts and interpretations transparent. The study documented all stages in detail, providing an audit trail that enhanced the study's credibility, dependability, and confirmability (Lincoln & Guba, 1985).

## RESULTS

As shown in Table 1, the study included 12 adults aged 82–100 years (six women and six men). Participants varied in education and occupation, marital status, and living arrangements.

**Themes**

The analysis yielded five main themes, together with their related subthemes, reflecting participants' experiences of aging well. The five themes were organized into three higher-order dimensions: autonomy (Theme 1), relationality (Theme 2), and meaning and purpose (Themes 3–5). Theme 1 was grouped under autonomy because it centered on self-direction and agency; Theme 2 under relationality because it concerned trust, reciprocity, and belonging; and Themes 3–5 under meaning and purpose because they addressed meaning-making, continued engagement, contribution, and continuity of identity. These dimensions represent higher-order interpretative groupings rather than additional themes. Table 2 presents the overarching dimensions, themes, and subthemes.

**Theme 1. Living life on one's own terms**

For the participants, aging well was closely associated with maintaining control over everyday life. Rather than describing it as freedom from illness, they emphasized the ability to make their own decisions, carry out everyday activities, and continue living according to their own preferences despite age-related changes. In this sense, autonomy was understood not as complete independence but as remaining the subject of one's own life while accepting support when needed. Preserving physical health mattered because it enabled participants to continue managing their daily lives, maintain mobility, and care for themselves. As K3 explained:

*"Let me live in health… Let me look after myself and not be dependent on anyone. There is nothing as bad as being dependent on someone. May God spare me from loss of mind."* (K3)

For K3, aging well was closely tied to remaining self-sufficient; dependence itself represented a feared loss of control over her own life. Rather than illness itself, participants often described aging in terms of the activities they could no longer carry out independently. For K1, the important issue was not receiving assistance itself but retaining the freedom to pursue the life she wanted:

*"Aging is not being able to do everything you want… I love nature very much, I love to travel, but I cannot join in. If someone I trust is with me, then I can."* (K1)

K1's account differed from K3's in an important respect. Whereas K3 associated dependence with a loss of self-sufficiency, K1 did not experience support as inherently incompatible with autonomy. For her, having a trusted person could extend what she could still choose and do.

A different form of adaptation was evident in E6's account.

*"I used to start swimming from here… I would swim all the way to the pier. It was perhaps seven kilometers. Now I cannot swim, but I go walking. Thanks be to God my health is good."* (E6)

For E6, maintaining continuity did not mean preserving the same activity in the same form; rather, he adjusted the activity to what was currently possible. Taken together, these cases reveal that autonomy was not experienced uniformly. For K3, self-reliance remained central to aging well; for K1, selectively accepted support could sustain agency; and for E6, autonomy meant adapting valued activities to changing capacities. Living life on one's own terms, therefore, involved different configurations of self-reliance, support, and adaptation across individual lives.

**Table 1. Sociodemographic characteristics of the participants.**

| Code | Age | Gender | Education | Marital Status | Living with | Former Occupation |
|---|---|---|---|---|---|---|
| **K1** | 87 | Female | No education | Widowed | Daughter | Homemaker |
| **K2** | 89 | Female | Primary school | Widowed | Daughter | Homemaker |
| **K3** | 85 | Female | Primary school | Married | Spouse | Care worker |
| **K4** | 87 | Female | Primary school | Widowed | Daughter | Homemaker |
| **K5** | 84 | Female | Secondary school | Widowed | Alone | Homemaker |
| **K6** | 84 | Female | Primary school | Widowed | Daughter | Homemaker |
| **E1** | 92 | Male | High school | Married | Spouse | Health worker |
| **E2** | 86 | Male | Secondary school | Married | Spouse | Imam |
| **E3** | 83 | Male | Secondary school | Single | Alone | Driver |
| **E4** | 82 | Male | University | Widowed | Alone | Teacher |
| **E5** | 100 | Male | Higher education | Widowed | Grandchildren | Teacher |
| **E6** | 83 | Male | University | Married | Spouse | Mechanical engineer |

**Table 2. Overarching dimensions, themes and subthemes of ageing well among the oldest-old.**

| Overarching dimension | Theme | Subthemes |
|---|---|---|
| **Autonomy** | **Living life on one's own terms** | Maintaining physical health; managing everyday activities; making one's own decisions; preserving autonomy while receiving support when needed. |
| **Relationality** | **Growing old without feeling alone** | Family support; reciprocal care and support; maintaining relationships with children and grandchildren; neighbour and friendship ties; feeling valued and connected |
| **Meaning and purpose** | **Accepting life through faith** | Maintaining prayer and worship; gratitude; accepting ageing and mortality |
| | **Remaining active and productive** | Continuing to learn; maintaining everyday responsibilities; participating in social life |
| | **Finding meaning in life** | Contributing to others; appreciating the value of life; finding joy in everyday life |

**Theme 2. Growing old without feeling alone**

For the participants, aging well was closely tied to meaningful relationships. The autonomy described in the previous theme was sustained through trust, belonging, and reciprocal support. Rather than simply having people around them, participants emphasized feeling valued, knowing someone would be there when needed, and maintaining relationships that provided them with security and a sense of belonging. Many described loneliness as one of the most difficult aspects of very advanced old age. However, loneliness was associated less with living alone than with feeling forgotten, misunderstood, or disconnected from others. Reflecting on the loss of family members and friends, E4 explained:

*"Above all, one has to accept that loneliness is a terrible hardship. As you grow old, the people around you dwindle. You lose your spouse; your friends pass away. What matters is that the one who remains is at peace, is not looked down upon by their children, and feels secure. Then a person can carry on with life more easily." (E4)*

Whereas E4 emphasized loss, recognition, and security, K3 located relational support in the reciprocity of marriage:

*"The man is lame, and so am I. But we support each other. He helps me, I help him. What one of us cannot do, the other tries to do. We look out for each other, and so we get by." (K3)*

Reciprocity also extended to family roles. K6 described continuing to contribute through caring for her grandchild:

*“I can't sit idle. When my grandchild comes home from school, I look after them. I cook their meal. I'll do it as long as I can.” (K6)*

For participants living without a spouse, children, grandchildren and neighbors were particularly important sources of emotional support.

Beyond individual ties, a familiar, long-established neighborhood offered belonging and everyday reciprocity. K4 emphasized the reassurance provided by dependable neighborly support, whereas K2’s account reflected a stronger sense of rootedness and familiarity within the neighborhood:

*"Bless my neighbors, they never leave me alone. Not once but a thousand times they have come. They knock on my door and ask how I am. Just knowing they are there gives a person strength." (K4)*

*"The neighbors across from us are all locals. You can talk from one balcony to the next. They have gardens, and in the evening, we go out and sit with them; we drop in on one another for coffee. Our neighborhood is good — a local neighborhood, and I grew up here." (K2)*.

Across these accounts, relational security was experienced in different ways: through recognition and security after loss, reciprocal spousal support, dependable neighborly care, and a sense of rooted belonging**.** Aging well was therefore experienced not as having a large social network, but as living within relationships characterized by trust, reciprocity, and a rooted sense of belonging.

**Theme 3. Accepting life through faith**

Making sense of age-related changes, the loss of loved ones and the awareness of life's finitude emerged as an important aspect of aging well. For many participants, faith provided strength that helped them accept what they could not control, cope with uncertainty, and maintain inner peace. Rather than being experienced solely as a religious obligation, faith was woven into everyday life and continued to provide spiritual support even when physical limitations required adapting religious practices. As K4 explained:

*"Every day I read my Qur'an. When I read, my heart is at ease. I try to perform my prayers as much as I can […]. But I pray even if seated. As long as I can fulfill my duty." (K4)*

Whereas K4 emphasized continuity of religious practice despite physical limitations, E2 described faith as a balance between personal effort and trust in God:

*"When you begin a task, if you say 'Bismillah', do not be afraid. God helps. A person should do all they can and leave the rest to God. Then one's heart is more at ease." (E2)*

Participants also viewed caring for their bodies as a spiritual responsibility, describing health as a trust to be protected. Gratitude, appreciation of what remained possible, and reconciliation with the past were all seen as expressions of faith. For E1, acceptance was more directly connected with mortality and the prospect of being remembered by others:

*"Dying is in our fate; but to be forgotten, how sorrowful." (E1)*

Across these accounts, faith took different forms: continuity of religious practice for K4, a balance between effort and surrender for E2, and a way of making sense of mortality for E1. Overall, faith supported acceptance of uncertainty while maintaining a sense of connection with life.

**Theme 4. Remaining active and productive**

For the participants, aging well also meant remaining actively engaged in everyday life. The autonomy, connectedness, and acceptance described in the previous themes were reflected here through continuing to learn, staying physically active, carrying out everyday responsibilities, and participating in social life. Rather than viewing old age as withdrawal, participants adapted their activities while continuing to do what they valued.

Continuing to learn was one way of maintaining this engagement. Reading, following current events, and seeking new knowledge were valued not only for acquiring information but also for keeping the mind active. As E5 explained:

*"I have kept notes for years, nearly twenty notebooks. Whatever I learned about diabetes I wrote down. […] I follow the news, I follow politics. When a person stops learning, it is as if they become cut off from life."* (E5)

Whereas E5 emphasized learning as a way of remaining connected to life, K6 located activity in continuing to manage everyday responsibilities:

*"I can never sit still. Before they are up, let me get up and do the work. I am old, but my peers just sit, whereas I still cook my own meals and do not have others waiting on me."* (K6)

Mobility likewise carried meaning beyond physical exercise. Going outdoors, walking, and remaining connected with the surrounding environment symbolized freedom and continued participation in life. E3 expressed this as follows:

*"Many people my age cannot leave the house. Their world becomes as small as the four walls of their home. When I go out, I feel free […]. I get tired, but that tiredness tastes different. The more one walks, the more one feels alive."* (E3)

Across these accounts, remaining active took different forms—continued learning, everyday responsibility, and physical mobility—but in each case it sustained a sense of engagement with life.

**Theme 5. Finding meaning in life**

While the previous theme focused on remaining active, this theme concerned why life continued to feel meaningful. Meaning came not simply from staying busy, but from preserving lifelong values, maintaining continuity between past and present, feeling that one still mattered to others, and, in some accounts, leaving something behind.

For E1, a retired military health officer, helping others represented more than a continuation of his former professional role; it remained a core expression of who he was:

*"Ours is a profession of conscience, not of the purse. The other day a friend fell ill; I had a fever of forty degrees, and I gave the injection all the same. I still rush to help, and I take great, great pleasure in it; I do not need money." (E1)*

E4 similarly found meaning through contribution, but his account centered on the emotional fulfillment of making a difference in others' lives:

*"For about twelve years we have been doing theatre with children with disabilities. On the days I go to rehearsals, I feel completely different. When the children's faces light up, I become happy too. I was tired on the way home, but even that tiredness brings a person happiness." (E4)*

For E1, meaning also extends towards the future through a desire to leave something behind. Having written poetry for many years, he described his wish to share his work with future generations:

*"I have close to five hundred poems. If I could find a sponsor and have them printed before I die, I would be happy." (E1)*

K5's account reflected a different pathway to meaning, centered on a renewed sense of personal value and purpose:

*"I had begun to feel very worthless, as if everything I had done had come to nothing, as if I had no purpose. But now I feel more valued, more revived, more energetic. I count the days to come here, and I come here full of joy." (K5)*

Across these accounts, meaning was sustained in different ways—through continuity of identity, contribution to others, legacy, and renewed self-worth. What distinguished this theme from remaining active was not the activity itself, but the significance participants attached to what they did and to who they continued to be.

**DISCUSSION**

This study contributes to the limited qualitative literature on the oldest-old by exploring how community-dwelling adults aged 80 years and over experience aging well. Participants described it not as the absence of illness or high functioning but as living on one's own terms, growing old without feeling alone, accepting life through faith, remaining active, and finding meaning in life. Together, these findings suggest that aging well among the oldest-old is a subjective, relational, and multidimensional process that can be sustained alongside age-related changes and support needs (Jopp et al., 2015; Halaweh et al., 2018). The findings are discussed below under three interconnected dimensions: autonomy, relationality, and meaning and purpose.

**Autonomy: living life on one's own terms**

The most prominent finding is that participants did not equate aging well with complete independence; instead, they described it as remaining in control of their lives while receiving support when needed. This is consistent with studies emphasizing independence, self-reliance, and avoiding becoming a burden on one's children (Chen et al., 2020; Neville et al., 2021), and with Plugge's (2021) observation that subjective experiences of aging well among the oldest-old do not necessarily correspond with objective indicators of successful aging.

The study extends this by showing that autonomy was experienced not only as an individual capacity but as something sustained through supportive relationships. Participants viewed receiving support as compatible with autonomy, as long as they could still make their own decisions and live according to their preferences. This is consistent with the concept of relational autonomy (Mackenzie & Stoljar, 2000) and with recent work arguing that autonomy should be understood in light of the realities of frailty rather than through ideals of complete self-sufficiency (Gobillot et al., 2025).

Participants also highlighted the importance of familiar neighborhoods and supportive social environments in sustaining everyday autonomy and a sense of belonging. This is consistent with environmental gerontology research emphasizing the role of age-friendly environments in later-life participation (van Hoof et al., 2021).

**Relationality: growing old without feeling alone**

The second dimension highlights that aging well was experienced not as an individual achievement but as something sustained through relationships. Participants described spouses, children, grandchildren, neighbors and friends as sources of emotional security, continuity and belonging rather than mere protection against loneliness. This is consistent with studies identifying social participation, family support and connectedness as central to aging well (Fernández-Ballesteros et al., 2010; Halaweh et al., 2018) and highlighting the importance of family relationships in later life (Sulandari et al., 2024).

The findings also extend this by showing that participants valued family relationships not only for the care they provided but also because they enabled them to keep contributing to others' lives. Through reciprocal roles—caring for grandchildren, supporting a spouse, sharing household responsibilities—participants maintained their sense of usefulness, identity, and belonging. Aging well thus emerged as a relational process shaped by both receiving and providing support, not by individual independence alone.

**Meaning and purpose: living a meaningful life**

The third dimension shows that aging well among the oldest-old depends on maintaining a meaningful connection with life. For many, faith was central: prayer, worship, gratitude and trust in God helped them accept what they could not change while preserving hope and inner peace (Ramsey, 2012). Yet acceptance did not imply passivity; participants cared for their bodies, kept everyday routines and continued to do what remained possible as part of their spiritual responsibility. These findings are consistent with research identifying spirituality, acceptance and awareness of mortality as important dimensions of aging well, particularly in community-oriented cultures (Badache et al., 2023; Sulandari et al., 2024).

Meaning was also sustained through remaining active and productive. Learning, reading, walking, artistic activities, household responsibilities, and helping others reinforced participants' sense of competence and purpose, echoing Roe et al. (2022) and Rolandi et al. (2024) on the role of meaningful activities in resilience and well-being. Participants defined activity not by its intensity but by its personal significance, resonating with Logvinov et al. (2026), who describe later-life vitality as emerging through adaptation, mental engagement and supportive relationships.

Beyond activity, participants associated ageing well with continuity between past, present and future. Continuing to contribute, preserving lifelong values and leaving a meaningful legacy allowed them to experience life as purposeful despite an awareness of mortality, echoing research on the growing importance of life review, legacy and meaning among the oldest-old (Badache et al., 2023).

The findings suggest that aging well can be sustained alongside age-related limitations and increasing support needs. Participants' accounts showed that autonomy, meaningful relationships and a sense of purpose could be maintained alongside age-related changes and varying support needs, supporting critiques of successful aging models that equate aging well with the absence of disease, high functioning and complete independence (Holstein & Minkler, 2003; Katz & Calasanti, 2015).

The principal contribution of this study is to show that aging well among the oldest-old is grounded not in avoiding loss but in adapting to changing circumstances while continuing to live according to one's own preferences, maintaining meaningful relationships and sustaining a sense of purpose. Rather than separate domains, autonomy, relationships and meaning interact to shape how aging well is experienced in very advanced old age.

**Study Limitations and Strengths**

This study has some limitations. Given the idiographic aim of IPA, the study did not seek statistical generalization; the findings should instead be understood within the particular sociocultural and experiential context of community-dwelling adults aged 80 years and older in Balıkesir, Türkiye. Recruitment through professional and social networks followed by snowball sampling may have

shaped who entered the study, particularly by favoring individuals who were accessible and willing to discuss their experiences. In addition, individuals with substantial cognitive or communication difficulties were not represented. As the analysis was conducted by a researcher with a professional background in gerontology, interpretation was necessarily situated; reflexive notes were used throughout data collection and analysis to examine how this positioning might influence the research process. Nevertheless, the idiographic design enabled an in-depth examination of both shared meanings and individual variations in experiences of aging well among adults aged 80 years and older.

## CONCLUSION

This study provides qualitative evidence on how the oldest-old experience aging well within the Turkish context. By centering the voices of adults aged 80 years and over—a population that remains underrepresented in the literature—it demonstrates that aging well is not defined by the absence of illness or complete independence. Rather, it is experienced as a dynamic, relational, and contextual process shaped by the interaction among autonomy, relationality, and meaning and purpose. Together, these dimensions show that aging well can be sustained alongside age-related changes and support needs when older adults can continue living according to their own preferences, maintain meaningful relationships, and preserve a sense of purpose

These findings have important implications for policy and practice. Health and social care for the oldest-old should move beyond a sole focus on disease management and dependency towards person-centered approaches that recognize older adults as active agents in their own lives. Supporting decision-making, meaningful social participation, close relationships, spirituality and supportive physical and social environments may be just as important as addressing health conditions. Promoting age-friendly communities, strengthening opportunities for lifelong learning and social participation, and enabling oldest-old adults to maintain meaningful roles within their families and communities are therefore essential for supporting aging well among the oldest-old.

This study was conducted within a single sociocultural context and involved a relatively small sample of community-dwelling oldest-old adults, which may limit the findings' transferability. Future qualitative research could explore how the oldest-old experience aging well across different cultural and socioeconomic settings, including rural and urban communities. Such research may further illuminate how sociocultural context shapes experiences of aging well and inform culturally responsive policies and services.

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**Conflict of Interest**

The author declares no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

**Author Contributions**

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**Ethical Approval**

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## REFERENCES

Badache, A. C., Hachem, H., & Mäki-Torkko, E. (2023). The perspectives of successful ageing among older adults aged 75+: A systematic review with a narrative synthesis of mixed studies. *Ageing & Society,* 43(5), 1203–1239. https://doi.org/10.1017/S0144686X21001070

Baltes, P. B., & Smith, J. (2003). New frontiers in the future of aging: From successful aging of the young old to the dilemmas of the fourth age. *Gerontology, 49*(2), 123–135. https://doi.org/10.1159/000067946

Bowling, A. (2005). Ageing well: Quality of life in old age. Open University Press.

Chen, L., Ye, M., & Kahana, E. (2020). A self-reliant umbrella: Defining successful aging among the old-old (80+) in Shanghai. *Journal of Applied Gerontology,* 39(3), 242–249. https://doi.org/10.1177/0733464819842500

Fernández-Ballesteros, R., García, L. F., Abarca, D., Blanc, E., Efklides, A., Moraitou, D., Kornfeld, R., Lerma, A. J., Mendoza-Núñez, V. M., Mendoza-Ruvalcaba, N. M., Orosa, T., Paúl, C., & Patricia, S. (2010). The concept of 'ageing well' in ten Latin American and European countries. *Ageing & Society,* 30(1), 41–56. https://doi.org/10.1017/S0144686X09008587

Gobillot, H., Genet, B., Dieudonné, B., Nicolas, M., Haddad, R., Boddaert, J., & Zerah, L. (2025). Striving for purposeful autonomy: A qualitative method to enhance autonomy measurement in older adults. *BMC Geriatrics,* 25(1), 963. https://doi.org/10.1186/s12877-025-06583-4

Halaweh, H., Dahlin-Ivanoff, S., Svantesson, U., & Willén, C. (2018). Perspectives of older adults on aging well: A focus group study. *Journal of Aging Research,* 2018, 9858252. https://doi.org/10.1155/2018/9858252

Holstein, M. B., & Minkler, M. (2003). Self, society, and the "new gerontology." *The Gerontologist*, 43(6), 787–796. https://doi.org/10.1093/geront/43.6.787

Jopp, D. S., Wozniak, D., Damarin, A. K., De Feo, M., Jung, S., & Jeswani, S. (2015). How could lay perspectives on successful aging complement scientific theory? Findings from a U.S. and a German life-span sample. *The Gerontologist,* 55(1), 91–106. https://doi.org/10.1093/geront/gnu059

Katz, S., & Calasanti, T. (2015). Critical perspectives on successful aging: Does it "appeal more than it illuminates"? *The Gerontologist*, 55(1), 26–33. https://doi.org/10.1093/geront/gnu027

Lincoln, Y. S., & Guba, E. G. (1985). Naturalistic inquiry. Sage.

Logvinov, I. I., Crook, J., Neff, D. F., Tofthagen, C., & Loerzel, V. W. (2026). Understanding factors contributing to vitality in older adults: A qualitative descriptive study. *Geriatrics,* 11(4), 93. https://doi.org/10.3390/geriatrics11040093

Mackenzie, C., & Stoljar, N. (Eds.). (2000). Relational autonomy: Feminist perspectives on autonomy, agency, and the social self. Oxford University Press.

Neville, S., Napier, S., Adams, J., Shannon, K., & Wright-St Clair, V. (2021). Older people's views about ageing well in a rural community. *Ageing & Society,* 41(11), 2540–2557. https://doi.org/10.1017/S0144686X20000458

Plugge, M. (2021). Successful ageing in the oldest old: Objectively and subjectively measured evidence from a population-based survey in Germany. *European Journal of Ageing,* 18(4), 537–547. https://doi.org/10.1007/s10433-021-00609-7

Ramsey, J. L. (2012). Spirituality and aging: Cognitive, affective, and relational pathways to resiliency. *Annual Review of Gerontology & Geriatrics*, 32(1), 131–150. https://doi.org/10.1891/0198-8794.32.131

Rowe, J. W., & Kahn, R. L. (1997). Successful aging. *The Gerontologist*, *37*(4), 433-440. https://doi.org/10.1093/geront/37.4.433

Roe, J., Blythe, M., Oliver, C., & Roe, A. (2022). Flourishing 'older-old' (80+) adults: Personal projects and their enabling places. Wellbeing, *Space and Society*, 3, 100072. https://doi.org/10.1016/j.wss.2022.100072

Rolandi, E., Rossi, M., Colombo, M., Pettinato, L., Del Signore, F., Aglieri, V., Bottini, G., & Guaita, A. (2024). Lifestyle, cognitive, and psychological factors associated with a resilience phenotype in aging: A multidimensional approach on a population-based sample of oldest-old (80+). *The Journals of Gerontology: Series B*, 79(11), gbae132. https://doi.org/10.1093/geronb/gbae132

Seedsman, T., Korkmaz Yaylagül, N., & Akış, A. G. (2024). Aging well and the intersection of flourishing, connectedness, and sense of meaningfulness in a changing world: Implications for personal and societal responsibility. *Journal of Economy Culture and Society,* 70, 227–241. https://doi.org/10.26650/JECS2024-1466636

Smith, J. A., Flowers, P., & Larkin, M. (2009). Interpretative phenomenological analysis: Theory, method and research. Sage.

Smith, J. A., & Osborn, M. (2008). Interpretative phenomenological analysis. In J. A. Smith (Ed.), Qualitative psychology: A practical guide to research methods (2nd ed., pp. 53–80). Sage.

Sulandari, S., Coats, R. O., Taufik, T., & Johnson, J. (2024). What does it mean to "age well" among British and Javanese older adults? A cross-cultural qualitative study. *The Journals of Gerontology: Series B*, 79(7), gbae085. https://doi.org/10.1093/geronb/gbae085

Turkish Statistical Institute. (2026). *Türkiye in Statistics, 2025* (Publication No. 4826).

van Hoof, J., Marston, H. R., Kazak, J. K., & Buffel, T. (2021). Ten questions concerning age-friendly cities and communities and the built environment. Building and Environment, 199, 107922. https://doi.org/10.1016/j.buildenv.2021.107922

Waddell, C., Van Doorn, G., Power, G., & Statham, D. (2025). From successful ageing to ageing well: A narrative review. *The Gerontologist,* 65(1), gnae109. https://doi.org/10.1093/geront/gnae109

Yılmaz, J., Yaylagül, N. K., & Helvik, A. S. (2026). Experiences of aging well: A qualitative study of older Turkish circular migrants. *Journal of Aging Studies,* 77, 101425. https://doi.org/10.1016/j.jaging.2026.101425