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An Examination of Effective Coping Strategies Against Role Loss Among Older Adults Receiving Institution-Based Care: A Focus Group Study *

Kurumsal Bakım Alan Yaşlı Bireylerde Rol Kayıplarına Karşı Etkili Başa Çıkma Stratejilerinin İncelenmesi: Bir Odak Grup Çalışması

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ABSTRACT

This qualitative study examines the effective coping strategies developed by older adults receiving institution-based care in response to role losses and investigates how these strategies support group members in coping with role loss. Data were collected through a focus group conducted with eight participants at Darülaceze, a residential care institution located in Istanbul, Türkiye, and analyzed using thematic analysis. Three main themes emerged: current roles, self-selected roles, and structured roles. The findings indicated that, in order to compensate for role losses, participants adopted meaningful roles and organized their role-related behaviors in ways that aligned their individuality with their social environment. This restructuring of social roles had a positive impact on participants' social functioning and their adaptation to institutional life. In conclusion, the study underscores the significance of assuming meaningful roles in coping with role losses and demonstrates that the empowerment approach in social work practice, together with the life wisdom shared in focus group discussions, can inform the design of interventions at the micro, mezzo, and macro levels.

Keywords: *role losses, older adults, focus group, qualitative research, social work*

ÖZ

Bu niteliksel çalışma, kurum temelli bakım alan yaşlı yetişkinlerin rol kayıplarına karşı geliştirdikleri etkili başa çıkma stratejilerini ve bu stratejilerin grup üyelerinin rol kaybıyla başa çıkmalarına nasıl katkı sağladığını incelemektedir. Veriler, İstanbul'da bulunan Darülaceze kurumunda sekiz katılımcı ile gerçekleştirilen bir odak grup çalışması yoluyla toplanmış ve tematik analiz yöntemiyle değerlendirilmiştir. Analiz sonucunda üç ana tema ortaya çıkmıştır: mevcut roller, kendi seçtikleri roller ve yapılandırılmış roller. Bulgular, rol kayıplarını telafi etmek için katılımcıların anlamlı roller üstlendiklerini ve bu rollere ilişkin davranışlarını bireyselliklerini sosyal çevreleriyle uyumlu hale getirecek şekilde düzenlediklerini göstermiştir. Sosyal rollerin yeniden yapılandırılması, katılımcıların sosyal işlevsellikleri ve kurumsal yaşama uyumları üzerinde olumlu etki yaratmıştır. Sonuç olarak, bu çalışma, rol kayıplarıyla başa çıkma sürecinde anlamlı roller üstlenmenin önemini vurgulamakta ve sosyal hizmet uygulamalarında güçlendirme yaklaşımının, odak grup tartışmalarında ortaya çıkan yaşam bilgeliğiyle birlikte, mikro, mezzo ve makro düzeylerdeki müdahalelerin tasarımına katkı sağlayabileceğini göstermektedir.

Anahtar kelimeler: *rol kaybı, yaşlı yetişkinler, odak grup, nitel araştırma, sosyal hizmet*

* This study was derived from the first author's doctoral dissertation prepared under the supervision of the second author. It was also presented at the International Mardin Artuklu Scientific Research Congress held on January 15–16, 2021.

INTRODUCTION

There is an increase in the rate and number of older adults in almost every country. According to global population statistics, the proportion of older adults worldwide reached 10.2% in 2024 (Turkish Statistical Institute [TÜİK], 2025). Türkiye's proportion of older adults, at 10.6%, was slightly above the world average, and the population of older adults has been growing at a higher rate compared to other age groups. In contrast, the proportion of young people has relatively declined: globally, the proportion of young people was 15.6% in 2024, whereas in Türkiye it was 14.9%, slightly below the world average (TÜİK, 2025). This indicates that demographic transformation in Türkiye is particularly characterized by the rapid growth of the older population. According to the Turkish Statistical Institute (TÜİK, 2024), the population of older adults, defined as individuals aged 65 and above, increased by 20.7% in the last five years, rising from 7,550,727 in 2019 to 9,112,298 in 2024. The proportion of older adults within the total population also grew from 9.1% in 2019 to 10.6% in 2024. In 2019, 62.8% of the older population were in the 65–74 age group, 28.2% in the 75–84 group, and 9.1% in the 85+ group, while in 2024 these proportions shifted slightly to 63.4%, 28.8%, and 7.8%, respectively. Furthermore, individuals aged 100 and over accounted for 0.1% of the older population, reaching 7,632 persons in 2024. This demographic trend reflects not only a numerical increase but also the loss of social roles, such as retirement, changes in family roles, the loss of spouses and friends, and reduced independence. Numerous studies have demonstrated the importance of roles and functions in later life, showing that losses in these domains significantly affect adaptation and life satisfaction (Top & Dikmetaş, 2012; Kapucu & Özkaptan, 2017; Abdi et al., 2019; Taylor et al., 2024). Building on these demographic trends, global and national statistics indicate a rapid transformation in population structure, which highlights not only the growth of the older population but also the role losses that accompany aging and shape its psychological aspects. Robins et al. (2002) stated that self-esteem decreases in old age and the main reason for this decline is seen as the loss of social roles.

With aging, role losses among older adults tend to increase. The reasons for this include the loss of spouses, friends, and close relatives; decreased participation in the workforce; and the erosion of traditional roles due to industrialization and urbanization. International research has shown that the loss of spouses and friends significantly increases loneliness and social isolation in later life (Niino et al., 2025; Marsa et al., 2025). When old age is examined more broadly, it can be understood in two contexts: pre-industrial and post-industrial societies. In agricultural societies, older adults held a significant place due to their experience; however, with the transition to industrial society, their authority and respect diminished, and their roles within family and society shifted (Cowgill & Holmes, 1972; Sung, 2001). In modern life, older adults have lost many of their traditional roles as family leaders and authority figures. Other factors, such as women's increased participation in the workforce and the shifting priorities of younger generations, have further reduced interaction with older individuals.

Moreover, institutionalization may negatively affect the quality of life of older adults through loss of independence and social roles (de Medeiros et al., 2020). In the Turkish context, studies have demonstrated that long-term care preferences are influenced by factors such as family support, loneliness, and cultural dynamics (Güdük & Giray, 2022; Ismail et al., 2021). These findings highlight that social processes and dynamic social structures have led to profound changes in how the elderly and their roles are perceived. This contextual landscape is also reflected in the ways older adults cope with the stress and anxiety accompanying role losses. In the literature, strategies for coping with role loss are commonly described as openness to change, use of relaxation techniques, cultivation of inner peace, and enhancement of self-worth (Upasen et al., 2025); adherence to recommendations, acceptance of the situation, and maintenance of a positive outlook (Beckman & Gustavsson, 2025); and the preservation of social ties and the maintenance of supportive interactions (Ahmadi et al., 2023). However, to the best of our knowledge, research directly examining how institutionalized older adults conceptualize role loss and how they cope with it remains limited. Therefore, the purpose of this study is to explore effective coping methods for role losses in older adults living in institutions and how they facilitate the process of role loss among group members. By doing so, this study aims to contribute to the development of social work practices that enhance adaptation and well-being among institutionalized older adults. The study focused on the following research questions:

1- What roles have individuals staying in institutions lost, and what new roles have they gained?

2- What coping mechanisms do individuals staying in institutions use to manage role losses?

Role Exit Theory

Role exit theory was proposed by Blau (1973) and defined as a process that occurs when the fixed interaction and shared activities between two or more people are terminated. In institutions where terms like loss and separation are used extensively due to situations such as death, the end of relationships, and the cessation of activities with the environment, it is stated that sadness, deprivation, uncertainty, and depression are frequently encountered in the elderly. Blau suggested that the role abandonment process occurs in four different situations. The first situation is the process that begins with the death of a spouse. The second involves voluntarily leaving the spouse and the social group. The third is reluctantly leaving a role due to reasons such as death or abandonment, and the last involves leaving a role through removal or exclusion by the social group. Streib and Schneider (1971) stated that an individual is recognized by their environment through their roles and continues to interact with their environment through these roles. Consequently, they stated that an individual's adaptation and acceptance process is smoother when the process progresses step by step, replacing old roles with new ones. This perspective laid the groundwork for subsequent studies that examined how various later-life transitions can be understood as processes of role exit. Building on Blau’s original framework, several scholars have highlighted how different life transitions in later

life represent forms of role exit. Carr (2004) examined widowhood as a form of role exit and emphasized that the reconstruction of roles is crucial for coping with the bereavement process. Moen (1996; 2001) analyzed retirement as a structured role exit, showing how health, well-being, and gender expectations shape the adaptation process. Cicirelli (2010) explored caregiving decision-making between elderly mothers and their adult children, demonstrating how the maternal role gradually transforms into that of a care recipient. Together, these studies illustrate that role loss and role restructuring are inevitable in later life and play a critical role in how older adults adapt to social and personal changes.

METHODOLOGY

In this study, the focus group method was preferred because it provides a supportive and structured environment for discussion. Krueger (1994) defines a focus group as a "carefully planned discussion designed to obtain perceptions on a defined area of interest in a permissive, non-threatening environment." In focus group studies, individuals evaluate their common opinions and differences and comment on each other's perspectives. These interactions are essential processes that directly influence the nature and content of responses (Kidd & Parshall, 2000). Moreover, focus group interactions help researchers procure more in-depth data than individual interviews by providing a social context for the improvement of participants' ideas (Krueger & Casey, 2000). In addition, providing a comfortable and flexible environment enables the researcher to interact directly with the participants and gain deeper insights, as group members freely discuss the topic or theme without much interference from the moderator (Morgan, 1996).

The focus group consisted of a moderator and participants who engaged in interactive discussions on effective coping methods for role loss among institutionalized older adults. In this study, the structured focus group methodology included five steps: development of questions around the center of interest, structured group discussions, focus group debriefing, transcription of discussions, and analysis/report preparation (Kua et al., 2007).

The study was conducted in Darülaceze, one of the oldest and most established care institutions for older adults in İstanbul. The city was selected as the research site because it has one of the largest elderly populations in Türkiye, reflecting diverse socioeconomic and cultural backgrounds. Furthermore, Darülaceze was particularly suitable as it provides long-term care services to a large number of older adults with different life experiences, making it an appropriate setting to explore coping strategies related to role losses in later life.

This study has certain limitations. First, as a qualitative study with a small sample, the findings cannot be generalized to all older adults in Türkiye, particularly those living independently, in different care models, or in other geographic regions. Second, the study's results should be interpreted within the context of the specific institutional setting where the research was conducted.

Participants

The study included eight older adults residing in Darülaceze. Of these participants, 62.5% were male and 37.5% were female. Half of the group (50%) were between the ages of 65–74, while the other half (50%) were between 75–85 years old; the youngest participant was 65 and the oldest was 80, with a mean age of 72. In terms of marital status, 50% of the participants were divorced, and 62.5% had no children. Regarding education, half of the group had completed primary school. Prior to admission to the institution, 87.5% had worked in informal or self-employed occupations. At the time of the study, 75% were engaged in institutional work activities. Additionally, 62.5% of the participants had social security coverage, 75% reported that their income and expenses were balanced, and 62.5% had a diagnosed illness. With respect to institutional experience, 87.5% had been living in Darülaceze for less than five years.

In terms of sampling and participant selection, purposive sampling was employed. This method involves selecting individuals who possess knowledge and experience relevant to the research topic. Since focus group studies rely on participants' ability to share perspectives and experiences on the subject matter (Morgan, 1988), purposive sampling is particularly recommended.

Prior to the research, between September and December 2019, the researcher visited the institution once a week to interact with the residents and to observe their profiles, psychosocial conditions, as well as the institutional structure and culture. This long-term engagement enabled the researcher to establish trust with the participants, obtain more realistic insights into their natural environment and behaviors, and evaluate the data in a more holistic manner (Yıldırım & Şimşek, 2013). In addition, a one-week preparation period was carried out before the group study, during which training materials were developed and the institutional setting was arranged. On the day of the session, the researcher arrived half an hour early to prepare refreshments and to ensure that the physical environment was organized in a way that would not interfere with the session.

Participant selection was conducted in collaboration with social workers at the institution. A list of eligible members who were able to communicate verbally on a regular basis, had no diagnosed psychiatric disorder, dementia, Alzheimer's disease, or intellectual disability was obtained. Furthermore, participants' Mini-Mental State Examination (MMSE) scores were required to be 24 or above. The Mini-Mental State Examination (MMSE) was administered by the first author as part of the research design, in line with the approval and guidance of the thesis jury. The administration was conducted following standard MMSE guidelines to ensure the accuracy of the screening process. The purpose of the study, its location, the principle of confidentiality, and the voluntary basis of participation were clearly explained to potential participants. Eight residents agreed to participate in the study voluntarily, and written informed consent forms were obtained along with verbal confirmation. For confidentiality, participants were assigned pseudonyms (e.g., "Mr. T," "Miss E").

These pseudonyms were used solely for reporting purposes and do not correspond to participants' actual identities.

Data Collection

The data were collected through 60–90 minute face-to-face group sessions conducted by the first author. The study was conducted in the rehabilitation department of Darülaceze with the official permission of the institution. Specifically, group sessions were held twice a week, on Mondays and Thursdays, for a total of eight sessions. With the consent of the participants, audio recordings were taken during the sessions. In order to accommodate both working residents and those attending physiotherapy, the sessions were scheduled at 3:00 p.m. Furthermore, the sessions took place in a room designated for group work within the rehabilitation department, after regular working hours. Since this room also served as the participants' workplace, environmental conditions such as lighting and heating were arranged in accordance with their needs to ensure a comfortable setting.

During these eight focus group meetings, qualitative data were collected to explore the participants' opinions and experiences in depth and to understand how they coped with role losses. In addition, consensus and diversity among participants were revealed, and their views were explored more deeply as they responded to others in the group (Morgan & Krueger, 1993).

To increase group interaction, great attention was paid to giving each member equal time to share their opinion and to comment on each other's perspectives. All interviews were audio recorded with participants' permission. Focus group questions were developed by the first author based on relevant literature on role theory, role loss, and coping strategies (e.g., Worden, 2001; Humphrey & Zimpfer, 2008; Fernandez-Ballesteros, 2002) and were structured with suggestions and recommendations from advisors. The purpose of the questions was to investigate the perspectives, experiences, and suggestions of institutionalized elderly people who experienced intense role losses, regarding role losses and coping methods. The leading questions were: "What are your role losses?", "What are your current social roles?", "What are your new roles?", and "What are your effective coping methods for role losses?" The open-ended questions were designed in a clear and understandable manner. Moreover, the number of questions was kept to a minimum in each group meeting to provide sufficient time for discussions and individual participation.

The audio-recorded focus group interviews were transcribed verbatim. Braun and Clarke's (2006) approach to thematic analysis (TA) was employed to interpret the data. To this end, transcripts were repeatedly read, codes were derived from the transcripts, and the codes were then grouped to form overarching themes. Explanatory prose and illustrative codes were used to describe the resultant themes.

FINDINGS

The following three themes emerged from the data collected: (a) "Current Roles," (b) "Self-Chosen Roles," and (c) "Structured Roles." The themes are illustrated with quotations from the interviews.

Current Roles

A common theme that emerged was the usefulness of maintaining existing social roles in coping with role losses. Group members emphasized that their ongoing roles as fathers, grandfathers, relatives, and friends not only brought them meaning and happiness but also functioned as important coping mechanisms against the challenges of institutional life.

For example, Mr. R stated: “I have a grandfather role; I have six grandchildren. They are my greatest happiness in this life. I really like my grandfather role, and I also like my father role. My relationship with my grandchildren and child is very good. I am closely connected to my grandchildren.” Similarly, Mr. N highlighted the centrality of family bonds: “What can one do sometimes? At least I have a daughter. A daughter is a great blessing and very loving. I love her very much. She is also very fond of me. We are constantly in touch; she is my everything. My daughter and my two grandchildren are the reasons I am alive today. I thank God for them.”

Beyond close family ties, participants also underlined the importance of broader kinship and friendship roles. For instance, Ms. A explained: “My older brother has two sons; we get along very well.” Mr. B noted: “I meet with some of my relatives, though not very often. I meet my cousins—I can say I still have a ‘cousin role.’ Although I see some relatives from time to time, I haven’t told anyone that I am here [in the institution]. So I don’t see them much.”

Friendships were also described as a significant source of well-being. Mr. N reflected: “I have two childhood friends. I meet up with them, and that does me a lot of good… In our youth, we all grew up in neighborhoods, so everyone knew each other. There were many friendships.”

These accounts demonstrate that preserving existing roles provides institutionalized older adults with a sense of belonging and social connectedness, thereby helping them mitigate the negative effects of role losses.

Self Chosen Roles

Members empathize with their siblings because they have personally experienced the pain of losing a mother , leading some to help by taking on a maternal role. For this reason, they try to help by taking on a maternal role. In this regard, it can be said that the members try to heal their own wounds by caring for their siblings’ emotional needs. Miss A, one of the members who took on the role of being a mother to her siblings, described this process as follows:

“I am very close with my sister at the moment. I am like her mother. Her children were born, and I was there to raise them. My sister is saved on my phone under the name ‘my daughter.’ She is my closest friend. I do not trust friends that much… I guess I am in the role of mother with my sister.”(Miss A)

The members form strong bonds with the visitors and interns who come to the institution. These strong ties strengthen the members’ social support system, improve their adaptation to the

institution, and make it easier for them to cope with life's difficulties. Miss E, one of the members, shared her difficult relationship with her daughter as follows: "The young people coming here and visiting us are like my children. I am not seeing my own daughter, yet now I have many daughters and sons. My visitors never end." Mr. R, another member, has chosen the role of a father for himself. He described this role by stating: "I have two daughters visiting me regularly; I am their father here."On the other hand, members who have never been parents have also adopted the role of a parent inside the institution. Mr. V expressed this as follows: "I like the visitors here. They come, we meet, we become connected, and I become like a father to them. They do not leave us, and it makes me very happy." Mr. B shared his view by saying: "There are students coming bright, sparkling, and shining. They are like my sons and daughters." The members develop a strong bond with the people they feel closest to within the organization and support each other through life's difficulties. Although many members have close relatives, this does not provide as much benefit as the support of someone within the organization. The chosen "siblings" they rely on have a great impact on their adaptation to the institution and their ability to live in peace. Miss E and Miss V have defined their situation as follows:

"If it wasn't for Mr. V, who I see as a big brother here, I would not be able to cope with things. His support is so great. He is with me through all my problems, and he supports me. At the end of the day, we are living here, and we need each other's support. We are the ones to help each other when needed."(Miss V)

Miss E has chosen Mr. N as a brother figure. She shared her opinion as follows:

"When I was mourning over having no one close within the institution, I found my big brother, Mr. N. He has been supporting me since I came here. Most of us don't have parents, so we are looking for support in the form of a brother or sister. We have people we trust here. This is how I hold on to life." (Miss E)

The members within the institution work in exchange for a certain amount of money. This way, the members not only earn an income but also integrate into society through the rehabilitation department, where there is a constant flow of interns and visitors, and in the colleges they attend for mutual projects. This working environment allows members to spend their free time effectively, increases their productivity, and gives them a sense of purpose. According to role exit theory, the service provider role that members acquire by working helps them replace the old roles that were lost with age and retirement. Miss E and Miss L shared their opinions as follows:

"I am very happy to visit that college regularly. Children have a great place in my life. It makes me so happy to visit them. I said to myself, I still have it; I can still do it. Joining the children, being able to teach them things, and learning from them makes me so happy." (Miss E)

“I like my job; my job is great. The rehabilitation section is very busy, and visitors often come and go. If it wasn’t for my job and I were sitting in my room, I would never meet this many great people.” (Miss L)

Structured role

The members have shared effective methods for being happy in the institution as they continue their lives there. They stated that they were able to maintain their strengths, which helped them adapt to life and feel at peace even after starting their stay in the institution. They also worked on improving their weaknesses, which had previously caused disharmony and unhappiness. Within the scope of social service intervention, it is of great importance for clients to use their strengths to solve their own problems. It has been observed that members structure their “institutional member” role after they begin living in the institution. Members mentioned that their past experiences and strengths helped them in their institutional life as they preserved these qualities. A positive approach to life and disregarding negativity were strongly emphasized by every member. Regarding this topic, Mr. N shared his current view of relationships as follows: “I get along well with everyone; I do not think badly of people.” Mr. E, on the other hand, stated his opinion in his own way:

“I become a child when interacting with children. I try my best to get along with everyone, even those who treat me poorly. I love life and people; I would still offer them bread even if they threw stones at me. I have quite a good dialogue with everyone here.” (Mr. E)

Miss E added her perspective: “I support those who have fallen, and I would never be jealous of someone strong and successful. I guess this is one of my good qualities.” Miss A shared her thoughts as follows:

“Of course, you feel sad from time to time, but I quickly pull myself away from sadness. I focus on the good things happening around me. I focus on people who make me smile and feel happy, trying to hold on to the positive aspects of life. Whenever a negative thought comes to mind, I quickly abandon it. I turn my attention to happy moments. One day, we will all die, so it doesn’t make sense to dwell on sadness.”(Miss A)

In addition, the concept of honesty, which is a crucial aspect of an individual’s relationship with themselves and ensures personal integrity through the harmony of words and behavior, was highlighted as a positive trait by the members. Miss A stated: “I do not appreciate lying. I speak to people’s faces, not behind their backs.” Mr. E shared a similar view: “I do not like gossip. I prefer to speak directly to the person involved.” The members also emphasized the benefits of their resilience, personal growth through experience, and increased maturity over time. Mr. E expressed his thoughts on this: “I have really learned a lot from what I experienced in life.” Miss E reflected on her life and shared her perspective:

“I have studied myself and became a teacher. I believe my strongest point is that, although I suffered a lot, I did not give up on people or life. I enjoy life, even though it is painful and I am alone. I learned to analyze people by observing them closely. I can now understand what kind of person someone is just by looking into their eyes. To protect myself, I have always paid attention to the behavior of people and memorized the ones who did not make me feel good. I stayed away from those people, and it never surprised me later to find out that they weren’t good people. I have never been wrong about my feelings.”(Miss E)

The experiences gained by the members from their mistakes, and their capacity to change themselves, have enabled them to develop flexibility skills that will help them live more peacefully and happily in the future. Some of the members stated that they were able to change their perspective on events and shared suggestions with others about methods that promote flexibility. Miss E offered advice to people who feel sad about living in the institution:

“I told myself, if I am a person who finds faults in everyone and everything, no matter where I go, I won’t be happy. If I don’t fix things within myself, I can’t be happy. I started paying attention to myself instead of others. I asked myself, ‘How can I be happy?’ I tried to empathize. I tried distancing myself from people and tried not to be bothered by them. I still can’t find people around me who fit with me, but I’m trying my best to be happy. Whenever I feel angry towards someone, I remind myself that’s just the way they are; there’s nothing to be done. Wherever I am, I need to learn to be happy. This way, I can see the positive aspects more clearly. This is how I cope with issues in my life here.”(Miss E)

Mr. B stressed the importance of “tolerance” toward others. He believes that without a tolerant approach, loneliness is inevitable. Mr. B’s and Miss E’s views on this matter are as follows:

“You need a friend here. You have to spend time with someone, as people here come from different regions with varied backgrounds and behaviors. We are five people sharing the same room. Not everyone is the same. You have to accept people as they are.” (Mr. B)

“Sometimes, when I see people, I tell myself, ‘This is their point of view, and it is based on what they have experienced in life. I cannot expect them to treat me as I wish.’ They’ve had a rough life and stayed here for a long time. Sometimes people try to impose their opinions on me, and I tell myself I don’t have to accept it, or them, the same way. We need to accept each other as we are. I had some difficulties when I first arrived, but later I got used to it. I think this is a place where you resist things at first, but as you see that you cannot change anything, you start to accept things as they are. After a while, you learn to live peacefully. We need to accept each other without judgment and strive to understand one another.” (Miss E)

The members have evaluated themselves during conflicts and have learned to self-criticize. Miss E expressed her struggles with her aggressive behavior and rigid mindset:

“I told myself, if I keep looking for mistakes in my surroundings and become a confrontational person, wherever I go, I’ll be unhappy. If I don’t fix things within myself, I cannot achieve happiness. I believe one should look at oneself through the eyes of another person; only then will you be able to notice your mistakes. I need to compare myself with others. What we need is to evaluate ourselves objectively and address what can be changed to avoid conflicts.”(Miss E)

Mr. B shared that after experiencing negative outcomes from impulsive actions, he decided to change his behavior:

“Yes, we always think we are right, but sometimes we need to judge ourselves and not just find fault with the other side. We should sometimes ask ourselves, ‘Who did I upset today?’ The ‘me first’ approach is not good. You should care about the other person and adjust your behavior accordingly.”(Mr. B)

Empathy is the ability to view an issue from another person’s perspective. Members who practiced empathy in their relationships shared their insights in the study. Miss E stated: “Without thinking about what made this person act in such a way, we jump to conclusions. I always try to empathize.” Thanks to the feeling of gratitude, individuals focus on the positive aspects of their experiences, and for negative experiences, they try to identify positive outcomes. The members stated that they embrace gratitude even in the face of difficulties. Mr. E expressed his thoughts on this:

“I always feel gratitude. I cannot leave this place due to my disability, but I have improved a lot. I wasn’t able to stand up before, but now, thanks to my physical therapy sessions, I am able to stand.” (Mr. E)

In addition, some members are seeking new goals and activities for themselves. They have stated that they focus on their inner motivation by prioritizing their dreams. Miss E shared her experience as follows:

“We do not know how much time we have left. However, we have enough time to plan and schedule what could not be done so far. A group of students came to visit today, and I was very happy to see them. It made me think, should I continue my education, which I left years ago? I felt so energetic and wanted to do something immediately. I will set goals for my future life from now on; I do not want to just eat, sleep, and wait for my time to pass in here anymore.”(Miss E)

DISCUSSION

Older people who live in institutions experience role loss more severely in old age. With the loss of roles, older adults develop methods to re-establish their internal balance during the transition process from their accustomed life to institutional life.

In this study, the methods older people use to cope with their role losses were investigated. Three main themes emerged: (a) “Current Roles,” (b) “Self-Chosen Roles,” and (c) “Structured Roles.” Results from the respondents reveal that members identify meaningful roles to replace their lost

roles as an effective coping method and structure the behaviors required by social roles in a way that harmonizes their uniqueness with the social environment. Members often emphasized their roles as grandfathers and grandmothers as their primary method for coping with role losses. According to Fernandez-Ballesteros (2002), the feeling of satisfaction increases significantly for older individuals who are frequently in touch with their children and grandchildren. The ongoing relationships and social support systems provided by family and friends strengthen their ability to cope with problems, making them feel more resilient. In addition to family ties, participants highlighted the significance of broader kinship and friendship roles—such as being a cousin, a sibling, or maintaining childhood friendships—which also provided meaning and support. Research demonstrates that social connectedness and integration are protective factors for older adults' well-being and resilience (Umberson & Montez, 2010; Kleinert et al., 2025). These findings suggest that maintaining ongoing roles within both family and friendship networks constitutes an important coping mechanism against role losses in institutional settings.

As the second main theme, the members adopted "Self-Chosen Roles." As stated by Humphrey and Zimpfer (2008), the members discovered new roles to replace the old and missing ones they had. The fact that the members choose their own roles and determine the responsibilities associated with those roles shows that their adaptation process is progressing positively and that they are discovering their strengths. For example, some members took on a parental role for their siblings to fill the void left by the loss of their parents. There is a positive relationship between empathy and the tendency to help others; the act of helping others often benefits the helper as well. The members try to heal their own wounds by supporting and caring for their siblings. Worden (2001) defines this as external adaptation. After a loss, a person may take on the roles of the one they lost, thereby becoming stronger by acquiring new responsibilities and skills. In this regard, Yalom (1992) states that the greatest favor one can do for a person is to "enable that person to help someone else." Generally, there is a focus on receiving help in old age, but the concept of providing help is not emphasized (Kahana et al., 2013). Brown et al. (2008) noted that during old age, the position of helping and supporting others becomes more important than merely receiving assistance.

Even if the members do not experience personal losses, they form strong bonds with visitors and interns who come to the institution. These bonds strengthen their social support system, increase their adaptation to the institution, and make it easier to cope with life's challenges. In addition, the roles they acquire through their jobs in the institution benefit their social support systems and active participation in life. When evaluated through role exit theory, older people should replace their lost roles with new ones. Members who lost their work-related roles in adulthood replaced them with new responsibilities and jobs within the institution, thereby meeting their emotional and physical needs.

As the third theme, the members cited "Structured Roles." They structured their "institutional member" role by preserving their uniqueness while harmonizing with the institution's environment. The concept of honesty, which was identified as one of their strengths, greatly contributed to their

continued positive interactions. Cüceloglu (2001) noted that honesty is crucial in an individual's relationship with themselves and that one's words should align with their actions, which contributes to personal integrity. This recognition as a reliable person strengthens one's communication with their surroundings. Members expressed satisfaction with their positive outlook and tolerance, which were characteristics they maintained. They stated that they have matured and adopted calm and consistent behaviors thanks to this perspective. Goldstein (1999) suggested that constructive and effective conflict resolution is possible with tolerance. Tolerance helps the individual mature (Hall & Fincham, 2005) and increases life satisfaction and self-esteem (Krause & Ellison, 2003). Additionally, members highlighted flexibility as an improvement in their abilities. The aspects that increased their flexibility skills were empathy, gratitude, awareness, and the goals they set in their new lives at the institution. Conflicts are inevitable in an environment with diverse perspectives, backgrounds, cultures, and experiences. Understanding people's differences is essential to resolving these conflicts. Empathy is the most effective method for understanding others' emotions. It allows individuals to view events from another person's perspective (Alma & Smaling, 2006). Moreover, the sense of gratitude strengthens the flexible approach of the individual. Gratitude allows one to focus on the positive side of events, even in negative situations. Negative events are viewed as opportunities for growth. The feeling of gratitude provides the individual with awareness of the benefits of negative experiences. McCullough et al. (2004) stated that individuals with a stronger sense of gratitude experience less anger and disappointment than others. Setting goals has shown great importance in embracing lost roles and replacing them with new, meaningful roles within the institution.

The empowerment approach views the participant as a person with potential and power who can make the best decisions about their situation. Therefore, the empowerment approach is closely related to the principle of self-determination. According to the right to self-determination, an individual has the free will to choose their own behavior based on their inner needs, feelings, and thoughts (Sprague & Hayes, 2000). This perspective is also evident in the findings of the study. For example, some members assumed new self-chosen roles (such as taking on a parental role for their siblings), which demonstrated their autonomy and capacity for independent decision-making. Participation in structured roles within the institution, on the other hand, contributed to their sense of competence and recognition by others, thereby reinforcing their empowerment experiences.

One of the most effective methods of empowerment is to listen without judgment, to try to understand, and to adopt a sincere approach, as listening is the least judgmental form of validation. We connect with people by listening rather than by speaking. Moreover, when we ask someone's opinion on a subject, we give them the message that we trust their thoughts (Bolat, 2021). During the focus group process, participants' active listening to each other enabled them to re-evaluate their own experiences and created an atmosphere of mutual trust. Indeed, they stated that they developed their own strategies by drawing inspiration from each other's coping methods during the sessions.

At the same time, the real world is full of highly complex and intertwined chains of events, which become stronger as one continues to live and accumulate experiences (Canan, 2015). In this context, older adults are able to perceive the whole through a small part of an event, and with this analytical thinking ability, they can develop strategies to cope with difficulties. The findings of the study also show that members were able to generate strong and effective solutions to life by adopting new roles or transforming existing ones in the face of role losses. Therefore, there are many life lessons to be learned from the knowledge, skills, and experiences of older individuals.

CONCLUSION

The purpose of this study was to examine the role losses experienced by institutionalized older adults and the effective coping strategies they employ to manage these changes. In line with the first research question, the findings revealed that participants lost significant roles from their previous lives—such as family and occupational roles—yet they also maintained certain current roles, such as being a grandfather or a friend, while additionally gaining new ones within the institution. These current and newly acquired roles, whether self-chosen (e.g., caregiving for siblings) or structured and assigned within the institution, allowed them to sustain a sense of purpose and belonging in their everyday lives. In response to the second research question, the findings demonstrated that older adults use several coping mechanisms to manage role losses. These mechanisms include maintaining existing roles where possible, creating new roles that reflect autonomy, and adapting to structured roles offered by the institution. Positive attitudes, flexibility, gratitude, and the ability to form supportive social connections further strengthened their adaptation process. These results are consistent with recent research that highlights autonomy, social integration, and positive coping strategies as key to well-being in later life (Kleinert et al., 2025; Upasen et al., 2025; Beckman & Gustavsson, 2025; Ahmadi et al., 2023; Kraun et al., 2024; Varela et al., 2025).

This study has certain limitations, primarily related to its small sample size and single-institution focus. Nevertheless, the use of focus groups provided rich and in-depth data that allowed a deeper understanding of coping strategies among institutionalized older adults.

Future studies should expand the sample to include older adults living in community settings or in different care models, allowing for broader comparisons across diverse contexts. In terms of practice, the findings offer important implications for social work: at the micro level, interventions can support older adults in creating meaningful roles and exercising autonomy; at the mezzo level, institutions can design programs that facilitate peer support and structured responsibilities; and at the macro level, policies can integrate empowerment and self-determination into institutional care practices to promote well-being and social participation.

ETHICAL APPROVAL

This study was approved by the Ethics Committee of Üsküdar University with the protocol number 2018/552, dated April 25, 2018.

AUTHOR CONTRIBUTIONS

The first author contributed 70% and the second author 30% to the design, execution, and writing of the study.

CONFLICT OF INTEREST

The authors declare that there is no conflict of interest regarding the publication of this article.

GENİŞLETİLMİŞ ÖZET

Bu niteliksel çalışma, kurum temelli bakım alan yaşlı yetişkinlerin rol kayıplarına karşı geliştirdikleri etkili başa çıkma stratejilerini ve bu stratejilerin grup üyelerinin rol kaybıyla başa çıkmalarına nasıl katkı sağladığını incelemektedir. Araştırma, İstanbul'da yer alan bir yaşlı bakım kurumunda yürütülmüş ve amaçlı (ölçüt) örnekleme yöntemiyle belirlenen sekiz katılımcıyla gerçekleştirilmiştir. Katılımcıların seçiminde Mini Mental Test puanının 24 ve üzerinde olması, düzenli sözlü iletişim kurabilme ve herhangi bir psikiyatrik ya da bilişsel bozukluk tanısının olmaması temel kriterlerdir.

Veriler, her biri 60–90 dakika süren sekiz odak grup oturumu ile toplanmış ve ses kayıtları alınarak Braun ve Clarke (2006)'nın tematik analiz yöntemiyle değerlendirilmiştir. Katılımcılar çalışmanın amacı, gizliliği ve gönüllü katılım esasları hakkında bilgilendirilmiştir. Çalışma, nitel araştırma deseninde ve odak grup görüşmesi yöntemiyle yürütülmüştür. Görüşmeler ses kaydına alınarak Braun ve Clarke (2006)'nın tematik analiz yöntemiyle değerlendirilmiştir. Bulgular, katılımcıların rol kayıplarına karşı mevcut roller, kendi seçtikleri roller ve yapılandırılmış roller olarak üç temel başa çıkma yaklaşımı geliştirdiği belirlenmiştir. Mevcut roller, bireylerin daha önce edindikleri sosyal kimlik ve ilişkiler üzerinden sürdürülen rolleri (örneğin: dede, anne, arkadaş rolleri) ifade etmektedir. Kendi seçtikleri roller ise katılımcıların geçmiş kayıplarını telafi etmek üzere gönüllü olarak benimsedikleri rollerden oluşmaktadır. Örneğin; ziyaretçilere "ebeveyn" rolü üstlenmek, kurum içindeki diğer bireyleri "kardeş" gibi görmek gibi sembolik rollerle yaşamlarına anlam katmaktadırlar. Üçüncü tema olan yapılandırılmış roller, kurum içinde yaşlı bireylerin edindikleri sorumluluk ve görevlerin bireysel farkındalıklarıyla şekillendirilmesiyle oluşmaktadır. Bu roller, bireylerin kurumsal hayata aktif katılımını, işlevselliklerini ve üretkenliklerini artırmaktadır. Katılımcılar, olumlu düşünmeye odaklanmanın, insanlara hoşgörüyle yaklaşmanın, çatışmalarda kendini sorgulamanın ve esneklik kazanmanın kuruma uyum sürecinde etkili olduğunu ifade etmişlerdir. Ayrıca minnettarlık hissi, empati, hedef belirleme gibi psikososyal becerilerin desteklenmesiyle bireylerin yaşam doyumlarının arttığı görülmüştür.

Sonuç olarak bu çalışma, yaşlı bireylerin sosyal rollerinin yeniden yapılandırılmasının onların psikolojik iyi oluşları ve sosyal işlevsellikleri üzerinde olumlu etkiler yarattığını göstermektedir. Bu bulgular, sosyal hizmet uygulamalarında güçlendirme yaklaşımının önemini ortaya koymakta ve odak grup yöntemiyle elde edilen yaşam bilgeliğinin mikro, mezzo ve makro düzeyde planlanacak sosyal hizmet müdahalelerine katkı sağlayabileceğini göstermektedir.

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