

# International Encyclopedia of Rehabilitation

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# **Identity**

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## **Introduction**

In order to grasp the meaning of the concept of identity in the context of physical disability rehabilitation, this article will first describe the distinction between the self and the identity. The development of identity and factors influencing it will follow, such as occupation. Peculiarities related to the identity of a person with a significant physical disability will also be highlighted, integrating items pertaining to interventions in rehabilitation.

## **Self**

Several authors have proposed different and complementary representations of self; psychoanalytical, psychological, behavioral, and social vision of self can be identified, depending upon the chosen perspective (Gergen, 1971; Morin and Bouchard, 1997). For several authors, self refers to all qualities, attributes, values and emotions, including feelings of moral worth, that a person assumes to be his or her own (Charmaz; 2002; Christiansen, 1999). Self constitutes the union of body, emotions, thoughts and sensations which constitute the individuality of a person. It seems to be partially grounded in bodily experiences, including familiar physical characteristics and capabilities (Reynolds, 2003). Self is also reflexive; it has an internal and personal perspective (Christiansen, 1999; Henare, 2003; Hocking, 2000). Self should be considered as content (characteristics that we think are our own as an individual) and as process (one who analyses information, grounded in the majority of our thoughts, feelings, and actions) (Vallerand, 1994). According to philosopher Charles Taylor (1989), self is characterized, for Western people in the modern era, by a sense of agency, inwardness and individuality.

Although self is usually conceptualized as a psychological property grounded in the physical and psychological traits of an individual, it is also seen as being socially constructed based on the responses of others within the particular matrix of social relationships, group memberships, and roles in which the individual participates. According to this social vision of self, it is possible to argue that a large part of self is a social creation, and that it develops through interactions with others and with the environment (Christiansen, 1999; Vallerand, 1994). Indeed, we live in a social environment where numerous stimuli (friends, TV, radio, Internet, books, etc.) influence what we are and what we become. In addition, there are multiple expressions of the self: our children, friendships, marriages, journals, daily interactions and others, which are all distributed throughout our social environments. Moreover, for this social vision of self, Christiansen (1999) argues that these pieces of self are a part of us; we are multifaceted, not as fragments, but as part of a comprehensive and understandable self.

Self also involves interpersonal, values and potentiality aspects, meaning an idea of who one might become. Self is not only formed through interactions with others, but also

through recognition that goal accomplishment has consequences that influence one's self-image, as well as the part of one's self as viewed by others (Christiansen, 2000; Vallerand, 1994). Within this social constructionist viewpoint, the accomplishment of personal goals provides building blocks for a lifelong construction of the self (Christiansen, 2000). Mead (1967) adopted the same perspective when he argued that self develops throughout the process of social experience and occupations. Hence, self develops from, but is not determined by experiences. It is, therefore, not the result of contemplation, but rather of its practical uses in cultural and historical situations (Thorén-Jönsson and Möller, 1999).

Within this framework, the self is viewed as continuously under construction. The self is never completed or finished; it is always in process, and is dynamic and spontaneous (Berman, Schwartz, Kurtines and Berman, 2001; Charmaz, 2002; Morin and Bouchard, 1997; Vallerand, 1994). One of the major developmental tasks facing an individual is to construct a self that is satisfactory within one's life context (Christiansen, 2000). Many components of self were defined: self-concept, self-image, self-esteem and self-efficacy (Bandura, 2003; Dumont and Rainville, 2006). Certain theories state that the self arises and changes continuously through social interactions, even if individuals develop a somewhat stable self-concept over time (Mead, 1967; Larsson Lund and Nygård, 2003).

## **Identity**

Identity is the state of having unique identifying characteristics. The Collins Dictionary defines it as the individual characteristics by which a person or thing is recognized. Distinctiveness, individuality, self, selfhood, singularity, uniqueness, and personality have been considered as synonyms of identity (Henare, 2003).

Identity is often conceptualized in terms of personal identity and social identity. Personal identity refers to the arrangement of self-perceptions and self-evaluations that are meaningful to a person, in relation to self-concept, self-esteem, self-image, or sense of self (Charon, 1998; Christiansen, 1999; Hocking, 2000; Laliberté-Rudman, 2002; Larsson Lund and Nygård, 2003).

Social identity refers to how a person is viewed by others (Laliberté-Rudman, 2002). It is built from many components: nationality, social class, age, religion, caste, occupation, race, gender, educational level, city of residency, political party adherence, leisure, sports, community, and social relationships (Freeman, 2001). For many authors, occupation and work are the most important aspects of social identity formation (Cramer, 2003; Laliberté-Rudman, 2002). Moreover, according to Berman, Schwartz, Kurtines and Berman (2001), personal values must be considered in social identity. From this perspective, people may be regarded as having many social identities, each being related to specific domains (Kao and Hammon Kellegrew, 2000; Reynolds, 2003) and distributed throughout social environments (Christiansen, 1999). Identity can thus be viewed as being multifaceted and situational (Hocking, 2000). Identity is not static and uniform; it is fragmented and continuous, modeled and remodelled as a result of the way we appear within the cultural system or in our discussions with others (Jakobsen, 2001).

Identity and management of identity are expressed in many voices, and several authors agree on the existence of dynamic and ongoing features, as opposed to static and closed ones (Alsaker and Josephsson, 2003; Christiansen, 1999; Giddens, 1984; Laliberté-Rudman, 2002). It is also the framework used to interpret and give meaning to experiences (Christiansen, 1999).

## **Relationship Between Self and Identity**

Self and identity are closely associated. According to Christiansen (1999), identity is the self we know, and people's identities are part of a comprehensive and understandable self. In addition, identity, as a composite definition of the self, includes an interpersonal aspect and is often created by the larger society. Identities are definitions that are created for and superimposed upon the self (Christiansen, 2000). From a dynamic standpoint, identities are theoretical concepts influencing the self, through asking questions such as "Who am I?" and "Who do I want to be in this world?", that pre-set condition for each individual in his or her lifespan (Alsaker and Josephsson, 2003; Giddens, 1984).

Charmaz (2002) indicated that self possesses consistent qualities (self-image, self-concept, personal identities, and social identities, self as process and as stable structure), and that some of its parts are stable, while others may change during one's life.

## **Identity Development**

Erikson's theory considers that individuals develop their identity through eight stages in life, each with developmental tasks requiring mastery in order for the individual to move on to the next stage of psychosocial development. In the final three adult stages of Erikson's theory, mastery is built upon social relationships, development of the capacity for caring for oneself as well as for others, and gradual acceptance of one's place in life with wisdom and understanding (Christiansen, 2000; Erikson, 1968). According to this theory, and from a constructionist perspective, identity continuously changes across the lifespan (Giddens, 1984; Jakobsen, 2001). People must work to form their identity through negotiation and reflection in a relevant context (Alsaker and Josephsson, 2003). In addition, many recent studies, including five longitudinal studies cited by Cramer (2003), conclude that identity changes and development continues to occur in adulthood, and progressive and regressive moves are possible (Cramer, 2003).

Several mechanisms contribute to the development of identity. For some authors, exploration has been viewed as a central factor in the formation of identity among adolescents (Berman, Schwartz, Kurtines and Berman, 2001). For those authors, exploration is viewed as a search for a revised and updated sense of self, and as a process of examination and discovery of whom and what one might be. Cramer (2003) identified two categories of factors associated with a change of identity at the adult age: psychological internal factors and external life events. In her study, change of identity was predicted by a combination of personal characteristics related to defence mechanism patterns and by life experiences such as marriage, professional success, social relationships, family relationships, and others (Cramer, 2003).

Social identity can also be modeled by social structure, as well as by cultural and historical context. For example, being member of a social group like a minority or a prestigious group affects self-concept and self-esteem and can affect identity (Freeman, 2001; Hocking, 2000). Our knowledge, type and levels of education, as well as diploma, employment or titles, are significant part of one's social identity. Objects in the environment can also contribute to the creation of one's identity (car, tools, clothes, assistive devices, etc.) (Hocking, 2000; Larsson Lund and Nygård, 2003).

Occupation is also a major constituent of one's identity. Occupation contributes to shaping self and identity through several mechanisms. It supports self-image, self-esteem, self-confidence, sense of competence and self-efficacy beliefs. Occupation provides opportunities for the development of various abilities, the realization of one's potential and the development of interests. It also provides support for roles, productivity and accomplishment, as well as opportunities for personal engagement, challenges and personal fulfillment. Occupation influences affects and feelings, like feelings of autonomy, creating hope and dreams, meeting personal values and preferences, developing a sense of responsibility and providing pleasure and satisfaction. Occupation structures time, counteracts boredom and reduces loneliness. It provides possibilities for action, interactions and control over the environment. Occupation provides the opportunity to make choices, realize projects and be goal directed. In a wider perspective that includes environment, occupations are opportunities to contribute to society, develop a feeling of belongingness and engagement that leads to intrinsic satisfaction and acknowledgement from others, fill the need for and contain the risks of social contact, be significant to and needed by others, and be viewed by others as an adult and a valuable person. Occupation improves awareness about one's self and identity, and about one's capabilities and limits. It supports the adaptation process when facing difficulties, helps making the connection between body and mind and can have the power of symbols or symbolic efficacy. Viewed generally, occupation creates continuity, consistency and coherence that give meaning to life (Dickie, 2003; Dumont and Rainville 2006; Jakobsen, 2001; Stone, 2003).

Overall, the self and identity are multidimensional. They evolve throughout one's life and include several components. Identity is the result of a life story (Christiansen, 1999). People compose themselves through their experiences, which include their social interactions, physical environment, as well as historical and cultural meanings (Christiansen, 1999; Jakobsen, 2001; Freeman, 2001; Henare, 2003; Hocking, 2000). The self and identity can be modified by some significant life events, such as being born with an impairment, leaving one's family, getting married, becoming parents, getting a diploma, obtaining employment, winning a prize, aging, getting into an accident or getting ill (Charmaz, 2002; Christiansen, 1999; Dumont and Rainville, 2006; Laliberte-Rudman, 2002; Larsson Lund and Nygård, 2003; Lysack and Seipke, 2002; Magnus, 2001; Reynolds, 2003; Sviden, Wikström and Hjortsjö-Norberg, 2002; Thorén-Jönsson and Möller, 1999; Wilkins, 2001).

## **Identity and Disability**

The presence of disabilities may significantly change one's identity, whether these appeared at birth or following an accident, traumatism, illness, or resulting from aging. Body, as a major constituent of the person, is interconnected with self. With adolescence, illness, or aging, the body undergoes changes, as does self (Charmaz, 2002). Events like a traumatism could result in a loss of certain parts of the self (for example, the loss of physical characteristics like strength or speed), and thus modify self-image and identity (Carpenter, 1994).

Being born different or with disabilities will influence the development of identity (Mercier, 2004). Children may find more difficult to reach adulthood, to stay dependent of their parents, which will lead them to follow different stages of identity development as compared to others. They will necessarily have different life experiences—occupations, social relationships and others—that will tailor their identity. During adolescence for example, some of them will experience more difficulty in asserting themselves or identifying themselves with peer groups. Rehabilitation interventions may provide them with opportunities to build their identity through various life experiences: peer meeting, activities to surpass oneself, rites of passage, activities aiming at developing preferences and interests and knowing one's forces and weaknesses and others.

A person dealing with a traumatism or illness that suddenly and significantly affects his or her occupations may lose his or her identity in the process. The loss of one's identity first derives from the deterioration of one's physical integrity (body alteration), but also from the loss of occupations, objects or social relationships that contributed to the identity development of the individual. Rehabilitation interventions mainly aim at supporting the necessary coping process that will lead the individual to develop a new identity (Dumont and Rainville, 2006). During the rehabilitation process, the individual experiences various concrete situations contributing to build his or her new identity. In addition to the nature and importance of various losses experienced by the individual, the age at which they occur, the circumstances, and the fact that these losses are either brutal or progressive, will affect the coping process and the development of a new identity (Dumont and Rainville, 2006).

Aging and illness often result in modifications in personal abilities. In addition, with aging and illness, daily habits like leisure activities, social interactions and work occupation are altered (Magnus, 2001; Reynolds, 2003). Usual ways of thinking, feeling and acting towards one's self may also change. Self-image, sense of competence, performance, achievement, perceived self-efficacy, and self-esteem can be modified (Charmaz, 2002; Reynolds, 2003; Sviden, Wikström and Hjortsjö-Norberg, 2002). For example, elderly people may not perceive themselves to be as capable and wealthy that they used to be (Lysack and Seipke, 2002) or someone having to use a wheelchair may experience a modified self-image (Larsson Lund and Nygård, 2003). Charmaz (2002) argues that when people maintain resilience in the face of aging or illness, their bodies may change, but their sense of self endures. Moreover, the enduring self is stable, but not static; some parts may change, while others could remain intact (Charmaz, 2002). From

another perspective, many authors speak about a transformation of self in certain situations altering the body (Carpenter, 1994; Dubouloz, Chevrier and Savoie-Zajc, 2001; Dubouloz, Laporte, Hall, Ashe and Smith, 2004; Dumont and Rainville, 2006; Gibbons, 1999; Paterson, Thorne, Crawford and Tarko, 1999; Schwartz and Sendor, 1999; Sprangers and Schwartz, 1999; Wilson, 1999).

## **The Importance of Environment**

The environment is an important constituent of the interaction between self, identity and occupation (Dumont, 2007; Dumont & Rainville, 2006). As such, when considering social environment, those with enough support from their close relationships can preserve their identity in spite of illness (Charmaz, 2002). Moreover, being a member of a club or an association for people with impairments or disabilities can be perceived as confirmation of belongingness to a group, which favours perception of a new identity (Magnus, 2001).

Physical environment also interacts with self and occupation. Assistive devices such as crutches or wheelchairs have an impact on self-image, but self and identity do not seem to be completely modified by these objects (Larsson Lund and Nygård, 2003). Moreover, the use of assistive devices and modifications of the environment can contribute to the feeling of competence, because when using them, the person can accomplish various activities that would otherwise be impossible to accomplish (for example, moving around outside using a wheelchair) (Thorén-Jönsson and Möller, 1999). However, some individuals avoid using technical aids to preserve their image (Magnus, 2001).

Among environmental factors, social psychology has highlighted the concept of social representation: diversity of opinions, attitudes, and structured beliefs defining the actions in society and determined by them (Mercier, 2004). Social representations have an inevitable and significant impact on the development of identity or new identities. In this aspect, a society in which people with disabilities are seen as dependent, sexless, excluded or inferior will most likely influence the development of identity in this population.

## **Conclusion**

Supporting identity construction and reconstruction is one of the main objectives of rehabilitation. In order to achieve this, interventions must be done in order to enhance the individuals' abilities, help them in developing a good self-image and self-esteem, as well as positive self-efficacy beliefs that could imply taking actions involving the proxies and the individual's entourage (Dumont et Rainville, 2006; Gutman, 1997). It is possible to intervene in the occupational domain and foster social participation of individuals in various ways: specific training, use of assistive devices, adaptation of workstations, home management and others (Dumont, 2007). It is also possible to intervene in the environmental domain through the creation of inclusive life environments, notably by promoting universal design (Dumont, 2007; Dyck, 2002) and a positive social vision of individuals with disabilities (Mercier, 2004). Disability advocacy organizations and Paralympics are examples of actions that contribute to change social representations and promote the development of a positive identity in individuals with disabilities. Using this

type of interventions regarding the macroscopic environments would benefit from a larger focus in rehabilitation.

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