Abstract

The acquisition of a disability not only impacts one's corporeality but has been found to destablise one's sense of personal as well as social identity. This qualitative study set out to expand on a previous investigation (Botha, 2016), by exploring the psychological and behavioural adaptation strategies that are employed in response to resisting, incorporating and/or integrating disability into one's identity. Furthermore, this study assessed the factors that could facilitate and/or impede disability identification. Beyond this, it aimed to investigate the trajectory (stage-wise, pendular, situational or state models) that the process of identity (re)construction takes. Data from seven individual face-to-face, semi-structured interviews were collected from adults with acquired physical and sensory disabilities. Previously as well as newly collected data underwent thematic analysis. Therefore, this study utilised secondary data analytics as part of its methodology. Moreover, to encapsulate the intra-personal as well as inter-personal dynamics inherent in identity (re)construction, the analysis was guided by an interpretative phenomenological lens and Social Identity Theory (SIT). The findings suggest that disability identification is a complex and contradictory phenomenon, as strategies of resistance, incorporation and/or integration can fluctuate by setting and circumstance. The findings also represent a significant departure from SIT literature, as participants predicted to perceive abled/disabled group boundaries as more permeable, made use of more collectivist as opposed to individualistic adaption strategies as previously predicted. Therefore, it is argued that some progress is being made with regards to disability pride, which has opened up a space for more positive and affirming disabled identities. Furthermore, disability identification is largely being facilitated by greater opportunities for political advocacy and social support; online and in the disabled community. However, stigma, both internalised and external, was still found to be a major inhibitory factor to disability identification, alongside female gendered and cultural ideals. Given these findings, recommendations for rehabilitation programs and psychological professionals working with acquired physical and sensory disability are proposed.