

Vocational Identity Reconstruction in Individuals with Spinal Cord Injury: A Narrative Approach

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ABSTRACT

This study aimed to explore how individuals with spinal cord injury reconstruct their vocational identities through personal narratives following their injury. This research employed a qualitative narrative methodology to examine the lived experiences of 22 participants with spinal cord injury residing in Turkey. Participants were selected through purposive sampling to ensure diversity in age, gender, and pre-injury occupational backgrounds. Data were collected through semi-structured interviews, which allowed participants to articulate their vocational journeys in detail. Interviews were conducted either face-to-face or via secure video conferencing, recorded with consent, and transcribed verbatim. Thematic narrative analysis was applied using NVivo software to identify recurring patterns, story arcs, and identity-related shifts across participants' accounts. Data saturation was achieved at 22 participants, ensuring a comprehensive representation of shared and divergent experiences. Three overarching themes emerged from the analysis: disruption of pre-injury identity, navigating vocational transition, and reconstruction of vocational identity. Participants described initial experiences of emotional disorientation, loss of purpose, and altered self-perception. As they moved through recovery, they sought support systems, reevaluated career paths, engaged in skill development, and encountered motivational fluctuations. Reconstruction of vocational identity involved processes of acceptance, narrative meaning-making, and redefinition of success. Institutional and societal barriers, such as limited accessibility and workplace stigma, were significant obstacles, while family encouragement, personal resilience, and community engagement facilitated identity renewal. Vocational identity reconstruction following spinal cord injury is a complex, narrative-driven process shaped by emotional, social, and structural factors. Narrative-informed, person-centered vocational rehabilitation practices that emphasize meaning-making and identity support are essential for holistic recovery and reintegration.

Keywords: spinal cord injury, vocational rehabilitation, narrative identity, qualitative research, identity reconstruction, employment, disability studies

1. Introduction

Vocational identity plays a central role in an individual's sense of self, providing purpose, structure, and social belonging. Following a spinal cord injury (SCI), this identity is often profoundly disrupted, requiring not only physical and psychological adjustment but also a redefinition of one's place within the workforce and broader society. The disruption of vocational identity after SCI has been widely recognized as one of the most challenging aspects of post-injury rehabilitation, influencing mental health, motivation, and quality of life (Bloom et al., 2019). As individuals navigate the aftermath of injury, they must reconcile their former professional selves with new limitations and realities—a process that can be both painful and transformative (Sallinen & Mengshoel, 2017).

The rehabilitation process following SCI is multifaceted, involving not only medical recovery but also psychosocial reintegration. Vocational rehabilitation (VR) plays a vital role in supporting individuals with disabilities to re-enter the workforce, adapt to new roles, or develop alternative employment pathways (Dorsett & McLennan, 2019). However, the outcomes of VR services remain inconsistent, and many individuals with SCI face significant barriers in reclaiming a vocational identity (Samiee & Naghavi, 2021). These barriers include inaccessible environments, discriminatory hiring practices, and the psychological toll of losing one's former identity (Zaidi & Baveja, 2018). In addition, vocational outcomes are influenced by the individual's internal narrative—how they make sense of their injury, perceive their abilities, and define personal success in a post-injury life (Ogden, 2017).

Narrative approaches in rehabilitation research have gained prominence for their ability to capture the lived experiences of clients and give voice to their subjective journeys (Akande & Long, 2024). This method shifts the focus from predefined clinical outcomes to the meaning-making processes of individuals as they reconstruct identity and purpose (Longoria & Degeneffe, 2023). Research has shown that narratives provide not only insight into coping mechanisms but also serve as tools for emotional regulation and social reengagement (Bloom et al., 2017). Through storytelling, individuals can integrate their pre- and post-injury selves into a coherent identity that supports psychological recovery and future orientation (Lanyon et al., 2024). In the context of SCI, where the injury marks a profound rupture in life continuity, narrative analysis becomes especially relevant.

Despite advances in the field, vocational rehabilitation remains underutilized or ineffectively applied in many cases (McLennan & Ludvik, 2020). There is often a mismatch between standardized rehabilitation models and the diverse, evolving needs of individuals with SCI. As highlighted by Ramakrishnan et al., early VR services are most effective when they are flexible, person-centered, and integrated with psychological support (Ramakrishnan et al., 2018). However, service delivery systems often operate in fragmented silos, failing to address the complex interplay between medical recovery, identity reconstruction, and social participation (Dunn et al., 2021). These systemic limitations contribute to vocational disengagement and long-term unemployment among individuals with SCI (Wallentin et al., 2021).

The literature further indicates that effective VR requires a holistic understanding of the individual's pre-injury career identity, current capabilities, and emotional needs (Bloom et al., 2019). For many, work is more than a source of income—it is a foundation of identity, social connection, and autonomy (Ogden, 2017). After SCI, this foundational role of work is often destabilized, leaving individuals in a state of identity limbo. As Sallinen and Mengshoel have observed, this liminal state is frequently characterized by loss, confusion, and a yearning for normalcy (Sallinen & Mengshoel, 2017). Yet it also presents opportunities for growth, redefinition, and narrative reconstruction.

The international scope of vocational rehabilitation research reveals both shared challenges and cultural nuances. For example, Starobina et al. emphasize the need for national-level coordination and policy reform in the professional rehabilitation of persons with disabilities (Starobina et al., 2022), while Hwan's study of Korean vocational rehabilitation policy highlights regional disparities in service access (Hwan, 2022). Similarly, Miethlich and Šlahor argue that integrating VR into corporate social responsibility strategies can enhance both business value and social inclusion, particularly when employers commit to supporting long-term adaptation (Miethlich & Šlahor, 2018). These global perspectives underscore the need for adaptive, culturally competent VR systems that honor the individual's story and social context.

Gender, socioeconomic background, and the nature of pre-injury work further influence how individuals reconstruct vocational identity. For example, McDonnall and Cmar found that service delivery models must be tailored to specific disability types and cultural expectations in order to be effective (McDonnall & Cmar, 2019).

Meanwhile, Borozinets et al. highlighted the psychological complexities faced by veterans with combat-related disabilities who must transition not only from military to civilian life but also from able-bodied to disabled identity (Borozinets et al., 2023). These intersecting challenges reinforce the idea that VR cannot be reduced to skill acquisition or job placement; it must encompass the psychological work of re-identifying and re-authoring one's life.

While narrative research has illuminated the vocational experiences of several populations—such as immigrants (Akande & Long, 2024), individuals with schizophrenia-spectrum diagnoses (Ogden, 2017), and people with intellectual disabilities (Evans, 2022; Hermanoff et al., 2017)—there is a continued need to explore how those with SCI reconstruct their vocational identities over time. This gap is particularly pronounced in countries where disability services are still evolving or unevenly implemented. As noted by Tophoven et al., younger individuals with disabilities often struggle to access age-appropriate vocational supports, further complicating identity development and long-term employment outcomes (Tophoven et al., 2018).

Research has also emphasized the importance of early intervention in shaping vocational outcomes. Bloom et al. stress the role of integrated services and early engagement in improving both psychological and employment-related recovery after SCI (Bloom et al., 2017). Similarly, McLennan et al. advocate for culturally safe and community-driven VR services, particularly for marginalized populations (McLennan et al., 2016). These findings support a growing consensus that vocational identity should not be treated as a static construct but rather as a dynamic, co-created process influenced by personal narratives, social relationships, and systemic structures.

Furthermore, individuals who engage actively in narrative reconstruction tend to report better psychological well-being, greater life satisfaction, and a stronger sense of coherence (Lanyon et al., 2024). The narrative approach allows them to reposition themselves not as passive victims of injury, but as active agents capable of reshaping their futures (Vijayan, 2021). As highlighted in longitudinal studies, this shift from a deficit-based to a strengths-based identity can mark the turning point in rehabilitation, motivating individuals to re-engage with work, pursue meaningful goals, and redefine success on their own terms (Borozinets et al., 2023).

Despite the promise of narrative-informed rehabilitation, implementation remains a challenge. Hyun-Uk's recent text-mining study of VR literature reveals that while psychological adjustment and identity are frequently discussed themes, practical integration into service design is lacking (Hyun-Uk, 2024). In line with this, Longoria and Degeneffe argue for the inclusion of client narratives in program development, especially for populations whose employment pathways do not follow traditional patterns (Longoria & Degeneffe, 2023). This perspective is echoed in Lippi et al.'s comprehensive review of rehabilitation strategies, which calls for programs that address not just functional recovery but also quality of life and identity integration (Lippi et al., 2023).

This study explores that process through a narrative lens, aiming to understand how individuals with SCI reconstruct their vocational identities and what social, emotional, and structural factors shape that journey.

2. Methods and Materials

2.1. Study Design and Participants

This study employed a qualitative research design with a narrative approach to explore the processes through which individuals with spinal cord injury reconstruct their vocational identities. The research aimed to capture the lived experiences and meaning-making patterns of individuals as they navigate the challenges and transformations following their injury. Participants were selected through purposive sampling to ensure rich and relevant narratives, with inclusion criteria emphasizing a formal diagnosis of spinal cord injury, employment history prior to the injury, and willingness to share personal experiences. A total of 22 participants (14 men and 8 women) from various regions of Turkey participated in the study. Participants ranged in age from 26 to 55 and represented diverse occupational backgrounds, including education, healthcare, manual labor, and administrative work. Theoretical saturation was reached with 22 participants, as no new themes emerged in the final interviews.

2.2. Data Collection

Data collection was conducted using in-depth semi-structured interviews, allowing participants to articulate their experiences with vocational identity reconstruction in their own words. The interview guide included open-ended questions covering topics such as professional self-concept

before the injury, perceived changes after the injury, challenges in re-entering the workforce, and personal strategies for identity reformation. Interviews lasted between 45 and 90 minutes and were conducted either in person or via secure video conferencing, depending on participant preference and accessibility. All interviews were audio-recorded with consent and transcribed verbatim for analysis.

2.3. Data Analysis

Data were analyzed using thematic narrative analysis with the assistance of NVivo software to facilitate systematic coding and organization of the transcripts. The analysis involved multiple stages, beginning with familiarization through repeated reading of the narratives, followed by the identification of key narrative segments reflecting turning points in vocational identity development. Codes were generated inductively and grouped into categories and overarching themes. Analytical memos and peer debriefing sessions ensured the rigor and credibility of the findings. The researchers maintained reflexive journals throughout the analysis to acknowledge and manage potential biases, enhancing the trustworthiness of the study.

Table 1

The Results of Thematic Analysis

Main Theme	Subtheme	Concepts (Open Codes)
Disruption of Pre-Injury Identity	Loss of Role and Purpose	Feeling useless, Loss of status, Disconnection from work life
	Emotional Disruption	Frustration, Anger, Grief, Emotional numbness, Hopelessness
	Altered Self-Perception	Lowered self-esteem, Body image issues, Perceived incompetence
	Social Withdrawal	Avoiding social interaction, Isolation, Feeling misunderstood, Withdrawal from colleagues
Navigating Vocational Transition	Physical Limitations	Reduced mobility, Dependency on others, Fatigue, Pain management
	Seeking Support Systems	Family encouragement, Peer mentoring, Professional counseling, Rehabilitation support
	Re-Evaluating Career Paths	Career change consideration, Interest assessment, Job feasibility evaluation, Exploring new roles
	Skill Adaptation and Training	Learning new skills, Vocational training, Technological adaptation
	Trial and Error in Employment	Job tryouts, Volunteering first, Short-term contracts, Employment discontinuity
	Institutional and Societal Barriers	Lack of accessibility, Stigma, Discrimination, Policy gaps, Limited accommodations
	Motivational Fluctuations	Wavering confidence, Burnout, Hopefulness, Fear of failure, Determination
Reconstruction of Vocational Identity	Navigating Workplace Interactions	Disclosure decisions, Co-worker reactions, Adapting communication, Navigating stigma
	Acceptance and Integration	Coming to terms with injury, Letting go of the past, Embracing limitations
	Identity Reformation	New identity construction, Personal growth, Learning from adversity, Shifting self-image
	Future Orientation	Goal setting, Career planning, Vision for future, Sense of direction
	Redefining Success	Personal achievement, Work-life balance, Quality of life, Emotional fulfillment
	Narrative Coherence	Life story reconstruction, Meaning-making, Narrative control

Participants in this study described a complex and multifaceted journey of vocational identity reconstruction

3. Findings and Results

The study included 22 participants (14 men and 8 women) aged between 26 and 55 years ($M = 41.3$, $SD = 8.2$), all of whom were living in various urban and semi-urban regions of Turkey. In terms of education, 6 participants held a high school diploma, 9 had completed undergraduate studies, and 7 held postgraduate degrees. Regarding employment status before injury, 10 participants were engaged in physically demanding occupations such as construction work, logistics, or manual labor; 7 were employed in administrative or clerical roles; and 5 were professionals in fields such as education and healthcare. At the time of the interviews, 4 participants had returned to full-time employment, 6 were working part-time or freelance, 8 were pursuing retraining or education programs, and 4 were currently unemployed. The time since injury ranged from 1 to 15 years, with the majority ($n = 13$) experiencing their spinal cord injury between 3 and 7 years prior to participation. All participants were recruited using purposive sampling, and theoretical saturation was reached after the 22nd interview.

following spinal cord injury. Through thematic analysis of 22 semi-structured interviews, three overarching themes

emerged: Disruption of Pre-Injury Identity, Navigating Vocational Transition, and Reconstruction of Vocational Identity. These themes reflect the progression from identity loss to redefinition, with several subthemes illuminating the psychological, social, and practical dimensions of this transformation.

Under the theme of Disruption of Pre-Injury Identity, many participants reported a deep sense of loss of role and purpose following their injury. The inability to return to their former work environments often triggered feelings of uselessness and disconnection from previously held roles. One participant shared, *“When I stopped working, I didn’t know who I was anymore. My job was a big part of me.”* Others echoed similar sentiments, highlighting how the abrupt halt in professional activities severed their sense of value and contribution.

Emotional disruption was another prominent experience in the early stages post-injury. Many participants described intense feelings of frustration, grief, anger, and even emotional numbness as they struggled to comprehend the permanence of their condition. One interviewee explained, *“I was angry at everything—the accident, my body, my life. I didn’t see a way forward.”* These emotional responses were compounded by a sense of hopelessness, which, for some, led to depressive episodes.

A third subtheme, altered self-perception, captured how participants’ views of themselves changed after the injury. Lowered self-esteem and feelings of incompetence were frequently mentioned. For instance, one participant reflected, *“I used to be the guy everyone came to for help. Now, I can’t even open a door without assistance.”* Body image concerns were also reported, especially among younger participants, who struggled with the visible and invisible impacts of disability.

The injury also led to social withdrawal, as participants began to isolate themselves from social and professional networks. Fear of being misunderstood, discomfort with their new appearance, and reluctance to discuss their condition contributed to this isolation. *“I didn’t want to go out. I didn’t want anyone to see me like this,”* one respondent noted, highlighting the interpersonal costs of their physical transformation.

Finally, within this theme, physical limitations were cited as a concrete barrier to engaging in former work roles. Participants discussed reduced mobility, chronic fatigue, pain, and the increased need for physical assistance. As one person shared, *“Even if I wanted to go back, my body wouldn’t let me. It’s like hitting a wall every day.”* These

limitations restructured their capacity to function within traditional vocational contexts.

The second major theme, Navigating Vocational Transition, included efforts to find support and reimagine work possibilities. The subtheme seeking support systems revealed the critical role of family, professionals, and peer networks in helping individuals re-engage with vocational goals. Participants frequently credited family members or rehabilitation staff with encouraging them to think beyond their injury. One noted, *“My brother kept saying, ‘This isn’t the end. You’ve still got skills.’ That stuck with me.”*

Re-evaluating career paths was a necessary and often difficult task. Participants described weighing their interests, physical abilities, and job feasibility in an unfamiliar post-injury world. For some, this process was empowering. *“I realized I could still use my mind. Maybe I couldn’t work construction anymore, but I could teach,”* explained a former laborer who became a vocational instructor. Others found it disheartening, confronting the gap between their aspirations and their new capabilities.

The subtheme of skill adaptation and training was common among those who pursued further education or vocational rehabilitation. Participants reported enrolling in online courses, learning to use assistive technologies, and acquiring new certifications. One participant said, *“The hardest part was starting over. But learning how to work a computer opened so many doors.”* These efforts were often framed as steps toward regaining agency and self-worth.

The trial and error in employment subtheme reflected the non-linear nature of re-entering the workforce. Participants spoke of taking short-term jobs, volunteering, or attempting roles that eventually proved unmanageable. *“I tried working at a call center. It was too stressful, and my back couldn’t take sitting that long,”* shared one individual. Despite setbacks, many participants expressed appreciation for the experiential learning these efforts provided.

Participants also highlighted institutional and societal barriers that complicated their return to work. Lack of accessibility, workplace stigma, policy gaps, and insufficient accommodations were frequently cited. One participant lamented, *“They said they support disabled workers, but then told me the office wasn’t wheelchair accessible.”* Such experiences fueled frustration and a sense of systemic exclusion.

Another subtheme, motivational fluctuations, captured the emotional ups and downs throughout this process. Participants described cycles of hope, fear, determination, and burnout. *“Some days I felt like I could take on the world.”*

Other days, I didn't want to get out of bed," one respondent noted. These fluctuations were influenced by personal resilience, family support, and societal feedback.

Navigating workplace interactions emerged as a distinct subtheme. Decisions about whether to disclose one's injury, managing reactions from colleagues, and overcoming stigma were central challenges. As one interviewee shared, *"I didn't want pity, but I also needed them to understand my needs. It's a tricky balance."* Participants emphasized the importance of respectful communication and inclusive environments in facilitating vocational engagement.

The final theme, Reconstruction of Vocational Identity, illustrated the gradual process of redefining one's professional self. The subtheme of acceptance and integration involved emotional acceptance of the injury and integration of the new self into daily life. One participant explained, *"It took years, but I finally stopped comparing myself to who I used to be."* This acceptance was foundational for subsequent identity development.

Identity reformation was a dynamic process marked by personal growth and learning. Participants described reconstructing their sense of self through reflection and resilience. *"I've become a different person—not worse, just different. And that's okay,"* one participant explained. For many, the injury became a source of meaning and transformation rather than purely loss.

The subtheme future orientation reflected participants' renewed ability to envision long-term goals and aspirations. Career planning, goal setting, and imagining future success were common. *"I want to start my own business. I know it'll be hard, but now I believe I can,"* shared one individual. This future-oriented mindset signified a shift from survival to growth.

Participants also engaged in redefining success, moving away from conventional definitions of career achievement. Many emphasized work-life balance, emotional fulfillment, and meaningful contribution over salary or status. *"I may not make as much money now, but I go to bed proud of what I did,"* noted one respondent. This redefinition helped align their self-concept with their current realities.

Lastly, narrative coherence captured how participants made sense of their journey. By reconstructing their life stories and finding meaning in their experiences, they developed a coherent sense of self that included both pre- and post-injury identities. One participant reflected, *"Telling my story helped me see the bigger picture. I'm not broken—I'm evolving."* The act of narrating their experiences became central to their identity reconstruction.

4. Discussion and Conclusion

This study explored the process of vocational identity reconstruction among individuals with spinal cord injury (SCI) in Turkey, utilizing a narrative qualitative approach. The findings illuminated a three-phase experience: disruption of pre-injury identity, navigation of vocational transition, and reconstruction of a new vocational identity. These themes reflect not only personal and psychological transformations but also the broader social and structural contexts in which individuals attempt to re-enter the world of work. The results align with a growing body of literature suggesting that vocational identity following SCI is not merely an outcome of physical rehabilitation but a complex psychosocial process that is continually shaped through narrative, social relationships, and institutional support (Bloom et al., 2019; Lanyon et al., 2024).

The first major theme, disruption of pre-injury identity, captured the profound psychological rupture experienced by participants in the wake of injury. Loss of purpose, emotional distress, altered self-perception, and physical limitations were commonly reported, underscoring the identity threat imposed by SCI. This aligns with previous studies that emphasize the centrality of work in one's self-concept and the emotional disorientation that occurs when this is lost (Ogden, 2017; Sallinen & Mengshoel, 2017). Participants' narratives of grief, hopelessness, and disconnection from their former roles mirror the findings of Bloom et al., who described the occupational void many individuals face after SCI and the subsequent crisis of identity (Bloom et al., 2019). Moreover, emotional disruption and social withdrawal echo themes identified in Dorsett and McLennan's analysis of status loss and identity destabilization following injury (Dorsett & McLennan, 2019).

The second theme, navigating vocational transition, demonstrated participants' efforts to seek new meaning and pathways through support systems, re-evaluation of career options, and skill development. Family encouragement and peer mentoring played significant roles in motivating individuals to consider re-engagement with vocational activities. This supports findings by Akande and Long, who emphasized the value of narrative support and autonomy-enhancing interventions in vocational rehabilitation settings (Akande & Long, 2024). Participants' efforts to trial new roles, engage in retraining, or attempt short-term employment opportunities reflect the experimental and nonlinear nature of return-to-work pathways. These results

are consistent with Longoria and Degeneffe's findings on the unpredictable career trajectories of marginalized groups in vocational rehabilitation, including those with injury-related impairments (Longoria & Degeneffe, 2023).

Institutional and societal barriers, such as inadequate accessibility, discrimination, and inflexible employment policies, emerged as major obstacles during this transitional phase. Several participants described feeling marginalized or dismissed in the workplace, which is in line with earlier research documenting systemic exclusion and policy shortcomings in the reintegration of individuals with disabilities (Samiee & Naghavi, 2021; Wallentin et al., 2021). Borozinets et al. also noted the role of institutional resistance in impeding the reintegration of individuals with acquired disabilities, particularly in post-combat and high-stigma contexts (Borozinets et al., 2023). The lack of responsive, adaptive infrastructures in workplaces further reinforces the need for policy reforms and inclusive employment models, as advocated by Hwan in his analysis of regional VR systems (Hwan, 2022).

Motivational fluctuations, including cycles of determination and despair, were a notable aspect of vocational transition. Participants described wavering confidence and emotional fatigue as they tried to balance their goals with the realities of post-injury limitations. Similar emotional turbulence has been noted in studies on individuals navigating psychiatric and cognitive impairments during rehabilitation. For example, Tophoven et al. observed emotional instability and burnout as significant barriers to successful outcomes in young adults with psychological disabilities undergoing vocational rehabilitation (Tophoven et al., 2018). Such internal fluctuations further highlight the need for psychological support structures integrated within vocational programs.

The final theme, reconstruction of vocational identity, captured participants' efforts to come to terms with their injury, redefine their personal and professional goals, and integrate their experiences into a coherent narrative. Acceptance and emotional integration were foundational to this process. Several individuals reported redefining success, not in terms of economic gain or professional status, but in terms of quality of life, autonomy, and contribution. These redefinitions mirror findings by Lanyon et al., who emphasized that individuals returning to work after stroke-related impairments often reconstruct their vocational identities based on new values and life perspectives rather than returning to previous benchmarks (Lanyon et al., 2024).

Identity reformation and future orientation were further supported by meaning-making efforts. Participants who engaged in narrative construction—sharing their stories, connecting events, and reframing challenges—demonstrated a higher degree of coherence in their new vocational identities. This finding supports the role of narrative practices in facilitating psychological recovery and self-continuity, as discussed by Ogden in his study of life-history narratives among individuals with mental illness (Ogden, 2017). Similarly, Miethlich and Šlahor argue that when VR is framed within the broader construct of corporate social responsibility, narrative identity can become an avenue for both employee development and inclusive organizational culture (Miethlich & Šlahor, 2018).

Narrative coherence also correlated with increased self-efficacy and planning. Participants who could imagine a future self in a vocational role—whether through entrepreneurship, advocacy, or creative engagement—were more likely to engage in meaningful vocational activities. This finding is supported by Bloom et al., who suggested that occupational bonding—developing a renewed emotional connection to one's work identity—is critical for long-term integration (Bloom et al., 2019). McLennan and Ludvik's review of early VR services similarly emphasized the importance of future-oriented planning and narrative coherence in promoting recovery among individuals with severe injuries or illnesses (McLennan & Ludvik, 2020).

The importance of early, personalized, and culturally sensitive vocational interventions was echoed throughout participant narratives. Several respondents expressed a desire for more individualized VR programs that respected their unique journeys and aspirations. These insights align with previous research advocating for tailored, person-centered approaches. For example, Ramakrishnan et al. found that early intervention programs tailored to the emotional and vocational goals of clients led to better long-term outcomes than generalized rehabilitation models (Ramakrishnan et al., 2018). Likewise, Bloom et al. emphasized that early and integrated services are particularly effective when they provide emotional support alongside job training and placement (Bloom et al., 2017).

Cultural and regional context also influenced the narratives. Participants from more urbanized areas reported better access to rehabilitation services and educational resources, while those in rural or semi-urban environments noted limitations in vocational options and social support. These disparities echo the findings of Hwan, who highlighted regional inequities in the provision of vocational

rehabilitation services across different municipalities in Korea (Hwan, 2022). Additionally, the need for culturally safe and inclusive services was underscored in McLennan et al.'s research on rehabilitation frameworks for marginalized communities, stressing the importance of aligning services with clients' sociocultural values (McLennan et al., 2016).

Notably, several participants linked their vocational identity reconstruction with advocacy and community engagement. By mentoring others with SCI or participating in disability awareness initiatives, individuals found new vocational purpose and agency. This theme of role transformation—from service recipient to service contributor—parallels the findings of Zaidi and Baveja, who documented how individuals with hearing impairments often became vocational mentors and peer leaders as part of their identity redefinition (Zaidi & Baveja, 2018). Similarly, the narrative method itself was therapeutic for some participants, enabling them to articulate their growth and resilience, as noted by Evans in his analysis of storytelling interventions among individuals with intellectual disabilities (Evans, 2022).

In summary, the findings of this study reaffirm the multifaceted nature of vocational identity reconstruction following SCI. This process is deeply narrative, emotionally charged, and shaped by interactions between personal agency and external systems. Participants did not merely "adjust" to new roles but actively reconstructed meaningful vocational identities through reflection, trial and error, and engagement with supportive others. These findings resonate with previous literature while offering culturally grounded insights into the experiences of individuals in Turkey. They highlight the ongoing need for narrative-informed, person-centered vocational rehabilitation models that prioritize identity, meaning-making, and social inclusion.

While this study provides valuable insights into the lived experiences of individuals with SCI in vocational identity reconstruction, it is not without limitations. The sample size, though adequate for qualitative research, was limited to 22 participants from Turkey, and thus findings may not be generalizable to individuals in different cultural or healthcare contexts. Furthermore, while the narrative approach enabled deep exploration of personal experiences, it inherently reflects subjective realities and may be influenced by participants' memory, emotional state, and communication style at the time of the interview. Additionally, the cross-sectional nature of data collection captures a snapshot rather than the longitudinal evolution of vocational identity over time.

Future research should consider longitudinal studies to track vocational identity reconstruction over several years, offering insight into the dynamic and ongoing nature of this process. Comparative studies across different cultural, economic, and institutional contexts could further illuminate how structural and societal factors shape identity reconstruction. There is also a need for research examining the perspectives of employers, rehabilitation counselors, and family members to gain a more holistic understanding of the vocational reintegration process. Finally, incorporating mixed methods—combining narrative analysis with psychological or occupational assessments—could deepen the understanding of the relationship between identity reconstruction and vocational outcomes.

Practitioners working with individuals who have sustained spinal cord injuries should adopt a narrative-informed approach that prioritizes personal meaning-making, emotional support, and individualized goal-setting. Vocational rehabilitation programs should move beyond task-based training to include identity-based counseling, peer mentorship, and creative role exploration. Service providers must also advocate for systemic changes in workplace accessibility and inclusive hiring practices to support long-term reintegration. Empowering individuals to participate in the design and delivery of VR services can further enhance the relevance and effectiveness of such programs. Ultimately, recognizing clients not as passive recipients of care but as active narrators of their recovery journey is essential for holistic rehabilitation.

Authors' Contributions

Authors contributed equally to this article.

Declaration

In order to correct and improve the academic writing of our paper, we have used the language model ChatGPT.

Transparency Statement

Data are available for research purposes upon reasonable request to the corresponding author.

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Declaration of Interest

The authors report no conflict of interest.

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Ethical Considerations

The study protocol adhered to the principles outlined in the Helsinki Declaration, which provides guidelines for ethical research involving human participants.

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