Identity Transformation of Blind People with Blindness in Adulthood in Bandung

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Abstract. This qualitative research aims to explore the identity transformation of 25 blind people in the Rehabilitation Center Wyata Guna Bandung who suffered from blindness in adulthood. They consist of 19 males and six females. The theoretical perspective used is phenomenology based on in-depth interviews. The study shows that the identity transformation of the blind people takes place in five stages: self-concussion, self-isolation, self-disclosure, self-improvement, and self-devotion with different nuances of communication dynamics. The stages of identity transformation fluctuate. Although the process and stages of transformation lead to a better direction, it does not mean that the informants have become truly blind individuals because they have not totally accepted their blind identity as an objective identity as well as a subjective identity. The results of this study prove that recipe knowledge and activities before blindness cannot be continued due to eye dysfunction. The identity transformation of the blind people is an unfinished transformation or a transformation that still proceeds to the consciousness of self-existence or total self-acceptance of being blind.

Key Words: the blind, blindness, identity transformation, phenomenology

Introduction

Blindness not only makes the eyes dysfunctional, but also causes social and psychological effects for anyone who experiences it, including the limitations of social mobility and communication. Eyes have an important role in communication. Wenburg and Wilmot (1973:108) refer to the eye as the sense regulator in interpersonal communication. DeVito (1997:191) considers it the most important nonverbal messaging system. It is because, as West and Turner (2009:161-162) suggest, the eye communicates a lot of different meanings such as interest, power, anger, disbelief, disapproval, indifference, nervousness, shyness, truthfulness, involvement, tiredness, and credibility. Blindness also causes a decrease in the blind people’s confidence because they cannot see like other human beings. This is reasonable because the existence of the eyes is very important in everyone’s life. Aristotle (Synnott, 2003:19) calls the eye the most esteemed sense and part in the human body because the eye is the reflection of one’s soul.

The psychological and social effects of blindness will be greater when blindness is experienced by adults. They have tasted the joy of living in normal conditions, so their blindness is a tragedy that has changed their orientation and has hindered their efforts to realize their planned goals. Their old experiences, lifestyles, values, and traditions or in Schutz’s (1972) term recipe knowledge, must be reconstructed with new traditions and ways of life due to their new physical condition (inability to see).

Physical transformation due to blindness will be followed by psychological transformation. At the same time, there is a change of consciousness which, according to Musgrove (1977:15), occurs when the relationship between oneself and social
experience is reinterpreted and seen with new understanding. Consciousness is the core of self (Mead, 1968), and the source of identity (Musgrove, 1977). This change in awareness and self-concept of the blind people after experiencing blindness in adulthood is what is meant by the transformation of identity in this paper.

Changes in the shape and function of the eyes that mark blindness often create a physical stigma so that blind people experience psychological barriers in social interaction. Their interpretation of the eye dysfunction and their understanding of other people’s responses to their new identity will persist. This new awareness will not only contribute to their identity transformation, but it will also make their communication with others more dynamic. The blind person continues to communicate with oneself and with others as the process of identity transformation takes place. Therefore, in addition to tracing the direction of the blind people’s identity transformation, this paper will also delineate the communication dynamics embedded in the transformation process.

According to Strauss (1959:91-92), identity transformation concerns psychological change, in which the subject becomes a person who is different from before. Therefore, identity transformation implies a new judgment about self and others, about events, actions, and objects. Such identity transformation enables reorientation and reinteraction of the blind in their social community. Soemantri (2006:86) argues, if blindness occurs when the ego begins to develop, a traumatic experience will be inevitable. The subject will experience shock and then depression because at that time one begins to be aware of a broader self.

The subjects of this study are people who have undergone permanent blindness based on medical judgment. Before becoming blind in adulthood, they had activities and collected experiences and traditions that had been passed down from generation to generation or what Schutz (Musgrove 1977:109) refers to as recipe knowledge, or what Berger and Luckmann (1990:58) call social stock of knowledge. This experience has an important role as a reference for everyone to live everyday life.

However, according to Schutz (Musgrove, 1977: 109), major accidents (such as the blindness suffered by a person in adulthood) make this recipe knowledge unable to be functional anymore. Discontinued experiences of the past (before blindness) will be followed by a fundamental awareness change (towards the new consciousness).

According to Musgrove (1977:15), consciousness changes “when this relationship between self and social experience is reinterpreted and seen in a new light.” Musgrove’s thesis is reinforced by Denzin (1987:11) who defines transformation as the process by which one is actively acquiring a new self image, new self-language, new relationships with others, and new ties to the social order. In this context, according to Strauss (1959:132), significant others are essential for a transformed individual, as well as to be a partner to build counter-identities (Berger & Luckmann 1990:236).

Significant others have an important role for the blind people’s identity transformation and their communication with others. Their different response and treatment significantly affect the blind’s direction and rhythm for identity transformation. Therefore, it can be understood that identity transformation is not uniformly experienced by every blind individual. Different patterns of identity transformation are possible because each individual interacts in and with different social environments, and interprets each environmental response in different ways.

According to Mead (1934) and Cooley (1983:184), the interpretation of a person about the judgments of others about himself or herself is the determining factor of the subject’s self-concept. Thus the process of the identity transformation of a person who suffers from blindness in adulthood is dynamic, so is their social communication. Referring to the self concept as defined by Mead and Cooley above, it can be assumed that the blind people are continually assessing and interpreting themselves based on the judgment of others that they comprehend.

Research Methodology

There have been relatively few studies of blind people’s experiences in Indonesia, let alone of blind people’s subjective experiences in Bandung. These few studies include, for instance, Atmaja (2015) and Pratama et al. (2016). Research of blind people’s subjective experiences is more commonplace in western countries, as conducted by Gillies et al. (2006), Benoit et al. (2013), Koutsoklenis and Papadopoulos (2014), and Siira et al. (2019),
Qualitative research on the blind people’s subjective experiences such as the present study seems rare in Indonesia. It is partly for this reason that this study was conducted. The study took several years until February 2018 based on a phenomenological tradition. Researchers interviewed and observed 25 blind people in the Rehabilitation Center Wyata Guna Bandung who suffered from blindness in adulthood. They consist of 19 males and six females. They ranged in age from 20 to 43 at the beginning of the research and twenty of them were single. This research has traced the process of identity transformation of those blind people due to the tragedy of becoming blind. All the data was obtained through in-depth interviews with the 25 informants and their significant others and some observations of their activities while they were still at the rehabilitation center until they became independent and had a new career.

Results and Discussion

Researchers have found five stages of identity transformation experienced by the informants who became blind in adulthood. These five stages are self-concussion, self-isolation, self-disclosure, self-improvement while asserting identity, and self-devotion to new professions. Although the five stages of this identity transformation will be explained chronologically, it does not mean that the five stages are linear. The five tendencies generally intersect and fluctuate as a consequence of diverse traits of the blind informants in terms of their free will, creativity, and the diversity and differences in their responses to their social environment as they understand it.

Self-concussion

Becoming blind is the starting point of a person’s eye condition change (from being able to see to being blind), and is followed by a status change from being normal to becoming a blind person. The change also forced the person to enter a new reality about life that had not been fully comprehended before. Therefore, in the early days of blindness, all of the blind informants experienced shock due to their unpreparedness to live life as blind people. In the context of this research, this phenomenon is called the stage of self-concussion.

The stage of concussion is the beginning of the transition. In the early days of blindness, all the blind people were not yet psychically ready to become blind. They were still haunted by double feelings; between thinking about the past (while they were sighted) and the tragedy of this blindness (including the blind identity they must now bear). In this stage, it is also found that efforts were made by the informants to overcome the blindness they experienced, such as through treatment.

The change of physical identity from being sighted to being blind is permanent so that the reactions shown during the self-concussion stage are extremely significant. Based on the acknowledgment of the informants and the testimony of some of their significant others, in the early days of blindness, the informants experienced shock and depression with varying degrees, from minor shock such as self-isolation with shouting and anger, to severe shock shown by hitting something, banging heads against the wall and destroying valuable objects around them. They were not ready to accept the new status as being blind. The feeling of shock due to blindness was followed by depression.

There is a correlation between the blind’s self-concussion and their educational and professional backgrounds while being sighted. Four blind people who experienced depression with extreme levels were informants who had high education levels compared to the other 21 blind people. GY was a graduate of the Hospitality Academy and had worked in a hotel. JE was a graduate student of the Faculty of Economics. NL was a graduate of the Faculty of Mathematics and Natural Sciences at one renowned university in Bandung and had worked. WH was a graduate of a university in Bandung and had also worked. With good education the informants hoped to have a better future and an established job. However, blindness made their expectations and comfort disappear, so their reaction to blindness was excessive and extreme.

Self-isolation

After experiencing self-concussion due to blindness, all blind people preferred to separate themselves from social interaction by locking themselves in their homes. Isolating themselves is an indication of their unpreparedness for accepting their new identity as blind people. They had the
same reason to isolate themselves. Feelings of shame, reluctance to be pitied, and fear of being known as blind people by others (especially friends) are three reasons for isolating themselves. In terms of duration, self-isolation in the early days of blindness did not occur equally for the blind. Based on the results of interviews with all the blind people as the subjects of this study, it is revealed that the shortest isolation period lasted for a week, and the longest lasted for five years.

Physically, self-isolation is separating oneself and avoiding contact with the outside world. However, that does not mean that they isolate themselves psychically. Indeed, self-dialogue continues during the period of self-isolation. Self-dialogue includes the blind’s interpretation of their blindness, the blind identity they bear, the response and the views of others about them, and also about their future strategy for a better life. Blind people also reduced communication with others because they were not willing to open up and exchange ideas with others optimally.

Although most of the self-isolation done by the informants took place in the early days of blindness, it sometimes reappeared thereafter on the basis of their desire and free will, and according to the particular motives they desired to come true, or as an interpretation of the symbolic behavior of their communication partners. For example, after they had become blind suddenly there were people who taunted them when they were around and used public facilities. This situation made them offended, and they often re isolated themselves.

**Self-disclosure**

This stage becomes a ‘turning point’ phase characterized by the informants’ awareness to accept (but not yet completely) their new identity as blind people. At this stage, the informants started thinking realistically about their condition and no longer became emotional. They sought to understand and acknowledge their condition as people with permanent visual impairment so that they could determine the right strategy and the next step in order to exist in the midst of a world dominated by sighted people in general and despite the difficult challenges in their lives.

The decision to open up and adapt to the outside world is a conscious choice for the blind. At this stage they began to dare to communicate with other people (aside from their significant others). The process of adaptation with the outside world began when the blind realized that they had the status of being blind. They were aware that they had entered this new world of living with the blind tradition and culture. More than just being aware of their status, at this stage as well the blind began to realize the importance of activities and jobs that enabled them to be productive, as in the period before experiencing blindness.

The desire above is a natural tendency because previously the informants were people who already had professions. The tragedy of blindness made their activities stalled. The motivation to work and to be more productive or the feeling of not wanting to be a burden to others inspired them to learn new work. Opening up to the outside world became the only option in order to realize that desire.

The choice to open up to the outside world placed the blind in a dilemmatic position. On the one hand, adapting to the outside world enabled them to know a lot of information about the world of blind people, such as information on educational institutions, work information, and so on. On the other hand, adapting to the outdoor environment brought back the old traumas they had begun to forget such as the insults and discriminatory behavior they received from society.

The bitter experience felt by the informants when adapting to their social environment is an indication of the existence of society’s discriminatory attitude towards the community of people with disabilities such as the blind. The negative attitude of society causes the process of self-adaptation and resocialization of the blind in the social environment disturbed. Berger and Luckmann (1990:236) use the term ‘failure of socialization’ to refer to this situation, which results in the deterioration of the blind’s self-confidence.

The discriminatory attitude of the society created interesting memories when the informants recalled their experiences of being discriminated. For example, YS’s experience, one of the informants, shows the trend. According to YS, he was once ridiculed by motorcycle taxi drivers at the Tasikmalaya train station with words that were not polite, such as "He knows he’s blind, but he still dares to travel alone.” The insult made him angry. In his anger, YS wanted to be able to
see again, so he could reply and give lessons to the people who made fun of him.

The discriminatory attitude of the society made the low self-esteem of the blind reappear. However, a strong desire to move forward forced them to open up and adapt to their social environment, although it was limited to people who could psychologically motivate them, or could practically help them to realize their practical interests.

The challenges faced by the blind in this adaptation stage show that their adaptation process is fluctuating. At first, they were excited, then they were disappointed again because of the discriminatory attitude of the society, until finally they decided to open up and adapt in a limited way and for only practical purposes. This dynamics of adaptation is schematically seen in the model of the process and dynamics of the blind’s adaptation (see figure 1).

**Self improvement While Asserting Identity**

This stage of identity transformation takes place as long as the blind person is in a rehabilitation center. This stage is a continuation of what happens when they open themselves and is marked by the mind and typical behavior of the blind when they want to learn and plan a career, in that it often reinforces their identity as being blind.

Learning at a blind rehabilitation center was an early attempt to build a new career after blindness befell the informants. This new career began because the activity and the old job could not be continued anymore because there was a change in the physical condition; from being able to see to becoming blind. It fits the reality that Musgrove (1977:15) mentioned that the acquired knowledge that someone has owned becomes useless when someone experiences sudden blindness in adulthood. Therefore, the subjects reconstructed their lifestyle and activities according to their physical condition and new identity as blind people.

The presence of these blind people in the rehabilitation center can also be interpreted as a shift in career orientation, occupation, and profession. Most of them already had a steady job, or at least had the ideal life orientation and ideals before blindness befell them. However, the tragedy of blindness made their professions, work and ideals disappear, so they needed new jobs, professions, and ideals relevant to their condition as blind people.

Being a masseur is a favorite profession for the blind. The tendency is based on the recognition of the informants and the major chosen by them when studying at the Rehabilitation Center Wyata Guna, Bandung.

![Figure 1: Model of the Process and Dynamics of the Blind’s Adaptation](image-url)
However, a few of the informants became masseurs as a side job. They generally wanted other jobs and professions that were more promising than just being a masseur or massaging work as a side job to complement other jobs such as doing business, working as a private employee, and some other types of jobs. There were two blind people who really did not want to be masseurs.

For the informants, the choice to study and live in the blind rehabilitation center and the desire to become a masseur is a symbolic form of recognizing the identity of the blind. The desire to enter the rehabilitation center means they were ready to live the life as blind people who were ready to be treated as such while in the institution, including being ready to receive a label as blind people from others.

The blind people’s resocialization in the rehabilitation center also strengthened their confidence as blind people. Before entering the rehabilitation center, these blind people still thought that the blind were only themselves, or that not many people suffered from the same fate as they did, so they felt lonely, had low self-esteem, and were ashamed to live among the majority people who were sighted.

Self devoting and Living Independently with New Careers

The stage of ‘Self-devoting’ in the context of this identity transformation is the informants’ attempt to live independently and pursue a chosen career. This stage is also the implementation of knowledge and skills of the blind (especially the knowledge and skills that have been learned since accepting their blind identity).

The end of the blind people’s education in a rehabilitation center such as Wyata Guna Bandung, on the one hand, gives them happiness because they have graduated and have the skills (especially the massage skills) as a provision to find a job and to be able to live independently. On the other hand, (psychologically) the end of education brings about new problems, especially the problem of adaptation within the society because they have to leave the institution and return to the society that has not known, nor understood their condition.

For at least a year, blind people get free education and service at the Rehabilitation Center Wyata Guna Bandung. They socialize with their blind fellows or with other institutional communities who are familiar with their condition. During that time they also reinforce their adaptation in the new blind world and build confidence in a relatively comfortable atmosphere. However, such kind of atmosphere does not continue, because there is a time limit that requires them to leave the center. They should interact with the society, find employment, and be prepared to accept the challenges of life in the society, including the possible psychological challenges coming from people with discriminatory behavior towards those with disabilities like them.

A rehabilitation center like Wyata Guna Bandung is a place of education and rehabilitation for people with disabilities before they return to the society to work in accordance with the skills they already have. However, adequate facilities and services provided by the institution (such as beds, food, clothing, and educational facilities that are completely free) sometimes make some of them become spoiled or too reliant, so that they are reluctant to leave the institution. This is especially so for the blind who are not ready to go back to the society and mentally are not ready to be independent. Memories of the togetherness (especially for those who still have lovers in the center) and the ominous shadow of hard life outside the institution often appears in their minds at the end of their existence in the center.

The results show that in general the self-concept of the blind is relatively stable after leaving the rehabilitation center in order to live life in the society, as it was said by AN, an informant: “I am not ashamed, and I feel normal, just like when I was in WG [WyataGuna]. I do not think about the issue of this blind status of mine and do not really care about what people say. The most important thing for me is how I can work and make money.”

AN’s opinion above illustrates that the blind people’s confidence built in the rehabilitation center previously has been imprinted in them. In other words, the issue of identity does not become a wedge any more for them, especially in their careers. This, according to the researchers’ observations, is caused by three factors, as follows:

First, age and emotional maturity – The increase of someone’s age is usually followed by emotional maturity. They face life issues more calmly and wisely. Blind people also
experience the same thing. Their emotions look increasingly more mature in living their life and facing every problem. The increasing age of the blind and the increasing age of their blindness make them wiser in judging themselves (in the sense that there is no more depression, and they no longer think seriously about their blindness). Their main orientation is to work as much as possible so they can survive and be independent. Emotional maturity (including the conviction that their eyes cannot be healed again) makes them ready to accept the attitudes and behaviors of others towards them.

Second, ability and expertise – Having graduated from an institution of education and rehabilitation like Wyata Guna Bandung gives them pride. They have successfully passed various learning and test processes, at least to be ‘expert’ blind masseurs. The skills have made them more confident; moreover, they have worked and been able to earn income from the profession they do. Despite the status of being blind, they can be productive (not a burden to others) and are often seen as being more productive than some other people who are unemployed. Therefore, there is no reason for them to feel inferior or embarrassed about the identity of being blind.

Third, the choice of residence and workplace – Factors of residence and workplace can affect the confidence of the blind. The location of blind people outside the institution after graduation from the rehabilitation center is not too strange to them. In their workplace, they always work in the community with other blind people. None of them chose to work in a workplace dominated by sighted people (the jobs other than the masseurs). In the massage and Shiatsu parlors, they were placed in separate places that allowed them to be ‘hidden’ from other people (the patients). The position and placement allowed them to communicate with other blind people, and not to be forced to communicate with sighted people. In terms of territory, the city they chose for a career is Bandung, a city that according to the blind is the ‘blind paradise’ because of the behavior and attitude of the people who appreciate the blind. No single blind informant decided to return home and open a parlor or work as a masseur in his home region.

The informants’ decision not to return to their own villages according to their confession does not mean that they were embarrassed or wanted to avoid the society (especially the people in their village who had known them before). Their decision to live and work in Bandung was particularly based on pragmatic purposes and business consideration. Living with blind friends enabled them to exchange ideas and information to make their work easier.

The informants of this research have experienced two situations, i.e. the normal situation where they were able to see and the blind world in which they were unable to see. In the time span from blindness to the time that this study was conducted, the informants had undergone several stages of the identity transformation. Researchers found two tendencies of the blind identity transformation, i.e. the transformation that tends to ‘decrease’ and the other transformation that tends to ‘increase.’ Therefore, the transformation of the blind identity in the context of this research is called the fluctuating transformation, which is diagrammatically seen in the transformation model of the blind’s fluctuating identity (see figure 2).

### Downward Transformation

Decreasing transformation moves from a good condition to an unfavorable condition, both physically and psychologically, from a stable psychic state with a positive self-concept to an unstable psychic state with a negative self-concept. Therefore, the downward transformation is more biopsychological, i.e. a combination of the physical transformation with the psychic transformation.

The declined transformation begins with a physical transformation, in which the blindness tragedy is regarded as the initial and primary cause of all the transformations that occur to the blind. Blindness as the starting point of the decreased transformation not only becomes a scourge for someone who experiences it, but also becomes a ‘disgrace’ for the blind’s significant others and other people who are close to the blind but not blood-related. Changes in the latter’s attitudes can be the termination of love relationship, and divorce for those who are married. The experience of YS who experienced blindness when he was married is one such example. YS admitted that his wife dared to have an affair before him even though they were not divorced. In the context of interpersonal communication, the phenomenon (the
breaking of the relationship of love or husband and wife) is a form of withdrawal, which, according to DeVito (1997:254), is considered an indication of poor communication.

The deterioration of the relationship between the blind and the discriminating significant others as described above makes the ‘negative’ indications of the decreased transformation clear. This transformation has changed the peaceful and intimate relationship between people who knew each other, to be both gradually or suddenly tenuous or disharmonic.

In addition to affecting relationships,
the decreased transformation caused by the tragedy of blindness also affects the occurrence of career or job transformation for the blind. Before becoming blind, the majority of the informants worked or had regular (productive or non-productive) activities. The tragedy of blindness terminated these habits and routines because the old activities could no longer run perfectly without the aid of the main sense device: the eyes. The concepts of life and activities during the sighted time do not work anymore when a person becomes blind. The results of this study reinforce Musgrove’s research findings (1977: 109) that major accidents in social life make a person’s accrued knowledge unable to be of any functional use anymore, and have resulted in changes of conditions. This, according to Musgrove, is felt by people who experience blindness in adulthood, where they experience a great discontinuity, so that they cannot perform their old habits.

The decreased transformation continues throughout the depression. At that time, the blind people experienced shock due to sudden blindness. The period, that Somantri (2006:86) claimed as the traumatic time, ended when the blind began to accept their destiny as such, and gradually began to open up to the outside world. At this point, the process of downward transformation ended and switched to another process of transformation, the upward transformation.

**Upward Transformation**

Upward transformation begins at a turning point for the informants after passing through a downward transformation that connotes negative experiences. The upward transformation is identical with productive and positive experiences. While the downward transformation is more ‘systemic-biopsychological,’ the upward transformation tends to be psycho-social-pragmatic. In this context, the role of the blind as transforming actors looks creative in rebuilding their psychic order which has been ‘torn’ by the tragedy of their blindness, and reinforced by pursuing a new career tailored to their abilities and physical condition. The blind were aware that with the condition of their blindness, they were at their lowest point seen from the perspective of their previous sighted existence. This self-awareness is the beginning of their active behavior to make a change to a better direction with the new recipe knowledge (Musgrove, 1977:109).

Blind people were aware that regrets, the state of mourning, lamenting the tragedy of blindness, and the shutting down or breaking of the lines of communication with others was not a productive attitude. The first step done by the blind was to fix their psychic condition. In this upward transformation, the informants began to accept their imperfect physical condition. They began to open up with the outside world, something they concretely proved by building interpersonal communication with others, until they finally went to the rehabilitation center for the blind. Studying in the blind rehabilitation center was one of the blind’s choices in order to gain knowledge and skills (especially massage skills) as a provision towards building a new career after their previous activities and careers had stalled due to blindness.

In addition to gaining new skills (as new recipe knowledge), the informants were aware that there were many other blind people whose fates were more unfavorable than theirs, namely, people who have been blind since they were born or since childhood. Although most of the informants were depressed in the early days of their blindness, in their subsequent development they pursued education to achieve their better future and to have productive work to continue their lives.

The upward transformation continued to move in a better direction after the blind had completed their studies in the rehabilitation institution, and as they entered a new world, the world of work. The knowledge and skills acquired during rehabilitation in the institution became their provision to build a career as masseurs. As the culmination of the upward transformation, the informants have become independent human beings; they have worked productively, even more productively than lazy human beings in general. Their career choices and independence provide them with material satisfaction and psychological pleasure. They are proud of their success in living independently with their chosen occupations and professions; moreover, they are aware but no longer care that people have skeptical and discriminatory views and judgments towards people with disabilities like them.

**Conclusions**

Based on the data analysis, it can be concluded that; First, the identity transformation of blind people who suffer
from blindness in adulthood goes through the five stages of transformation, namely self-concussion, self-isolation, self-disclosure, self-improvement, and self-devotion. Self-concussion and self-isolation are the stages of the transformation of a downward transformation of identity filled with dark periods and unproductive and negative actions, while the next three stages (self-disclosure, self-improvement, and self-devotion) constitute the upward transformation of identity characterized by creative thoughts and productive actions such as the informants' willingness to communicate with others, to gradually recognize their new identity, and to learn to live with a new career that is relevant to their condition as blind people.

Second, the identity transformation of informants who experience blindness in adulthood fluctuates. The awareness and self-acceptance of blind people sometimes decrease, and then increase again, and so forth. Although the process and stages of their identity transformation lead to a better direction, it does not mean that blind people have become truly blind individuals because they have not totally accepted the blind identity as either an objective identity or a subjective identity. Therefore, the transformation of the blind people's identity is an unfinished transformation or a transformation that still proceeds to the consciousness of self-existence or total self-acceptance of being blind. Fluctuations in the process and direction of the identity transformation of the blind cannot be separated from their social interaction and their interpretation of the various social responses upon their self-existence.

References