

Emotional Regulation and Its Relationship to the Quality of Emotions in the Work Environment for People with Physical Disabilities Working in the Government Sector in the Kingdom of Saudi Arabia

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Abstract

The study identified the level of emotional regulation, the level of quality of emotions in the work environment for people with physical disabilities in the government sector. The descriptive survey method was used to achieve the study objectives. The study sample consisted of (149) male individuals with physical disabilities working in the government sector, and their ages ranged between (25-50) years. Two questionnaires were used to measure the level of emotional regulation and the level of quality of emotions in the work environment. The results showed that the level of emotional regulation as a whole and its domains from the point of view of the study sample were at low levels. In addition, there is a positive (directive) and statistically significant correlation between positive re-evaluation, re-planning and positive focus, emotional regulation as a whole, and quality of emotions in the work environment for people with physical disabilities in the government sector.

Keywords: *emotional regulation, quality of emotions, work environment, people with physical disabilities, the disabled's work.*

Introduction

Emotions are psychological and emotional states that suddenly take possession of the individual because of his exposure to a situation. Examples include laughter, crying, anxiety, hate, happiness, sadness, and anger. This condition affects the individual from the first years of his life, and during this stage, he is unable to control it well, but with age, he gradually learns how to control or hide it (Shahbazirad & Azizi, 2018). Although people can control their emotions as they age, some people lack control over their emotions. Therefore, they have difficulties regulating these emotions, which affects their thinking, behavior, behavior, and relationships with others around them (Al-Assimi & Ali, 2018). Emotional regulation is defined as "the ability of an individual to monitor, modify, and correct emotional responses to achieve desired goals." Thus, it is a cognitively emotional strategy, which includes the individual's ability to change the emotional meanings of the stimulus, and then provide the appropriate response to it within the limits of the social context, which gives him flexibility in dealing with different situations" (Babkirk et al., 2015, 832). Emotional regulation also refers to the defense strategies and mechanisms

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used by individuals in dealing with stressful situations and events. It is based on the idea that individuals prefer a pleasant emotion to an unpleasant emotion, and regulate it accordingly (Sajadi et al., 2012). James Gross believes that emotional regulation is the conscious and unconscious strategies that an individual uses to increase, decrease, or maintain one or more components of an emotional response. James Gross defined it in three components: The experience component, which includes the subjective feelings of the individual according to his life experiences, the behavioral component includes behavioral responses, and the physiological component includes physiological responses, such as heart rate and blood pressure (Gross, 2014). Emotional regulation involves three basic features: the goal of the organization, which is what the individual is trying to achieve, the strategies he uses to achieve the goals, and, finally, the results he wants to achieve. Therefore, emotional regulation shows the individual's ability to deal with the event. This means that what he can do about this event, and towards the various environmental contexts, and how to act about the social and environmental problems surrounding it, or how to express emotional behavior in socially appropriate ways (Jankowski, 2013).

Two factors are involved in the individual's emotion regulation: the processes associated with the generation of emotion and the processes that ensure good management of emotion or the mismanagement of emotion. This indicates that emotion regulation refers to physiological, attentional, and cognitive processes. For example, physiologically, emotions are self-regulated by a rapid pulse, increased or decreased respiratory rate, sweating, or other accompaniments of emotional arousal. In addition, emotions can be regulated by emotive cognitive processes (successful coping) or more emotive processes, such as cognitive reconstruction, self-blame, introspection, and intimidation (Neacsiu et al., 2014). As for the difficulty of emotional regulation in the individual, it leads to a variety of problems, including, for example, poor adaptability, difficulty in making decisions, difficulty in solving problems, avoiding any confrontation with oneself, and identity disorder in the individual (Demmrich & Wolfradt, 2018). In addition, the difficulty of emotional regulation leads to poor satisfaction with life and compatibility with it and, thus, decreases the quality of life level (Ahmed, 2020).

Quality of life is one of the concepts of positive psychology, which emphasizes that the individual can adapt and adapt to society when he focuses on the positive aspects of his life, such as hope, optimism, happiness, self-satisfaction, and enjoying relationships with others (Abdullah, 2014). The quality of life was defined as, "an individual's feeling of satisfaction with his life in general, and his psychological ability to judge his own life with conviction and wisdom, and acceptance of his physical, psychological and social health as determined by himself, or through an objective evaluation by others that the life conditions of this individual are good and safe and there is nothing He threatens her" (Al-Jundi & Talahmeh, 2017: 339). The quality of life refers to the high level of positive emotion in the individual and the low level of negative emotion and provides overall cognitive judgments that indicate the positivity of the individual's life (Rand, 2009). It also refers to personal satisfaction, positive experiences related to the mind, body, and spirit, such as learning new things, developing competencies, achieving self-direction and pursuit of personal goals, having a positive outlook on the future, and contributing to society (Lui & Fernando, 2018). This, in turn, improves the individual's level of self-esteem, normal practice of daily life activities, and social competence and mood. In addition, it gives the individual more sense of general health and mental health, and the overall balance between satisfying his needs and thus influencing his performance to appear in a distinctive positive way and satisfaction with life (Mannix et al., 2009).

Disability is a common phenomenon in societies, and almost no society is devoid of it (Al-Rawsan, 2019). Disability has been defined as a condition that limits an individual's ability to perform one or more functions essential in daily life, such as self-care, or the

practice of social relations and economic activities, within the limits that are considered normal. It has different forms, such as hearing impairment, visual impairment, autism spectrum disorders, learning difficulties, mental disability, motor disability, and physical disability (El-Fil & Sayed, 2016). A disabled person needs special and supportive services when he suffers from a severely restrictive sensory, mental, or physical condition. People with disabilities need a range of educational and rehabilitative services that help the person with disabilities to be independent, assume responsibility, and integrate into society. These services would improve the quality of life of people with disabilities, just like the rest of the community (Al-Jalamdah, 2016).

Since disability limits an individual's ability to perform basic daily life functions, it has negative effects on that person's life in general, and in particular, the environment in which he lives or works (Emerson & Giallo, 2014). It also leads to excessive self-blame, poor calmness and tranquility, weak independence, low ego, weak confidence in one's abilities, unacceptable levels of body image, and poor practice of motor activities (Suleiman & Eis, 2012). In addition, he is more at risk of experiencing lower levels of quality of life than people without disabilities, and are more likely to be teased and bullied. He has a limited number of friends poor engagement in social and recreational activities (Resch et al., 2012), and poor integration into social, professional, and work-life (Parey, 2021).

Regarding the relationship between emotional regulation and the quality of life of people with disabilities, these people's sense of inadequacy, self-stigma, and inferior view of themselves may contribute to the difficulty in emotional regulation and emotional control. This leads them to weak focus and attention, lack of competence in social relations, lack of effectiveness in social behavior, and poor contact with reality. It also decreases the quality of life (Dardas & Ahmad, 2014). In addition, the pessimism of these people and the negative expectations of future events dominate them and negatively affect their relationships with members of their society, which leads to a decrease in their quality of life (Hassan et al., 2022). Moreover, the negative emotions of people with disabilities, such as anger, sadness, and anxiety, can lead them to negative psychological effects and affect their mental health and quality of life (Al-Sartawi et al., 2014). Hence, this study investigated the relationship between each emotional regulation and the quality of emotions in the work environment for people with disabilities, including the physically-handicapped working in the government sector to give additional value and a measure of knowledge diversity in this field.

Statement of the Problem

The problem of this study stemmed from the fact that emotional regulation and quality of life are essential indicators in achieving psychological and social adaptation for people with disabilities (Mohammed, 2011). They are also satisfied with the environment in which they live or work. They are among the categories that need special care and support to maintain high levels of psychological and emotional control and the quality of their emotions. These individuals view life differently from people without disabilities as a result of self-stigma and shame. Therefore, their outlook on life is affected by the conditions of disability and their negative or positive emotions (Lui & Fernando, 2018). As a result of their difficulty in emotional regulation, people with disabilities have low levels of satisfaction with life and compatibility with it (Ahmed, 2020). In addition, people with disabilities in general, including those with physical disabilities are unable to perform basic functions due to the health condition accompanying this disability and the medical and treatment reviews it requires. Moreover, it goes back to the view of some members of society for this group, which is characterized by compassion and sympathy, and those mixed with negative attitudes or inaccurate expectations about their capabilities. This view forms negative emotions, such as anger or sadness, and thus generates low levels of quality of life, including the quality of emotions (Al-Sartawi et al., 2014). In light of the review of previous studies, it was found that the term emotional

regulation and the quality of emotions did not receive sufficient theoretical and applied research among people with disabilities, including those with physical and physical disabilities, globally and in the Arab world, and at the local level represented in the Kingdom of Saudi Arabia. Based on the foregoing, the problem of the current study was generated by highlighting the level of emotional regulation and the level of quality of emotions in the work environment of people with physical disabilities working in the government sector in the Kingdom of Saudi Arabia and the relationship between them. Specifically, this study attempted to answer the following questions:

1. What is the level of emotional regulation among people with physical disabilities working in the government sector in the Kingdom of Saudi Arabia?
2. What is the level of quality of emotions in the work environment for people with physical disabilities working in the government sector in the Kingdom of Saudi Arabia?
3. Is there a statistically significant correlation at the significance level of ($\alpha = 0.05$) between the level of emotional regulation and the level of quality of emotions in the work environment for people with physical and physical disabilities working in the government sector in the Kingdom of Saudi Arabia from the point of view of the study sample?

Objectives of the Study

This study aimed to identify the level of emotional regulation and the level of quality of emotions in the work environment of people with physical and mental disabilities working in the government sector in the Kingdom of Saudi Arabia. It also showed the nature of the correlation between the level of emotional regulation and the level of quality of emotions in the work environment for people with physical disabilities working in the government sector in the Kingdom of Saudi Arabia.

Significance of the Study

It is hoped that this study will benefit people with physical disabilities in general and especially those working in Saudi society after publishing its results and introducing society and the government to their level of emotional regulation and the level of quality of emotions in the work environment in which they live. It is also hoped that this study will raise awareness of the ministries and agencies concerned with people with disabilities of the importance of raising the level of emotional regulation and the quality of emotions experienced by people with disabilities, including those with physical disabilities, in the Kingdom of Saudi Arabia. In addition, the study educates people with disabilities, including those with physical disabilities, of the importance of claiming their rights that improve the quality of their emotions in the work environment. Thus, this study expresses the extent of the growing societal interest in the rights of marginalized groups in society and a distinguished gesture in front of developed countries. Moreover, the study educates human rights organizations to indicate Saudi society's awareness of the importance of people with disabilities and granting them their rights that provide them with a decent life and equality with others.

Delimitations of the Study

The study adhered to the topic limits that sought to investigate the level of emotional regulation and its relationship to the quality of emotions in the work environment for people with physical and physical disabilities. The study was also applied in Najran region in the Kingdom of Saudi Arabia; it was applied to a sample of males, whose ages ranged between (25-50) years, of people with physical disabilities working in the government sector in the country. In addition, the study was conducted from May 2023 to June 2023. Finally, the study adhered to the two tools (the emotional regulation questionnaire, and the questionnaire on the quality of emotions in the work environment) that were developed by the researchers.

Methods

The descriptive approach was used in the study using the survey method due to its suitability for the study and the quantitative analysis of the data obtained through the study tools. The study examined the understanding of the nature of the relationship between the study variables "emotional regulation and the quality of emotions in the work environment".

Population and Sample of the Study

The population of the current study consisted of all people with physical disabilities working in the government sector in Najran region in the Saudi society, from the age of (20) years and over. No accurate statistics are available on their numbers and prevalence rates. The study was conducted on a sample of people with physical disabilities working with the help of employment data available at the Ministry of Social Affairs and other institutions working in the field of rehabilitation and employment of people with disabilities in Najran region. A random sample of 149 males, whose ages ranged between (25-50) years, were selected from people with physical disabilities working in the government sector in the country in cooperation with clubs for people with disabilities in Najran region. They belong to these clubs for community participation and access to appropriate support and services for them. They also agreed to participate in the study.

Study Tools

To achieve the objectives of the study, two tools were used:

The first tool (Emotional Regulation Questionnaire): A questionnaire was developed to measure the level of emotional regulation among people with physical disabilities working in the government sector in the country, by referring to previous educational literature, such as Babkirk et al. (2015), Shahbazirad and Azizi (2018), and Hassan et al. (2022). These studies were employed in defining the domains of the tool and developing items that fit the aim and objectives of the study. The items were formulated in a way that guarantees the credibility of the response. The first part included a letter addressed to the study sample members to clarify its objectives, confirm the confidentiality of data, and agree to participate in the study. The second part consists of ten items distributed in two domains: the first domain: positive re-evaluation (6) items and the second domain: re-planning and positive focus (4) items. To estimate the responses of the study sample, the respondent puts a sign (√) in front of each item on a five-point gradient (strongly agree, agree, neutral, disagree, strongly disagree). To correct the tool, the criterion by Hamadneh and Khair Eddeen (2023) was used by giving the values, respectively (5, 4, 3, 2, 1) for the scores (strongly agree, agree, neutral, disagree, strongly disagree). The following scores were approved for the achievement of the study tool items and the overall result: 1.00 - 1.80 = very low level, more than 1.80 - 2.60 = low level, more than 2.60 - 3.40 = medium level, more than 3.40 - 4.20 = high level, more than 4.20-5.00 = very high level.

The second tool (questionnaire for the quality of emotions in the work environment): A questionnaire was developed to measure the quality of emotions in the work environment for people with physical disabilities and workers in the government sector in the country by referring to previous educational literature, such as Al-Sartawi et al. (2014) and Hassan et al. (2022). These studies were employed in defining the domains of the tool and developing items that fit the aim and objectives of the study. The items were formulated in a way to guarantee the credibility of the response. The tool included the first part, including a letter addressed to the study sample members to clarify its objectives and confirm the confidentiality of data and participation in the study. The second part consists of (12) items that measure the quality of emotions in the work environment for people with physical disabilities working in the government sector in the country from the point of view of the study sample. To estimate the responses of the study sample, the respondent puts a sign (√) in front of each item on a five-point Likert scale (strongly

agree, agree, neutral, disagree, strongly disagree). To correct the tool, the criterion by Hamadneh and Khair Eddeen (2023) was used by giving the values, respectively (5, 4, 3, 2, 1) for the scores (strongly agree, agree, neutral, disagree, strongly disagree). The following scores were approved for the achievement of the study tool items and the overall result: 1.00 - 1.80 = very low level, more than 1.80 - 2.60 = low level, more than 2.60 - 3.40 = medium level, more than 3.40 - 4.20 = high level, more than 4.20-5.00 = very high level.

Validity of the Study Tools

The study tools were presented to ten experts who hold a doctorate in the care and rehabilitation of people with disabilities and psychology from faculty members in Saudi universities and five who work in the rehabilitation of people with disabilities. They were asked to judge each item of the two study tools in terms of linguistic formulation and the extent of its relationship with the subject it was designed to measure. The wording of some items has been modified based on the experts' opinions, observations, and recommendations.

Reliability of the Study Tools

To ensure the reliability of the study tools, two methods were used: the test-retest method and the internal consistency reliability coefficient (Cronbach's Alpha). The two tools were applied to a survey sample consisting of (20) individuals with physical disabilities working in the government sector in the country, selected from the study population and outside its sample. Then, the two tools were re-applied to the same sample two weeks after the first application. After that, the Pearson correlation coefficient was calculated between the scores of the subjects on the two tools as a whole in the two application times. Table 1 shows the results.

Table 1. Reliability coefficients for the two study tools

Domain	Test-retest	Cronbach's Alpha
Positive re-evaluation	0.89	0.79
Re-planning and positive focus	0.85	0.78
Emotional regulation scale	0.91	0.83
The quality of emotions in the work environment as a whole	0.80	0.83

It is clear from Table 1 that the reliability coefficients for the domains of the study tool "Emotional Regulation Questionnaire" according to the test-retest method ranged between (0.85-0.89). The overall reliability coefficient of the tool in the same way was (0.91). The reliability coefficients for the domains of the study tool "Emotional Regulation Questionnaire" according to the internal consistency method "Cronbach's Alpha" ranged between (0.78-0.79), and the overall reliability coefficient for the tool using the same method was (0.83). These results indicate that the tool has high-reliability indicators and is suitable for achieving the study objectives. It is also evident from Table 1 that the overall reliability coefficient for the study tool "Quality Emotions Questionnaire in the Work Environment" was (0.80). The overall reliability coefficient of the tool, using the internal consistency method "Cronbach's alpha", was (0.83). These are reliability coefficients with high degrees and suitable for scientific research purposes.

Results

Results of the First Research Question: What Is the Level of Emotional Regulation among People with Physical Disabilities Working in the Government Sector in the Kingdom of Saudi Arabia?

The means, standard deviations, and ranks of the study sample's responses about the level of emotional regulation of people with physical disabilities working in the government

sector in the Kingdom of Saudi Arabia were calculated to answer this question. Table 2 depicts the results.

Table 2. Means and standard deviations for the level of emotional regulation among people with physical disabilities working in the government sector

No.	Items	Means	Standard deviations	Rank	Level
2	Re-planning and positive focus	2.56	.760	1	Low
1	Positive re-evaluation	2.47	.740	2	Low
	Total degree	2.49	.680		Low

Table 2 shows the total score for the level of emotional regulation among people with physical disabilities working in the government sector in the Kingdom of Saudi Arabia from the point of view of the study sample with a mean of (2.49), and a standard deviation of (0.68), and a low level. The second domain, "Re-planning and positive focus", ranked first with a mean of (2.56), a standard deviation of (0.76), and a low level. The first domain, "Positive re-evaluation", ranked second, with a mean of (2.47), a standard deviation of (0.74), and a low level.

Results of the Second Research Question: What Is the Level of Quality of Emotions in the Work environment for People with Physical Disabilities Working in the Government Sector in the Kingdom of Saudi Arabia?

The means, standard deviations, and ranks of the study sample's responses about the level of quality of emotions of people with physical disabilities working in the government sector in the Kingdom of Saudi Arabia were calculated to answer this question. Table 3 depicts the results.

Table 3. Means and standard deviations for the level of quality of emotions in the work environment of people with physical disabilities working in the government sector

No.	Items	Means	Standard deviations	Rank	Level
7	I find it difficult to make any decision while working	3.14	1.04	1	Medium
4	I feel afraid at work	3.14	1.05	1	Medium
8	I feel under-enthusiastic about my work	2.83	.860	2	Medium
1	My nerves are not calm while working	2.80	1.01	3	Medium
9	I feel guilty about my career	2.73	1.02	4	Medium
10	I get depressed during periods of work	2.68	.980	5	Medium
5	I suddenly feel anxious at work	2.23	1.02	6	Low
12	I am ashamed of the looks of the reviewers in my workplace	2.10	.820	7	Low
11	I feel hated at my job	2.09	.800	8	Low
2	I get sad at work for no apparent reason	2.09	.810	8	Low
3	I feel weak willed in the face of work pressures	2.09	.820	8	Low
6	I get emotionally excited during my work	2.03	.960	9	Low
	Total degree	2.49	.430		Low

Table 3 shows that the total score for the level of quality of emotions in the work environment for people with physical and physical disabilities working in the government sector in the Kingdom of Saudi Arabia, from the point of view of the study sample, came with a mean of (2.49), a standard deviation (0.431), and a low level. The means for the items ranged between (2.03 - 3.14) and came at low to medium levels. Item (7) "I find it difficult to make any decision while working" and item (4) "I feel afraid while working" ranked first with a mean of (3.14), and an average level. Item (8) "I feel a lack of enthusiasm in performing my work" ranked second with a mean of (2.83) and a medium

level while item (6) “I get emotionally excited during my work” came in ninth and last rank with a mean of (2.03) and a low level.

Results of the Third Research Question: Is There a Statistically Significant Correlation at The Significance Level of ($\alpha = 0.05$) between the Level of Emotional Regulation and the Level of Quality of Emotions in the Work Environment for People with Physical Disabilities Working in the Government Sector in the Kingdom of Saudi Arabia from the Point of view of the Study Sample?

The Pearson correlation coefficient was used to show the nature of the correlation between emotional regulation and the level of quality of emotions in the work environment for people with physical disabilities in the government sector in the Kingdom of Saudi Arabia from the point of view of the study sample to answer this question. Table 4 presents the results.

Table 4. Pearson correlation coefficient to show the nature of the correlation between emotional regulation and the level of quality of emotions in the work environment for people with physical disabilities in the government sector in the Kingdom of Saudi Arabia

Emotional regulation	Pearson correlation coefficient	The level of quality of emotions in the work environment
Positive re-evaluation	Pearson Correlation	.185*
	Sig. (2-tailed)	.024
	N	149
Re-planning and positive focus	Pearson Correlation	.189*
	Sig. (2-tailed)	.021
	N	149
Total degree	Pearson Correlation	.219**
	Sig. (2-tailed)	.007
	N	149

Table 4 shows that there was a positive (direct) and statistically significant correlation at the significance level of (0.05) between the first domain “positive re-evaluation” and the level of quality of emotions in the work environment for people with physical disabilities working in the government sector in the Kingdom of Saudi Arabia. The correlation coefficient was (.185), and the statistical significance was (.024). There was also a positive (direct) and statistically significant correlation at the significance level of (0.05) between the second domain "Re-planning and positive focus" and the level of quality of emotions in the work environment for people with physical disabilities in the government sector in the Kingdom of Saudi Arabia. The correlation coefficient was (.189) and statistical significance (.021). In addition, it was found that there is a positive (directional) and statistically significant correlation at the significance level of (0.05) between emotional regulation as a whole and the level of quality of emotions in the work environment for people with physical disabilities in the government sector in the Kingdom of Saudi Arabia as a whole. The correlation coefficient was (.219), and the statistical significance was (.007).

Discussion

Discussion of the results of the first question

The results showed that the domain of re-planning and positive focus, the domain of positive re-evaluation, and the total score of the level of emotional regulation of people with physical disabilities working in the government sector in the Kingdom of Saudi Arabia were all at a low level. This result may be attributed to the suffering of people

with physical disabilities from frustration and failure in all aspects of life. Physical disability increases that suffering as a result of feelings of inadequacy, inferiority, and self-stigma. This disability also adds new challenges due to the social, emotional, and psychological pressures that people with physical disabilities suffer from, related to their disability, and its restrictions on their abilities and capabilities. Hence, they generate negative feelings and emotions to high degrees, thus leading them towards difficulty in regulating emotions and appropriate responses to them. Also, it gives them difficulty in being flexible in dealing with different situations and losing control over their feelings and emotions (Ahmed, 2020). In addition, the lives of people with physical disabilities, as a result of their living under the burden of self-stigma, increase their psychological, emotional, and social pressures in a way that exceeds their ability to bear. This may lead them to adopt irrational thoughts that elicit some irrational reactions, such as self-blaming, exaggerating matters, and reaching conclusions in an illogical way (Boyle, 2013). Moreover, the methods of the family upbringing of the physically and mentally handicapped person since childhood, which are based on total dependence on the family, insecure attachment patterns during childhood, and dealing with their negative emotions; may negatively affect emotion regulation strategies in adulthood and in the future (Besharat & Shahidi, 2014). Accordingly, the researchers believe that the many frustrations and obstacles that people with physical disabilities face in their lives are reflected in their emotions and the way they deal with these obstacles in an incorrect way, which makes them less in control and management of their emotions.

Discussion of the results of the second question

The results showed that the level of quality of emotions in the work environment for people with physical disabilities working in the government sector in the Kingdom of Saudi Arabia is at a low level. This result may be attributed to the health problems suffered by people with physical disabilities, which affects their adaptation to the work environment and conditions. These compulsions are reflected in their psychological and emotional state and, as a result, a deficiency in the quality of their emotions. Society members also look at them with a view of pity and kindness, mixed with negative attitudes or inaccurate expectations about the capabilities of these people. This view creates negative emotions, such as fear, anxiety, hatred, sadness, and anger and makes them feel weak in the face of work pressures and difficulty making decisions. Thus, they generate low levels of emotional quality in the work environment (Al-Sartawi et al., 2014). The result may also be attributed to the attitudes and challenges faced by physically handicapped workers in the workplace, such as the low level of social acceptance for them, the poor provision of an accessible and safe environment for them in the work environment, and the environmental barriers in the workplace that limit their mobility, independence, and freedom, or judicial the need. These challenges negatively affect their adaptation to the work environment and their level of psychological health and satisfaction, and generate feelings of frustration, anxiety, tension, and fear that affect the quality of their emotions related to their work environment (Parey, 2021). Accordingly, the researchers see the repercussions of the stressful life on people with physical disabilities, their level of mental health, the extent to which society accepts their disability, the environmental facilities for them, and the many frustrations and obstacles they face in the work environment. It is reflected in how they deal with their emotions and makes them less satisfied with their emotional lives in the work environment.

Discussion of the results of the third question

The results showed that there is a positive correlation (directive) and statistically significant between the first domain, "positive re-evaluation", the second domain, "re-planning and positive focus", the level of emotional regulation as a whole, and the level of quality of emotions in the work environment for people with physical disabilities in the sector government. This result is attributed to the high ability of emotional regulation to predict the quality of life in general and, in particular, the quality of emotions. The

emotional aspects have a greater impact on the quality of life for the disabled and the ability of the physically disabled person to be aware of his emotions and control them and the ability to work out strategies to regulate them, affects aspects of the quality of his emotions and feelings and their expression (Hassan et al., 2022). In addition, the challenges of daily situations and problems that a person with a physical disability goes through in his workplace may lead him to deal with them incorrectly through poor awareness of his emotions towards them, which results in difficulty in controlling and controlling emotions. Thus, they lead to recklessness in thinking and abnormal reactions, which affect positive evaluation, re-planning, and positive focus, and ultimately lead to negative relationships with the individuals around him, especially in his workplace, and a weakness in the quality of emotions (Ahmed, 2020). Accordingly, the physically handicapped person, whenever he can positively control his emotions, has the quality of emotions in the work environment, and vice versa, if he loses control of his emotions, the less he has the quality of emotions in the work environment.

Recommendations

Based on the results of the current study, the researchers recommended that the government should work on preparing community programs and initiatives that are concerned with educating community members about the importance of people with disabilities in general, including those with physical disabilities, and how to deal with them in work environments and build positive attitudes towards them. It is also recommended to strengthen the role of officials in the government sector in developing plans and solutions to remove all environmental and societal obstacles that prevent the integration of people with physical disabilities who work in the forms of life within the institutions in which they work. These solutions ensure an improvement in the level of their emotional regulation, and the level of quality of their emotions. In addition, there is a need to intensify the role of clubs and associations of people with disabilities in implementing social programs that would create positive attitudes towards people with disabilities in general, including those with physical disabilities, and how to deal with them to help them achieve compatibility and adaptation in work environments. Finally, it is necessary to conduct more correlational studies about emotional regulation and its relationship to the quality of emotions among people with disabilities in light of different demographic variables: gender, age of the disabled, marital status, economic status, educational qualification, place of residence, and type of disability.

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