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The Ability Model of Emotional Intelligence in Mothers of Children with Learning Disabilities

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ABSTRACT

The Ability Model of emotional intelligence provides a theoretical framework for understanding psychological well-being. This model conceptualises emotional intelligence as a set of abilities rather than traits. Specifically, it encompasses the capacity to perceive, use, understand, and manage emotions, which is particularly relevant for populations facing unique challenges, such as mothers of children with learning disabilities. This study explores the relationship between emotional intelligence and psychological well-being within this population. A survey was administered to mothers, assessing their emotional intelligence and psychological well-being through a structured questionnaire. Partial Least Squares Structural Equation Modelling (PLS-SEM) was employed to test the hypotheses. The findings confirm that emotional intelligence plays a significant role in both positive and negative dimensions of psychological well-being among mothers of children with learning disabilities. Higher emotional intelligence is associated with better psychological outcomes, reflected in lower levels of negative traits and higher levels of positive traits. In conclusion, this study highlights that emotional intelligence is significantly linked to both positive and negative aspects of psychological well-being in this group. The results demonstrate that higher emotional intelligence is associated with enhanced positive well-being and reduced negative psychological experiences, underscoring its protective and adaptive role in high-stress caregiving contexts. By facilitating effective emotional regulation, emotional awareness, and adaptive coping strategies, emotional intelligence contributes to mothers' psychological resilience and overall mental health.

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1. INTRODUCTION

The Ability Model of emotional intelligence (EI), developed by Mayer and Salovey, posits that EI is a set of cognitive abilities that allow individuals to perceive, understand, use, and manage emotions effectively. This model frames EI as a set of abilities rather than a trait or characteristic, focusing on how people process emotional information and use it to navigate their social and emotional worlds. As research into EI has expanded, it has become clear that EI plays a critical role in determining psychological well-being, social functioning, and decision-making. The Ability Model's emphasis on emotional processing, regulation, and understanding offers a valuable framework for understanding the emotional challenges faced by individuals, especially in caregiving contexts.

Mothers of children with neurodevelopmental disabilities, such as autism spectrum disorder (ASD), attention deficit hyperactivity disorder (ADHD), intellectual disabilities, and other developmental conditions, face unique challenges that significantly impact their psychological well-being. These mothers often experience elevated levels of stress, fatigue, and emotional distress as they balance caregiving responsibilities, provide emotional support, and maintain their own personal well-being. Studies have shown that mothers of children with neurodevelopmental disabilities experience higher levels of psychological strain compared to mothers of typically developing children (Akram et al., 2019). This caregiving burden can lead to negative emotional outcomes, including depression, anxiety, and burnout; however, it may also create opportunities for personal growth, resilience, and emotional development. The emotional demands associated with caregiving in the context of neurodevelopmental disabilities require mothers to possess a high level of EI to effectively cope with daily stressors and sustain their psychological health.

The Ability Model of EI is particularly relevant to understanding the emotional dynamics of mothers of children with learning disabilities. According to the model, the ability to perceive and understand emotions in oneself and others, manage emotions effectively, and use emotional information to guide thought and behaviour can serve as protective factors in reducing psychological distress. EI can help mothers regulate their emotional responses to stress, manage feelings of anxiety or frustration, and engage in more adaptive coping strategies. Conversely, poor EI may contribute to negative emotional outcomes, such as emotional dysregulation, high stress levels, and decreased quality of life.

Despite the established role of EI in emotional regulation and psychological well-being, few studies have specifically explored how the Ability Model of EI can influence the psychological well-being of mothers of children with learning disabilities (Karimi et al., 2021; Kartol et al., 2024; Jani et al., 2023; Jani et al., 2024). Given the emotional and psychological strain these mothers face, understanding how EI affects their well-being is crucial for developing targeted interventions to improve their mental health and coping strategies. The Ability Model offers a promising framework for exploring how EI functions as both a protective and predictive factor in the psychological well-being of mothers raising children with special needs.

This study aims to investigate the relationship between EI, as conceptualised by the Ability Model of EI, and the psychological well-being of mothers of children with learning disabilities. Specifically, the study seeks to determine whether EI can predict both positive and negative aspects of well-being in this population. The study will explore the four (4) components of the Ability Model: perceiving emotions, using emotions to facilitate thinking, understanding emotions, and managing emotions, to assess how these abilities influence the emotional and psychological outcomes of mothers raising children with learning disabilities.

By examining the role of EI in shaping the psychological well-being of mothers of children with learning disabilities, this study aims to provide valuable insights into how EI can act as a critical tool for managing

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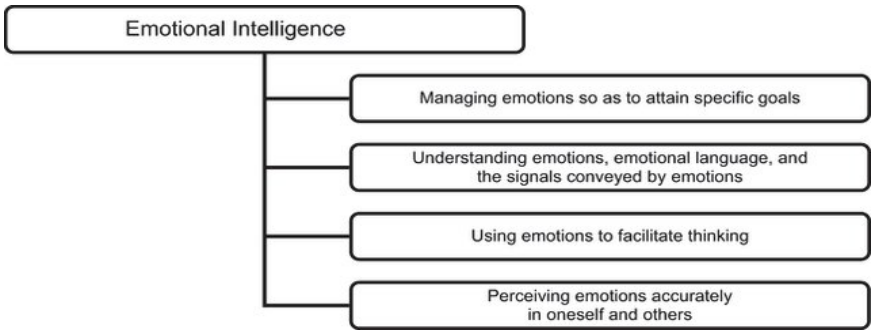
stress and promoting emotional resilience. Ultimately, the findings may inform interventions that target EI development to improve the mental health and well-being of mothers in this caregiving role, helping them cope with the challenges of raising children with learning disabilities and fostering positive outcomes for both mothers and children.

In the subsequent sections, this paper will review the relevant literature on EI, the Ability Model, and the psychological challenges faced by mothers of children with learning disabilities. It will then present the methodology of the study, followed by the results and discussion of the findings, which aim to further explore the potential benefits of EI for improving the psychological well-being of this unique population.

2. LITERATURE REVIEW

The Ability Model of EI is a theoretical framework that focuses on an individual's capacity to recognise, understand, and manage emotions, both in oneself and in others. Developed by John D. Mayer and Peter Salovey in the early 1990s, this model distinguishes EI as a cognitive ability, separate from but related to general intelligence. According to Mayer and Salovey (1997), EI encompasses the capacity to process emotional information and use it in ways that facilitate thinking, decision-making, and interpersonal relationships. Figure below show the Ability Model of EI consists of four (4) key branches, as outlined by Mayer et al (2008).

Fig 1 The Four-Branch Model of Emotional Intelligence



Note: Reprinted from "Emotional intelligence: New ability or eclectic traits? "J. D. Mayer, P. Salovey, and D. R. Caruso, 2008, American Psychologist, 63, p. 504. Copyright 2008 by the American Psychological Association.

The Ability Model differs from other models of EI, such as the Trait Model, which focuses on emotional competencies and personality traits. The Ability Model emphasises that EI is a set of cognitive abilities that can be developed through learning and practice, rather than fixed traits or dispositions. This view makes the Ability Model particularly valuable in both personal and professional contexts, where EI can be improved to enhance emotional regulation, resilience, and interpersonal effectiveness (Mayer et al., 2016).

A significant strength of the Ability Model is its emphasis on EI as an intelligence that can be measured and improved. Unlike other models that may conflate EI with personality traits, the Ability Model strictly focuses on emotional abilities and skills. This makes it a useful tool for assessing and improving emotional processing in individuals (Kanesan and Fauzan, 2019).

To measure EI based on this model, several tests have been developed, most notably the Mayer-Salovey-Caruso Emotional Intelligence Test (MSCEIT). This test, developed by Mayer, Salovey, and Caruso (2003), assesses the four (4) branches of EI by presenting participants with scenarios requiring them to identify,

understand, and manage emotions. The MSCEIT has undergone multiple revisions, with the latest version, MSCEIT 2.0, being an advanced assessment tool designed to enhance the measurement of EI.

In addition to the MSCEIT, the Schutte Self-Report Emotional Intelligence Test (SSEIT), developed by Schutte et al. (1998), is another widely used instrument for measuring EI. The SSEIT focuses on self-reported EI, assessing various aspects such as emotional perception, expression, and regulation. While the SSEIT is a self-report tool, the MSCEIT is an ability-based test that provides a more objective measure of EI by evaluating an individual's capacity to perform specific emotional tasks.

EI plays a significant role in psychological well-being, as it enables individuals to manage their emotions and navigate interpersonal relationships effectively. Research has shown that individuals with higher levels of EI tend to experience better psychological well-being and are more resilient in the face of challenges (Singh and Kaur, 2019). By enhancing EI, individuals can improve their emotional regulation, reduce the impact of negative emotions, and foster greater personal satisfaction and mental health. Thus, the Ability Model provides a robust framework for understanding how EI influences both personal and social outcomes, offering valuable insights for improving psychological well-being.

As EI continues to be an area of active research, the Ability Model remains a foundational theory, contributing to the growing understanding of how emotional processing and regulation affect various aspects of life, including mental health, relationships, and professional success. The evolving nature of EI research promises to further refine its measurement and application across diverse contexts, from personal development to leadership and mental health care.

Table 1: Ability Model of Emotional Intelligence

Authors	Study Focus	Ability Model Dimension	Sample / Context	Method / Instrument	Key Findings	Contribution to Current Study
Mayer & Salovey (1997)	Conceptualization of EI as an ability	PE, FE, UE, ME	Theoretical	Ability Model Framework	EI defined as cognitive ability for processing emotional information	Foundational theory for independent variable
Mayer et al. (2003)	Validation of Four-Branch Model	PE, FE, UE, ME	Adults	MSCEIT	Four-branch structure empirically supported	Structural basis for EI measurement
Mayer, Salovey & Caruso (2008)	EI vs trait models	PE, FE, UE, ME	General population	Ability-based testing	EI distinct from personality traits	Justifies use of Ability Model
Caruso & Salovey (2004)	Emotional reasoning and decision-making	FE, UE	Adults	MSCEIT	Emotions enhance thinking and problem-solving	Explains EI–well-being mechanism
Brackett & Mayer (2003)	EI and psychological well-being	PE, UE, ME	Adults	MSCEIT & PWB	Ability EI positively predicts psychological well-being	Empirical support for EI–PWB link
Extremera & Fernández-Berrocal (2005)	EI and mental health	ME, UE	University students	Ability-based EI scales	Higher EI associated with lower emotional distress	Supports EI reducing negative well-being
Landa et al. (2010)	EI, stress, and health	ME, UE	Working adults	Ability EI measures	EI buffers stress and	Supports stress-regulation pathway

					psychological strain	
Ruiz-Aranda et al. (2014)	EI, stress mediation	ME, UE	Female health professionals	MSCEIT	Stress mediates EI–well-being relationship	Mechanism relevant to mothers under stress
Carmeli et al. (2007)	EI and work-related well-being	PE, ME	Employees	Ability-based EI	EI improves stress management and satisfaction	Generalizes EI effects across life domains
Singh & Kaur (2019)	EI and resilience	PE, FE, ME	Adults	Ability EI scales	Higher EI increases resilience and coping	Supports positive well-being enhancement
Penacoba et al. (2020)	EI and positive/negative well-being	ME, UE	Adults	Ability EI instruments	EI predicts higher positive and lower negative well-being	Direct alignment with study hypothesis
Ahmadi (2014)	EI and psychological health	ME, UE, PE	Adults	Ability-based questionnaires	EI linked to better mental health outcomes	Reinforces EI as protective factor
Mayer et al. (2020)	EI development and application	PE, FE, UE, ME	Multiple contexts	MSCEIT revisions	EI abilities can be developed through learning	Supports intervention implications
Kanesan & Fauzan (2019)	Measurement strength of Ability Model	PE, FE, UE, ME	Conceptual	Review study	Ability Model offers objective EI assessment	Justifies methodological choice
Fredrickson (2013)*	Positive emotions and coping	FE, ME (indirect)	Adults	Experimental studies	Positive emotions broaden coping capacity	Theoretical support for EI–positive PWB

Note. Abbreviations used in this study:
- *EI – Emotional Intelligence*
- *PE – Perceiving Emotions*
- *FE – Facilitating Emotions*
- *UE – Understanding Emotions*
- *ME – Managing Emotions*
- *MSCEIT – Mayer-Salovey-Caruso Emotional Intelligence Test*
- *SSEIT – Schutte Self-Report Emotional Intelligence Test*
- *PWB – Psychological Well-Being*

EI has been shown to have a significant positive relationship with psychological well-being, which encompasses both positive and negative dimensions of an individual's mental state. Research over the years has established in Table 1 shown that individuals with higher EI tend to experience better mental and emotional health, demonstrating greater resilience and adaptive coping strategies in response to stress and difficult circumstances.

A study by Carmeli et al. (2007) found a positive correlation between EI and psychological well-being, highlighting that individuals with higher EI were better able to manage stress, leading to a greater sense of well-being. Similarly, Brackett and Mayer (2003) discovered a positive relationship between EI, personality traits (as measured by the Big Five model), and Ryff's psychological well-being scale, emphasising that EI contributes to overall psychological health. In Palmer et al.'s (2002) research, a positive relationship between EI and psychological well-being was found among undergraduate students in Spain, showing that emotionally intelligent students were more likely to report higher levels of happiness and life satisfaction. Further reinforcing this notion, Landa et al. (2010) and Extremera and Berrocal (2005) conducted studies that found similar positive relationships between EI and psychological well-being. Their research indicated

that emotionally intelligent individuals tend to manage negative emotions more effectively, leading to improved mental health and greater overall well-being.

A study by Ruiz Aranda, Extremera, and Pineda-Galán (2014) focused on female health professionals in training and found that higher levels of EI were associated with less perceived stress, as well as greater life satisfaction and happiness. This suggests that EI plays a crucial role in mitigating the impact of stress, ultimately enhancing psychological well-being. The study further found that perceived stress mediated the relationship between EI and well-being, showing that individuals with higher EI are less likely to experience stress and, as a result, have higher levels of psychological satisfaction.

Mehmood and Gulzar (2014) examined the relationship between EI and psychological well-being in adolescents, specifically looking at depression and self-esteem. Their findings revealed a significant positive relationship between EI and self-esteem, while a negative correlation was found between EI and depression. This suggests that emotionally intelligent individuals are better equipped to manage negative emotions, contributing to healthier mental states and greater emotional resilience.

Conversely, individuals with deficiencies in EI may struggle to adapt to life's challenges, particularly when managing difficult emotions such as anger, anxiety, or even happiness. Ugoani and Ewuzie (2013) argued that individuals who lack emotional self-regulation often become overwhelmed by their emotions, leading to lower psychological well-being. Furthermore, these individuals may struggle with building satisfying and emotionally rewarding lives, as they find it difficult to identify or process their emotions effectively.

Several other studies have found consistent evidence supporting the positive relationship between EI and psychological well-being. For instance, Penacoba et al. (2020) and Ahmadi (2019) found that emotionally intelligent individuals generally experience higher levels of positive well-being and lower levels of negative well-being, demonstrating better emotional regulation and coping mechanisms in the face of adversity.

The role of EI in fostering social relationships is also important in promoting psychological well-being. Ahmad et al. (2023) suggested that emotionally intelligent individuals tend to have better communication skills, empathy, and understanding in their interactions, leading to stronger, more supportive social networks. Social support is widely recognised as a crucial factor in enhancing psychological well-being, further highlighting the importance of EI in shaping mental health outcomes.

In this study, EI serves as the independent variable, while psychological well-being is the dependent variable. According to Mayer, Salovey, Caruso, and Sitarenios (2003), EI is divided into four (4) skill components: perceiving emotions, facilitating thought with emotion, understanding emotions, and managing emotions. On the other hand, Ryff (1989) proposed six (6) dimensions of psychological well-being: autonomy, environmental mastery, personal growth, positive relations with others, purpose in life, and self-acceptance.

This study aims to explore the relationship between EI, as measured by the Ability Model, and psychological well-being in mothers of children with learning disabilities. It is hypothesised that individuals with high EI will generally report higher levels of positive well-being and lower levels of negative well-being. By understanding this relationship, the study seeks to provide insights into how EI can serve as a resource for improving the psychological health and resilience of mothers dealing with the unique challenges of caring for children with learning disabilities.

3. METHODOLOGY

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This study aims to examine the relationship between EI based on the Ability Model and psychological well-being from both positive and negative perspectives in mothers of children with learning disabilities. A quantitative research design was adopted, with primary data collected through a structured, closed-ended questionnaire. Respondents were recruited using purposive sampling to ensure that participants were mothers of children formally diagnosed with learning disabilities. All items were rated on a five-point Likert-type scale ranging from 1 (strongly disagree) to 5 (strongly agree).

The independent variable, EI, was conceptualised according to Mayer, Salovey, and Caruso's (1990) Ability Model, which identifies four (4) key branches: Managing Emotions (8 items), Understanding Emotions (9 items), Perceiving Emotions (10 items), and Facilitating Emotions (6 items). To measure EI, the Schutte Self-Report Emotional Intelligence Test (SSEIT; Schutte et al., 1998) was employed. Although SSEIT is a self-report instrument rather than a pure ability-based test like the Mayer-Salovey-Caruso Emotional Intelligence Test (MSCEIT), it has demonstrated strong reliability and construct validity in prior research and is suitable for practical applications in community samples. The use of SSEIT is conceptually aligned with the Ability Model, as it captures participants' self-perceived emotional abilities while maintaining the structural representation of the four (4) branches of EI.

The dependent variable, psychological well-being, was measured using the Ryff Psychological Well-Being Scale (Ryff, 1989), which consists of six (6) dimensions: Autonomy, Environmental Mastery, Personal Growth, Positive Relationships with Others, Purpose in Life, and Self-Acceptance. Each dimension included seven (7) items, and both positive and negative aspects of well-being were evaluated, resulting in 21 items per scale. The Ryff Psychological Well-Being Scale was chosen due to its extensive usage and validation across diverse populations, offering a robust measure of psychological well-being.

Given the complexity of the model, which involves multiple latent constructs and indicators, Partial Least Squares Structural Equation modelling (PLS-SEM) was selected as the analytical method. PLS-SEM is appropriate for this study because it accommodates complex models, can handle smaller to medium sample sizes without strict normality assumptions, and focuses on predictive relationships, which aligns with the study's objective of examining EI as a determinant of both positive and negative aspects of psychological well-being (Hair et al., 2017).

Overall, this methodology integrates the Ability Model of EI with Ryff's psychological well-being framework and uses validated instruments to provide a rigorous approach for examining how EI influences both positive and negative psychological well-being outcomes in mothers of children with learning disabilities. The study design, sampling strategy, instrument choice, and analytical method collectively address prior limitations and justify the methodological approach.

4. RESULTS

One hundred and five (105) working and non-working mothers of children with learning disabilities were invited to participate in the study. First, they were administered a set of questionnaires regarding to Understanding Emotions [UE], Managing Emotions [ME], Perceiving Emotions [PE], and Facilitating Emotions [FE]. They were administered a second set of questionnaires regarding to psychological well-being. Participants were asked to complete questionnaires sent by personal and group WhatsApp or Telegram. Three (3) respondents failed to return the questionnaires, whereas another three (3) respondents were excluded due to missing data. Ninety-nine (99) respondents were included in the study. More than half of the respondents were between 30-39 years (52.5%). 70 (70.7%) of respondents had finished undergraduate studies, 16 (16.2%) of respondents had finished high school, and 13 (13.1%) of respondents had post graduate degree. Additionally, 90 (90.9%) of respondents were married, while seven (7.1%) of them were single, and 2 (2.0%) others were divorced or widowed.

Table 2: *Demographic Profile of Respondents (N = 99)*

Demographic Variable	Category	Frequency (n)	Percentage (%)
Age	30–39 years	52	52.5
	Other age groups	47	47.5
Educational Level	High school	16	16.2
	Undergraduate degree	70	70.7
	Postgraduate degree	13	13.1
Marital Status	Married	90	90.9
	Single	7	7.1
	Divorced/Widowed	2	2.0

4.1 Data Analysis

The factor loadings for all items exceeded the recommended threshold of 0.5, which indicates that each item contributes meaningfully to its respective construct (Tabachnick & Fidell, 1996). Although the average variance extracted (AVE) values were below the ideal 0.50, they are considered acceptable in the context of high composite reliability, as AVE values around 0.4 can be tolerated when composite reliability exceeds 0.6 (Hair, 2017). In this study, the composite reliability values, which reflect the internal consistency of the indicators in measuring the latent constructs, ranged from 0.721 to 0.859, surpassing the recommended minimum of 0.6 (Hair, Black, Babin, & Anderson, 2010). These results indicate that the constructs demonstrate strong reliability, and despite the lower AVE values, the measurement model is acceptable for structural analysis using Partial Least Squares Structural Equation Modelling.

Table 3: Factor Loading and Reliability

Constructs	Cronbach's Alpha	Composite Reliability	Average Variance Extracted (AVE)
Emotional Intelligent (EI) ▪ Managing Emotions (ME) ▪ Understanding Emotions (UE) ▪ Perceiving Emotions (PE) ▪ Facilitating Emotions (FE)	0.921	0.93	0.373
Negative Psychological Well-being (NPW)	0.909	0.922	0.388
Positive Psychological Well-being (PPW)	0.843	0.872	0.273

4.2 Discriminant Validity (DV)

The discriminant validity (DV) assessment is then conducted to avoid correlated items within different statistical elements. DV reflects the correlation between items in different statistical constructs. Heterotrait–Monotrait (HTMT) ratio is one of the widely employed methods for DV evaluation (Hair et al., 2017). In order to meet the required criteria, this study utilises the HTMT ratio assessment method, whereby the HTMT ratio for each construct must not exceeded 0.9. The results indicated that all HTMT values were below the threshold of 0.90, thus confirming sufficient discriminant validity (Henseler, Ringle, and Sarstedt, 2015). Overall, the measurement model demonstrated satisfactory construct validity.

Once the reliability and validity of the measurement are assured, path coefficients can be reported based on the results of a PLS structural model. A significant effect can be either positive or negative. Table 4 shows the absolute significance of the path coefficients for the relationship between EI and positive psychological well-being (Hypothesis 1).

Table 4: Summary of Hypotheses Testing

Description	Path coefficient	t-statistics	Q^2	R^2	f^2	Result
EI→NPW	-0.363	3.888	0.047	0.130	0.152	Significant

EI→PPW	0.726	13.846	0.133	0.527	1.113	Significant

The t-value can be compared with the critical value from the standard normal distribution to decide whether the coefficients are significantly different from zero. For instance, the critical value for significance levels of 5 percent probability of error is 1.96 (two-tailed test). In this study, the results showed that all independent variables of EI are significant with positive psychological well-being (β = 0.726, t-value = 13.846). Therefore, when the mothers' EI is higher, the psychological well-being also higher.

Hypothesis 2 is also significant with a negative relationship between EI and negative psychological well-being (β = -0.363, t-value = 3.888). A negative, or inverse correlation, between EI and negative psychological well-being, indicates that one variable increase while the other decreases, and vice-versa. This relationship may or may not represent causation between two variables, but it does describe an observable pattern. This result confirms that the higher the EI, the lower the rate for negative traits in psychological well-being.

Additionally, the R2 coefficients indicated that the model accounted for 13.0% and 52.7% of the variability in negative psychological well-being and positive psychological well-being, respectively. This suggests that the model had the ability to make accurate predictions. VIF should be 5 or lower (i.e., Tolerance level of 0.2 or higher) to avoid the collinearity problem. The result shows that the VIF is 1 for both relationship, which is accepted. VIFs between 1 and 5 suggest that the correlation is not severe enough to warrant corrective measures.

The effect size (f^2) quantifies the extent to which a specific exogenous construct contributes to explaining an endogenous construct, as measured by the change in R^2 when the construct is omitted from the model (Ramayah et al., 2018). This metric allows researchers to assess whether the removal of an independent variable would meaningfully reduce the explanatory power of the model (Hair et al., 2017b). Following conventional guidelines, f^2 values of 0.02, 0.15, and 0.35 are interpreted as small, medium, and large effects, respectively. In the present study, EI exhibits a very large effect on positive psychological well-being (f^2 = 1.113), indicating that it substantially contributes to the variance explained, whereas its effect on negative psychological well-being is moderate (f^2 = 0.152), reflecting a meaningful but comparatively smaller contribution. This pattern is consistent with theoretical expectations that EI more strongly promotes positive outcomes than it mitigates negative outcomes.

The results of the study confirm that EI plays a significant role in both positive and negative psychological well-being in mothers of children with learning disabilities. Higher emotional intelligence is associated with better psychological outcomes, including lower negative traits and higher positive traits in their psychological well-being.

5. DISCUSSION AND CONCLUSION

Positive and negative well-being are central concepts in psychology, representing two (2) distinct yet interrelated dimensions of an individual's mental and emotional state. Understanding both dimensions is essential for promoting overall psychological health and life satisfaction. Effectively recognising and managing negative emotions is crucial, but actively cultivating positive aspects of well-being is equally important. Maintaining this balance can strengthen resilience, improve coping strategies, and enhance overall quality of life.

Positive well-being refers to life satisfaction, happiness, and the experience of positive emotions such as gratitude, joy, and accomplishment. Research has shown that higher levels of positive well-being foster resilience, improve physical and mental health, and enhance adaptability in challenging situations (Fredrickson, 2013). Positive emotions broaden cognitive and emotional resources, enabling more effective

coping and strengthening interpersonal relationships. In contrast, negative well-being encompasses experiences of distress, dissatisfaction, and persistent negative emotions, including anxiety, stress, and emotional exhaustion. Prolonged negative emotional states can adversely affect physical health, social relationships, and work functioning. Social isolation, pessimistic thinking, and rumination exacerbate psychological distress, increasing the risk of mental health problems. Identifying and addressing negative well-being is therefore critical for supporting mental health and adaptive functioning.

The present study examined the relationship between EI and both positive and negative dimensions of psychological well-being among mothers of children with learning disabilities, a population that often experiences heightened caregiving stress. The findings indicate that EI plays a pivotal role in shaping psychological outcomes. Specifically, higher EI was associated with enhanced positive well-being and concurrently with reduced negative psychological experiences. Mothers with greater EI reported better self-acceptance, autonomy, and sense of purpose, alongside lower levels of anxiety and emotional distress. These results suggest that EI functions as a psychological resource, helping mothers manage caregiving stress and maintain better mental health.

These findings are consistent with prior research demonstrating that EI supports adaptive coping and enhances overall well-being (Mayer et al., 2008; Schutte et al., 2007; Extremera & Fernández-Berrocal, 2006). Compared to studies in general populations, the current study highlights the particularly strong role of EI in fostering positive outcomes within a high-stress caregiving context. While previous studies often focus on either positive or negative well-being, the present findings underscore its dual role in promoting positive states and mitigating negative experiences simultaneously.

Notably, the study suggests that EI has a more pronounced influence on positive well-being than on negative well-being. This aligns with Fredrickson's (2013) theoretical framework, which proposes that positive emotions broaden cognitive and emotional resources, enhancing resilience and adaptive functioning. The moderate effect on negative well-being indicates that while EI buffers stress and reduces distress, it is one of several factors influencing negative psychological outcomes in caregiving contexts.

These findings have important practical implications. Interventions designed to strengthen emotional intelligence such as programs focusing on emotion recognition, regulation, and empathy development may enhance positive well-being, reduce negative emotional experiences, and improve coping strategies among mothers of children with learning disabilities. Such interventions could ultimately support both maternal mental health and caregiving effectiveness.

In conclusion, the present study confirms and extends previous research by demonstrating that EI is a key determinant of psychological well-being, particularly in populations experiencing chronic caregiving stress. The findings highlight its protective and adaptive role, showing that EI fosters positive psychological states while mitigating negative experiences. Future research should explore longitudinal and intervention-based designs to clarify the causal mechanisms through which EI enhances well-being and resilience in high-stress caregiving populations.

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7. CONFLICT OF INTEREST STATEMENT

None declared

8. AUTHORS' CONTRIBUTIONS

Syahrina Hayati Md Jani: Conceptualisation, writing-review, editing, and proofreading; **Nurjannah Salleh**: Conceptualisation, writing-review, and validation.

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