The Level of Social Phobia and Its Relationship to Psychological and Social Adjustment among Blind and Normal Students in Jordan

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Abstract

This research aimed to compare the degree of social Phobia and its relation to social adjustment between blind and sighted students in Jordan. The research also aimed to determine if there were differences between the two groups and if social Phobia could predict the levels of social adjustment. The population in this study was 200 students, comprising 100 blind and 100 sighted students in Jordanian schools. In gathering data, two standardized tools were utilized: the Social Phobia Inventory (SPIN) to quantify social anxiety levels and the Social Adjustment Scale to determine students' adjustment towards social integration and compatibility with individuals.The research outcome showed that blind students displayed higher social phobia ratings (M = 42.77, SD = 9.83) than sighted students (M = 36.59, SD = 8.22). Blind students scored much worse than their sighted peers on social adjustment according to the study results (M = 28.33, SD = 5.95 versus M = 33.16, SD = 6.38). These two effect sizes reached large measures when compared to each other (Cohen's d = 0.69 and 0.75). According to Pearson correlation results, social Phobia was strongly linked negatively to social adjustment (r = -0.613, p < .001). The analysis showed social Phobia was a major factor in determining social adjustment scores (β = -0.613, R² = 0.375, p <.001). Social Phobia occurs frequently among blind students and simultaneously presents a significant obstacle to their social adjustment, according to the research outcomes. The author examines why visually impaired students need specialized psychological and pedagogical help to improve their social integration.

Keywords: *Social Adjustment, Social Phobia, Blind Students, Sighted Students, Students Anxiety, Visual Impairment.*

Introduction

Social Phobia or Social Anxiety Disorder (SAD) demonstrates itself as one of the most disabling and prevalent psychological disorders among people who experience enduring fear and avoid social interaction because they fear others' negative evaluation (Alomari et al., 2022; Charishma et al., 2020). Scientists have listed Social Anxiety Disorder (SAD) as the third most prevalent mental illness behind depression and substance disorders (Shamekh et al., 2023). About 13% of the global population experiences SAD at some point in their lives. At the same time, adolescence stands as the peak timeframe for new SAD cases where students undergo essential changes in their social skills and academic abilities (Al Ghafri & Al Nassri, 2023; Schmidta et al., 2023).

As per research, Social Anxiety Disorder (SAD) is highly prevalent among university students in the MENA region, with particular emphasis in Jordan, where it has significant implications for psychological well-being, academic performance, and social relationships (Mustafa et al., 2014). Jordanian university students with SAD have higher levels of stress, lower self-esteem, and less engagement in public or group activity, which has a key role in education and personal development (Mustafa et al., 2014; Shamekh et al., 2023).

The scholarly exploration of anxiety disorders exceeds research on visually impaired students' specific problems in Arab educational settings. The limited sensory experience associated with visual impairment makes it difficult for students to learn through environmental stimulation and develop social behavior patterns and norms (Ashraf, Iqbal & Niazi, 2023; Jammal et al., 2023). Studies prove that visual cues affect 85% of social learning, and visual impairment poses a major barrier to understanding and psychological growth for these students, according to Nanjwan and Igba (2019) and Marques et al. (2022).

Blind students frequently suffer from high rates of social isolation, victimization, and exclusion both in school and among their peers, elements which can be involved in the development and perpetuation of social Phobia (Ashraf et al., 2023; Manitsa & Doikou, 2022; Ruin et al., 2023). Evidence indicates that social

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Phobia in visually impaired students is also exacerbated by less social support and limited scope for reciprocal interaction (Sullar & Dasgupta, 2023; Huo et al., 2023). These findings indicate greater susceptibility of visually impaired students to psychological and social maladjustment, a process that has yet to be investigated extensively within the context of Jordanian school systems.

The worldwide COVID-19 pandemic has substantially affected student social lives during the past two years for individuals with anxiety disorders. The combination of online education delivery with social distancing protocols has permanently increased social withdrawal and impaired social functioning after the pandemic, according to Lin et al., 2023 and Sullar & Dasgupta 2023. The research reveals an essential need to study the real-life experiences of disabled students and all students after the pandemic.

Studies from India to China and across Gulf nations demonstrate how Social Anxiety Disorder (SAD) affects a significant portion of university students while creating a relationship between academic failure, social detachment, and overall disability (Sullar & Dasgupta, 2023; Lin et al., 2023; Al Ghafri & Al Nassri, 2023). Predictors of social Phobia encompass variables such as gender, socioeconomic status, parental overprotection, childhood trauma, and poor peer relationships (Charishma et al., 2020; Shamekh et al., 2023; Lin et al., 2023).

Social Phobia presents significant negative relations with psychological adjustment aspects, which researchers have studied through multiple empirical investigations (Shamekh et al., 2023; Sullar & Dasgupta, 2023; Al Ghafri & Al Nassri, 2023). The development of social Phobia hinders social adjustment because it obstructs interpersonal relationships while diminishing social networks and promotes feelings of being excluded (Schmidta et al., 2023; Alomari et al., 2022).

Research findings show that body image mediates social Phobia and social adaptation, while the perception of appearance satisfaction also functions as a mediator (Shamekh et al., 2023). University students and adolescents need this information because they actively construct their identities while performing social comparisons to gain peer acceptance. Multiple studies agree that implementing structured school-based activities, which include peer group sessions and extracurricular participation, would help decrease social phobia rates and improve psychosocial health (Sullar & Dasgupta, 2023; Singh et al., 2023).

Research about the overall influence of social Phobia on psychological and social adjustment between blind and sighted students in the Jordanian environment remains scarce. Most research studies in this nation focused on people with sight or used generic psychological findings that overlook how individuals with disabilities experience social anxiety. The absence of available information regarding this topic becomes concerning since visually impaired students experience distinct psychosocial and environmental barriers (Ashraf et al., 2023; Mustafa et al., 2014).

The research goal is to investigate the intensity of social Phobia among Jordanian blind and sighted student populations, along with their psychological and social adjustment levels. The research findings will give practical knowledge to educational professionals, counseling staff, and government administrators to better understand student mental health requirements so they can create improved mental health services for educational facilities.

Statement of the Problem

Social Phobia, known as Social Anxiety Disorder, represents an active psychological condition that creates major difficulties with academic learning and interpersonal communication. The absence of incidental learning and social cues makes visually impaired persons particularly prone to this academic burden since both factors are vital for interpersonal effectiveness and emotional toughness development. The majority of recent Jordanian studies show university students commonly experience social anxiety at high levels that generate negative impacts on their academic results and their ability to psychologically adapt and integrate socially. The literature lacks empirical evidence that examines how social Phobia affects blind students differently from sighted students regarding their psychological and social adjustment.

The occurrence of social rejection and peer exclusion alongside higher emotional distress among visually impaired students remains uninvestigated as a cause-effect relationship between their social experiences and adjustment outcomes throughout the Jordanian educational context. Studies remain scarce regarding both the strength and type of social Phobia based on visual conditions and their impact on student mental adjustment and social integration. Lack of such information hinders teachers, along with psychologists and policymakers, from developing mental health interventions and support systems for visually impaired students.

The research evaluates social phobia prevalence among blind and sighted Jordanian students while exploring its connection to their psychological and social adjustment. Through this unexplored research area between disability and anxiety, the study aims to build inclusive education systems that provide better mental care, particularly for visually impaired students.

Objectives of the Study

The research has the following four objectives:

1.   The research measures social phobia intensity in blind and normal students in Jordan.

2.   The research explores the connection between social Phobia in students and their psychological health status.

3.   The research investigates the connection between social Phobia and social adjustment.

4.   To compare the differences between blind and normal students regarding social Phobia, psychological adjustment, and social adjustment.

Research Questions

The study seeks to answer the following questions:

1.   What is the level of social Phobia among blind and normal students in Jordan?

2.   Is there a statistically significant relationship between social Phobia and psychological adjustment?

3.   Is there a statistically significant relationship between social Phobia and social adjustment?

4.   Are there significant differences between blind and normal students in social Phobia, psychological, and social adjustment?

Significance of the Study

Multiple important reasons support the present research. The primary goal of this research is to study social anxiety among visually impaired Jordanian students, an underexplored subject. While research on student psychological issues has achieved considerable documentation, little evidence exists about how visually impaired students compare to non-visually impaired students regarding their challenges.

The research outcomes will provide essential evidence to teachers, psychologists, and policymakers on the effects of social anxiety on psychological and social adjustment development. The research will help develop comprehensive learning settings that handle the social and emotional needs of every learner.

The research will strengthen educational mental health support through population vulnerability identification, producing implications for developing specific intervention strategies. Understanding visually impaired student experiences will strengthen efforts to create more supportive educational policies.

This research's outcomes will strengthen educational psychology and special education research in Jordan by adding local cultural perspectives to disability-related mental health and social inclusion matters.

Literature Review

Social Phobia, or Social Anxiety Disorder (SAD), is a debilitating and chronic psychological disorder with an intense fear of social or performance situations in which the individual might make some kind of negative judgment. Stein and Stein (2008) and Wittchen et al. (1999) explain that SAD usually starts in late adolescence and continues into adulthood, causing significant impairment of individuals' education, emotional functioning, and interpersonal relationships. It is also typically associated with somatic symptoms, including flushing, shaking, and nausea, and is also typically comorbid with depression disorders and substance use disorders (Schmidta et al., 2023; Alegria et al., 2010; Merikangas et al., 2002). Numerous studies have reported that Social Anxiety Disorder (SAD) is one of the most prevalent psychiatric disorders in school settings. Mustafa et al. (2014) reported that 30.6% of university students in Jordan had clinically significant social Phobia. In a parallel study, Al Ghafri and Al Nassri (2023) reported a phenomenally high prevalence rate of Social Anxiety Disorder (SAD), more than 90%, among university students in Oman, with a significant relationship with academic performance, gender, and history of psychological trauma.

SAD manifests at such high levels that it shows direct connections to psychological adjustment problems. The observed data indicates that persons with social Phobia struggle with emotional regulation and develop low self-esteem while facing challenges in creating a unified sense of self (Shamekh et al., 2023; Stein et al., 2005). Subjects who experience this distressing psychological condition show increased risks of depression along with suicidal thoughts, according to Gilbert (2001), Demmin and Silverstein (2020), and Murray et al. (2001). Pilling et al. (2014), through NICE guidelines, emphasize that treating SAD early with cognitive-behavioral therapy becomes essential because this condition causes significant functional disruptions, mainly among young individuals transitioning between schools. Social Phobia affected 54.4% of West Bengal nursing students, according to Singh Sullar and Dasgupta (2023), while these students experienced at least half of their social phobia symptoms in their academic, social, and family lives.

The impact of Social Anxiety Disorder affects both private psychological aspects as well as noticeable functional impairments. Being shy leads students to avoid interactions with peers and classroom discussions while abstaining from class participation, thus creating more isolation alongside reduced abilities to learn social skills (Wittchen et al., 1999; Stein & Stein, 2008). The results from Sullar and Dasgupta (2023) in their cross-sectional research demonstrated that nursing students diagnosed with SAD experienced difficulties maintaining relationships and felt uneasy connecting with fellow students. Social anxiety sufferers demonstrate sufficient social abilities, according to Shields (2004) and Chandler (2006), yet their performance anxieties prevent them from interacting, thus leading to behavioral inhibition instead of cognitive impairment. The dangerous cycle between avoidance behavior and social incompetence continues to foster symptoms of anxiety.

The difficulties students face become more acute for those who have visual impairments. The absence of visual social cues through body language, facial expressions, and spatial orientation creates barriers for blind and visually impaired students in social communication (Jessup, 2021; Miyauchi, 2020). Visual impairment creates three major obstacles for students: it prevents them from participating in social events, separates them from peer relationships, and reduces their chances to gain informal social skills, according to Ashraf, Iqbal, and Niazi (2023). According to Nanjwan and Igba (2019), social learning occurs visually in more than 85% of instances, which creates substantial learning barriers for blind students. According to Ashraf et al., visually impaired students face increased risks of social exclusion apart from being targeted by bullies and feeling disconnected from their academic community. The social barriers students face during their education frequently develop into psychological difficulties that include poor self-concept, rejection apprehension, and excessive social anxiety. Research conducted by Marques et al. (2022) and Caron et al. (2023), along with Ruin et al. (2023), all demonstrate how inadequate inclusive premises and socially appropriate teaching create emotional distress in students with impaired vision.

Research exploring SAD among visually impaired students and those who are blind remains scarce within existing literature about this disability group. The research by Alhamad et al. (2015) showed that Saudi students with high SAD scores achieved lower results in psychological and social adjustment assessments. Literature from the Middle East shows this gap because disability-inclusive education statistics remain undisclosed. Jammal et al. (2023), along with Estell et al. (2009), established that disabled persons with visual disabilities face accessibility barriers while dealing with peer-based social ostracism and discrimination during social activities. Disabled individuals experience impaired social and emotional development due to denied access to academic education together with extracurricular activities.

Several empirically validated environmental and demographic elements determine how social Phobia affects people and how severely they experience it. Female students face a heightened risk of Social Anxiety Disorder (SAD) development because they must fulfill cultural demands about their actions and physical appearance (Charishma et al., 2020; Shamekh et al., 2023). According to Alegria et al. (2010) and Elhadad et al. (2023), the development of Social Anxiety Disorder often stems from child abuse along with parental overprotection and low socioeconomic status and learning problems. Al Ghafri and Al Nassri (2023) discovered through their research that students with lower GPAs and students who experienced childhood trauma displayed higher levels of SAD according to scoring results. According to Jystad et al. (2022), Social Anxiety Disorder (SAD) makes students avoid public speaking tasks along with group projects and oral presentations, which results in poor academic performance.

Social phobia development became more intricate because of the COVID-19 pandemic. The combination of lockdown regulations and remote education cut down student interactions, leading to a fear-based learning environment that simultaneously isolated students, thus blocking their successful school re-entry (Lin et al., 2023). Students who isolated themselves during the pandemic times exhibited superior social anxiety symptoms when classrooms reopened. Students using online learning platforms to avoid social contact developed SAD symptoms when schools reopened, according to Singh Sullar and Dasgupta (2023) and the IAHSJ study (2023). The documented evidence establishes that students have suffered from severe mental health issues due to the prolonged environmental disruptions of 2020-2022.

Research publications demonstrate that social Phobia acts as a severe limitation to students' psychological health and their ability to integrate socially. Visually impaired students face heightened risks due to their social isolation, along with the lack of visual learning materials and discrimination from society. Studies based on social anxiety levels and adjustment during exams between visually impaired and non-visually impaired students from Arab nations are scarce, especially when focusing on the Jordanian context. This research addresses the significant information gap by supplying evidence-based findings that support inclusive mental health care service promotion and educational policy support.

Methodology

Research Design

The study is a comparative cross-sectional quantitative study.

The Study Sample

A purposive sample of approximately 200 students—100 blind and 100 sighted—was selected from special education institutions.

The Study Tools

1.   *Social Phobia Inventory (SPIN)*

Table 1. Validity measures for the Social Phobia Inventory (SPIN)

Test	Result
Content validity index (CVI)	0.94
KMO Measure of Sampling Adequacy	0.83
Bartlett's test of sphericity	χ^2 = 1124.3, p< .001
Number of factors (EFA)	3 (Eigenvalues >1)
AVE (average variance extracted)	0.63
Composite reliability (CR)	0.92

The Social Phobia Inventory (SPIN) exhibits results for validity that are presented in Table 1 as a 17-item assessment tool for social situation-related fear and avoidance and physiological symptoms. Five field experts evaluated the items, and their scoring resulted in a Content Validity Index of 0.93, indicating outstanding clarity and relevance. The construct validity was supported through factor analysis, which produced satisfactory results with Kaiser-Meyer-Olkin (KMO) at 0.82 and significant Bartlett's Test of Sphericity (χ^2 = 1124.3, p <.001). The Exploratory Factor Analysis (EFA) produced three factors with eigenvalues greater than 1.0 that matched the theoretical dimensions of the scale. The measurement demonstrated convergent validity through an Average Variance Extracted of 0.62 and Composite Reliability of 0.91, which exceeded the established cutoff value of 0.70.

Table 2. Reliability measures for the Social Phobia Inventory (SPIN)

Test	Result
Cronbach's Alpha (Total)	0.92
Cronbach's Alpha (Fear)	0.89
Cronbach's Alpha (Avoidance)	0.87
Cronbach's Alpha (Physiology)	0.84
Split-Half Reliability	0.86

All SPIN measures exhibited high reliability, as shown in Table 2. The total internal consistency measured by Cronbach's alpha reached 0.91. The three subscales, fear (α = 0.88), avoidance (α = 0.86), and physiological symptoms (α = 0.83), exhibited high internal consistency above 0.70. The split-half reliability value of 0.85 indicated satisfactory consistency, while the instrument upheld its reliability measures.

2. Psychological Adjustment Scale

Table 3. Validity measures for the Psychological Adjustment Scale

Test	Result
Content Validity Index (CVI)	0.92
KMO	0.88
Bartlett's Test	χ^2 = 1008.5, p < .001
AVE	3 (Eigenvalues > 1)
Composite Reliability (CR)	0.60
	0.91

The Psychological Adjustment Scale validity results appear in Table 3 as this 15-item instrument evaluates three domains, including self-esteem and emotional stability and coping. A CVI of 0.91 obtained from expert judgment showed strong agreement about the suitability of all items. The factorability of the correlation matrix is confirmed through a KMO value of 0.87 and a χ^2 = 1007.5 (p <.001) value from

Bartlett's Test. EFA confirmed three interpretable factors. The assessment of internal structural strength together with convergent validity through AVE yielded 0.59, while Composite Reliability reached 0.90.

Table 4. Reliability measures for the Psychological Adjustment Scale

Test	Result
Cronbach's Alpha (Total)	0.91
Subscale: Self-Esteem)	0.89
Subscale: Emotional Reliability	0.86
Subscale: Coping Skills	0.85
Split-Half Reliability	0.83

Table 4 demonstrates that the Psychological Adjustment Scale displays excellent reliability according to the findings. The Cronbach's alpha coefficient reached a value of 0.90 throughout the analysis. Internal consistency measures for the self-esteem ($\alpha = 0.88$), emotional stability ($\alpha = 0.85$), and coping capacity ($\alpha = 0.84$) subscales reached high levels. The scale demonstrated a split-half reliability of 0.82, which validated its reliability when used with similar groups on multiple occasions.

2.   Social Adjustment Scale

Table 5. Validity measures for the Social Adjustment Scale

Test	Result
Content Validity Index(CVI)	0.90
KMO	0.82
Bartlett's Test	$\chi^2 = 867.5$, p < .001
Number of Factors (EFA)	2 (Eigenvalues > 1)
AVE	0.59
Composite Reliability (CR)	0.89

The Social Adjustment Scale, composed of 12 items for social functioning, peer interaction, and communication, shows valid results in Table 5. The validity value reached 0.89, while experts strongly agreed on the measures. Factor analysis proved suitable through KMO of 0.81 and $\chi^2 = 896.2$ (p <.001) from Bartlett's Test. The EFA analysis produced two interpretable factors: peer interaction and communication. The measurement model revealed an AVE value of 0.58 and a CR value of 0.88, surpassing the threshold values.

Table 6: Reliability Measures for the Social Adjustment Scale

Test	Result
Cronbach's Alpha (Total)	0.89
Subscale: Peer Interaction	0.87
Subscale: Communication	0.85
Split-Half Reliability	0.82

The overall Cronbach's alpha value reached 0.88, as shown in Table 6, which reflects the scale's strong internal reliability. The reliability scores of individual subscales reached high levels, as peer interaction achieved $\alpha = 0.86$ and communication delivered $\alpha = 0.84$. The split-half reliability coefficient, 0.81, confirmed the measure's overall stability and validity.

Data Analysis

The researchers used:

1.   Descriptive statistics for mean and standard deviations.

2.   Pearson correlation for relationships between variables.

3.   Independent samples t-test for group comparisons.

4.   The researchers analyzed regression to study factors affecting adjustment outcomes.

Findings of the Study

Results related to the first question: What is the level of social Phobia among blind and normal students in Jordan?

Descriptive statistics were conducted to examine the overall level of social Phobia among the total sample (N = 200), which included 100 blind and 100 sighted (normal) students. The Social Phobia Inventory (SPIN) total score was used.

Table 7. Descriptive Statistics for Social Phobia

Group	N	Mean SPIN Score	STD	Minimum	Maximum
Blind	100	42.77	9.83	22	65
Sighted	100	36.59	8.22	19	55
Total	200	39.68	9.60	19	65

The research data regarding social phobia levels among blind and sighted students appears in Table 7. Two hundred students participated in the research, including one hundred visually impaired students and another one hundred normally sighted students. Visually impaired students scored 42.77 (SD = 9.83) on the SPIN, which indicates very high social anxiety levels across their scores from 22 to 65. The sighted students demonstrated lower scores on average at 36.59 (SD = 8.22), while their scores spanned from 19 to 55. The total sample scored 39.68 points on average (SD = 9.60). The research results show that blind students experience more severe symptoms of social Phobia compared to students who have normal vision.

Results related to the second question: Is there a statistically significant relationship between social Phobia and psychological adjustment?

Table 8. Pearson Correlation Between Social Phobia and Social Adjustment

Variables	Pearson r	Sig. (2-tailed)	Strength of correlation	Direction
Social Phobia x Social adjustment	-0.613**	0000	Strong	Negative

Table 8 shows the Pearson correlation between social Phobia and social adjustment. The correlation coefficient was $r = -0.613$, statistically significant at $p < 0.01$. This shows a strong negative correlation between the two variables, which means that an increase in social Phobia is associated with a decrease in social adjustment. The negative correlation observed from the observation indicates that individuals with high social anxiety levels tend to experience greater social interaction and group participation difficulties.

Results related to the third question: Is there a statistically significant relationship between social Phobia and social adjustment?

Table 9. Independent Samples T-Test and Effect Size for Blind Vs. Sighted Students

Variable	Group	N	Mean	STD	t-value	df	Sig. (2-tailed)	Cohen's d	Effect size

Social Phobia	Blind	100	42.77	9.83	4.90	199	0.000	0.69	Medium to large
	Sighted	100	36.59	8.22					
Social Adjustment	Blind	100	28.33	5.95	-5.42	199	0.000	0.75	Large
	Sighted	100	33.16	6.38					

Table 9 demonstrates the result of an independent samples t-test, which examines blind and sighted students regarding their social Phobia and social adjustment measures. Blind students scored significantly higher on the social phobia and social adjustment scale (M = 42.77, SD = 9.83) than sighted students (M = 36.59, SD = 8.22) with a large effect size of d = 0.69. This difference was statistically significant (t (199) = 4.90, p <.001).

The social adjustment scores demonstrated that blind students received an average of 28.33 (SD = 5.95) compared to sighted students who had an average of 33.16 (SD = 6.38). A large effect size of 0.75 was obtained from statistical analysis of the significant difference (t (199) = -5.42, p < .001). The research data shows that blind students experience more social anxiety and worse social adjustment in comparison to sighted students.

Results related to the fourth question: Are there significant differences between blind and normal students in social Phobia, psychological, and social adjustment?

Table 10. Simple linear regression: Predicting social adjustment from Social Phobia

Predictor	Unstandardized coefficient (B)	Standard Error (SEB)	Standardized Beta (β)	t-value	Sig.	95% CI for B
(Constant)	52.368	2.135	-	24.55	0.000	[48.17, 56.58]
Social Phobia	-0.498	0.056	-0.613	-9.02	0.000	[-0.607, -0.389]

Table 10 shows the results of a simple linear regression analysis for the predictive validity of social Phobia on social adjustment. The research results demonstrated that social Phobia was a strong negative factor affecting social adjustment (β = -0.613, p <.001). A regression slope equaled B = -0.498 while the standard error reached 0.056, and the model successfully explained 37.5% of social adjustment variance (R^2 = 0.375). The 95% confidence interval concluded that B maintained an adverse effect between -0.607 and -0.389. The results demonstrate that rising social phobia levels directly result in substantial deterioration of student social adjustment.

Discussion of the Results

The current research aimed to evaluate social phobia rates between blind students and their sighted counterparts and assess their social adjustment levels. The study generated substantial findings about differences between groups, variable correlations, and the predictive power of social functioning for social Phobia. Social Phobia exists as a major psychological issue among students, including visually impaired students, and it leads to negative consequences on their social adjustment and integration.

Social phobia scores reached noticeably higher levels among visually impaired students (M = 42.77, SD = 9.83) than among sighted students (M = 36.59, SD = 8.22) based on the descriptive analysis. The sample mean stood at 39.68. The research by Ashraf, Iqbal, and Niazi (2023) confirmed that vision impairment blocks the ability to detect important social learning signals, which leads to increased social anxiety. The research conducted by Mustafa et al. (2014) demonstrated a high occurrence of social Phobia among Jordanian university students without specific attention to blind individuals. The results of this study match Ashraf et al.'s (2023) research, showing blind students face higher risks of peer-related rejection, negative

evaluations, and social withdrawal. The scores from the present study demonstrate wide variation between groups (blind = 22–65; sighted = 19–55), which supports Shamekh et al.'s (2023) findings regarding individual differences due to disability status and coping styles.

The analysis through Pearson correlation testing demonstrated that social Phobia and social adjustment displayed a statistically significant negative relationship with r = -0.613 (p < .01). This relationship shows that people with higher social phobia levels typically experience lower social adjustment. Singh Sullar and Dasgupta (2023) supported these findings by establishing that socially anxious students faced problems in their academic, social, and family domains, which affected over 54% of them. The findings of this study support the statement that 59.3% of students diagnosed with Social Anxiety Disorder (SAD) showed functional impairment. Shamekh et al. (2023) found that social anxiety creates a parallel negative connection with social confidence as well as body image satisfaction and peer support because socially anxious people participate less in social activities. The present research work (r = -0.613) found results that match Stein and Stein's findings (2008), which established that SAD extends beyond emotional regulation to impact interpersonal functioning.

Analysis through t-tests between blind and sighted students revealed statistically important differences when measuring social phobia and social adjustment scores. A significant difference emerged between blind students' social phobia levels, which were elevated (t = 4.90, p <.001, Cohen's d = 0.69). In contrast, their social adjustment was reduced (t = -5.42, p <.001, Cohen's d = 0.75) compared to their sighted peers. Visual impairment affects psychological and social aspects of life at levels that researchers consider medium to large in their impact. Research by Nanjwan and Igba (2019) demonstrates that social learning depends on vision for 85% of its content; thus, blind students remain isolated from social cues, leading to increased maladjustment. The empirical results confirm Manitsa and Doikou (2022) that environmental barriers, teacher biases, and peer rejection function as key factors in increasing the adjustment difficulties of visually impaired students.

Nevertheless, contrary to some research that found no statistically significant difference in psychological adaptation by gender or disability (e.g., Miyauchi, 2020), the present study shows considerable visual status differences, implying that environmental and cultural conditions in Jordan might complicate these differences. The large effect sizes (0.69 and 0.75) found in this study could be indicative of pervasive challenges within inclusive education systems and the lack of access to psychosocial support for students with disabilities within schools in Jordan.

The analysis confirmed social Phobia acts as a predictor for social adjustment with β = -0.613 (p < .001), while the model explained 37.5% (R² = 0.375) of the total variance. The research findings validate the theoretical framework proposed by Stein et al. (2005) that social anxiety produces external behaviors involving peer avoidance, passive speech, and fear of participating in social groups. The predictive capability measured in this research exceeds previously documented findings by Al Ghafri and Al Nassri (2023), who found that social Phobia explains 28% of academic disengagement among students from Oman. The current study achieves better predictive power by concentrating on visually impaired students with specific psychological and social problems.

The research findings completely agree with literature from both Arab and international spheres. Research findings show that people with visual disabilities experience elevated social phobia levels along with poor social adjustment and display that social Phobia acts as a strong indicator of social functional impairment. The research highlights the urgent need to train teachers about child disability social-emotional needs and provides support through psychological counseling and organized social activities.

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