Assessing the Reliability of a Module for Adolescent Psychological Well-Being in Malaysia Using the Sidek Model

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ABSTRAK

This study focuses on the development and assessment of a module designed to enhance adolescent psychological well-being in Malaysia, utilizing the Sidek Module Development Model. Undertaken by the Counselling and Psychology Association of Malaysia (PEKAMARA), the initiative targets teenagers aged 13-25 years. The module development followed a comprehensive approach encompassing needs analysis, objective formulation, content development, strategy selection, module production, implementation, and evaluation. Rigorous psychometric measures adapted from the Sidek model were employed to evaluate the module's validity and reliability. The results demonstrated a high level of validity, with a coefficient of 0.80, indicating effective targeting of the psychological challenges faced by the adolescent demographic. Furthermore, the module exhibited strong reliability, with a Cronbach’s Alpha value of 0.93, highlighting its consistency in measuring desired psychological outcomes. Incorporating evidence-based practices from cognitive-behavioral therapy, positive psychology, and mindfulness, the module offers tailored interventions aimed at improving stress management, emotional regulation, resilience, and overall life satisfaction among adolescents. The study involved a sample of 10 experts (5 men and 5 women) with doctorates in relevant fields for the development phase, and a pilot study with 50 adolescents aged 13-25 years. The research instruments included the “Soal Selidik Kebolehpercayaan” (Reliability Questionnaire) developed by the researchers. The findings underscore the importance of integrating theoretical frameworks into practical modules that are effective and adaptable to diverse cultural contexts and individual needs. This study contributes significantly to the field of adolescent mental health interventions by demonstrating the efficacy of a structured and systematic approach in fostering positive psychological outcomes.

Keywords: Module of adolescence psychological well-being in Malaysia, Sidek module development model, psychological well-being

INTRODUCTION

Adolescence, a period spanning from ages 13 to 25, is universally recognized as a time of significant transition and development. Globally, adolescents grapple with a myriad of challenges, including academic pressures, peer relationships, and identity formation, all of which play pivotal roles in shaping their psychological well-being (American Psychological Association, 2020). These challenges are compounded by the prevalence of mental health issues such as anxiety and depression, which can have profound implications for their overall health and prospects (World Health Organization, 2020). In psychology, adolescence is often categorized into three dimensions: early adolescence (ages 13-15), characterized by rapid physical growth, the onset of puberty, and the beginning of more complex thinking processes; middle adolescence (ages 16-18), where individuals continue to develop their identities, become more independent, and face
increased academic and social pressures; and late adolescence or post-adolescence (ages 19-25), marking the transition to adulthood with a focus on completing education, starting careers, and forming intimate relationships. Understanding these dimensions is crucial for developing targeted interventions and support strategies to enhance psychological well-being during each stage of adolescence (Afifah & Sari, 2024).

In Malaysia, as in many parts of the world, adolescents face unique cultural and societal pressures that influence their mental health outcomes. The rapid modernization and globalization experienced in Malaysia have brought about shifts in traditional values and family structures, impacting adolescent lifestyles and stress levels (American Psychological Association, 2020). Moreover, societal expectations regarding academic achievement and career success contribute to the psychological burden experienced by Malaysian adolescents, often exacerbating feelings of stress and anxiety (World Health Organization, 2020).

Recent studies highlight the prevalence of mental health challenges among Malaysian adolescents, underscoring the need for effective interventions to promote psychological well-being. According to the World Health Organization (2020), approximately 10-20% of adolescents worldwide experience mental health disorders, with similar rates reported in Malaysia. These statistics underscore the urgency of implementing evidence-based approaches to support adolescent mental health and well-being.

This study explores the application of the Sidek module development model, a structured framework designed to address the specific needs of adolescent populations in optimizing psychological well-being among Malaysian adolescents. Previous research highlights a gap in comprehensive, culturally tailored interventions specifically targeting Malaysian adolescents, particularly within the dimensions of early adolescence (ages 13-15). Existing studies often focus on general mental health strategies without addressing the nuanced cultural and developmental contexts unique to Malaysian youth (Smith et al., 2019; Tan & Lim, 2020). By integrating principles from cognitive-behavioral therapy, positive psychology, and mindfulness, the module for adolescent well-being in Malaysia aims to equip adolescents with essential coping skills and resilience-building strategies tailored to their cultural context and developmental stage.

The gap identified in previous research lies in the lack of culturally specific interventions addressing the psychological needs of Malaysian adolescents, particularly in early adolescence. Existing literature primarily focuses on broader mental health approaches without accounting for the distinct cultural and developmental challenges faced by adolescents in Malaysia (Smith et al., 2019; Tan & Lim, 2020). This study addresses this gap by developing and validating a module that specifically targets the psychological well-being of Malaysian adolescents, utilizing the Sidek module development model.

The study primarily focuses on early adolescence (ages 13-15), recognizing it as a critical developmental period characterized by rapid physical and cognitive changes, the onset of puberty, and the formation of identity and social roles (Steinberg, 2014; Sawyer et al., 2018). This age group is crucial as interventions during this stage can significantly impact long-term psychological outcomes and resilience (Smith et al., 2019; Tan & Lim, 2020).

This study explores the application of the Sidek module development model a structured framework designed to address the specific needs of adolescent populations in optimizing psychological well-being among Malaysian adolescents. By integrating the principles from cognitive-behavioural therapy, positive psychology, and mindfulness, the
module for adolescent well-being in Malaysia aims to equip adolescents with essential coping
skills and resilience-building strategies tailored to their cultural context and developmental
stage.

This study aims to evaluate the reliability of the SIDEK model as applied to enhancing
adolescent psychological well-being in Malaysia. Adolescence, spanning ages 13 to 25,
represents a critical period marked by significant psychological and developmental transitions.
The SIDEK model, integrating cognitive-behavioral therapy, positive psychology, and
mindfulness, offers a structured framework tailored to address the unique cultural and
developmental needs of Malaysian adolescents. To assess its reliability, this research employs
rigorous psychometric measures adapted from the SIDEK framework. The study focuses on
measuring the internal consistency and validity of the SIDEK model in relation to key aspects
of adolescent psychological well-being, such as stress management, emotional regulation,
resilience, and overall life satisfaction. By investigating these dimensions, the study aims to
provide empirical evidence regarding the effectiveness and consistency of the SIDEK model
in enhancing psychological outcomes among Malaysian adolescents. This evaluation not only
contributes to advancing theoretical understanding but also informs practical applications in
adolescent mental health interventions within Malaysia's cultural context.

THE SIDEK MODULE DEVELOPMENT MODEL: ENHANCING EDUCATIONAL AND
PSYCHOLOGICAL INTERVENTIONS

The Sidek module development model represents a structured framework renowned for
its efficacy in crafting educational and psychological interventions tailored to specific
definitions (Sidek, 2018). Initially designed for educational applications, this model has
evolved to encompass diverse fields, including psychology, by integrating evidence-based
practices to achieve measurable outcomes. The foundational stage of the Sidek model
involves conducting a meticulous needs assessment to pinpoint challenges and objectives
within the target population, thereby facilitating the precise tailoring of interventions to
address identified needs effectively (Sidek, 2018).

Subsequently, the model progresses to objective formulation, emphasizing the
formulation of clear, measurable goals crucial for evaluating intervention effectiveness
(Sidek, 2018). These objectives, often delineated through SMART criteria (specific,
measurable, achievable, relevant, time-bound), provide a definitive roadmap for
intervention development and subsequent evaluation. Following objective formulation,
content development ensues, characterized by the integration of evidence-based
practices drawn from cognitive-behavioural therapy, positive psychology, and
mindfulness. This phase underscores collaboration among experts to ensure the
content's accuracy, relevance, and engagement for the intended audience (APA, 2020).

Strategy selection follows content development, focusing on the careful curation of
instructional methods and interactive techniques that align with diverse learning styles
and enhance intervention impact (Sidek, 2018). These strategies, ranging from
interactive workshops to multimedia presentations, are tailored to optimize participant
engagement and facilitate effective knowledge transfer. Once content and strategies are
synthesized into a cohesive module format, the model advances to the critical phase of
module production. Here, modules are structured for seamless implementation in
educational or real-world settings, featuring comprehensive materials and facilitator
guides to uphold fidelity to intervention goals and objectives (Sidek, 2018).
Implementation marks the practical realization of the module, involving meticulous planning, facilitator training, and ongoing support to ensure adherence to intended objectives and procedures (Sidek, 2018). This phase encompasses logistical coordination, session scheduling, and participant monitoring to validate intervention outcomes. The subsequent evaluation phase employs rigorous methodologies to assess intervention impact, combining quantitative assessments and qualitative feedback to refine and optimize future implementations (APA, 2020). Such evaluations contribute invaluable insights into intervention effectiveness, guiding iterative improvements for enhanced outcomes in educational and psychological contexts.

Adapted for psychological interventions, the Sidek module development model underscores the integration of cognitive-behavioral therapy (Beck, 1976), positive psychology (Seligman & Csikszentmihalyi, 2000), and mindfulness principles (Kabat-Zinn, 1990) to foster mental health and resilience. This approach ensures interventions are not only evidence-based but also culturally responsive, catering to diverse population needs for maximal efficacy and relevance. In conclusion, the systematic framework of the Sidek model exemplifies best practices in developing and implementing educational and psychological interventions, enhancing their impact and fostering positive outcomes across varied contexts and populations.

![Sidek Module Development Model](image)

In this study, the Sidek module development model was applied to create and evaluate an educational intervention aimed at enhancing psychological well-being among Malaysian adolescent students. The research followed a systematic approach across three distinct stages: Module Preparation (Stage 1), Module Trial and Evaluation (Stage 2), and Implementation and Evaluation (Stage 3), integrating cognitive-behavioral therapy (CBT), positive psychology, and mindfulness principles into the SIDEK module.
development model. These theories provide the theoretical framework and principles guiding the development, trial, implementation, and evaluation of the module aimed at enhancing adolescent psychological well-being in Malaysia.

Stage 1 of the SIDEK module development model commenced with a comprehensive Needs Assessment aimed at identifying prevalent psychological challenges among Malaysian adolescent students. Through surveys and interviews, key issues such as stress management, emotional regulation, and resilience were pinpointed. Based on these findings, clear Objectives were formulated to guide the development of tailored interventions integrating cognitive-behavioral therapy (CBT), positive psychology, and mindfulness techniques. The subsequent phase, Content Development, involved meticulous crafting and refinement of module materials. This process included gathering insights from expert consultations to ensure alignment with evidence-based practices and cultural relevance. Preliminary feedback from potential users further informed decisions on selecting appropriate textbooks, workbooks, audiovisual aids, and interactive tools. Concurrently, Strategy Selection focused on identifying instructional methods and interactive techniques best suited for delivering the module content effectively. This systematic approach ensured that the module materials were carefully chosen to address specific psychological needs while catering to the developmental and cultural contexts of Malaysian adolescents.

Moving to Stage 2, the module underwent Pilot Testing with a small sample of students to identify initial issues and refine content and delivery strategies despite limitations in resources. Validity and Reliability Testing ensured the module accurately measured its intended outcomes across different demographics, leveraging available resources judiciously. Module Refinement followed, incorporating insights from pilot testing to enhance the module's effectiveness within resource constraints. Final Module Preparation concluded Stage 2, where the module was finalized based on revisions and refinements derived from feedback and evaluation outcomes, demonstrating efficient use of limited resources.

In the field of psychology and education, the development of effective intervention modules requires rigorous validation and reliability testing to ensure their efficacy and relevance, even in the face of resource constraints. This study employs a structured approach to validate and measure the reliability of a Psychological Well-being Module designed for adolescents in Malaysia. The methodology integrates expert validation in the first phase and pilot testing with adolescents in the second phase, navigating challenges posed by limited resources. This essay outlines the procedural steps, from expert selection and content validation to pilot study implementation and evaluation, adhering to the Sidek module development model. Despite challenges such as limited funding and access to specialized facilities, the study demonstrates effective use of available resources to achieve robust validation and refinement of the module.

**METHODOLOGY**

In this study, the procedure involved two distinct phases for conducting validity and reliability analyses of the module designed to enhance psychological well-being among Malaysian teenagers. The first phase focused on expert validation, where feedback and insights were gathered from 10 recognized experts in counselling from various regions across Malaysia. These experts were selected based on their expertise in counselling and their familiarity with the psychological challenges faced by Malaysian adolescents(Kamaruddin, Ma’rof, and Chew Lin, 2024).
During this phase, the experts critically evaluated the module's content, structure, and alignment with evidence-based practices such as cognitive-behavioural therapy, positive psychology, and mindfulness. Their feedback helped ensure that the module effectively addressed the identified psychological needs and was culturally appropriate for Malaysian teenagers.

Following the expert validation phase, the second phase of the study shifted focus to assessing the reliability of the module among actual teenagers. This phase aimed to evaluate how consistently the module achieved its intended outcomes and whether it was effective in real-world settings. Fifty teenagers, representative of the target demographic and spanning various socio-demographic backgrounds, participated in this phase to ensure diversity in the study sample.

During the reliability assessment phase, quantitative measures were used to assess the module's impact on psychological well-being indicators such as stress levels, emotional regulation, and resilience among the participating teenagers. This phase provided empirical data on the module's reliability in producing consistent results across different groups of adolescents.

Overall, these two phases of the study were instrumental in establishing both the validity and reliability of the module. The expert validation ensured that the module was theoretically sound and aligned with best practices in counselling, while the reliability assessment among teenagers demonstrated its effectiveness in practical application. This rigorous approach underscored the module's suitability for addressing the complex mental health needs of Malaysian teenagers, contributing valuable insights to the field of psychological interventions.

**Phase 1: Expert Validation Process**

The first phase involved the validation of the adolescence psychological well-being module by a panel of 10 experts comprising professionals from industry and universities in Malaysia. Each expert was selected based on their extensive experience in counselling, psycho-educational interventions, and familiarity with cognitive-behavioural therapy and related psychological theories. Experts received an official invitation letter explaining the study's objectives and their role in evaluating the module’s content.

**Intermission Phase: Calculation of Content Validity Score**

Experts were provided with a content validation score form utilizing a Likert-scale (1 = Strongly Disagree to 10 = Strongly Agree) to assess various aspects of the module, including its suitability for the target demographic, alignment with objectives, and efficacy of proposed activities. They independently evaluated the module and provided feedback through written evaluations or in-person meetings with researchers. Verbal feedback sessions allowed for comprehensive discussions to gather insights and suggestions for module refinement.
The Content Validity Achievement (CVA) was calculated for each expert using the formula:

\[
\text{Total Score from Expert (x)} \times \frac{100}{\text{Maximum Score (100)}} = \text{Content Validity Achievement}
\]

Figure 2. Formula for Content Validity Achievement

According to Sidek Mohd Noah and Jamaludin Ahmad (2005), a CVA score exceeding 70% indicates good content validity, warranting the module’s readiness for further testing and implementation.

**Second Phase: Reliability Measuring Process**

The adolescence well-being module development in this study was undertaken as part of a doctoral program by the primary researcher. The module was specifically designed, written, and developed for adolescents residing in Malaysia. A pilot study was conducted with a group of teenagers over a single weekend. Before the study, inclusion criteria were established, requiring participants to be Muslim, aged between 13 to 25 years, and literate.

Participants were provided with both oral and written explanations about the psycho-educational program session and were invited to participate voluntarily. For participants under the age of consent as per the Malaysia Child Act 2001, assent consent was obtained. Informed consent was obtained from the guardian overseeing each participant. The consent process ensured that participants understood their voluntary participation rights, including the option to withdraw from the study at any time. Typically, completing the consent form, along with the oral explanation, took approximately 15 minutes.

**Participants and Selection Criteria**

The study engaged 50 teenagers, comprising an equal distribution of 25 males and 25 females, recruited from secondary schools across Malaysia. Participants were carefully selected based on specific demographic criteria: age between 13 to 17 years and enrollment in diverse socioeconomic backgrounds and geographic locations. This approach aimed to ensure a representative sample reflecting Malaysia’s adolescent population, crucial for studying psychological interventions.

**Module of Adolescence Psychological Well-being in Malaysia**

The Module of Adolescence Psychological Well-being aimed to enhance the mental health outcomes of Malaysian adolescent students through a structured approach using the Sidek module development model. This module facilitated a systematic progression through three key stages: Module Preparation, Module Trial and Evaluation, and Implementation and Evaluation.

During Module Preparation, a thorough Needs Assessment identified prevalent psychological challenges among adolescents, informing the formulation of clear
Objectives focused on stress management, emotional regulation, and resilience. Content Development integrated evidence-based practices from cognitive-behavioural therapy, positive psychology, and mindfulness, tailored to meet the specific needs of the target population. Strategy Selection ensured effective delivery methods were chosen to maximize engagement and learning outcomes.

In Module Trial and Evaluation, the intervention underwent Pilot Testing to refine content and delivery strategies based on initial feedback. Rigorous Validity and Reliability Testing ensured the intervention accurately measured its intended outcomes across diverse demographic groups. Module Refinement incorporated insights from pilot testing to enhance effectiveness, culminating in the Final Module Preparation phase where the intervention was finalized for implementation.

During Implementation and Evaluation, the intervention was deployed across educational settings in Malaysia. Pre- and Post-Assessment measures were employed to quantify changes in psychological well-being indicators, supported by Quantitative Analysis using statistical methods to assess significant improvements. Qualitative Feedback from participants and Stakeholder Perspectives from educators and mental health professionals provided additional insights into the intervention's impact and effectiveness.

Overall, the study highlighted the Sidek module development model's efficacy in systematically designing, refining, and evaluating an evidence-based intervention aimed at improving psychological well-being among Malaysian adolescent students. By adhering to ethical guidelines and integrating both quantitative and qualitative data, the research contributed valuable insights into the development and implementation of effective psychological interventions in educational settings.

Table 1. Summary of the module of Adolescence Well-being in Malaysia

<table>
<thead>
<tr>
<th>Module</th>
<th>Intervention</th>
<th>Title of Intervention</th>
<th>Objectives</th>
</tr>
</thead>
<tbody>
<tr>
<td>1&lt;sup&gt;st&lt;/sup&gt;</td>
<td>Stress Module</td>
<td>Turning Threats into Opportunities</td>
<td>To help individuals identify and understand stress as an opportunity for personal growth and development.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Managing Stress with the 10B Technique for Emotional Well-being</td>
<td>To provide practical techniques for effectively managing stress to enhance emotional well-being.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Love Yourself</td>
<td>To encourage individuals to develop self-compassion in overcoming anxiety and worry.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>My Story</td>
<td>To assist individuals in expressing their experiences and feelings related to anxiety through personal storytelling.</td>
</tr>
<tr>
<td>2&lt;sup&gt;nd&lt;/sup&gt;</td>
<td>Anxiety Module</td>
<td>Relaxation</td>
<td>To teach relaxation techniques to reduce anxiety and promote calmness.</td>
</tr>
<tr>
<td>3&lt;sup&gt;rd&lt;/sup&gt;</td>
<td>Depression Module</td>
<td>Me and Depression</td>
<td>To provide an understanding of depression and ways to identify its symptoms and seek help.</td>
</tr>
<tr>
<td>Module</td>
<td>Description</td>
<td></td>
<td></td>
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<tr>
<td>---------------------------------------------</td>
<td>-----------------------------------------------------------------------------</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>4th Grief and Bereavement Module</strong></td>
<td>The Grief and Loss Process</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>My Sad Heart</strong></td>
<td>To provide a space for individuals to express their sadness and receive support during the grieving process.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>5th Financial Module</strong></td>
<td>Needs vs. Wants</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Managing Financial Stress</strong></td>
<td>To help individuals distinguish between needs and wants in personal financial management.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>6th Psychological First Aid Module</strong></td>
<td>3L (Look, Listen, and Link)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>PFA in Action</strong></td>
<td>To teach the Psychological First Aid (PFA) approach, which involves observing, listening, and linking individuals to resources.</td>
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</tr>
</tbody>
</table>

Each session lasted between one and two hours. The researcher took into consideration the capabilities of each group member to understand and complete each task. All necessary tools and materials were provided to all group members to ensure they could fully participate in the sessions. After each session, the researcher allocated additional time for group members to complete a reliability measurement form. This form was used to assess the consistency and dependability of the intervention techniques applied during the sessions.

**Measure: Reliability Measuring Form**

The Reliability Measuring Form is a tool used to ensure the consistency and dependability of the intervention techniques applied during the sessions of your study. Its primary purpose is to assess how reliably the methods and tools used in each module of the Psychological Well-being Module for adolescents in Malaysia are implemented and perceived by participants. This form typically includes structured criteria or rating scales to evaluate various aspects such as adherence to intervention protocols, fidelity in delivering techniques, and consistency in outcomes across different sessions or facilitators. By using this form, researchers can gather systematic data on the reliability of their interventions and make informed decisions regarding the refinement or adjustments needed to enhance their effectiveness.

The study collected brief demographic data in Part A, including names, ages, and genders of participants. Part B involved a Likert-scale assessment where participants rated 50 items from 1 to 5. This assessment focused on evaluating the suitability of tools, time allocation effectiveness, satisfaction with activity flow, and achievement of module objectives. Feedback from participants indicated overall satisfaction with activity flow, time allocation, and tools provided. This feedback was essential for ensuring the reliability and effectiveness of the intervention methods, guiding continuous improvements based on participant insights.
RESULTS & DISCUSSION

Results of Validation Analysis

According to Bailey (1978), a content validity questionnaire is crucial when researchers have a clear understanding of how a concept should be measured. It requires that items in the questionnaire are directly related to the concept being measured. To validate a module, content validity must be rigorously completed with input from at least two language experts and three counselor experts, as outlined by Thorndike (1997). This process aims to ensure consistency in terminology, language usage, and the accurate interpretation of the module's content or psychological instrument. Language experts play a critical role in recommending clear and easily understandable language, ensuring that all statements are comprehensive and complete (Bailey, 1978; Thorndike, 1997).

The researchers appointed 10 counselling experts. All of them were Malay and practised the module in their practices. They also held doctorate degrees. The experts provided feedback on the module's content, ensuring that the language used was simple and easily understood and that the statements were complete and comprehensive.

Table 2. Division of Validity Achievement according to Percentage of Ten Counseling Experts

<table>
<thead>
<tr>
<th>Evaluator</th>
<th>Experts score (N/50)</th>
<th>Total of Validity Achievement (%)</th>
<th>Validity Index</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evaluator 1</td>
<td>45</td>
<td>90</td>
<td>.90</td>
</tr>
<tr>
<td>Evaluator 2</td>
<td>48</td>
<td>96</td>
<td>.96</td>
</tr>
<tr>
<td>Evaluator 3</td>
<td>39</td>
<td>78</td>
<td>.78</td>
</tr>
<tr>
<td>Evaluator 4</td>
<td>28</td>
<td>56</td>
<td>.56</td>
</tr>
<tr>
<td>Evaluator 5</td>
<td>38</td>
<td>76</td>
<td>.76</td>
</tr>
<tr>
<td>Evaluator 6</td>
<td>42</td>
<td>84</td>
<td>.84</td>
</tr>
<tr>
<td>Evaluator 7</td>
<td>47</td>
<td>94</td>
<td>.94</td>
</tr>
<tr>
<td>Evaluator 8</td>
<td>33</td>
<td>66</td>
<td>.66</td>
</tr>
<tr>
<td>Evaluator 9</td>
<td>41</td>
<td>82</td>
<td>.82</td>
</tr>
<tr>
<td>Evaluator 10</td>
<td>40</td>
<td>80</td>
<td>.80</td>
</tr>
<tr>
<td>Total of Achievement Average</td>
<td></td>
<td></td>
<td>.802</td>
</tr>
</tbody>
</table>

The validity index of 0.80 indicates that the module successfully targets and addresses the specific psychological challenges faced by adolescents in this age group. Furthermore, the overall reliability coefficient was impressively high, with a Cronbach's Alpha value of 0.93, demonstrating the internal consistency and reliability of the module.

Results of Reliability Measure Analysis

The reliability of the intervention techniques applied during the sessions was systematically evaluated using a Reliability Measuring Form. This assessment aimed to ensure consistency and dependability across various aspects of the modules.
Graph 1. Evaluation of Intervention Techniques: Reliability Measure Analysis

The reliability measure analysis focused on ensuring consistency and dependability across various aspects of the modules used in psychological interventions. Participants consistently rated the tools provided during sessions highly, indicating strong agreement (average ratings between 4 to 5 on a Likert scale) on their suitability and effectiveness for learning and engagement. Evaluations of time allocation also yielded positive results, with participants generally agreeing that session times were well-managed and sufficient for effective participation. The flow and organization of activities within each module received praise for being logical, engaging, and supportive of learning objectives. Moreover, participants strongly agreed that the sessions effectively achieved their outlined objectives, demonstrating perceived relevance and impact in addressing psychological challenges such as stress, anxiety, depression, and financial management. Overall, these findings underscore the effectiveness and positive reception of the intervention methods, supporting their validation and potential for broader implementation to enhance psychological well-being among adolescents in similar contexts.

The feedback gathered through the Reliability Measuring Form underscored the robustness and effectiveness of the intervention methods employed. The high ratings across all measured criteria indicate that the modules were well-received and perceived as valuable by the participants. These findings contribute to the overall validation of the modules and support their potential for broader implementation in enhancing psychological well-being among adolescents in similar contexts.

In the study of the Interventions Psychological Well-being Module, the reliability of the module was rigorously assessed to ensure its effectiveness in achieving its objectives. Current perspectives emphasize the importance of participants successfully following all activity steps to measure reliability, indicating mastery of intervention objectives. Contemporary approaches,
such as those discussed by authors like Jamaludin Ahmad and Sidek Mohd Noah (2001), advocate using activity objectives to measure reliability, a method adopted in this study.

Based on the statistical analysis using SPSS Version 21, the Interventions Psychological Well-being Module demonstrated a high Cronbach's Alpha coefficient of 0.929 across its 50 items, indicating strong internal consistency among the module items. This underscores its reliability in measuring the intended constructs related to psychological well-being among adolescents.

In interpreting Cronbach's Alpha, different scholars suggest varying thresholds. More recent perspectives, such as those from DeVellis (2017) and Tavakol & Dennick (2011), emphasize the importance of aiming for a Cronbach's Alpha of 0.90 or higher for excellent reliability. In this study, the module surpassed these benchmarks with a robust reliability index value of 0.93, highlighting its strong internal consistency.

This high-reliability index underscores the module's robustness and effectiveness in addressing psychological challenges among adolescents. It indicates that the module's items consistently measure the intended psychological constructs with accuracy and reliability. Therefore, based on these findings, the Interventions Psychological Well-being Module demonstrates strong potential for practical application in enhancing psychological well-being in similar populations.

**Conclusion**

The development and validation of the module for adolescent psychological well-being in Malaysia have been rigorously supported by foundational principles in psychological assessment and intervention. The use of a content validity questionnaire, aligned with modern standards, ensured the module effectively measures targeted psychological constructs among adolescents. Collaboration with language and counselling experts enhanced clarity, relevance, and cultural sensitivity, crucial for engaging adolescents in effective counselling interventions.

Integration into educational and clinical settings, facilitated by experts with doctoral qualifications, underscored the module’s practical applicability and potential for widespread adoption. This integration bridges theory with practice, ensuring alignment with educational curricula and clinical protocols, enhancing its utility across diverse settings (Firmansyah, Hasdin, & Jamaludin, 2023).

The module demonstrated strong internal consistency, with a Cronbach's Alpha value of 0.929, indicating robust reliability in measuring psychological outcomes. This reliability assures practitioners and researchers of consistent and valid data for evaluating intervention effectiveness and conducting further research. Positive outcomes from validity and reliability assessments pave the way for future research endeavors to refine the module's applications and explore adaptations for diverse populations and psychological challenges beyond adolescence.

**Implications**

The validated module stands as a testament to collaborative efforts in psychology and counselling, promising continued innovation and impact in adolescent mental health care. Its effectiveness in addressing psychological challenges supports its importance in
clinical practice and research, potentially improving mental health outcomes and fostering resilience among adolescents.

By prioritizing cultural relevance and sensitivity through expert engagement, the module resonates authentically within the Malaysian context, enhancing trust and engagement crucial for effective interventions. Future research can further explore its adaptation and extension to benefit broader demographic groups and address evolving psychological needs.

**Acknowledgement**

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