The Effectiveness of Group CBT Module in Alleviating Body Dissatisfaction, Anxiety, and Self-Esteem Issues in Adolescents

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This study examines the efficacy of a Cognitive Behavioural Group Counselling Intervention Module in addressing body image dissatisfaction, anxiety, and self-esteem, specifically among adolescents which can have a substantial impact on their mental well-being. Excessive preoccupation with achieving a desired weight and physical appearance can result in the development of depression, eating disorders, and social difficulties. 20 psychology education students took part in this study. They utilised various instruments including the multidimensional body self-relations questionnaire-appearance scale, physical appearance state and trait anxiety scale, and body esteem scale for adolescents and adults. Results of module 0.897 show that the Cognitive Behavioral Group Counselling Intervention Module has high validity and reliability indicating that this intervention module has the potential to assist individuals in altering their assumptions and beliefs related to dissatisfaction with their self-image, specifically to their physical appearance. Additionally, the results of the three variables also show a significant difference between pre and post treatment with $p<0.05$.

Keywords: module intervention cognitive behavioral therapy, body image dissatisfaction, anxiety, self-esteem, university student

Human development and overall well-being, especially for young adults or adolescents, are heavily influenced by body image, as noted by Markey (2010). Newman and Newman (2016) distinguish between two stages of adolescence: early adolescence, spanning ages 12 to 18, and late adolescence, from 18 to 24. This period is characterised by a multitude of problems and societal pressures. Adolescents experience substantial physiological transformations, including rapid development and the onset of puberty, which result in changes to their physical appearance and dimensions. As a result, young adults may encounter increased discontentment with their physical appearance, which might potentially endanger their overall welfare. Markey (2010) emphasises the association between negative body image and a range of mental health problems, such as depression, anxiety, eating disorders, and low self-esteem.

The human body is widely regarded as the most prominent physical characteristic, highly desired by many for its aesthetic appeal. Attaining an aesthetically pleasing appearance is a common desire, as it has the capacity to facilitate positive social interactions and can lead to financial benefits, as shown by Pop (2016).

Pop emphasizes the pivotal role of physical appearance in initial social encounters and suggests that it dictates an individual's societal acceptance. It's no surprise, then, that contemporary youth invest significant resources, often thousands of ringgits, in enhancing their physical allure to secure a favorable place in society. The prevalence of anxiety and dissatisfaction with body image among

young adults, particularly in Higher Education Institutes, is a significant concern, as highlighted by Liao et al. (2010). This issue often escalates into depression and stress, exacerbating its detrimental effects, as noted by Baptista et al. (2012). Notably, the repercussions extend beyond mental health, affecting interpersonal relationships and academic performance. Hart et al. (2008) categorizes body image dissatisfaction as a manifestation of social appearance concerns or physical social concerns, emphasizing individuals' preoccupation with how others perceive them. This preoccupation manifests as social anxiety, leading individuals to shy away from unfamiliar social interactions and engage in frequent self-comparisons (American Psychiatric Association, 2013).

In the context of Higher Education Institutions, this anxiety is closely linked to diminished self-esteem and a compromised quality of life among university students (Izgiç et al., 2004). This highlights the urgent need for interventions addressing body image concerns to mitigate their adverse impact on psychological well-being and academic success. Kowaliski et al. (2007) highlight the intricate relationship between appearance anxiety and self-esteem, indicating that individuals with low self-esteem perceive themselves as less liked and valued by others, perpetuating a cycle of diminished self-worth. This phenomenon is exacerbated by societal biases favoring individuals with neater external appearances, attractive body shapes, and adherence to prevailing fashion trends. Conversely, individuals whose appearance diverges from societal norms, such as those with larger bodies, darker skin tones, or unconventional fashion choices, often face discrimination and marginalization within their social circles.

Research by Abdollahi et al. (2016) corroborates this, illustrating how adolesecents with negative body images, such as being perceived as overweight, having dark skin, or being shorter, become targets of peer bullying. The focus on physical appearance in peer criticism can profoundly impact victims, making it challenging for them to navigate daily life and eroding their confidence. This underscores the urgent need for interventions that promote body positivity and combat societal prejudices, fostering environments where individuals of all appearances feel valued and accepted. The study of Christiana et al. (2015, also confirmed that poor body image is associated with a worse quality of life in all its dimensions: physical, environmental, social relationships and especially the psychological dimension.

Seok et al. (2018) highlight concerning trends in mental health among students in Malaysia, as indicated by statistics from the Malaysian Ministry of Health. Over the years, there has been a notable increase in mental health issues among students, with a particularly stark rise in anxiety and depression cases. In 2011, the ratio was one student with a mental health problem among ten students, which worsened to one in every five students by 2016. Moreover, data from the National Health and Morbidity Survey (NHMS) 2017, as reported by the Institute of Public Health (2018), underscores the severity of the situation. The survey reveals that depression affects 1 out of every 5 young adults in Malaysia, while anxiety impacts 2 out of 5 young adults, and stress affects 1 out of 10. Although the NHMS study provides a broad overview of anxiety, it aligns with our study's focus on specific aspects of anxiety, including social anxiety, anxiety related to physical appearance leading to eating disorders, anxiety stemming from trauma, and depression.

These findings underscore the urgent need for targeted interventions and support

systems to address the multifaceted challenges of anxiety and depression among Malaysian adolescents especially university students. Such efforts should encompass both preventive measures and accessible mental health services to mitigate the adverse effects on university student's well-being and academic performance. Indeed, the research by Radeef et al. (2014) sheds light on the common mental health challenges faced by university students, attributing them to the transitional phase and the need to adapt to new environments. Stress, anxiety, and depression emerge as prevalent issues among university students, a sentiment echoed by Dyson & Rank (2006) and Latiff et al. (2014).

These observations align closely with the broader trend identified by the Institute for Public Health (2017, 2018), which indicates a rising prevalence of anxiety, depression, and stress among adolesecents. This continuity in findings underscores the significance of addressing mental health concerns, particularly among university students who are predominantly teenagers and young adults.

Given the focus of our study on body image dissatisfaction, anxiety, and self-esteem among university students, these findings provide valuable context, highlighting the interconnectedness of mental health issues within this demographic. This highlights the significance of comprehensive approaches to mental health assistance in university environments, which include methods to enhance positive body image and strengthen self-confidence, while also addressing anxiety and depression. Hence, the primary aim of this study is to assess the efficacy of a group counselling intervention module rooted in Cognitive Behavioural Therapy (CBT) in tackling body dissatisfaction, anxiety, and self-esteem issues among adolescents. Additionally, it aims to examine the prevalence and connections between body image dissatisfaction, anxiety, and self-esteem among university students.

In this pilot study, the researcher has formulated four main hypotheses:
(1) The Cognitive Behavioral Group Counseling Intervention Module will demonstrate high levels of reliability and validity.
(2) There is a significant difference between the pre-test and the post-test on image dissatisfaction among the treatment group in testing the effectiveness of the Body Image Cognitive Behavioral group counselling module.
(3) There is a significant difference between the pre-test and the post-test on anxiety among the treatment group in testing the effectiveness of the Cognitive Behavioral Group Counseling module of body image.
(4) There is a significant difference between the pre-test and the post-test on self-esteem among the treatment group in testing the effectiveness of the Body Image Cognitive Behavioral Group Counseling module.
These hypotheses serve as the foundation for investigating the impact of the Cognitive Behavioral Group Counseling intervention on body image dissatisfaction, anxiety, and self-esteem among the study participants. Through rigorous testing and analysis, the researcher aims to provide valuable insights into the efficacy of the intervention module in addressing these psychological variables.

In accordance with Cash (2012), the complex issue of body image dissatisfaction, anxiety, and self-esteem encompasses cognitive, perceptual, and behavioral dimensions. Cognitive aspects involve individuals' thoughts and beliefs about themselves, while perception refers to how others evaluate their bodies. The behavioral element pertains to individuals' actions and treatment of their bodies. In

this study, the researcher aims to address these dimensions by restructuring cognitive patterns and modifying behaviors that impede individuals' daily functioning. Through the implementation of a behavioral cognitive intervention module, participants will be guided to challenge and revise their assumptions and beliefs regarding self-image dissatisfaction, particularly concerning physical appearance. By targeting these cognitive and behavioral processes, the intervention seeks to foster positive changes in individuals' perceptions of themselves and their bodies, ultimately promoting enhanced well-being and self-esteem.

Method

In this pilot study conducted at a public university in Malaysia, participants comprised both male and female university students. Employing an experimental method within the quantitative research paradigm, the study focused on addressing body image dissatisfaction, anxiety, and self-esteem issues.

Sample of Study

A total of 20 psychology students were randomly selected for this study. The sampling process involved random selection, ensuring unbiased representation among participants (Creswell et al., 2017). The participants underwent pre-treatment evaluation, and the scores were recorded to make comparison with the post-treatment evaluation (Jacobs et al., 2012). The participants underwent six counselling sessions utilizing the Counseling Behavioral Cognitive Intervention Module. Meanwhile, the control group also received counselling using the same intervention module following the conclusion of treatment sessions for the treatment group. The aforementioned methodology enabled a methodical assessment of the intervention's efficacy in mitigating body image dissatisfaction,

anxiety, and self-esteem among university students, providing significant perspectives on possible interventions specifically designed for this population.

Instrument
i. Demographics
This questionnaire is divided into two parts. Part A is related to demographic information that covers the background, which contains nine items that have been constructed to make analysis and comparison. Question 1 is age, Question 2 gender, Question 3 Race, Question 4 status, Question 5 education level, Question 6 major taken, Question 7 body weight (kg), Question 8 height (cm) and Question 9 BMI.

ii. Multidimensional Body Self-Relation Questionnaire (Appearance Scale)
MBSRQ-AS questionnaire has a 34-item version of the instrument, consisting only of the five appearance-related subscales (Appearance Evaluation, Appearance Orientation, Overweight Preoccupation, Self-Classified Weight, and the Body Areas Satisfaction Scale). The answer scale is assessed using five Likert scales, namely, 1: Strongly Disagree, 2: Disagree, 3: Not Sure, 4: Agree and 5: Strongly Agree. Cash (2000) recommended using this version when researchers are only or primarily interested in appearance-focused body image. Cash (2000) also reported adequate internal consistency coefficients across all MBSRQ subscale scores (Cronbach's women ≥ .74, mean ≥ .70) and adequate 1-month test-retest reliabilities. An exploratory factor analysis revealed that the MBSRQ-AS items significantly loaded with the scale's main factors. Internal consistencies of the subscales ranged from .76 to .86. Test-retest reliability ranged from .75 to .93. Convergent validity was also confirmed as the MBSRQ-AS subscales correlated positively (Marios et al., 2013).

iii. Physical Appearance State and Trait Anxiety Scale (PASTAS)

The Physical Appearance State and Trait Anxiety Scale (PASTAS; Reed et al., 1991) measures anxiety related to specific body parts as well as anxiety about the overall body image. This instrument contains 16 items that assess state and trait dimensions of anxiety. The answer scale is evaluated from 0 to 4, which is 0: Not at all, 1: A little, 2: Moderately, 3: Agree and 4: Very unusual. For the trait anxiety item, people are asked about how they feel about their body in general and their answers are scored from 0 (not at all) to 4 (very important). Test-retest reliability is .87, and Cronbach's alpha is from .82 to .92 (Reed et al., 1991).

iv. The Body-Esteem Scale for Adolescents and Adults (BESAA)

The Body-Esteem Scale for Adolescents and Adults was designed by Mendelson et al., (2001). This questionnaire contains 23 items and three subscales, namely appearance, attribution and body weight. The rated Likert scale type is 0: No, 1: Rarely, 2: Sometimes, 3: Often and 4: Always; higher scores indicate more positive body values. Mendelson et al. (2001) reported acceptable internal consistency for the three self-esteem subscales, with Cronbach's alpha ranging from .75 to .96.

v. Cognitive Behavioral Group Counseling Module

In order to implement an intervention, it is imperative to build a module that has a high validity. Abu Bakar Nordin (1995) stated that a level of mastery or achievement of 70% is considered to have mastered or reached a high level. Therefore, before conducting the pilot study, three module panel experts in the field of psychology reviewed the intervention module, and the score obtained was 80%. On this basis, the Body Image behavioral, cognitive intervention module can be used for the intervention. This intervention module has six meeting sessions conducted for both groups. The meeting has been divided into three stages, namely the beginning stage, the middle or working stage and the termination or closing stage (Jacob et al., 2009). After the end of the counselling session for this pilot study, the respondents were asked to fill out a module reliability questionnaire. The Cronbach Alpha's score for the intervention module is 0.762 for 75 items, which is considered an appropriate score for reliability. According to Griethuijsen et al., (2014), the acceptable significant value for Cronbach's Alpha is 0.7 and above, and this shows that the cognitive behavior group counselling intervention module can be used.

Data Analysis

In order to analyze the data findings of the pilot study, SPSS version 29 was used. A non-parametric Wilcoxon Signed Rank test was done to compare the mean difference between pre-intervention and post-intervention.

Results

A non-parametric test, specifically the Wilcoxon signed rank test, is used to compare the pre-intervention and post-intervention variables. Below are the tables to present the data findings.

Table 1
Descriptive statistics for Multidimensional Body-Self Relation Questionnaire for Pre-Intervention and Post-Intervention

	N	Mean	Std. Deviation	Min	Max	Median
MBSRQ PRE	20	3.69	0.24	3.24	4.24	3.69
MBSRQ POST	20	2.70	0.13	2.44	2.94	2.68

Table 1.1
Wilcoxon signed rank test on Multidimensional Body-Self Relation Questionnaire Pre-Intervention and Post-Intervention

MBSRQ Pre MBSRQ Post	N	Mean Rank	Sum of Ranks	z	p
Negative Ranks	20[a]	10.50	210.00	-3.92[b]	0.001
Positive Ranks	0[b]	0.00	0.00		
Ties	0[c]				

a. MBSRQ POST < MBSRQ PRE
b. MBSRQ POST > MBSRQ PRE
c. MBSRQ POST = MBSRQ PRE

The Wilcoxon signed rank test reveals that the post-intervention scores for the Multidimensional Body-Self Relation Questionnaire are lower (*Mdn*=2.68, *N*=20) compared to pre-intervention scores (*Mdn*=3.69, *N*=20), $z= -3.92$, $p=$

0.001 with a large effect size $r= 0.87$. This means that there is a significant difference between pre-intervention and post-intervention for the MBSRQ score among the participants of the study.

Table 2

Descriptive statistic table for Physical Appearance and Trait Anxiety Questionnaire for Pre-Intervention and Post-Intervention

	N	Mean	Std. Deviation	Min	Max	Median
PASTAS PRE	20	1.86	0.59	0.88	2.81	1.90
PASTAS POST	20	0.56	0.17	0.38	0.88	0.56

Table 2.1

Wilcoxon signed rank test on Physical Appearance and Trait Anxiety Questionnaire Pre-Intervention and Post-Intervention

PASTAS Pre PASTAS Post	N	Mean Rank	Sum of Ranks	z	p
Negative Ranks	20[a]	10.50	210.00	-3.92[b]	0.001
Positive Ranks	0[b]	0.00	0.00		
Ties	0[c]				

a. PASTAS POST < PASTAS PRE
b. PASTAS POST > PASTAS PRE
c. PASTAS POST = PASTAS PRE

The Wilcoxon signed rank test reveals that the post-intervention scores for the Physical Anxiety and Trait Anxiety Questionnaire are lower (*Mdn*=0.56, *N*=20) compared to pre-intervention scores (*Mdn*=1.90, *N*=20), *z*= –3.92, *p*= 0.001 with a large effect size *r*= 0.87. This means that there is a significant difference between pre-intervention and post-intervention for PASTAS scores among the participants of the study.

Table 3

Descriptive statistic table for Body Esteem Scale for Adolescents and Adults for Pre-Intervention and Post-Intervention

	N	Mean	Std. Deviation	Min	Max	Mdn
BESAA PRE	20	2.52	0.33	1.96	3.26	2.54
BESAA POST	20	3.08	0.27	2.44	3.57	3.08

Table 3.1

Wilcoxon signed rank test on Body Esteem Scale for Adolescents and Adults Pre-Intervention and Post-Intervention

BESAA Pre BESAA Post	N	Mean Rank	Sum of Ranks	z	p
Negative Ranks	1[a]	10.00	10.00	-3.42[b]	0.001
Positive Ranks	18[b]	10.00	180.00		
Ties	1[c]				

a. BESAA POST < BESAA PRE
b. BESAA POST > BESAA PRE
c. BESAA POST = BESAA PRE

The Wilcoxon signed rank test reveals that the post-intervention scores for the Body Esteem Scale for Adolescents and Adults are higher (*Mdn*=3.08, *N*=20) compared to pre-intervention scores (*Mdn*=2.54, *N*=20), *z*= –3.42, *p*= 0.001 with a large effect size *r*= 0.76. This means that there is a significant difference between pre-intervention and post-intervention for BESAA scores among the participants of the study. This concludes the non-parametric Wilcoxon signed rank test for all three questionnaires collected for the pilot study.

Module's Cronbach Alpha

Cronbach's Alpha	N
0.897	79

The Cronbach Alpha's score for the Intervention Module is 0.897 for 79 items, which is considered an appropriate score for reliability. This shows that the Cognitive Behavioral Group Counseling Intervention Module is valid and reliable.

Discussion

The Cognitive Behavioral Module serves as the cornerstone of support in this pilot study, aimed at assisting individuals grappling with body image dissatisfaction, anxiety, and self-esteem issues by fostering positive cognitive restructuring and behavioral modification. Cognitive behavioral therapy (CBT) emerges as a pivotal approach utilized in treatment and rehabilitation programs tailored to address body image concerns (Cash, 2019). Individuals experiencing recurrent negative self-perceptions often find themselves ensnared in feelings of anxiety, which subsequently erode their self-esteem and impede their ability to engage socially.

As Adinda et al. (2012) elucidate, low self-esteem can precipitate a cascade of adverse outcomes, including diminished motivation, social withdrawal due to shyness, and compromised academic performance. Furthermore, individuals grappling with low self-esteem are predisposed to experiencing heightened levels of depression and anxiety (Aditomo, 2004). Thus, the Cognitive Behavioral Module employed in this pilot study endeavors to empower individuals to challenge and reframe their negative cognitions, thereby fostering a more positive self-image and enhancing their psychological well-being. Through targeted cognitive restructuring and behavioral interventions, the module aims to equip participants with coping mechanisms to navigate and alleviate the adverse impacts of body image dissatisfaction, anxiety, and low self-esteem.

The research problem addressed by the cognitive behavioral group counselling intervention focuses on individuals, particularly students of Higher Education Institutes, who grapple with body image dissatisfaction, anxiety, and self-esteem issues. These challenges stem from a multitude of factors, including self-esteem, identity, and various socio-cultural influences such as culture, race, socioeconomic status, belief values, needs, experiences, and societal perceptions. Rozimah & Bukhary (2017) emphasize that these factors contribute to individuals' negative thoughts about their body image, prompting them to compare themselves unfavorably with others in terms of physical appearance, body shape, and other attributes. Consequently, individuals experience a pervasive sense of dissatisfaction with their bodies, which can significantly impact their psychological well-being and quality of life.

Cognitive Behavioral Therapy (CBT) emerges as a prominent treatment modality aimed at addressing individuals' negative thoughts by restructuring their cognitive patterns. This approach equips individuals with strategies to adapt to triggers that may elicit aggressive behavior. CBT has garnered widespread popularity and is recognized as a cornerstone of therapeutic rehabilitation programs, particularly in addressing behavioral challenges among young individuals (Cash, 2019). Building upon the robust foundation of previous research and supported by expert panel evaluations of counselling and psychology modules, the researcher is convinced of the efficacy of the Cognitive Behavioral Intervention Module in addressing the issues of body image dissatisfaction, anxiety, and self-esteem. This module, grounded in the principles of CBT, offers a structured framework to assist respondents in challenging and reframing their negative thought patterns, thereby fostering positive cognitive restructuring and behavioral adaptation.

The cognitive behavioral group counselling intervention module comprises six sessions designed to address

negative body image using cognitive behavioral techniques. These sessions are tailored to treat symptoms through cognitive restructuring and behavior modification, fostering self-awareness and empowering individuals to navigate their conditions effectively. Participants engage in various cognitive behavioral techniques, including psychoeducation, cognitive restructuring, relaxation, self-talk, modeling, and monitoring. Additionally, individuals are assigned homework tasks after each session to monitor their cognitive and behavioral progress. Therapists can utilize the cognitive behavioral group counseling intervention module manual on body image to assist individuals grappling with image dissatisfaction, anxiety, and self-esteem issues. Through this approach, participants are guided to identify underlying causes and cultivate self-acceptance. Counselling or psychotherapy approaches have been shown to bolster self-confidence and adaptive capacity by alleviating anxiety and enhancing self-esteem among students (Velayudhan et al., 2010). By integrating these techniques into the intervention module, therapists aim to empower individuals to navigate their body image concerns and foster a positive sense of self.

The results of the study demonstrate the effectiveness of the Cognitive Behavioral Intervention module in addressing the challenges faced by participants experiencing body image dissatisfaction, anxiety, and self-esteem issues. The high Cronbach's Alpha coefficient of 0.897 indicates the reliability of the intervention module, affirming its utility in therapeutic applications. As highlighted by Gusman (2021), the cognitive behavioral therapy approach enhances individuals' awareness of their thoughts and behaviors, providing a framework for targeted intervention. Building upon this foundation, the researchers conducted six group counseling sessions with the treatment group, offering tailored support to address their specific concerns related to body image dissatisfaction, anxiety, and self-esteem. Furthermore, existing literature supports the efficacy of cognitive behavioral therapy as a viable alternative for individuals grappling with these issues (Stice et al., 2021). These findings underscore the promising role of cognitive behavioral interventions in promoting psychological well-being and enhancing coping mechanisms for individuals experiencing body image dissatisfaction, anxiety, and self-esteem concerns.

The results of the study regarding body image dissatisfaction among the treatment group revealed a notable positive change, as participants experiencing improvement after engaging in group counseling sessions utilizing the cognitive behavioral intervention module. These findings are consistent with the outcomes of Lewis et al.'s (2019) study, which employed a similar cognitive behavioral therapy (CBT) intervention for addressing body image dissatisfaction. In Cash's study, which encompassed male and female university students selected at random, a significant 93% of participants reported positive effects, including reduced investment in body image concerns and an overall improvement in emotional well-being. Moreover, an overwhelming 98% expressed satisfaction with the treatment services provided. Body image serves as a fundamental aspect of self-representation, profoundly influencing how individuals perceive themselves and are perceived by others. Particularly among teenagers, the pursuit of an idealized body shape is often fueled by societal expectations and norms. However, it is crucial to challenge the perception of "perfection" associated with body image, as the relentless pursuit of unattainable standards can perpetuate negative feelings of dissatisfaction and stress. Such persistent negative emotions surrounding body image can significantly

impact an individual's mental health and daily functioning.

The results pertaining to anxiety issues within the treatment group, following the implementation of the cognitive behavioral intervention module, yielded positive outcomes. The reduction in anxiety levels concerning physical appearance observed after participating in six counseling sessions using the module, recording mean score from 1.86 to 0.56. Supporting these findings, a combined study by Strachan & Cash (2002) demonstrated the efficacy of Cognitive Behavioral Therapy (CBT) intervention techniques, such as psychoeducation and self-monitoring, in addressing body image concerns.

Furthermore, Humberto et al. (2014) highlighted that body image concerns among university students often stem from societal pressures to conform to prevailing cultural ideals of beauty and perfection. This preoccupation with achieving an "ideal" appearance can exert detrimental effects on mental health, academic performance, and interpersonal relationships, particularly among young women. Thus, challenging and redefining societal standards of beauty is crucial in promoting holistic well-being and fostering a supportive environment for university students to thrive. By addressing these underlying societal influences and providing effective interventions like cognitive behavioral therapy, we can mitigate the adverse impact of unrealistic beauty standards on individuals' mental health and overall success.

The final outcome of the study addresses the issue of self-esteem in relation to body image dissatisfaction, and the implementation of the cognitive behavioral intervention module yielded promising results. Participants in the treatment group demonstrated significant improvements in self-esteem concerning body image, with the mean level of self-esteem increasing from 2.52 to 3.08 following six group counseling sessions using the module. These findings align with the results of a study by Molly & Monica (2015), which investigated the impact of Cognitive Behavioral Treatment on individuals' behavior and self-esteem. The study revealed that participants experienced positive changes in their behavior, including reduced tendencies to evaluate or compare themselves with others, decreased investment in the appearance, and reduced susceptibility to external influences.

Moreover, participants reported increased self-confidence, reduced expenditure on appearance-related products, greater satisfaction with their bodies, decreased anxiety about weight gain, and reduced confusion in various situational contexts. These findings underscore the efficacy of cognitive behavioral interventions in promoting positive self-perception and mitigating the adverse effects of body image dissatisfaction on individuals' self-esteem and overall well-being.

In summary, the findings of this pilot study indicate that all four main hypotheses formulated were confirmed. Despite the limited sample size, the results demonstrate the efficacy of the cognitive behavioral group counseling intervention module in addressing body image dissatisfaction, anxiety, and self-esteem issues among participants. These findings are consistent with previous research by Stice et al. (2021), which underscores the effectiveness of the cognitive behavioral approach in tackling these concerns among university students aged 18 to 21. The prevalence of negative body image concerns among university students, as evidenced by prior studies, highlights the significance of addressing these issues within the context of Higher Education Institutes. Excessive preoccupation with external evaluations can detrimentally

impact both physical and academic well-being. Additionally, research by Marco et al., (2013) suggests that advancing age, particularly among individuals aged 18 to 27, may exacerbate concerns about body image, potentially influencing lifestyle choices and contributing to unhealthy behaviors such as sedentary lifestyles and poor dietary habits (Cecchini et al., 2010). Overall, these findings underscore the importance of implementing interventions to address body image concerns among university students, particularly those enrolled in Higher Education Institutes. By providing effective cognitive behavioral interventions, we can mitigate the negative impacts of body image dissatisfaction, anxiety, and self-esteem issues, ultimately promoting holistic well-being and academic success among students.

Recommendation

Based on the conducted research, several recommendations emerge for enhancing future studies in this field. Firstly, researchers should deepen their examination of factors contributing to body image dissatisfaction, anxiety, and self-esteem. This entails considering demographic variables such as parents' income, rural or urban residence, and ethnic background. By comprehensively analyzing these demographic factors, researchers may uncover nuanced differences that directly or indirectly influence body image dissatisfaction, anxiety, and self-esteem. This broader approach to demographic analysis can shed light on the complex interplay between socioeconomic status, cultural influences, and individual perceptions of body image. Moreover, it can help identify specific demographic groups that may be particularly vulnerable to body image concerns, thus informing targeted interventions and support strategies.

Another recommendation for future research is to increase the study sample size by including a more diverse range of public and private universities in Malaysia. This expansion aims to enhance the generalizability of study findings to the broader student population across different types of institutions. By including a broader representation of universities, researchers can capture a more comprehensive understanding of the prevalence and impact of body image dissatisfaction, anxiety, and self-esteem among Malaysian students. By conducting research across various university settings, this study can serve as a platform to raise awareness among Malaysians about the pervasive nature of these issues among students in Malaysia. By shedding light on the prevalence of body image concerns across different educational contexts, this research can contribute to efforts aimed at addressing these issues on a national scale.

Furthermore, it is recommended that researchers studying body image dissatisfaction consider additional factors such as the respondent's Body Mass Index (BMI), lifestyle practices, and nutritional diet. By incorporating these variables into the research design, researchers can gain a more comprehensive understanding of the complexities surrounding body image distortion and its relationship with other factors under investigation. Examining BMI, lifestyle choices, and dietary habits can provide valuable insights into how these factors contribute to body image concerns and their potential impact on psychological well-being. This holistic approach will enrich future studies and facilitate a more nuanced understanding of body image dissatisfaction among individuals.

Finally, for researchers interested in studying the effectiveness of cognitive behavioral intervention modules, it is recommended to diversify techniques or employ a combination of Cognitive Behavioral Therapy (CBT) approaches. By incorporating various CBT techniques,

researchers can enhance the effectiveness of the intervention module and provide individuals with a more comprehensive toolkit to address body image dissatisfaction, anxiety, and self-esteem issues. Moreover, the adoption of diverse CBT techniques can contribute to therapists in Malaysia by equipping them with versatile strategies to assist individuals in overcoming these challenges effectively. This approach not only enhances the impact of cognitive behavioral interventions but also fosters positive behavioral changes and promotes mental well-being among individuals grappling with body image concerns.

Conclusion

In summary, this pilot study underscores the prevalence of image dissatisfaction, anxiety, and self-esteem issues among university students in Malaysia. The observed correlation between body image dissatisfaction and comparison tendencies highlights its potential impact on the psychological well-being of individuals, contributing to conditions such as depression, anxiety, and compromised self-esteem (Grogan, 2016). Addressing body image dissatisfaction within higher education institutions could yield students who are more self-assured, satisfied with life, and adept at fostering positive relationships (Salleh & Zuria, 2007).

Furthermore, the findings indicate that cognitive behavioral group counseling interventions offer promise in reshaping thought patterns and behavior. Drawing from cognitive behavioral therapy (CBT), individuals can gain insight into their challenges and develop positive outlooks comparable to their peers. It is crucial to raise awareness about the detrimental impact of body image dissatisfaction on the psychological well-being of both adolescents and adults. If left unaddressed, this dissatisfaction can escalate to severe conditions like body dysmorphic disorder, prompting extreme measures such as plastic surgery (Nurlita & Lisiswanti,

2016) or exacerbating instances of bullying, both online and offline, necessitating intervention from authorities to safeguard mental health. Additionally, it's noted that IBD symptoms are also associated with poorer body image. Symptoms such as abdominal pain, bloating, and sudden body weight fluctuations are correlated with a diminished body image (Trindade et al., 2017).

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