Adolescents' Psychological Well-being: Adaptation and Validation of the Brief Scale of Psychological Well-Being for Adolescents (BSPWB-A) in Indonesia

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Abstract

Background: The Brief Scale of Psychological Well-Being for Adolescents (BSPWB-A) is a 20-items self-report questionnaire developed to measure adolescents' psychological well-being. The present study aims to adapt and validate the BSPWB-A in the Indonesian context.
Methods: Referring to International Test Commission (ITC) guidelines, the adaptation and validation procedure included back-translation, peer and expert reviews, cognitive interviews, and evaluation of scale psychometric properties. Data from 770 junior and high school students aged 11 to 19 were collected and analyzed to identify the scale reliability (internal consistency) and construct validity through Confirmatory Factor Analysis (CFA). Convergent validity was assessed by correlating the BSPWB-A score with other related measures, such as the Satisfaction with Life Scale (SWLS), Positive and Negative Affect Schedule (PANAS), and Kessler Psychological Distress Scale-6 (K-6).
Results: The BSPWB-A has good psychometric properties. An acceptable Cronbach's alpha coefficient indicated high internal consistency. The CFA supported the four-factor model implying adequate construct validity. Moreover, the instrument correlated positively with the life satisfaction and positive affect scales; and negatively with the psychological distress and negative affect scales.
Conclusions: The Indonesian version of the BSPWB-A is psychometrically sound for assessing adolescents' psychological well-being.

Keywords: psychological well-being; adolescent; adaptation; validation; psychometric properties

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Introduction

Traditionally, research on adolescence used to focus on various problems that generally occur during this period (Viejo et al., 2018), such as risky behaviours (delinquency, substance abuse, sexual activity), school problems, distress, etc. (Crosnoe & Johnson, 2011; Furstenberg, 2000). It is due to the view suggesting that adolescents experience disturbances and crises known as storms and stress (Lerner & Steinberg, 2004). Over the last few years, the perspective toward adolescence has changed to be more positive (Lodi et al., 2019). The research viewpoint has shifted from a deficit approach, which initially tried to reduce adverse conditions in adolescents, to a positive youth development approach that mainly focuses on the potential and strength of adolescents. This approach assumes that individuals have innate strengths to function positively and continuously experience healthy life changes (Viejo et al., 2018). Adolescents' optimal functioning is not only marked by the absence of a problem but by continuous and successful self-development (Gómez-López et al., 2019; Lerner et al., 2005). This view refers to one of the positive psychological theories, Psychological Well-Being (PWB) (Ryff, 1989).

Past research showed that psychological well-being is crucial in adolescence. Findings revealed that adolescents with a high level of psychological well-being are mentally and physically healthy (e.g., Khan et al., 2015; Mechanic & Hansell, 1987; Proctor et al., 2009; Ryff, 2017). They also tend to be socially competent and function well in their social environment (Gómez-López et al., 2019). Furthermore, adolescents' psychological well-being predicts general health and well-becoming in the future (Hoyt et al., 2012).

A well-known assessment tool for evaluating adolescents' well-being is the Brief Scale of Psychological Well-Being for Adolescents (BSPWB-A) (Viejo et al., 2018), adapted from the widely used adult Psychological Well-Being Scale (PWBS) (Ryff, 1989). While the PWBS consists of six dimensions of psychological well-being (self-acceptance, positive relations with others, autonomy, environmental mastery, purpose in life, and personal growth), environmental mastery and purpose in life cannot be assessed thoroughly in adolescents (Loera-Malvaez et al., 2008; Viejo et al., 2018). Thus, the BSPWB-A uses only four psychological well-being dimensions: self-acceptance, positive interpersonal relationships (positive relations with others), autonomy, and life development (personal growth).

The scale consists of 20 self-report items rated on a six-point Likert scale. It has adequate empirical evidence of reliability and construct validity (Viejo et al., 2018). To date, this instrument is only available in English and Spanish. Therefore, the present study aims to validate the BSPWB-A in Indonesian adolescents. Since measuring adolescents' psychological well-being in Indonesian adolescents still used adult PWBS (e.g., Olivia & Mustikasari, 2021; Patricia et al., 2020; Sutanto et al., 2020), our study will address the aforementioned limitation.

The primary objectives of this study are as follows: (1) to investigate the internal structure of the Indonesian adaptation of the BSPWB-A; (2) to evaluate the internal consistency of the Indonesian version of the BSPWB-A.; (2) to establish convergent validity by examining the correlations between the scale and well-established measures such as the Satisfaction with Life Scale (SWLS; Diener, 1984), Positive and Negative Affect Schedule (PANAS; Watson et al., 1988), and Kessler Psychological Distress Scale-6 (K-6; Kessler et al., 2002).

Our hypotheses are as follows: We anticipate that the internal structure of the Indonesian adaptation of BSPWB-A will conform to the four-factor model proposed by Viejo et al. (2018). We also expect that both the overall score and each subscale will demonstrate robust internal consistency. Furthermore, based on prior studies (Brouzos et al., 2017; Heizomi et al., 2015) we hypothesize that the Indonesian BSPWB-A will exhibit positive correlations with the SWLS (life satisfaction) and Positive Affect, while showing negative correlations with Negative Affect and K-6 (psychological distress).

Methods

Procedures

This study was approved by the Research Ethics Committee of the Universitas Padjadjaran. Following the International Test Commission (ITC) guidelines for translating and adapting tests (International Test Commission, 2016), the research procedure was divided into several stages. The initial phase was to ask permission from BSPWB-A authors (Viejo et al., 2018) to adapt and validate the instrument in the Indonesian context. Research proceeded with a cross-cultural adaptation that includes (1) forward translation of BSPWB-A into Indonesian by two certified translators with a psychology background, (2) backward translation performed by two additional qualified translators, (3) peer review with three researchers in the same field, (4) expert review carried out by three well-being professionals to examine the scale content validity, and (5) cognitive interview involving six adolescents (four male and two female) ages between 13 and 19 (M_{male} = 16, SD = 2.58; M_{female} = 16, SD = 1.41) to determine if the items were properly comprehended. The following stage tested the construct validity, convergent validity, and reliability of BSPWB-A. To collect data, the authors visited schools and distributed questionnaires to students with the principals' permission.

Participants

Participants were recruited from fifteen public and private schools across Indonesian provinces in Java island, the main Island of Indonesia. A total of 770 adolescents aged 11 to 19 (M = 13.86; SD = 1.84) were involved in this study, predominantly female (n = 434; 56.4%) and junior high school students (n = 528; 68.6%). Throughout the one-month data collection period, participants who voluntarily agreed to participate filled in the informed consent and research questionnaire.

Materials

Socio-demographic variables. A brief questionnaire for gathering information such as age, gender, geographical location, school (junior high or high school), and grade level (between 7th and 12th).

Brief Scale of Psychological Well-Being for Adolescents (BSPWB-A; Viejo et al., 2018). BSPWB-A is a 20-item self-report instrument that evaluates psychological well-being in adolescents: self-acceptance (e.g., "*I like most aspects of my personality*"), positive interpersonal relationships (e.g., "*I know that I can trust my friends and they know that they can trust me*"), autonomy (e.g., "*If I had the opportunity, there are many things about myself that I would change*"), and life development (e.g., "*I think it is important to have new experiences that challenge me*"). All items were rated on a 6-point Likert scale ranging from 1 = *completely disagree* to 6 = *completely agree*. In the present study, BSPWB-A was translated and adapted to Indonesian. Psychometric properties of the original and Indonesian versions of the scale are reported in the results section.

Satisfaction With Life Scale (SWLS; Diener, 1984; Indonesian validation by Akhtar, 2019). SWLS was developed for assessing individuals' subjective well-being using 5 items (e.g., "*I am satisfied with my life*"). The response options were on a 7-point Likert scale (*strongly disagree* to *completely agree*). Scores were added up, with a higher score reflecting a greater level of subjective well-being. In the present study, Cronbach's alpha coefficient acquired for the Indonesian version of SWLS was α = .86, suggesting adequate scale reliability.

Positive And Negative Affect Schedule (PANAS; Watson et al., 1988); Indonesian validation by Akhtar, 2019). PANAS comprises 20 items separated into two subscales: Positive Affect (10 items, e.g., "*Enthusiastic*") and Negative Affect (10 items, e.g., "*Nervous*"). Participants evaluated how frequently they experienced the emotions on every item using a 5-point Likert scale ranging from 1 = *none of the time* to 5 = *all the time*. Each subscale's score is calculated independently. A higher score indicates more pleasant or negative emotions experienced by the participants. High internal consistencies for both subscales were attained in the current study (α = .83 for Positive Affect and α = .89 for Negative Affect).

Kessler Psychological Distress Scale-6 (K-6; (Kessler et al., 2002); Indonesian validation by Tran et al., 2019). K-6 is a 6-item self-report assessment used to examine psychological distress levels within individuals (e.g., "*How often did you feel hopeless?*"). The response options were on a 5-point Likert scale (*none of the time* to *all the time*). A higher overall score implies that the participants had felt more psychological discomfort. The Indonesian version of K-6 demonstrated acceptable reliability in this study with a Cronbach's alpha coefficient of α = .88.

Data Analysis

Data were analyzed using RStudio version 4.3.1 and IBM SPSS Statistics 27.0.1.0. Confirmatory Factor Analysis (CFA) was performed to evaluate the scale construct validity by comparing the empirical data with the theoretical model, as hypothesized by Viejo et al. (2018). Given the non-normal distribution of multivariate data, the Satorra-Bentler parameter was recommended (Viejo et al., 2018). The following fit indices and cut-off values were applied: Comparative Fit Index (CFI) ≥ .95, Goodness of Fit Index (GFI) > .90, Root Mean Square Error of Approximation (RMSEA) < .08, and Standardized Root Mean Square Residual (SRMR) < .08 (Hooper et al., 2008). The

construct validity was also supported by the standardized factor loading coefficient > .50 and the significance level (*p* value) < .01 (Hair et al., 2014). Criteria for measurement invariances in multigroup CFA included non-significant χ^2 difference (*p* > .01) and minimal differences of CFI and RMSEA (ΔCFI and ΔRMSEA) < .001 (Rutkowski & Svetina, 2013). The reliability of the BSPWB-A was determined by assessing internal consistency through Cronbach's alpha and McDonald's omega coefficients. A value of α > .70 implies relatively high reliability (Taber, 2018). Convergent validity was examined by using Pearson correlation. Additionally, we conducted comparative analyses related to age and gender using Independent Sample T-Tests and ANOVA.

Results

Preliminary Analysis

The Mardia's coefficients of multivariate skewness ($b_{1,2}$ = 3479.08, *p* = 3.37) and kurtosis ($b_{2,2}$ = 32.68, *p* < .001) showed that the multivariate normality assumption was not met. The polychoric correlation between items revealed low to moderate values (.001 to .704), suggesting a relatively low degree of collinearity (see Table 1).

Construct Validity

CFA was conducted to evaluate the structure of the BSPWB-A. The results supported the four-factor model (Figure 1), demonstrating

Fig. 1. Confirmatory factor analysis for the BSPWB-A
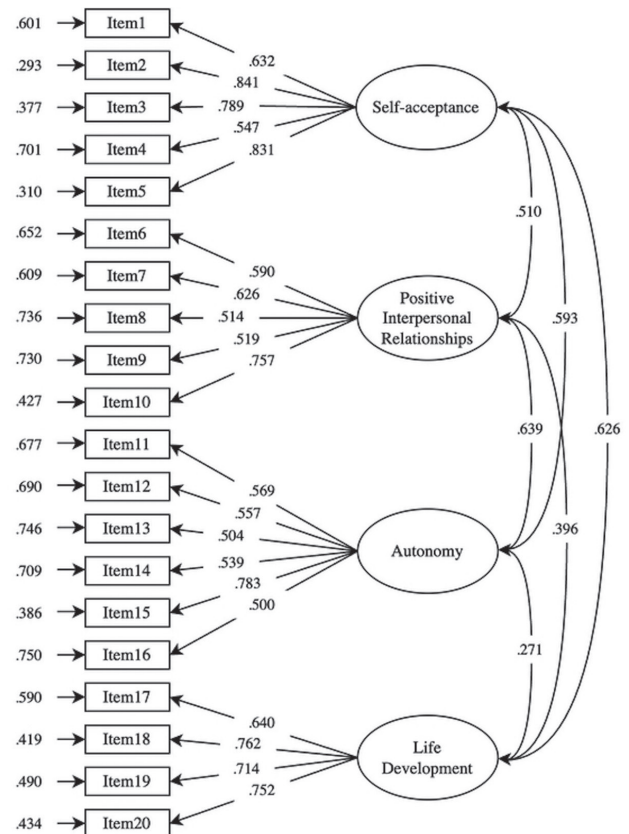
Tab. 1. Polychoric correlation matrix

	1	2	3	4	5	6	7	8	9	0	1	2	3	4	5	6	7	8	9	0
Item1	1																			
Item2	.543	1																		
Item3	.498	.673	1																	
Item4	.292	.448	.496	1																
Item5	.622	.701	.653	.459	1															
Item6	.213	.268	.269	.151	.249	1														
Item7	.212	.267	.262	.080	.258	.617	1													
Item8	.285	.275	.253	.211	.279	.221	.257	1												
Item9	.173	.178	.196	.227	.193	.435	.503	.257	1											
Item10	.280	.308	.315	.338	.332	.242	.295	.504	.337	1										
Item11	.182	.309	.218	.164	.225	.343	.369	.019	.279	.062	1									
Item12	.176	.356	.272	.221	.276	.370	.354	.071	.233	.122	.693	1								
Item13	.197	.206	.209	.061	.171	.218	.210	.046	.197	.001	.397	.382	1							
Item14	.271	.260	.216	.101	.271	.269	.275	.081	.278	.136	.264	.259	.297	1						
Item15	.415	.440	.401	.230	.482	.372	.397	.175	.360	.220	.426	.406	.389	.493	1					
Item16	.113	.198	.193	.194	.176	.207	.217	.027	.204	.013	.380	.395	.309	.225	.384	1				
Item17	.251	.279	.327	.296	.360	.080	.079	.238	.103	.252	.014	.097	.008	.086	.172	.031	1			
Item18	.369	.378	.362	.269	.114	.114	.123	.260	.134	.291	.028	.029	.046	.170	.261	.016	.500	1		
Item19	.311	.318	.281	.284	.092	.092	.071	.220	.098	.277	.007	.010	.080	.158	.222	.013	.451	.704	1	
Item20	.314	.384	.392	.318	.136	.136	.125	.208	.103	.276	.087	.094	.180	.172	.227	.048	.470	.565	.555	1

Tab. 2. Factor loadings of the four-factor model

Factor		Items	λ	SE
Self-acceptance	1	When I look at the story of my life, I am pleased with how things have turned out.	.63*	.04
	2	In general, I feel confident and positive about myself.	.84*	.04
	3	I like most aspects of my personality.	.79*	.04
	4	I have confidence in my own opinions, even if they are contrary to the general consensus.	.55*	.05
	5	In general, I feel proud of who I am and the life I lead.	.83*	.04
Positive Interpersonal Relationships	6	I often feel lonely because I have few close friends with whom to share my concerns.	.59*	.08
	7	I don't have many people who want to listen when I need to talk.	.63*	.07
	8	I feel that my friends bring me a lot of things.	.51*	.05
	9	I have not experienced many warm and trusting relationships with others.	.52*	.06
	10	I know that I can trust my friends and they know that they can trust me.	.76*	.05
Autonomy	11	I tend to worry about how other people assess the choices I have made in my life.	.57*	.05
	12	I tend to worry what other people think of me.	.56*	.06
	13	If I had the opportunity, there are many things about myself that I would change.	.50*	.05
	14	The tasks and responsibilities of everyday often get me down.	.54*	.05
	15	In many ways, I feel disappointed about my achievements in life.	.78*	.05
	16	I often change my mind about decisions if my friends or family disagree.	.50*	.05
Life Development	17	I think it is important to have new experiences that challenge me.	.64*	.04
	18	I think everything we experience is an opportunity to grow and to become a better person.	.76*	.04
	19	I think life is a continuous process of learning, changing and growth.	.71*	.04
	20	When I encounter difficulties, or I do not feel happy with anything in my life, I try to look for a way to change it and move forward.	.75*	.04

*Note: λ = Standardized Factor Loading; SE = standard error; * p < .01*

a satisfactory fit: χ^2S-B(140) = 385.585, p < .001, χ^2_{normed} = 2.754; CFI = .954; GFI = .943; SRMR = .060; RMSEA = .048 (90% CI [.042, .053]). All standardized factor loadings exceeded .50 with p-values < .001, indicating robust and statistically significant associations between the items and their respective factors (see Table 2). Thus, the scale effectively measured the intended construct, in this case, psychological well-being.

Multigroup Confirmatory Factor Analysis

After identifying the four-factor model for psychological well-being within the entire sample (n = 770), we conducted multigroup CFA to assess the measurement invariance across different gender and age groups. The results, as presented in Table 3, indicated that the fit indices for both the configural and metric models were acceptable. Specifically, the χ^2 values were not statistically significant, and there was only a negligible change in CFI and RMSEA (ΔCFI and ΔRMSEA equal to .001). These findings demonstrated that male and female adolescents across various age groups shared a consistent conceptualization of the psychological well-being construct. Moreover, the metric invariance analysis revealed that factor loadings were equal across gender and age groups, suggesting that adolescents responded to each indicator of the latent variables in an equivalent manner.

Tab. 3. Measurement invariance across gender and age

Group	Model	χ^2	df	RMSEA	CFI	ΔRMSEA	ΔCFI
Gender	Configural invariance	598.33	280	.054	.948		
	Metric invariance	617.67	296	.053	.947	.001	.001
	Structural invariance	714.19**	312	.058	.934	.013	.005
	Residual invariance	753.23**	316	.060	.929	.006	.002
Age	Configural invariance	657.30	280	.059	.940		
	Metric invariance	681.36	296	.058	.939	.001	.001
	Structural invariance	717.21*	312	.058	.936	.003	.000
	Residual invariance	753.79**	316	.060	.931	.005	.002

Note. * $p < .01$, ** $p < .001$

Tab. 4. Descriptive analysis and reliabilities of the BSPWB-A

	M	SD	ω	α	α (Viejo et al., 2018)
Self-acceptance	4.08	1.33	.86	.86	.87
Positive interpersonal relationships	4.09	1.53	.76	.75	.79
Autonomy	3.24	1.55	.79	.79	.80
Life development	4.88	1.14	.82	.82	.83
Total scale	3.99	1.53	.87	.87	.95

Internal Consistency

The Indonesian version of the BSPWB-A exhibited high reliability as the original version (Viejo et al., 2018). Cronbach's alpha and McDonald's omega coefficients for the total scale and each factor were above .70 and ranged from .75 to .87 (see Table 4).

Convergent Validity

The scale convergent validity was examined by using Pearson correlation analysis. Correlation coefficients were computed between the psychological well-being score assessed with BSPWB-A and other related constructs, such as life satisfaction (SWLS), positive and negative affect (PANAS), and psychological distress (K-6).

As shown in Table 5, the BSPWB-A score was significantly and positively associated with both life satisfaction ($r = .72$, $p < .001$) and positive affect ($r = .51$, $p < .001$). In addition, there was a negative and significant relationship discovered between the BSPWB-A score and negative affect ($r = -.65$, $p < .001$) as well as psychological distress ($r = -.65$, $p < .001$).

Gender and Age Differences in Adolescents' Psychological Well-Being

Table 6 provides descriptive statistics for psychological well-being among male and female adolescents across different age groups. Gender significantly influenced psychological well-being in adolescents, as indicated by mean differences in self-acceptance ($t = 2.56$, $p < .05$), positive interpersonal relationships ($t = 4.14$, $p < .05$), autonomy ($t = 5.09$, $p < .05$),

Tab. 5. Correlations between BSPWB-A and other measures

	1	2	3	4	5
1. Psychological well-being (BSPWB-A)	1				
2. Life satisfaction (SWLS)	.72*	1			
3. Positive affect (PANAS)	.51*	.45*	1		
4. Negative affect (PANAS)	-.65*	-.50*	-.15*	1	
5. Psychological distress (K-6)	-.65*	-.54*	-.23*	.81*	1

Note. * $p < .01$

Tab. 6. Adolescents' psychological well-being by gender and age

	Gender				Age													
	M		F		≤ 12		13		14		15		16		17		≥ 18	
	M	SD	M	SD	M	SD	M	SD	M	SD	M	SD	M	SD	M	SD	M	SD
SA	4.24	1.18	4.02	1.22	4.21	1.17	4.08	1.31	4.19	1.21	4.21	1.20	3.88	1.09	3.92	1.18	4.31	1.05
PIR	4.42	1.10	4.06	1.21	4.14	1.16	4.25	1.27	4.12	1.18	4.54	1.16	4.12	1.04	4.20	1.10	4.50	1.10
A	3.48	1.19	3.05	1.15	3.33	1.14	3.30	1.23	3.09	1.11	3.26	1.15	3.12	1.26	3.18	1.27	2.84	1.14
LD	4.69	1.04	4.63	.98	4.50	1.03	4.59	1.00	4.63	1.13	4.80	.97	4.75	.99	4.95	.80	4.94	.75
PWB	4.47	.93	4.32	.94	4.36	.94	4.34	.97	4.41	1.04	4.50	.95	4.31	.88	4.43	.84	4.63	.74

Note. SA = Self-Acceptance, PIR = Positive Interpersonal Relationships, A = Autonomy, LD = Life Development, PWB = Psychological Well-Being

and overall psychological well-being ($t = 2.13$, $p < .05$). Notably, male adolescents scored higher in all aspects. The mean score for the life development aspect differed significantly by age ($t = 3.04$, $p < .05$), with older groups (above 16 years old) scoring higher. However, in general, psychological well-being remains relatively consistent throughout adolescence.

Discussions

Research on adolescents' psychological well-being has grown in past years. An adequate assessment tool for these studies is needed. However, it is still limited, particularly in Indonesia. Therefore, this study aims to adapt and validate the existing measure, the Brief Scale of Psychological Well-Being for Adolescents (BSPWB-A) (Viejo et al., 2018), in the Indonesian context. The findings suggested that the Indonesian version of the BSPWB-A has good psychometric properties, including high reliability and acceptable construct and convergent validity. Hence, the Indonesian version of the BSPWB-A is a powerful instrument for evaluating the psychological well-being of Indonesian adolescents.

The CFA results supported the four-factor model as proposed by Loera-Malvaez et al. (2008) and Viejo et al. (2018), indicating that adolescents' psychological well-being was determined by four factors: self-acceptance, positive interpersonal relationships, autonomy, and life development. Despite utilizing the same theoretical framework, it was recommended to exclude two of the six factors (*environmental mastery* and *purpose in life*) from the adult Psychological Well-Being Scale (PWBS) (Ryff, 1989) when assessing psychological well-being in adolescents. Previous research found that adolescents might encounter challenges in accurately identifying these aspects, such as control over their environment or a sense of purpose in life (Loera-Malvaez et al., 2008). Another study employing the PWBS in adolescents found high correlations between *environmental mastery* and *purpose in life* with other factors, resulting in an inadequate model fit (Gao & McLellan, 2018). Thus, the original and Indonesian versions of the BSPWB-A incorporated only the four dimensions of psychological well-being. The multigroup CFA results demonstrated measurement invariance across gender and age groups, signifying that adolescents perceived psychological well-being consistently.

Compared to its original version (Viejo et al., 2018), the Indonesian BSPWB-A had a lower internal consistency within an acceptable range. The value of Cronbach's alpha coefficients for the overall scale and its factors (self-acceptance, positive interpersonal relationships, autonomy, and life development) in the Indonesian BSPWB-A were relatively less. However, both scales were considered reliable and had better psychometric properties than using PWBS in adolescents (Chan et al., 2019; Gao & McLellan, 2018).

Significant correlations were discovered between psychological well-being and other related psychological constructs, including life satisfaction, positive and negative affect, and psychological distress. These findings were aligned with prior research suggesting that individuals with a high level of psychological well-being tend to be more satisfied with their lives and experience positive (happiness) rather than negative affect (Heizomi et al., 2015). Life satisfaction was also crucial to adolescents' well-being and indicated their optimal functioning (Shek & Leung, 2013; Suldo & Huebner, 2006). The negative association between psychological well-being and psychological distress implied that lower psychological well-being was related to higher psychological discomfort (Khan et al., 2015). Adolescents who felt themselves to be under stress were less content and happy, which was related to their lower level of well-being (Heizomi et al., 2015).

This study also included comparative analyses of psychological well-being among male and female adolescents across various age groups. Consistent with Viejo et al.'s (2018) research on psychological well-being in adolescents, our study similarly revealed that male adolescents exhibit higher levels of psychological well-being. Age was found to significantly differ only in the *life development* aspects, which was also found in prior study (Viejo et al., 2018). During the transition to adulthood, adolescents deliberately organize their behavior to address environmental challenges (Roberts et al., 2001). Older adolescents strive for increased psychological growth and maturity, displaying higher levels of persistence, reflectiveness, and purposefulness.

Nonetheless, it is important to acknowledge the limitations of this study. The data was gathered from adolescents residing on Java Island, Indonesia. Given the country's rich diversity in ethnicities, geographic locations, and socioeconomic strata, generalizing these findings to other cultural or socioeconomic groups should be done with caution. Additionally, the study used a cross-sectional design, limiting our ability to make inferences regarding changes in psychological well-being over time. Future research can address the limitations of this study through two key approaches. First, expanding the study to multiple regions in Indonesia would help uncover how cultural and regional factors influence psychological well-being. Second, conducting longitudinal studies to track individuals' well-being over time can reveal developmental trends and influential factors.

Conclusions

This is the first study that validates the BSPWB-A in Indonesian samples. Findings showed that the Indonesian version of the BSPWB-A exhibited good psychometric properties. Therefore, this instrument is suitable for evaluating the psychological well-being of adolescents, which may be very beneficial for developing more programs and interventions to enhance their well-being.

Author Contribution
The authors contributed equally to this manuscript.

Conflict of Interest
The authors declare that they have no conflict of interest.

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Ethical approval

The research was conducted according to the Declaration of Helsinki for medical research involving human participants and was approved by Research Ethics Committee of the Universitas Padjadjaran Indonesia (1058/UN6.KEP/EC/2021). All participants gave their consent to participate in the study. The identity of the participants was anonymous, and the data were stored in an encrypted online archive, accessible only to the authors of the present study.

Informed Consent

Informed consent was obtained from all participants included in the study.

Data Availability Statement

Data will be made available upon reasonable request.

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