SELF-EFFICACY DIFFERENCES BETWEEN PERPETRATORS AND VICTIMS

By

Keith Rigby

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Committee Members
Dr. Michael Yellow Bird, Committee Chair
Dr. Rock Braithwaite, Committee Member
Serenity Bowen, LCSW, Committee Member
Dr. Michael Yellow Bird, Graduate Coordinator

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ABSTRACT

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Self-efficacy has been shown through literature, to affect motivation, decision-making, and life choices in children, (Bandura, 1994; Feltz, 2011). This study explored the differences between academic, social, emotional, and physical activity self-efficacy between perpetrator and victim groups in middle school students. After informed consent was obtained, middle students (N=72) completed self-efficacy and bullying questionnaires at the end of the 2013-14 school year. Results indicated there were no significant (p > .05) differences between perpetrator and victim groups and self-efficacy scores. Further study on the complex social, cognitive, and environmental factors that play formative roles in children’s development are needed to explain the lack of findings.
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INTRODUCTION

Middle school is a time of transition during which developmental, cognitive, and social learning are occurring as children are interacting, and establishing social norms and roles. How sources of environmental and cognitive information are processed and weighted by children in making judgments on tasks, in different situations, and applied to individual skills is unknown, (Feltz, 2001). Social Cognitive Theory posits that individuals learn from social, cognitive, and environmental processes that regulate how one thinks and acts (Bandura, 1989). Bandura’s (1994) research has linked self-efficacy beliefs to psychological constructs such as motivation, perceived competence, self-esteem and self-regulatory processes. Since self-efficacy is critical to the development of one’s beliefs in ability to achieve, understanding the social process that influence these beliefs in schools becomes important. One such social variable that has been shown to influence school achievement over the past decade has been bullying (Cook, Williams, Guerra, & Sadek, 2010).

Bullying frequently occurs in a school environment while developmental and social influences are shaping adolescent affect, behavior, and cognition. Research on bullying in schools supports mixed correlations between self-efficacy and bullying behaviors, as well as a correlation between positive self-efficacy and the ability to abstain from bullying. The implications of these mixed correlations suggest that both positive and negative connections to bullying predict undesirable affect, behavioral, and cognitive outcomes in students (Cook, Williams, Guerra, & Sadek, 2010). For example, students
that are victimized in schools tend to be students that are overweight or obese with several health/quality of life implications (Jensen & Steele, 2012). One such behavior known to contribute to becoming overweight or obese is participation (or lack of) in physical activity.

Children and adolescent physical activity levels were first identified as becoming problematic with the publication of the Surgeon General’s Report on physical activity (USDHHS, 1996). Since that time, research has studied the influence of several variables and the associations to children and adolescent physical activity and self-efficacy has been identified as a strong predictor of obesity (Sallis, Prochaska, & Taylor, 2000; Trost, Kerr, Ward, & Pate, 2001). Studying the links between self-efficacy, physical activity, and bullying, however, and attempting to explain these complex cognitive and social learning influences on self-efficacy makes it important to understand how students conceptualize success and decision making processes that facilitates success. What is still unresolved in the literature is how these variables contribute to social processes that are many times influenced by traumatic experiences like bullying. The purpose of this research was to investigate the differences between several self-efficacy constructs, as influenced by bullying. Because bullying and self-efficacy are connected in either a positive or negative manner to several outcomes, further study on the differences in perceived self-efficacy between perpetrator’s and victims is warranted.
Self-Efficacy

Self-efficacy is an individual’s belief about their ability to produce desired outcomes that also enhance competency (Bandura, 1994). Social processes contribute to self-efficacy when individuals attempt new things, experience success and failure, and occurs through cognitive development and environmental learning (Bandura, 1994). Success with new tasks strengthens self-efficacy as individuals learn to cope and become resilient as a result of handling failure through positive learning processes (Bandura, 1994). When unsuccessful at tasks, some individuals perceive failure in a negative way creating self-doubt (Bandura, 1994).

In his Social Learning theory Bandura (1971) describes vicarious, symbolic and self-regulatory processes as integral to learning. Social learning through these cognitive, environmental, and self-regulatory processes allow humans to have some perceived measure of control over their behavior (Bandura, 1971). This combination of processes during middle school has impact on a child’s self-perception in positive and negative ways, and how an individual interprets messages about themselves and their competency in different areas. In middle school, these areas include academic, and social self-efficacy.

Self-efficacy has been tied to variables including motivation, depression, self-esteem, academic achievement, and suicide. Self-efficacy is a cognitive/social process learned by mastery experiences, and may be enhanced by modeling, social persuasion,
and stress reduction (Bandura, 1994). These social learning factors affect the overall perceived self-efficacy of an individual’s cognitive view of their ability to attempt tasks of increasing difficulty, and personal motivation. The more positive “mastery” experiences one obtains, the greater their perceived ability to meet life’s demands, (Bandura, 1998). An individual’s perceived self-efficacy beliefs contribute in several ways to motivation including: determining goals one sets for themselves, effort expended, perseverance when facing difficulties, and resilience to failing, (Bandura, 1998). These beliefs of perceived self-efficacy are developing throughout the middle school years, and activities such as academics, bullying, and physical activity are impacted by an individual’s perceived self-efficacy. Academically, children with high self-efficacy for “learning or performing a task participate more readily, work harder, persist longer when they encounter difficulties, and achieve at a higher level” (Schunk, 2002) p.3.

One’s self-efficacy beliefs are directly related to personal agency, or an individual’s perception of control over the events in one’s life (Bandura, 1998). Self-efficacy judgments concern what a person thinks they can do, and are cognitive processes stemming from many personal sources of efficacy information (Feltz, 2001). A child’s beliefs of personal efficacy can shape the course of their lives by impacting decision-making in one’s choices of involvement in activities and environments. A vast amount of social learning occurs amongst peers, and has great impact on children’s self-efficacy. In addition, children of similar age provide important comparisons to judge and verify an individual’s self-efficacy (Bandura, 1994).
Physical activity is one such domain in which children and adolescents use social norms to evaluate competence when developing self-efficacy (McAuley & Blissmer, 2000). Research has found high-self-efficacy and positive attitudes predict a higher likelihood that young people will both form the intent to, and participate in physical activity (Haggar, 2001). When individuals are exposed to negative experiences (i.e., bullying), research indicates that self-efficacy measures, peer interactions and attitudes are associated with both bullying and victimization (Andreou, 2004). Negative social process are likely to decrease participation in physical activity as “people’s beliefs in their capabilities affect how much stress and depression they experience in threatening or difficult situations, as well as their level of motivation” (Bandura, 1993, p. 5). acting as an emotional mediator of self-efficacy beliefs (Bandura, 1993). Emotional stress and depression are directly related to one’s perceived abilities to handle the situations they encounter, and the amount of anxiety generated by perceived inability in these situations.

Self-talk (cognitive processes) increase stress level by focusing on perceived deficiencies, and increasing arousal (Bandura, 1993). By magnifying threats and worrying about situations that seldom happen, one increases their innate personal distress and lowers their level of functionality (Bandura, 1993). Attempting to deal with perceived threats, and mistrusting one’s efficacy, increases heart rate, blood pressure, stress hormone level, and effects immune system efficiency (Bandura, 2001).

Academic settings also provide individuals with domain specific beliefs concerning their academic achievements (Pajares, 1996). Academic failures affect student’s perceived efficacy beliefs and low academic self-efficacy is related to increased
anxiety and lower academic performance (Bandura, 1993). Motivation is affected through
cognitive dissonance surrounding perceived inabilities on academic tasks, as well as the
resulting increased stress hormone levels (Bandura, 2001). The transition leading into,
and middle school years, are filled with developmental changes in cognitive and social
abilities. Throughout this period, social comparison and competition are increasingly
important, and hit their peak in 6th & 7th grades, creating an optimal period for studying
self-efficacy and interests (Tracy, 2002).

**Bullying**

Bullying amongst school aged children is a worldwide problem and has generated
psychological and educational research in literature with the aim of informing
found increased prevalence of suicidal ideation and depression in adolescent bully
victims, 15.8.1% & 17.5% respectively, compared to non-bully victims. Bullying
behavior is described as being; “exposed, repeatedly and over time, to negative actions on
the part of one or more students”. These negative actions may include intentionally
excluding one from a group, words, physical contact, dirty gestures, or making faces.
Additionally, there is an asymmetric power relationship and victims have difficulty
defending themselves. Bully/victim behavior patterns remain stable over time, and tend
to remain so without intervention, (Olweus, 1995). Previous bullying studies have shown
students involved in bullying suffer with low self-esteem, stress, loneliness, anxiety,
sleep disorders, somatization, social withdrawal, and depression, (Ozer, 2011). Nearly
60% of boys classified as bullies in 6th through 9th grades were convicted of a crime
before age 24, and 40% of three or more crimes. Bullying is a sign of future antisocial behavior, and nearly half of all bullying can be prevented with interventions (Fox, 2003).

Bosworth, (1999) found more than one third of middle school children feel unsafe, and do not report bullying behaviors because they are scared, or due to inadequate reporting skills, and were of the opinion school employees did nothing to stop the behaviors. In another study by Stevens, (2002) bullies were found to have an avoidant attachment history and a strong asymmetric power imbalance in the paternal/maternal relationship, with fathers having the greater power. Notable was the asymmetric power between siblings, where the siblings were also more powerful than the aggressive bully, and family communication inadequate. Curtner-Smith, (2000) found maternal anger, depression, and lack of boys' involvement in fun family activities were related to boys being involved in bullying, and, “children with parents that are disagreeable, cold, hostile, or rejecting are often at risk for developing aggressive behaviors, including: bullying peers, and delinquency. Among many risk and protective factors, research indicates parents and friends are important sources of social influence, and associated with adolescent bullying and victimization, (Wang, 2009).

In 2014 findings from the British National Child Development study including all children born in England, Wales, and Scotland for a one week period in 1958 and followed to age 50, shows bullying effects to be pervasive and persistent, negatively impacting children 40 years later, (n=7,771). These negative findings include: poorer psychological and physical health, and reduced cognitive functioning, as well as greater risk of depression, suicidal ideation, and anxiety disorders. Personal well-being and social
relationships were found to suffer from early bullying, with male victims tending to have lower levels of education, higher levels of unemployment, less likely to be in relationships, poorer life satisfaction, lower quality of life, and reduced earnings, (Takizawa R, 2014). The above reference to physical health outcomes and the impact of bullying account for the need to review literature on physical activity in children.

**Physical Activity**

Children do not achieve adequate levels of daily physical activity, and as a result more children are overweight today than at any other time in U.S. history, (Story, 2009). Elgara (2005) found having weight problems at age 7 was associated with bullying others, feeling left out, and being bullied (p.518). Storch, (2007) found that “peer victimization was negatively related to physical activity” (p. 86), while Bauer, (2004) found staff and students claimed bullying, competition, and teasing as barriers to participating fully in physical activity classes. Students of all ethnic backgrounds saw increases in the numbers of overweight children every two years during the period from 1986 to 1998, as well as increased Type 2 diabetes in adolescents and children from inactivity and lack of physical activity (Bauer, 2004). School social, and physical environments may be critical influences on the patterns of physical activity of middle school children, and are a critical time developmentally for positively affecting children’s self-efficacy and physical activity. These findings also provided evidence of the need for bullying intervention to facilitate healthy physical activity in this age cohort, (Bauer, 2004; Storch, 2007). According to the American Heart Association, “sedentary behavior is a leading preventable cause of death, and has an inverse relationship between physical
activity and all-cause mortality” (2006, p.2739). Understanding the processing of
cognitive and environmental sources of bullying related to self-efficacy information may
provide insight in the decision-making process that influences children and adolescent
health behaviors that will facilitate designing effective intervention strategies.
METHODS

Participants

Participants involved in the study were middle schools student’s (N =72) ages of 11 to 14 years attending a middle school in rural northern California. The overall school enrollment is approximately 270 students with 62 percent of students qualifying from free and reduced meals. Grade level participation included sixth graders (n = 30), seventh graders (n = 27), and eighth graders (n = 15) with females representing 63 percent and males 27 percent of the total sample. Ethnicity of the sample included African American (~ 4%), Asian (~ 4%), Caucasian (~ 73%), Hispanic (~ 6%), Native American (~ 8%), Multiple Race (~ 4%), and Pacific Islander (~ 1%).

Questionnaires

**Self-Efficacy.** The Self-Efficacy Questionnaire-Children (SEQ-C) was used to collect self-efficacy information from middle school students (Muris, 2001) The SEQ-C is a 24-question self-report scale consisting of three sub scales: Academic self-efficacy (8), Social self-efficacy, (8) and Emotional self-efficacy, (8) and is designed to assess these three domains of self-efficacy (Appendix A). Students respond to each item on a 5-point likert scale ranging from 1 (not at all) to 5 (very well). Larger scores are representative of high self-efficacy with respect to each subscale. The Physical Activity Self-Efficacy Scale (PASES) is an eight question survey validated in children (Bartholomew, Loukes, Jowers, & Alluna, 2006; Appendix B). Students score each of the
eight items on a three point scale with scores ranging from 0 (no), 1 (maybe), or 2 (yes). The total number of questions combining subscales was 32.

**Bullying.** The Olweus Bullying Questionnaire (OBQ: Solberg & Olweus, 2003) was used to measure bullying in schools. The OBQ is a 39-item questionnaire has been validated and found reliable measuring two subscales bully perpetration ($\alpha = .88$) and bully victimization ($\alpha = .87$). Students respond to items on a five point Likert scale ranging from “It hasn’t happened to me in the past couple of months”, “Only once or twice”, “2 to 3 times a month”, “About once a week”, and “Several times a week”. The OBQ is a copyrighted instrument and providing examples of specific questions is not permitted with our permission.

**Procedures**

All middle school students in grades 6, 7, and 8 were invited to take part in the project. Informed consent was solicited from each child’s parent/guardian by distributing a project summary and consent forms. Questions concerning the procedures used during participation were encouraged from children and/or parents/guardians. Both parental/guardian consent and individual children’s assent were obtained prior to participation in the project. No coercion to participate or prejudice against those opting not to participate. In addition, once approval had been granted from the HSU Institutional Review Board, all study procedures and documents were reviewed by the school's administrative team that had agreed to participate in the project.

Students returning consent forms were then assigned a unique numeric identifier so that confidentiality was maintained. Questionnaires were then collated into packets
prior to being administered. On the day surveys were administered children were given a standards set of instructions and asked to respond honestly and accurately to all questions. Students were encouraged to ask questions during the session and when finished take their completed questionnaires and place them in manila envelopes that were after all students had completed the surveys.

**Statistics**

The independent variables (IV) for the current investigation were bully perpetrator (yes or no) and bully victim (yes or no) and classified as categorical. The dependent variables (DV) were continuous and included academic self-efficacy, social self-efficacy, emotional self-efficacy, and physical activity self-efficacy. Descriptive statistics (means and standard deviations) were calculated for each of dependent variables and main analysis performed was a multivariate analysis of variance (MANOVA). A conservative alpha level ($\alpha = 0.0125$) was set for the study to prevent type I errors from being committed as separate univariate analysis of variance (ANOVA) procedures were performed to determine significant differences.
RESULTS

The independent variables included victimization (victim OR not a victim) and bullying (uses bullying behaviors OR doesn’t use bullying behaviors) behaviors and the dependent variables were academic self-efficacy, emotional self-efficacy, and physical activity self-efficacy. A two-way multivariate analysis of variance (MANOVA) was used to determine differences between victim and bullying behaviors in self-efficacy perceptions. Follow-up univariate analyses of variance (ANOVA) procedures were used to evaluate group differences with a Bonferroni correction ($\alpha = 0.0125$) to prevent a type I error from being committed. A total of 88 middle school students completed of questionnaires and of those responding only 72 students provided sufficient information to complete the analyses for victim and bullying behaviors, respectively. There were 52 who reported being victims and 30 students reporting bullying behaviors. Table 1 summarizes the descriptive statistics for each category between self-efficacy perceptions.

<table>
<thead>
<tr>
<th>Variables</th>
<th>Victim (n = 52)</th>
<th>Perpetrator</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Not a Victim (n = 20)</td>
<td>NBB (n = 39)</td>
</tr>
<tr>
<td>Academic SE</td>
<td>3.80 (0.63)</td>
<td>3.66 (0.53)</td>
</tr>
<tr>
<td>Social SE</td>
<td>3.82 (0.43)</td>
<td>3.86 (0.48)</td>
</tr>
<tr>
<td>Emotional SE</td>
<td>3.34 (0.64)</td>
<td>3.42 (0.68)</td>
</tr>
<tr>
<td>Physical Activity SE</td>
<td>5.08 (0.84)</td>
<td>4.80 (1.05)</td>
</tr>
</tbody>
</table>

Table 1. Descriptive Statistics for Self-Efficacy Variables

Note. NBB = No Bullying Behaviors; BB = Bullying Behaviors.
The multivariate assumptions of normality and homogeneity of covariance matrices were not violated based on non-significant \( p > .05 \) Shapiro-Wilkes and Box’s test values. Results from the MANOVA indicated that there were no significant differences \( F = (4, 62) \ 0.293 \), Pillai’s Trace = 0.019, \( p = 0.881 \) between groups (victim and perpetrator) across self-efficacy variables. Univariate ANOVA’s used a follow-up analyses also indicated no significant differences for each self-efficacy variable. Figure 1 provides the graphical representation of the data.

Figure 1. Self-Efficacy Mean Scores between Groups

Figure 1. NV = student reporting they were not a victim; V = student reporting that they were a victim; NBB = students reporting not using bullying behaviors; BB = students reporting using bullying behaviors.
DISCUSSION

This study examined four domains of self-efficacy to determine if there were differences in perpetrating and victimization behaviors in the middle school environment. Results indicated there were no significant differences between groups and self-efficacy variables. These results are contrary to studies by Ozer (2004) & Andreau (2005) that found these to be significant variables in bullying behaviors. Contrary to predictions social, emotional, and academic self-efficacy variables showed non-significant \( p \)-values in this study, however trends were present. Victims reported lower academic, social, and physical activity self-efficacy scores that non-victims. Students that reported bullying behaviors had higher academic and physical activity self-efficacy but lower social and emotional self-efficacy than those not using bullying behaviors.

Much literature has found self-efficacy to have impact on self-concept and motivation through social and cognitive interaction, parental influence and other variables such as peer influence. The current investigation did not collect data from students on variables known to influence self-efficacy as the purpose was descriptive and focused on studying differences in self-efficacy between different social groups (i.e., perpetrators and victims). While this study did not have similar findings, previous research implications show the need to study these relationships if we are to develop and implement effective intervention strategies. Interventions must be developmental in nature and aimed at the child’s behaviors, social cognitions, social problem-solving skills,
as well as contextual; focusing on strained relationships with parents and risky peer relationships (Pepler, 2008; AHA, 2006).

Most research on physical activity interventions has targeted individuals between 16 and 65, but recent studies of children 8-12 show targeting sedentary behaviors increases participation in physical activity in this age group (AHA, 2006). The current investigation was interested in analyzing physical activity self-efficacy between perpetrator and victim groups to determine if physical inactivity (lack of self-efficacy) was attributed to group classification. In order to develop school-based intervention strategies research needs to consider mediating factors such as a wider environmental/multilevel approach that includes the developmental and contextual strategies previously mentioned.

More research on self-efficacy in these domains is needed to further minimize bullying, and increase healthy physical activity in young children. The cognitive processes involved in developing a strong sense of self-efficacy across the four domains examined in this study, are individual in nature and are impacted by social environment and interaction, emotional maturity, and perceived abilities. These three domains appear to influence the regulation of negative affective states in adolescents (Muris, 2002). Adolescents are going through tremendous changes cognitively, hormonally, and socially, and continued study of self-efficacy may better describe these changes and their effects on children’s overall wellbeing.

Bullying victims face serious life challenges early that can include shootings, great bodily harm, or suicide. The need to mitigate this behavior has led 20 states to
mandate school intervention programs in an effort to deal with this serious issue. School environment can have a great effect on bullying and mitigate bullying behaviors by having a safe environment, engaged students and positive adult models.

Interventions focused on student engagement offer the most promise because school engagement is a protective factor for victims of bullying, as are engagement with, and encouragement from, adult models during school activities. Engagement may offer the opportunity to discuss victimization and create time for resolving problems, helping victims cope and stay in school. Self-efficacy and victimization are intertwined in ways still unclear at the present time, but perceived self-efficacy and power differential seem to have impact on students ability to choose direction in life and level of school engagement. When this engagement is safe and encouraging giving students feelings of positive self-efficacy, involvement in bullying may be easier to resist, and initial involvement avoided. Intervention with students in the school environment offers the most hope for mitigating bullying behaviors in the long term (OJJP, 2011).

Limitations: The small sample size (N = 72), or approximately 1/3 of those students invited to participate in this study may be seen as a limitation for this study. As Solberg (1994) points out, with the population of bully’s being small, a larger sample size is of particular importance. Additionally, the components performance outcomes, vicarious experiences, verbal persuasion, and physiological feedback that influence an individual’s self-efficacy were not analyzed which would have provided a better understanding of the social context related to middle school students. Baseline data and repeated measures would have provided a more thorough understanding of
developmental changes in student outcomes. Methodological procedures could be considered a limitation due to a number of options in survey administration. First, the proximity of individuals in the survey setting could have given respondents more room for privacy in giving answers and keeping distraction to a minimum. Second, in future research giving individual, rather than group administered surveys might give participants more privacy and less stressful conditions under which to answer questions without being concerned about peer pressure, or other age groups in the room, (important in this age cohort). Muris (2002) indicated that scales administered during regular classes provided significant results. To prevent intrusion into student’s academic routines, questionnaires were administered during the afternoon and time of day may have had impact on results as well.

**Implications for Social Work:** Social workers working in schools deal with self-efficacy related issues every day when called to intervene in bullying, academic problems, family and individual issues. Each of these issues deals with the cognitive processing, motivation, decision-making, and perceived abilities of students and their families inherent in self-efficacy’s manifestation in schools. Children make choices every day based on self-efficacy level that can have lifelong implications and this study may aid social work in improving methodology in future research design. This study will also add to the body of social work literature.
REFERENCES


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research, 66(4), 543-578.


Appendix 1

*Academic self-efficacy*

How well can you get teachers to help you when you get stuck on schoolwork?
How well can you study when there are other interesting things to do?
How well can you study a chapter for a test?
How well do you succeed in finishing all your homework every day?
How well can you pay attention during every class?
How well do you succeed in passing all subjects?
How well do you succeed in satisfying your parents with your schoolwork
How well do you succeed in passing a test?

*Social self-efficacy*

How well can you express your opinions when other classmates disagree with you?
How well can you become friends with other children?
How well can you have a chat with an unfamiliar person?
How well can you work in harmony with your classmates?
How well can you tell other children that they are doing something that you don’t like?
How well can you tell a funny event to a group of children?
How well do you succeed in staying friends with other children?
How well do you succeed in preventing quarrels with other children?

*Emotional self-efficacy*

How well do you succeed in cheering yourself up when an unpleasant event has happened?
How well do you succeed in becoming calm again when you are very scared?
How well can you prevent to become nervous?
How well can you control your feelings?
How well can you give yourself a pep talk when you feel low?
How well can you tell a friend that you don’t feel well?
How well do you succeed in suppressing unpleasant thoughts?
How well do you succeed in not worrying about things that might happen?

Appendix 2

Physical activity self-efficacy scale, (PASES)

1. How sure are you that you can prefer to jog between lessons?

2. How sure are you that you can physically be active 3-5 times a week?

3. How sure are you that you can exercise most of the time during your physical exercise lesson and sustain being active?

4. How sure are you that you can improve your physical competence by jogging or riding a bike 3-5 times a week?

5. How sure are you that you can maintain your pace without stopping for 15-20 minutes when you are physically active?