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8	Psychological and behavioral correlates of early adolescents' physical literacy
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Abstract

2	Purpose. Physical literacy is understood to be important for adolescents' behavioral
3	and psychological wellness. Yet, to date, limited empirical data exists to support such
4	reasoning. Addressing this gap, the present study examined relationships between physical
5	literacy and early adolescents' physical education (PE) engagement, leisure-time exercise
6	behavior, and psychological well-being. <i>Method</i> . The physical literacy level of 187 early
7	adolescents ($M_{age} = 12.84$, $SD = .55$, girls = 99) was measured using the Canadian Assessment
8	for Physical Literacy (Healthy Active Living and Obesity Research Group, 2014). One week
9	later, data pertaining to standardized measures of engagement in PE, leisure-time exercise
10	behavior, and psychological well-being were collected. <i>Results</i> . Structural equation modeling
11	revealed that physical literacy was positively correlated with PE engagement, leisure-time
12	exercise, positive affect, and vitality, whereas it was negatively correlated with negative
13	affect. <i>Conclusion</i> . Findings from this work substantiate the contention that physical literacy
14	has manifold benefits for an early adolescents' behavioral and psychological wellness.
15	Keywords: Physical education, engagement, exercise, well-being.
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Introduction

2 Physical literacy is understood to be important for child and adolescent development 3 and health (e.g., Society of Health and Physical Educators America [SHAPE], 2013; United 4 Nations Educational, Scientific and Cultural Organization [UNESCO], 2015; Whitehead, 5 2010). To date, physical literacy has been largely studied in regard to conceptualization, 6 measurement, usefulness, and practical development (e.g., Tremblay & Lloyd, 2010; 7 Whitehead, 2010). Such work has supported the adoption of several physical literacy 8 interventions that show promise in supporting the health and well-being of children and 9 adolescents (e.g., SHAPE, 2013; UNESCO, 2015). Yet despite advancements in 10 measurement, it is surprising that very few studies have investigated the health-related 11 behavioral and psychosocial outcomes of physical literacy. This study will therefore address 12 this void in the extant literature by testing relationships between physical literacy and 13 engagement in physical education (PE), leisure-time exercise behavior, and psychological 14 well-being.

15 **Physical Literacy**

16 One of the most widely cited definitions of physical literacy describes it as the 17 motivation, confidence, physical competence, knowledge and understanding to value and take 18 responsibility for engagement in physical activities for life (International Physical Literacy 19 Association, 2017). From this perspective, physical literacy is considered a holistic construct 20 that encompasses not only a physical component, but also cognitive (i.e., knowledge and 21 understanding), psychological (i.e., motivation and confidence) and behavioral (i.e., physical 22 activity behavior) elements. Recently, a large-scale empirical study of physical literacy (Royal 23 Bank of Canada Learn to Play-Canadian Assessment of Physical Literacy, 2018) has been 24 reported by Tremblay and his colleagues using their Canadian Assessment of Physical 25 Literacy (CAPL) measurement tool (Healthy Active Living and Obesity Research Group

1 [HALO], 2014; Longmuir et al., 2015; Tremblay et al., 2018). The CAPL is currently the 2 only, and widely accepted, measurement tool available for assessing holistic physical literacy 3 that has peer-reviewed support for its systematic development, validity, and reliability 4 (HALO, 2014; Francis et al., 2016; Longmuir et al., 2015). Within the CAPL, an overall 5 physical literacy score is calculated based on measures relating to the four domains identified 6 by the International Physical Literacy Association definition (i.e., physical competence, 7 motivation and confidence, knowledge and understanding, daily behavior). Initial data from a 8 sample of 10,034 Canadian children showed that boys and older children tended to have 9 higher levels of physical literacy than girls and younger children (Tremblay et al., 2018). 10 Using the Royal Bank of Canada Learn to Play-CAPL data, associations among the 11 different aspects of physical literacy have been reported (Belanger et al., 2018; Lang et al., 12 2018). Lang et al. (2018) reported a positive relationship between overall physical literacy and 13 cardiorespiratory fitness. Similarly, Belanger et al. (2018) reported a positive relationship 14 between physical literacy and physical activity and a negative relationship between physical 15 literacy and sedentary behavior. Collectively, these findings provide initial insight into the 16 value of physical literacy, yet further empirical research exploring the relationships between 17 physical literacy and a broader array of health and well-being outcomes is needed (Longmuir 18 & Tremblay, 2016). In this study, we focus on outcomes related to engagement in school PE, 19 self-reported leisure-time exercise behavior, and psychological well-being.

20 Physical literacy and engagement in school PE

Engagement, broadly defined, is an individual's level of active involvement in a learning activity (Skinner & Belmont, 1993). When engaged, individuals demonstrate focus, interest, and persistence (Reeve, Jang, Carrell, Jeon & Barch, 2004). In school contexts, engaged pupils are believed to challenge themselves, act independently, and exert intense effort and concentration and generally show positive emotions such as enthusiasm, optimism

1	and curiosity when completing tasks (Skinner & Belmont, 1993). To this end, empirical
2	research has shown engagement to be positively associated with several adaptive outcomes in
3	school, including greater achievement, enhanced learning, and better skill development
4	(Skinner & Belmont, 1993). When assessed in school contexts, academic engagement has
5	been measured via four core elements, namely behavioral (i.e., active participation with effort
6	and persistence), cognitive (i.e., psychological investment in learning and cognition within
7	tasks), emotional (i.e., feelings in relation to teachers, peers and school), and agentic (i.e.,
8	student contribution to the flow and instruction received) (Reeve & Tseng, 2011).
9	Although engaged participation in PE is considered important for physical activity and
10	health (Sallis et al., 2012), researchers have not explored the interplay among physical literacy
11	and PE engagement. This is somewhat surprising as physical literacy and its components are
12	likely to be highly influential in how pupils behave, think, and feel in PE. For instance, one
13	component of physical literacy – motivation – is well understood to be influential in pupil
14	engagement (e.g., Curran, Hill, Ntoumanis, Hall, & Jowett, 2016; Reeve et al, 2004).
15	Relatedly, competence is an important antecedent of well-integrated motivation (Ryan &
16	Deci, 2017) and as such, integration of physical competence and confidence within physical
17	literacy makes it likely to also be influential in PE engagement. Other research is also
18	suggestive. Two systematic reviews demonstrate a positive relationship between motor
19	competence (a component of physical competence) and behavioral engagement in physical
20	activity broadly (Lubans, Morgan, Cliff, Barnett & Okely, 2010). Likewise, the reported
21	positive relationship established between children's physical literacy and physical activity
22	behavior (Belanger et al., 2018) provides further evidence of the importance of physical

24 skills have been shown to relate to enhanced moderate to vigorous physical activity (MVPA)

literacy towards behavioral engagement to physical activity. Further, higher levels of motor

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Physical literacy and leisure-time exercise behavior

time in PE (Fairclough, Stratton & Baldwin, 2002). Collectively, theory and research suggest
 that physical literacy is likely to share a positive association with engagement in PE.

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4 Participation in regular exercise or physical activity during adolescence has long been 5 associated with a range of positive health outcomes (Hallal, Victoria, Azevedo, & Wells, 6 2006; Janssen & LeBlanc, 2010; Poitras et al., 2016; Telema et al., 2014). Although the terms 7 are often used interchangeably, physical activity concerns any bodily movement that results in 8 energy expenditure, whereas exercise reflects the planned and purposeful engagement with 9 physical activity (Caspersen, Powell, & Christenson, 1985). Individuals are likely to engage 10 in physical activity behaviors of varying frequencies, intensities, durations, and types 11 throughout their daily lives. However, sufficient time periods of MVPA are currently 12 advocated for health benefit (World Health Organization [WHO], 2010). For young people, a 13 minimum of 60 minutes MVPA per day is recommended (WHO, 2010). Yet, data show that 14 only a limited number of young people meet MVPA recommendations worldwide (Sallis et 15 al., 2016; Tremblay et al., 2016). Given that much incidental physical activity has been 16 engineered out of daily living (Katzmarzyk & Mason, 2009), more purposeful engagement in 17 physical activity during free time (i.e., leisure-time exercise) is often required to achieve health-enhancing levels of physical activity. Thus, it is important to understand the factors 18 19 associated with leisure-time exercise behavior.

Physical literacy may be one construct that is positively associated with exercise
behavior because its core components (i.e., physical competence, motivation, confidence and
knowledge, and understanding) are considered important correlates or determinants of
lifelong physical activity (Longmuir & Tremblay, 2016). Evidence is generally supportive of
the importance of physical literacy towards exercise behaviors and overall physical activity in
young people (e.g., Belanger et al., 2018; Biddle, Atkin, Cavill, & Foster, 2011). The

1 relationship between physical literacy and physical activity during free time (i.e., leisure-time 2 exercise) is, however, yet to be explored. However, research appears supportive of a positive 3 relationship. For example, Taylor, Ntoumanis, Standage, and Spray (2010) reported that 4 perceived competence positively predicted exercise intentions and leisure-time physical 5 activity during adolescence. Similarly, research has shown adolescents' perceived athletic 6 competence at the beginning of the academic year to predict sport and exercise participation 7 7- and 14-months later (Papaioannou, Bebetsos, Theodorakis, Christodoulidis, & Kouli, 8 2006). Further, during childhood, higher levels of motor coordination at baseline have been 9 found to predict sport participation (considered volitional) two years later (Vandorpe et al., 10 2012). As such, we consider theory and past research to be supportive of a positive 11 relationship between physical literacy and leisure-time exercise behavior.

12 **Physical literacy and psychological well-being**

13 Alongside engagement in PE and leisure-time exercise behavior, physical literacy is 14 likely to contribute to psychological well-being among children and adolescents. 15 Psychological well-being is a multidimensional construct consisting the presence of positive 16 affect, the absence of negative affect, and the presence of vitality (Ryan & Frederick, 1997). 17 Positive and negative affect are hedonic indicators of psychological well-being and encapsulate feelings of pleasure or distress respectively. Vitality is a eudemonic form of 18 19 psychological well-being and encapsulates a relative state of "energy and aliveness" (Ryan & 20 Frederick, 1997, p. 530). Recent reports document a rise in mental health issues amongst 21 young people, thus there is an urgent need to explore factors related to the psychological well-22 being of children and adolescents (WHO, 2017).

As a construct that draws upon factors from a range of domains (i.e., physical,
affective, cognitive), physical literacy may represent an important foundation to young
people's psychological well-being. Indeed, and drawing upon the philosophical concept of

1 embodiment, Whitehead (2010) proposed that physical literacy is an important individual 2 capability that makes a significant contribution to quality of life. One potential mechanism 3 linking physical literacy to enhanced psychological well-being is via physical competence and associated perceptions of competence (i.e., confidence). Indeed, experiencing perceptions of 4 5 competence is considered essential for psychological growth and wellness (Ryan & Deci, 6 2017). Research supports these ideas. For example, studies have demonstrated a positive 7 association between satisfaction of the psychological need for competence in physical activity 8 related contexts and aspects of psychological well-being (e.g., Standage, Duda, & Ntoumanis, 9 2003; Standage & Gillison, 2007). Additionally, higher levels of physical competence have 10 been associated with more pleasurable physical activity experiences (Carroll & Loumidis, 11 2001). Collectively, then, theory and past research are supportive of a positive association 12 between physical literacy and psychological well-being.

13 The Present Study

14 Physical literacy has been identified as being influential for child and adolescent 15 health. Yet to date very little research has been conducted to examine the outcomes of 16 physical literacy. Accordingly, the aim of this study was to test associations of physical 17 literacy with early adolescents' PE engagement, leisure-time exercise behavior, and psychological well-being (i.e., indexed by scores to measures of positive affect, negative 18 19 affect, and vitality). Based on the aforementioned theory and past empirical research, we 20 hypothesized that physical literacy would positively correlate with PE engagement, leisure-21 time exercise behavior, vitality, and positive affect. By contrast, it was hypothesized that 22 physical literacy would negatively correlate with negative affect. 23

Method

Participants and Procedure 24

1	Prior to commencing the study, ethical approval was provided by the research ethics
2	approval committee of the lead author's university. A sample of 187 participants ($M_{age} =$
3	12.84, SD =.55, girls = 99, boys = 87, ethnicity = 93% White) were recruited from two schools
4	from South Wales. These participants were invited to complete the Canadian Assessment for
5	Physical Literacy (CAPL: HALO, 2014). Following the CAPL guidance (HALO, 2014), the
6	CAPL was administered over a two-day period. On day one, participants completed the
7	obstacle course, plank and anthropometric measures, and were issued with a pedometer. On
8	day two, participants completed PACER test, sit and reach test, grip strength test, and
9	completed the CAPL questionnaire. Pedometers were collected after a minimum of eight days
10	at a convenient time for schools. One week following the CAPL measurements, a multi-item
11	questionnaire pack was administered to assess the participants' engagement in PE, leisure-
12	time exercise behavior, positive and negative affect, and vitality. Data were collected
13	throughout the school year.
14	Instruments
15	Physical literacy. The Canadian Assessment for Physical Literacy, Version 1 (CAPL;
16	HALO, 2014) was used to measure physical literacy. An overall physical literacy score (out of
17	100) is calculated from the CAPL from the subcomponent scores of daily behavior,
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18 motivation and confidence, knowledge and understanding, and physical competence. Based

19 on their overall physical literacy score, participants are categorized as 'beginning',

20 'progressing', 'achieving', or 'excelling' on their physical literacy journey.

Daily behavior was assessed using a seven-day pedometer step count protocol and via self-reported MVPA and sedentary behavior. A pedometer (Fastime-Ped 1, Leicestershire, England) was distributed to all participants to wear for eight consecutive days. Consistent with the CAPL manual (Version 1), participants recorded their daily step count using the pedometer tracking log provided in the CAPL manual (HALO, 2014). Day one was used as a

1 familiarization day and these data were not recorded and used in analysis. As outlined in the 2 CAPL manual (HALO, 2014), a minimum wear time of 10 hours per day (Eisenmann, 3 Laurson, Wickel, Gentile, & Walsh, 2007), and step counts between 1,000 and 30,000 steps 4 were considered valid (Tudor Locke, McClain, Hart, Sisson, & Washington, 2009). Further, at 5 least three or more valid days of pedometer measurement was required to be included in the 6 final analysis (Tudor-Locke et al., 2009). As outlined in the CAPL manual, pedometer step 7 counts provide a more direct, objective measure for physical activity than self-reported data 8 (HALO, 2014). Moreover, and in comparison to accelerometers, the relatively low cost, 9 simplicity of initialization and analysis, reliability, and unobtrusive nature of pedometers 10 make them an ideal tool for researchers to use with large samples (Colley, Janssen & 11 Tremblay, 2012). Previous research with the CAPL has supported the effectiveness of 12 following these protocols for collecting and analyzing pedometer step counts with groups of 13 young people (e.g., Tremblay et al., 2018; see Corder, Ekelund, Steele, Wareham & Brage, 14 2008 regarding the reliability and validity of different methods of assessing physical activity). 15 MVPA levels were recorded via self-report of the number of days in the past week that 16 participants were physically active for at least 60 minutes. Specifically, participants were 17 asked "During the past week (7 days), on how many days were you physically active for a total of at least 60 minutes per day? (all the time you spent in activities that increased your 18 19 heart rate and made you breathe hard)." Sedentary behavior scores were calculated from 20 participant responses to the number of hours they usually spend watching TV and playing 21 video games on a school day or a weekend day. Information on the validity and reliability of 22 scores to these self-reported measures have previously been reported in the Youth Risk 23 Behavior Surveillance System (Brener et al., 2013). Pedometer scores, MVPA, and sedentary 24 behavior scores were calculated using the scoring systems provided in the CAPL manual

1 (HALO, 2014). A total daily behavior score out of 32 was calculated by adding the CAPL 2 pedometer step score to the total screen time score and the weekly time spent in MVPA. 3 Motivation and confidence were assessed using the Children's Self-Perceptions of 4 Adequacy in and Predilection for Physical Activity (CSPAPPA; Hay, 1992). This scale 5 requires participants to respond to a range of items in answer to the stem "what is most like 6 you". Participants firstly select from two options (e.g., Adequacy - "some kids are good at active games" or "other kids find active games hard to play", and Predilection – "some kids 7 8 don't like playing active games"), before outlining if the statements were "really true" or "sort 9 of true" for them. Individual adequacy and predilection items are scored from one to four. 10 Adequacy scores were then summed, multiplied by 1.5 and divided by seven (HALO, 2014). 11 Predilection scores were summed and divided by nine (HALO, 2014). Overall motivation and 12 confidence scores were calculated by adding the adequacy and predilection scores. 13 Participants also respond to two individual items asking them to rate their own activity and 14 skill levels with that of their peers on a 1-10 Likert scale. This score is divided by 10 and 15 added to the adequacy and predilection scores to provide an overall motivation and 16 confidence out of 14. The benefits to barriers ratio score was not included due to issues with 17 children misunderstanding items from this measure. Similar findings have been reported elsewhere (e.g., Gunnell et al., 2018). However, and in order to maintain an overall score out 18 19 of 18 for the motivation and confidence domain, a fractional method was used to scale the 20 score out of 14 up to 18. The overall score out of 14 was divided by 14 then multiplied by 18. 21 Scores provided to the CSPAPPA have previously shown good test-retest reliability and 22 adequate validity (Hay, 1992).

Knowledge and understanding was assessed using the questionnaire developed
specifically for the CAPL (HALO, 2014). Within this, an overall knowledge and
understanding score out of 18 is calculated from participant responses to items relating to the

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participant's knowledge of the physical activity and sedentary behavior recommendations,
awareness of fitness and movement skill parameters and methods for their improvement, use
of safety equipment during physical activity and perceptions of health (HALO, 2014;
Longmuir et al., 2015). An example item for the knowledge and understanding component
asked participants to circle one of four responses to the question, "if your wanted to get better
at a sport skill like kicking and catching a ball, what would be the best thing to do?" Scores
provided to the knowledge and understanding domain have been shown to provide support for
the factorial structure of this component as part of an overall physical literacy score
(Longmuir et al., 2015).
Finally, physical competence was calculated by adding the participants CAPL scores
for motor competence, musculoskeletal fitness, cardiorespiratory fitness, and body

12 composition (HALO, 2014). Motor competence was calculated from individual scores on the

13 Canadian Agility and Movement Skill Assessment (CAMSA; Longmuir et al., 2017).

14 Participant skills within the CAMSA were assessed by the lead author. Musculoskeletal

15 fitness was calculated from pupils scores on the sit and reach assessment of flexibility

16 (Canadian Society for Exercise Physiology, 2013), an assessment of grip strength (Canadian

17 Society for Exercise Physiology, 2013), and the assessment of plank torso strength (Boyer et

al., 2013). Cardiorespiratory fitness was assessed using the Fitnessgram 20m progressive

19 aerobic cardiovascular endurance run (PACER; Meredith & Welk, 2010). Finally, body

20 composition was assessed using body mass index (height, weight; Canadian Society for

21 Exercise Physiology, 2013) and waist circumference (Canadian Society for Exercise

22 Physiology, 2013). The overall score for physical competence out of 32 was calculated using

the scoring system outlined in the CAPL manual (HALO, 2014).

Scores provided to the CAPL have been shown to provide a valid and reliable measure
of physical literacy, as defined by the International Physical Literacy Association (2017).

First, extensive development of the CAPL via a 3-round Delphi process with 19
internationally-leading physical activity/fitness experts ensured agreement on the validity of
the overall conceptualization, the specific assessment protocols included, and the scoring
system incorporated within the measure (Francis et al., 2016). Second, further testing of the
CAPL with a large sample of participants demonstrated acceptable factorial structure for the
measure along with close relationships with teacher derived ratings (Longmuir et al., 2015).

7 Engagement in PE. Engagement in PE was measured using an adapted version of the 8 classroom engagement measure developed by Reeve and Tseng (2011). This measure assesses 9 agentic (e.g., "during PE, I ask questions"), behavioral (e.g., "I pay attention in PE"), emotional (e.g., "PE is fun") and cognitive (e.g., "when I study, I try to relate what I'm 10 11 learning to what I already know") components of engagement. Participants were asked to 12 respond to 19-items on a 7-point Likert scale to indicate the extent to which they agree. 13 Scores to this measure have previously demonstrated acceptable factorial structure and 14 internal consistency ($\alpha = .87$; Cheon, Reeve & Moon, 2012; Reeve & Tseng, 2011).

15 Leisure-time exercise behavior. Leisure-time exercise behavior was assessed using the Leisure Time Exercise Questionnaire (LTEQ; Godin & Shephard, 1997). Responses to the 16 17 LTEQ require participants to report how many times over a typical week they have spent undertaking strenuous, moderate and light exercise of at least 15 minutes during their free 18 19 time. An overall leisure-time exercise score is calculated using the following formula (total 20 exercise score = [number of strenuous bouts x 9] + [number of moderate bouts x 5] + [number21 of light bouts x 3]). Scores to this measure have demonstrated support for the LTEO's 22 psychometric properties in child samples (e.g., Biddle, Gorely, Pearson, & Bull, 2011). For 23 example, a test-retest reliability coefficient of $\alpha = .74$ has been reported (Godin & Shephard, 1985). Further, validity and reliability of LTEQ scores have been judged as acceptable in two 24

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reviews (Biddle, Gorely, Pearson, & Bull, 2011; Hidding, Chinapaw, van Poppel, Mokkink,
 & Altenburg, 2018).

3 **Psychological well-being.** The 10-item positive and negative affect schedule for 4 children (PANAS-C; Ebesutani et al., 2012) was used to assess the participants' positive and 5 negative affect. To assess positive affect, participants reported the extent to which they felt 6 happy, cheerful, proud, joyful, and lively, over the past few weeks using a 5-point Likert 7 scale. Conversely, to assess negative affect, participants indicated on the same Likert scale, 8 the extent to which they felt sad, scared, miserable, afraid, and mad. Scores provided to the 9 PANAS-C have demonstrated acceptable factorial structure and internal consistency (i.e., 10 positive affect $\alpha = .86$, negative affect $\alpha = .82$; Ebesutani et al., 2012). Vitality was measured 11 using the subjective vitality scale (Ryan & Frederick, 1997; Bostic, Rubio, & Hood, 2000). 12 Within this tool, participants responded to 6-items (e.g., "I feel alive and vital") on a 7-point 13 Likert scale. Scores provided to the subjective vitality scale have been shown to support 14 acceptable factorial structure (Ryan & Frederick, 1997) and good internal consistency in 15 adolescent samples (e.g., $\alpha = .88$; Taylor & Lonsdale, 2010).

16 Analytic Strategy

17 Initially, descriptive statistics (i.e., means, standard deviations, correlations, alpha coefficients) were calculated. Using AMOS version 22.0 (Arbuckle, 2013), the main analysis 18 19 was then undertaken using two-phased structural equation modeling procedure (Anderson & 20 Gerbing, 1988). Initially, a measurement model was tested using confirmatory factor analysis 21 (CFA). This enabled the adequacy of the relationships between individual items and their 22 latent constructs to be examined. Following the CFA, a structural equation model 23 encompassing the hypothesized relationships was tested. The overall fit of data for both the 24 measurement and structural models was assessed by using a set of fit indices which compare 25 the variance-covariance matrix of the sample data to the variance-covariance matrix of the

1	model-implied data. A close match between sampled and hypothesized variances and
2	covariances, as indicated by the fit statistics, would show the hypothesized data to be
3	adequately represented by the sample data. The fit of the measurement and structural models
4	were determined using conventional standards and deemed acceptable if CFI and TLI \geq .90
5	and RMSEA and SRMR \leq .10 (Marsh, Hau, & Wen, 2004). Statistical significance was set at
6	p = .05. Effect sizes were calculated as the proportion of variance shared by physical literacy
7	and each dependent variable using the coefficient of determination (i.e., R_2).

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Results

9 **Preliminary Analysis**

10 One hundred and eighty-seven children commenced the CAPL physical competency 11 protocols, CAPL questionnaire, and were administered with a pedometer. Missing value 12 analysis showed that 127 participants had complete physical competency data (i.e., nine 13 complete protocols). Missing physical competence data emerged as a result of absence on day 14 of testing (n = 32) and declining participation on a specific protocol (n = 28). Following the 15 CAPL manual guidance (HALO, 2014, p.18), a fractional method was used to calculate an 16 overall physical competence score from the participants' available protocol results. 17 Additionally, 68 participants (36%) failed to provide valid pedometer data (HALO, 2014), leading to further missing data. Given that a total physical literacy score can be calculated 18 19 with a maximum of one complete missing protocol (HALO, 2014; Francis et al., 2016), 20 participants with only the pedometer step count score missing were retained in the sample. 21 To maintain the pattern of physical literacy scores, for participants only missing the 22 pedometer step count score, a fractional imputation method was used. Here, the overall 23 physical literacy score (out of 100) was determined by dividing the total score recorded from 24 the completed protocols by the maximum possible score (i.e., 79), and then multiplying this 25 number by 100. This yielded a final sample of 158 with complete physical literacy data. Of

1	these, 150 were available to complete the follow up questionnaire pack. Analysis of missing
2	values at time point two revealed 14 participants with over 10% missing data or incomplete
3	leisure time exercise data. These participants were removed, leaving a total of 136
4	participants. A mean-substitution from the completed sub-scale items was utilized to impute
5	remaining missing data. In accordance with Tabachnick and Fidell (2007), 11 significant
6	univariate outliers were identified and removed (z-scores larger than 3.29, $p < .001$) and no
7	multivariate outliers were identified using Mahalanobis distances greater than $\chi_2(9) = 27.88$
8	($p < .001$). Following the removal of these cases, a final sample of 125 participants was
9	available for analysis ($M_{age} = 12.82$, $SD = .54$, girls = 69, boys = 55, 1 not disclosed).
10	Bivariate correlations, means, standard deviations, and alpha coefficient values are
11	shown in Table 1. Analyses revealed positive relationships between physical literacy and all
12	elements of PE engagement, leisure-time exercise behavior, positive affect, and vitality. There

13 was a negative correlation between physical literacy and negative affect. These findings lend14 initial support to our hypotheses.

15 **Primary analysis**

16 The measurement model contained four latent variables (PE engagement with four 17 sub-scale indicators, positive affect with 5 item indicators, negative affect with 5 item indicators, and vitality with 6 item indicators) and two observed variables (physical literacy 18 19 and leisure time physical activity). Covariances were specified between the disturbance terms 20 of positive affect, negative affect, and vitality to reflect the common association among these 21 variables in previous empirical research (e.g., Gagne, Ryan & Bargmann., 2003). Analyses of 22 individual factor loadings from the measurement model revealed two items from the negative 23 affect scale loaded poorly (i.e., < .40; Hair, Black, Babin, & Anderson, 2010) onto their respective latent variable and were therefore removed. With these items removed, the 24 25 measurement model demonstrated good fit to the data (TLI = .94, CFI = .95, $\chi_2 = 205.01$

1	(157), $p < .05$, RMSEA = .05, SRMR = .06). In stage two, the hypothesized structural model
2	was tested. Fit statistics showed the structural model to have an adequate fit to the data (TLI =
3	.91, CFI = .93, χ_2 = 236.59 (164), $p < .05$, RMSEA = .06, SRMR = .11). Detailed analysis of
4	the structural model showed several significant relationships between the study variables that
5	are presented in Figure 1. Physical literacy was significantly and positively related to
6	engagement in PE (β = .57, p < .001, R_2 = .33), levels of leisure-time exercise (β = .38, p <
7	.001, $R_2 = .14$), vitality ($\beta = .53$, $p < .001$, $R_2 = .28$), positive affect ($\beta = .39$, $p < .001$, $R_2 = .28$)
8	.15), and significantly and negatively related to negative affect ($\beta =25$, $p < .05$, $R_2 = .06$).
9	Overall, physical literacy explained 33% of variance in PE engagement, 14% of variance in
10	leisure-time exercise, 28% of variance in vitality, 15% of variance in positive affect, and 6%
11	of variance in negative affect.

Discussion

13 As recently highlighted by scholars (e.g., Longmuir & Tremblay, 2016), an important 14 and missing avenue of research pertains to better understanding the outcomes of physical 15 literacy. In an initial attempt to address this gap, we examined the relationships between 16 physical literacy and engagement in PE, leisure-time exercise behavior, and the psychological 17 well-being of early adolescents. Using a prospective design, the results of the present work 18 support the importance of physical literacy by demonstrating positive relationships between 19 physical literacy and engagement in PE, leisure-time exercise behavior, and psychological 20 well-being as well as a negative association between physical literacy and negative affect.

21 **Physical Literacy and Engagement in PE**

Results of this study showed a positive relationship between physical literacy and engagement in PE. The positive association with physical literacy and engagement in PE has several important implications. First, as a context that provides structured physical activity experiences for all young people, engagement in PE is highly salient for physical health (e.g.,

1 Fairclough, Stratton, & Baldwin, 2002; Sallis et al., 2012). One of the ways through which 2 physical literacy may enhance physical health, then, is via heightened engagement in PE. 3 Second, our findings highlight the potential risks of disengagement from secondary school PE 4 among pupils who have not vet developed adequate levels of physical literacy. It appears 5 essential that physical educationalists consider how their pedagogical approaches support the 6 needs of all pupils and particularly those with lower levels of physical literacy. Strategies such 7 as making activities meaningful and relevant, providing choice, optimal challenge, and 8 structure are essential (Ntoumanis & Standage, 2009). Finally, research shows that 9 engagement and motivation share a reciprocal relationship (e.g., Curran et al., 2016). Hence, it 10 is likely that just as physical literacy contributes to PE engagement, PE engagement may also 11 contribute to physical literacy.

12 Physical Literacy and Leisure-Time Exercise

13 We also found that physical literacy shared a positive association with leisure-time 14 exercise. This finding adds to the recent results of Belanger et al.'s (2018) work wherein they 15 reported a positive relationship between physical literacy and physical activity and a negative 16 association between physical literacy and sedentary behavior. Considering that much 17 incidental physical activity has been removed from daily lives (Katzmarzyk & Mason, 2009), achieving health-enhancing levels of physical activity requires participation in more 18 19 purposeful activity (i.e., leisure-time exercise). Thus, the positive relationship between 20 physical literacy and leisure-time exercise behavior reported in our work has important health 21 implications for young people. First, short-term benefits of exercise participation include 22 enhanced musculoskeletal and cardiovascular health and fitness, lowered fat mass, and higher 23 self-esteem (Hallal et al., 2006; Janssen & LeBlanc, 2010). Second, longer-term benefits may 24 be associated with participation in leisure-time exercise during adolescence, potentially, via

18

the tracking of exercise behaviors into young adulthood and/or by offsetting the development
 of future health conditions (Hallal et al., 2006; Telema et al., 2014).

3 Physical Literacy and Psychological Well-being

4 The results from this study also demonstrated a positive relationship between physical 5 literacy and positive affect and vitality. Conversely, physical literacy shared a negative 6 association with negative affect. Previous research has demonstrated positive relationships 7 between physical activity and psychological well-being (Poitras et al., 2016). Further, within 8 her philosophical basis for physical literacy, Whitehead (2010) suggests that being "physically 9 literate can make a significant contribution to quality of life" (p. 32). The positive 10 relationships found between physical literacy and positive affect and vitality lends support to 11 these ideas. Here, our findings indicate how, in addition to developing physical health, 12 supporting the development of physical literacy can also hold important psychological 13 benefits for young people. This is particularly important given the rising mental health issues 14 reported amongst young people (WHO, 2017), with our findings suggesting that physical 15 literacy may be one pathway through which these issues might be alleviated.

16 Limitations and future research

17 This study has limitations. The homogenous nature of the sample means that findings cannot be generalized. Relatedly, the small effective sample size used is also a limitation. 18 19 Future research should therefore aim to further explore outcomes associated with physical 20 literacy in larger and more diverse samples. The recent release of a streamlined CAPL 2.0 21 (HALO, 2017) enhances the practicalities of such research by decreasing the burden on 22 participants, gatekeepers, and researchers. However, the use of this tool is not without 23 challenges. Specifically, we were able to maintain sample size in our study through following 24 guidance in the CAPL 1.0 manual (HALO, 2014) to maintain some participants only missing 25 pedometer step count within our sample. Yet, in the CAPL 2.0, this is not advised, meaning

1 future research may require large sample sizes to account for attrition. Further, detailed 2 analysis of the true nature of missing pedometer data is advised. Additionally, some 3 participants in our sample were 12-13 years of age, slightly above the age range of the CAPL. 4 However, at present there is not an alternative, validated measure for assessing the physical 5 literacy of adolescents. Future work should seek to address this gap. Yet, it is of note that a 6 ceiling effect was not detected in the sample, hence suggesting the CAPL to potentially be a 7 suitable measure of physical literacy for 13-year old pupils. Next, and despite the prospective 8 nature of the research design, the data remains correlational and therefore causal relationships 9 cannot be inferred. Likewise, we cannot ascertain the directionality of relations. In the case of 10 PE engagement and leisure-time exercise, reciprocal relationships are especially likely. 11 Longitudinal research is therefore required to monitor variables over time. Finally, and 12 although past work has demonstrated mean differences among physical literacy dimensions to 13 exist (Tremblay et al., 2018), it would be interesting in future work with appropriately 14 powered sample to examine the invariance of associations among physical literacy and 15 outcome variables across potentially important covariates such as age (including relative age 16 effect), gender, socioeconomic status, and cultural background.

17

Conclusion

This study adds to a vastly limited body of empirical research examining the correlates of physical literacy in early adolescents. The present findings show physical literacy to contribute to a number of adaptive outcomes including PE engagement, leisure-time exercise behavior, and psychological well-being. As such, our findings support the longstanding contention that physical literacy contributes to young people's development, health, and wellness. Further to this, our data also adds to the assertion that the development of physical literacy should be a target of early intervention (Whitehead, 2010).

25

1	References
2	Anderson, J., & Gerbing, D. (1988). Structural equation modeling in practice: A review and
3	recommended two-step approach. Psychological Bulletin, 103, 411-423.
4	Arbuckle, J. L. (2013). Amostm 22 user's guide. Chicago, IL: SPSS.
5	Belanger, K., Barnes, J., Longmuir, P., Anderson, K., Bruner, B., & Copeland, J.,
6	Tremblay, M. (2018). The relationship between physical literacy scores and adherence
7	to Canadian physical activity and sedentary behavior guidelines. BMC Public
8	<i>Health</i> , 18(S2).
9	Biddle, S., Atkin, A. J., Cavill, N., & Foster, C. (2011). Correlates of physical activity in
10	youth: A review of quantitative systematic reviews. International Review of Sport and
11	Exercsie Psychology, 4, 25-49.
12	Biddle, S., Gorely, T., Pearson, N., & Bull, F. (2011). An assessment of self-reported physical
13	activity instruments in young people for population surveillance: Project
14	ALPHA. International Journal of Behavioral Nutrition and Physical Activity, 8, 1.
15	Bostic, T. J., Rubio, D. M., & Hood, M. (2000). A validation of the subjective vitality scale
16	using structural equation modeling. Social Indicators Research, 52, 313-324.
17	Boyer, C., Tremblay, M., Saunders, T., McFarlane, A., Borghese, M., Lloyd, M., &
18	Longmuir, P. (2013). Feasibility, validity, and reliability of the plank isometric hold as
19	a field-based assessment of torso muscular endurance for children 8–12 years of
20	age. Pediatric Exercise Science, 25, 407-422.
21	Brener, N.D., Kann, L., Shanklin, S., Kinchen, S., Eaton, D.K., Hawkins, J., & Flint, K.H.
22	(2013). Methodology of the Youth Risk Behavior Surveillance System. Morbidity and
23	Mortality Weekly Report, 62(1), 1-20.

1	Canadian Society for Exercise Physiology. (2013). Canadian society for exercise physiology
2	physical activity training for health (CSEP-PATH). Ottawa, ON: Canadian Society for
3	Exercise Physiology.
4	Carroll, B., & Loumidis, J. (2001). Children's perceived competence and enjoyment in
5	physical education and physical activity outside school. European Physical Education
6	<i>Review</i> , 7, 24-43.
7	Caspersen, C. J., Powell, K. E., & Christenson, G. M. (1985). Physical activity, exercsie, and
8	physical fitness: Definitions and distinctions for health-related research. Public Health
9	Reports, 100, 126-131.
10	Cheon, S.H., Reeve, J., & Moon, I.S. (2012). Experimentally based, longitudinally designed,
11	teacher-focused intervention to help physical education teachers be more autonomy
12	supportive toward their students. Journal of Sport and Exercise Psychology, 34, 365-
13	396.
14	Colley, R.C, Janssen, I., & Tremblay, M.S. (2012). Daily step target to measure adherence to
15	physical activity guidelines in children. Medicine and Science in Sports and Exercise,
16	44(5), 977-982.
17	Corder, K., Ekelund, U., Steele, R.M., Wareham, N.J., & Brage, S. (2008). Assessment of
18	physical activity in youth. Journal of Applied Physiology, 105, 977-987.
19	Curran, T., Hill, A., Ntoumanis, N., Hall, H., & Jowett, G. (2016). A three-wave longitudinal
20	test of self-determination theory's mediation model of engagement and disaffection in
21	youth sport. Journal of Sport and Exercise Psychology, 38, 15-29.
22	Ebesutani, C., Regan, J., Smith, A., Reise, S., Higa-McMillan, C., & Chorpita, B. (2012). The
23	10-item positive and negative affect schedule for children, child and parent shortened
24	versions: Application of item response theory form more efficient assessment. Journal
25	of Psychopathology and Behavioral Assessment, 34, 191-203.

1	Eisenmann, J., Laurson, K., Wickel, E., Gentile, D., & Walsh, D. (2007). Utility of pedometer
2	step recommendations for predicting overweight in children. International Journal of
3	Obesity, 31, 1179-1182.
4	Fairclough, S., Stratton, G., & Baldwin, G. (2002). The contribution of secondary school
5	physical education to lifetime physical activity. European Physical Education
6	<i>Review</i> , <i>8</i> , 69-84.
7	Francis, C., Longmuir, P., Boyer, C., Andersen, L., Barnes, J., & Boiarskaia, E., Tremblay,
8	M. (2016). The Canadian assessment of physical literacy: Development of a model of
9	children's capacity for a healthy, active lifestyle through a Delphi process. Journal of
10	Physical Activity and Health, 13, 214-222.
11	Gagne, M., Ryan, R. M. & Bargmann, K. (2003). Autonomy support and need satisfaction in
12	the motivation and well-being of gymnasts. Journal of Applied Sport Psychology,
13	15(4), 372-390.
14	Godin, G., Shephard, R. J. (1997). Godin leisure-time exercise questionnaire. Medicine and
15	Science in Sports and Exercise. 29, S36-S38.
16	Gunnell, K., Longmuir, P., Woodruff, S., Barnes, J., Belanger, K., & Tremblay, M. (2018).
17	Revising the motivation and confidence domain of the Canadian assessment of
18	physical literacy. BMC Public Health, 18(S2).
19	Hair, J.F., Black, W.C., Babin, B.J., & Anderson, R.E. (2010). Multivariate data analysis.
20	Seventh edition. Upper Saddle River, NJ: Prentice Hall.
21	Hallal, P., Victora, C., Azevedo, M., & Wells, J. (2006). Adolescent physical activity and
22	health. Sports Medicine, 36, 1019-1030.
23	Hay, J.A. (1992). Adequacy in and predilection for physical activity in children. Clinical
24	Journal of Sport Medicine, 2, 192-201.

1	Healthy Active Living and Obesity Research Group/HALO. (2014). Canadian assessment of
2	physical literacy-first edition: Manual for test administration. Ottawa, ON: Children's
3	Hospital of Eastern Ontario Research Institute.
4	Healthy Active Living and Obesity Research Group/HALO. (2017). Canadian assessment of
5	physical literacy second edition: Manual for test administration. Ottawa, ON:
6	Children's Hospital of Eastern Ontario Research Institute.
7	Hidding, L.M., Chinapaw, M.J.M., van Poppel, M.N.M., Mokkink, L.B., & Altenburg, T.M.
8	(2018). An updated systematic review of childhood physical activity questionnaires.
9	Sports Medicine, 48, 2797-2842.
10	International Physical Literacy Association. (2017). Definition of physical literacy. Retrieved
11	from www.physical-literacy.org.uk.
12	Janssen, I., & LeBlanc, A. G. (2010). Systematic review of the health benefits of physical
13	activity and fitness in school-aged children and youth. International Journal of
14	Behavioral Nutrition and Physical Activity, 7, 40.
15	Katzmarzyk, P., & Mason, C. (2009). The physical activity transition. Journal of Physical
16	Activity and Health, 6, 269-280.
17	Lang, J., Chaput, J., Longmuir, P., Barnes, J., Belanger, K., & Tomkinson, G., Tremblay,
18	M. (2018). Cardiorespiratory fitness is associated with physical literacy in a large
19	sample of Canadian children aged 8 to 12 years. BMC Public Health, 18(S2).
20	Longmuir, P., Boyer, C., Lloyd, M., Borghese, M., Knight, E., & Saunders, T., Tremblay,
21	M. (2017). Canadian agility and movement skill assessment (CAMSA): Validity,
22	objectivity, and reliability evidence for children 8-12 years of age. Journal of Sport
23	and Health Science, 6, 231-240.

1	Longmuir, P., Boyer, C., Lloyd, M., Yang, Y., Boiarskaia, E., Zhu, W., & Tremblay, M.
2	(2015). The Canadian assessment of physical literacy: Methods for children in grades
3	4 to 6 (8 to 12 years). BMC Public Health, 15(1).
4	Longmuir, P. & Tremblay, M. S. (2016). Top 10 research questions related to physical
5	literacy. Research Quarterly for Exercise and Sport, 87, 28-35.
6	Lubans, D., Morgan, P., Cliff, D., Barnett, L., & Okely, A. (2010). Fundamental movement
7	skills in children and adolescents. Sports Medicine, 40, 1019-1035.
8	Marsh, H., Hau, K., & Wen, Z. (2004). In search of golden rules: Comment on hypothesis-
9	testing approaches to setting cutoff values for fit indexes and dangers in
10	overgeneralizing Hu and Bentler's (1999) findings. Structural Equation Modeling: A
11	Multidisciplinary Journal, 11, 320-341.
12	Meredith, M. & Welk, G. (Eds.). (2010). Fitness Gram and Activity Gram test administration
13	manual. Champaign, IL: Human Kinetics.
14	Ntoumanis, N., & Standage, M. (2009). Motivation in physical education classes. Theory and
15	Research in Education, 7, 194-202.
16	Papaioannou, A., Bebetsos, E., Theodorakis, Y., Christodoulidis, T., & Kouli, O. (2006).
17	Causal relationships of sport and exercise involvement with goal orientations,
18	perceived competence and intrinsic motivation in physical education: A longitudinal
19	study. Journal of Sports Sciences, 24, 367-382.
20	Poitras, V., Gray, C., Borghese, M., Carson, V., Chaput, J., & Janssen, I., Tremblay, M.
21	(2016). Systematic review of the relationships between objectively measured physical
22	activity and health indicators in school-aged children and youth. Applied Physiology,
23	Nutrition, and Metabolism, 41, S197-S239.
24	Reeve, J., Jang, H., Carrell, D., Jeon, S., & Barch, J. (2004). Enhancing students' engagement
25	by increasing teachers' autonomy support. Motivation and Emotion, 28(2), 147-169.

1	Reeve, J., & Tseng, C. (2011). Agency as a fourth aspect of students' engagement during
2	learning activities. Contemporary Educational Psychology, 36, 257-267.
3	Ryan, R. M., & Deci, E. L. (2017). Self-determination theory: Basic psychological needs in
4	motivation, development and wellness. New York, NY: The Guilford Press.
5	Ryan, R. M., & Frederick, C. M. (1997). On energy, personality and health: Subjective
6	vitality as a dynamic reflection of well-being. Journal of Personality, 65, 529-565.
7	Sallis, J., Bull, F., Guthold, R., Heath, G., Inoue, S., & Kelly, P., Hallal, P. (2016).
8	Progress in physical activity over the Olympic quadrennium. The Lancet, 388, 1325-
9	1336.
10	Sallis, J., McKenzie, T., Beets, M., Beighle, A., Erwin, H., & Lee, S. (2012). Physical
11	education's role in public health: Steps forward and backward over 20 years and
12	HOPE for the future. Research Quarterly for Exercise and Sport, 83, 125-135.
13	Skinner, E., & Belmont, M. (1993). Motivation in the classroom: Reciprocal effects of teacher
14	behavior and student engagement across the school year. Journal of Educational
15	Psychology, 85, 571-581.
16	Society of Health and Physical Educators America. (2013). National standards for K-12
17	physical education. Reston, VA: SHAPE America.
18	Standage, M., Duda, J., & Ntoumanis, N. (2003). A model of contextual motivation in physical
19	education: Using constructs from self-determination and achievement goal theories to
20	predict physical activity intentions. Journal of Educational Psychology, 95, 97-110.
21	Standage, M., & Gillison, F. (2007). Students' motivational responses toward school physical
22	education and their relationship to general self-esteem and health-related quality of
23	life. Psychology of Sport and Exercise, 8, 704-721.
24	Tabachnick, B. G., & Fidell, L. S. (2007). Using multivariate statistics (5th ed.). New York:
25	Allyn and Bacon.

1	Taylor, I., & Lonsdale, C. (2010). Cultural differences in the relationships among autonomy
2	support, psychological need satisfaction, subjective vitality, and effort in British and
3	Chinese physical education. Journal of Sport and Exercise Psychology, 32, 655-673.
4	Taylor, I., Ntoumanis, N., Standage, M., & Spray, C. (2010). Motivational predictors of
5	physical education students' effort, exercise intentions, and leisure-time physical
6	activity: A multilevel linear growth analysis. Journal of Sport & Exercise
7	Psychology, 32, 99-120.
8	Telema, R., Yang, X., Leskinen, E., Kankaanpaa, A., Hirvensalo, M., Tammelin, T.,
9	Raitakari, O. T. (2014). Tracking of physical activity from early childhood through
10	youth into adulthood. Medicine & Science in Sports & Exercise, 46, 955–962.
11	Tremblay, M., Barnes, J., González, S., Katzmarzyk, P., Onywera, V., Reilly, J., &
12	Tomkinson, G. (2016). Global matrix 2.0: Report card grades on the physical activity
13	of children and youth comparing 38 countries. Journal of Physical Activity and
14	Health, 13, S343-S366.
15	Tremblay, M. & Lloyd, M. (2010). Physical literacy measurement – The missing piece.
16	Physical and Health Education, 76, 26-30.
17	Tremblay, M., Longmuir, P., Barnes, J., Belanger, K., Anderson, K., & Bruner, B.,
18	Woodruff, S. J. (2018). Physical literacy levels of Canadian children aged 8–12 years:
19	Descriptive and normative results from the RBC Learn to Play-CAPL project. BMC
20	Public Health, 18(S2).
21	Tudor-Locke, C., McClain, J., Hart, T., Sisson, S., & Washington, T. (2009). Expected values
22	for pedometer-determined physical activity in youth. Research Quarterly for Exercise
23	and Sport, 80, 164-174.
24	UNESCO/United Nations Educational, Scientific and Cultural Organization. (2015). Quality
25	physical education: Guidelines to policy makers. Paris, France: UNESCO.

1	Vandorpe, B., Vandendriessche, J., Vaeyens, R., Pion, J., Matthys, S., & Lefevre, J.,
2	Lenoir, M. (2012). Relationship between sports participation and the level of motor
3	coordination in childhood: A longitudinal approach. Journal of Science and Medicine
4	in Sport, 15, 220-225.
5	Whitehead, M. (Ed.). (2010). Physical literacy: Throughout the lifecourse. New York, NY:
6	Routledge.
7	World Health Organization. (2010). Global recommendations on physical activity for health.
8	Geneva: WHO.
9	World Health Organization. (2017). Depression and other common mental disorders: Global
10	health estimates. Retrieved from
11	http://apps.who.int/iris/bitstream/10665/254610/1/WHO-MSD-MER-2017.2-
12	eng.pdf?ua=1.

1 Table 1

Variable	М	SD	α	1	2	3	4	5	6	7	8	9	10
1. Physical literacy	68.77	10.47	-	-									
2. Engagement in PE	4.96	.83	-	.50**	-								
3. Agentic engagement	3.99	1.17	.83	.37**	.77**	-							
4. Behavioral engagement	5.81	.80	.81	.38**	.75**	.39**	-						
5. Emotional engagement	5.45	1.16	.86	.51**	.82**	.51**	.64**	-					
6. Cognitive engagement	4.69	1.16	.87	.31**	.77**	.41**	.44**	.49**	-				
7. Leisure-time exercise behavior	60.41	33.36	-	.38**	.30**	.21*	.22*	.24**	.26**	-			
8. Positive affect	3.79	.70	.78	.39**	.47**	.31**	.33**	.47**	.37**	.23**	-		
9. Negative affect	1.65	.55	.61	19*	05	.05	12	05	06	.02	31**	-	
10. Vitality	4.70	1.12	.86	.52**	.59**	.43**	.42**	.53**	.45**	.28**	.75**	31**	-

2 Means, Standard Deviations, Reliabilities, and Correlations between Study Variables

3 **. Correlation is significant at the 0.01 level (2-tailed).

4 *. Correlation is significant at the 0.05 level (2-tailed).

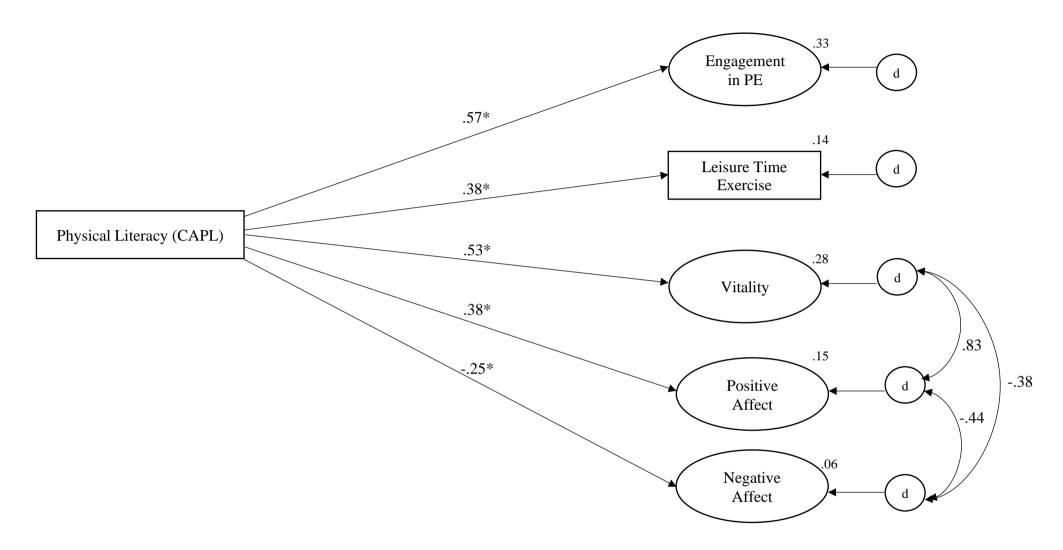


Figure 1: Structural equation model of relationships between physical literacy and outcome variables

*. Denotes statistically significant path