

Self-efficacy, Locus of Control and Life Satisfaction among Young People, 2016

*Findings from the Young Persons' Behaviour and
Attitudes Survey.*

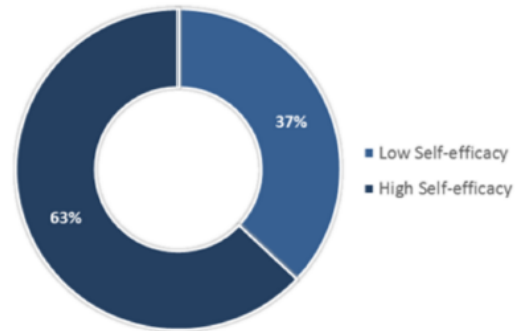
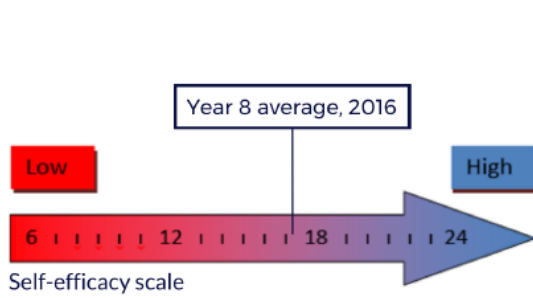
September 2017

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Self-efficacy, Locus of Control and Life Satisfaction among Year 8s - 2016

Self-efficacy: is a person's belief about their capabilities to exercise influence over events that affect their lives.



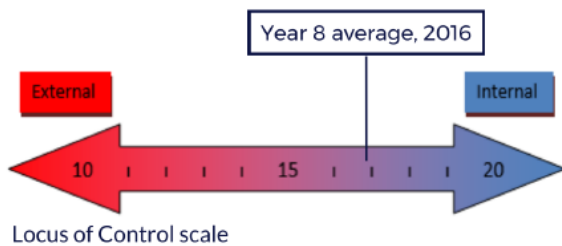
In 2016, Year 8s exhibited a mean self-efficacy score of 17.2 out of a possible 24.

Thirty seven per cent of Year 8s exhibited a low self-efficacy in 2016.



Mean self-efficacy scores for Year 8s and the proportion of Year 8s with low self-efficacy were also compared across five differing characteristics; school type, gender, religion, free school meal receipt and urban/rural geographies. For each of these, no significant differences were found.

Locus of Control (LoC): explains the degree to which a person feels in control over their life. Individuals with an internal LoC believe in their own influence and control while those with an external LoC believe control over their life is determined by outside factors.



Year 8s who attended Grammar schools exhibited a more internal LoC than Year 8s who attended Secondary schools.



Year 8s who did not receive a free school meal (FSM) exhibited a more internal LoC than Year 8s who did receive a FSM.

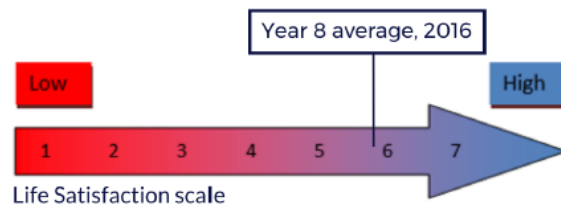
In 2016, Year 8s exhibited a mean locus of control score of 16.9 out of a possible 20.



Mean LoC scores for Year 8s were also compared across the differing characteristics; gender, religion, and urban/rural geographies. For each of these, no significant differences were found.

Life Satisfaction

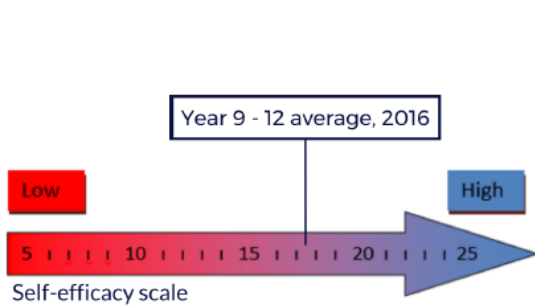
In 2016, Year 8s exhibited a mean life satisfaction score of 5.8 out of a possible 7.



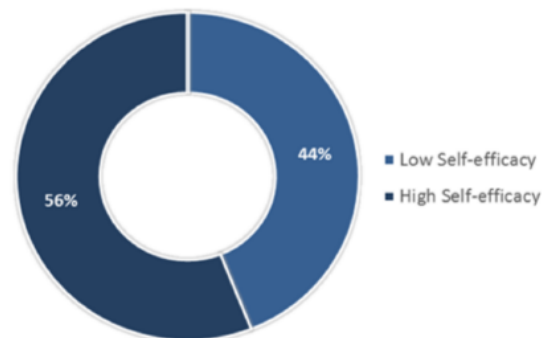
Mean life satisfaction scores for Year 8s were also compared across five differing characteristics; school type, gender, religion, free school meal receipt and urban/rural geographies. For each of these, no significant differences were found.

Self-efficacy, Locus of Control and Life Satisfaction among Year 9 - 12s - 2016

Self-efficacy: is a person's belief about their capabilities to exercise influence over events that affect their lives.



In 2016, Year 9-12s exhibited a mean self-efficacy score of 17.3 out of a possible 25.

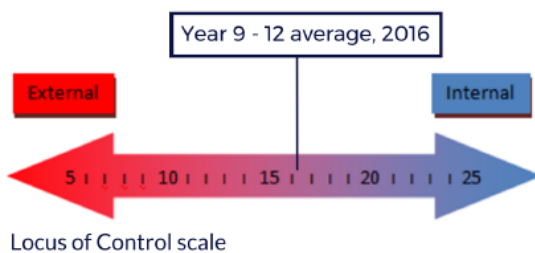


Forty four per cent of Year 9-12s exhibited a low self-efficacy in 2016.



In 2016, there were a number of significant differences found when comparing mean self-efficacy scores and the proportion of individuals with low self-efficacy (Years 9 - 12) across differing characteristics. This was most prominent in relation to gender, deprivation, free school meal receipt and health. Males, those living in the least deprived areas, those not receiving free school meals and Year 9 - 12s with good health exhibited a significantly higher self-efficacy than their counterparts.

Locus of Control (LoC): explains the degree to which a person feels in control over their life. Individuals with an internal LoC believe in their own influence and control while those with an external LoC believe control over their life is determined by outside factors.



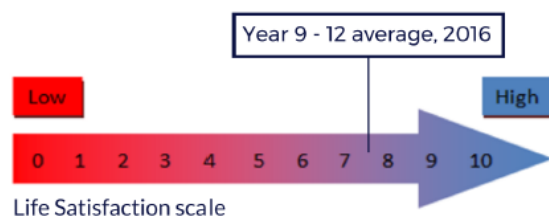
In 2016, Year 9 - 12s exhibited a mean locus of control score of 16.2 out of a possible 25.

In 2016, there were a number of significant differences found when comparing mean locus of control scores (Years 9 - 12) across differing characteristics. This was most prominent in relation to school type, gender, urban/rural geographies and health. Grammar school students, males, those living in urban areas and Year 9 - 12s with good health all exhibited a significantly higher (more internal) LoC than their counterparts.



Life Satisfaction

In 2016, there were a number of significant differences found when comparing mean life satisfaction scores (Years 9 - 12) across differing characteristics. This was most prominent in relation to gender, religion, health and long standing illness. Males, Catholics, Year 9 - 12s with good health and those living without a long standing illness all exhibited a significantly higher life satisfaction than their counterparts.



In 2016, Year 9 - 12s exhibited a mean life satisfaction score of 7.6 out of a possible 10.



This report presents estimates for children aged 11 to 16 (School Years 8 to 12) in Northern Ireland for three metrics:

- Self-efficacy
- Locus of Control
- Life Satisfaction

1) **Self-efficacy:** Bandura¹ conceptually described self-efficacy as a person's belief about their capabilities to exercise influence over events that affect their lives. People with high self-efficacy are often seen as confident in their capabilities and produce sustained efforts to achieve their goals. In contrast people with low self-efficacy often doubt their capabilities, are less ambitious and give up on their aims when challenged. In short self-efficacy is a question of resilience and those with higher self-efficacy often experience greater life satisfaction and wellbeing.

2) **Locus of Control (LoC):** Locus of control² is a personality construct which explains the degree to which a person feels they have control over their life. The locus of control scale can be seen as a continuum from external to internal. Those with internal LoC believe in their own influence over life events and are confident that their actions can have direct effect on their life outcomes. Those with external LoC believe the converse and appoint personal outcomes as the result of fate and factors outside of their control.

3) **Life Satisfaction:** Life satisfaction relates to an individual's satisfaction with their life overall. Higher scores on the life satisfaction scale indicate a greater sense of contentment with life and have many implications for life facets such as health, family, lowering depression and weight loss³.

These data have been collected for children aged 11 to 16 via the Young Persons' Behaviour and Attitudes Survey (YPBAS) 2016. The report ['Self-efficacy, Locus of Control & Life Satisfaction in Northern Ireland, 2014/15 and 2015/16'](#), published in December 2016, provides estimates for these metrics for the population aged 16 and over in Northern Ireland.

Separate scales are used to measure self-efficacy, locus of control and life satisfaction for children in Year 8, and children in Years 9 to 12. As a result, direct comparisons between the two age groups cannot be made. This report provides estimates of both. For further information on this, including the tools used for measuring each of the metrics, please refer to Appendix A – Further Information.

¹ Bandura, A. (1994). Self-efficacy. In V. S. Ramachaudran (Ed.), *Encyclopedia of human behavior* (Vol. 4, pp. 71-81). New York: Academic Press. (Reprinted in H. Friedman [Ed.], *Encyclopedia of mental health*. San Diego: Academic Press, 1998).

² Rotter, J. B. (1954). *Social learning and clinical psychology*: Englewood Cliffs, NJ: Prentice Hall.

³ Quality Improvement Fund (2015). *Investigating Locus of Control, Self-efficacy and Wellbeing – The relationships between all items across 3 instruments for a single item scale*: <https://gss.civilservice.gov.uk/wp-content/uploads/2013/02/Janis-Scallon-report.pdf>.

Definition: Self-efficacy is a person’s belief about their capabilities to exercise influence over events that affect their lives. Self-efficacy is a question of resilience and those with higher self-efficacy often experience greater life satisfaction.



Young people in Year 8 in Northern Ireland had a mean self-efficacy score of 17.2 out of a possible 24 in 2016.

Figure 1: Year 8 self-efficacy scale

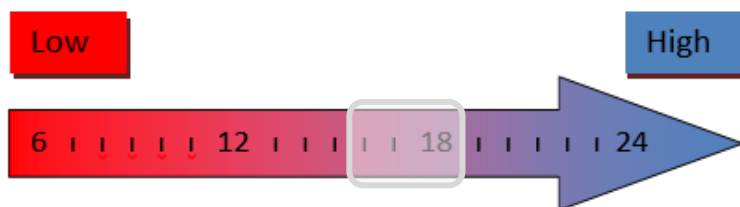
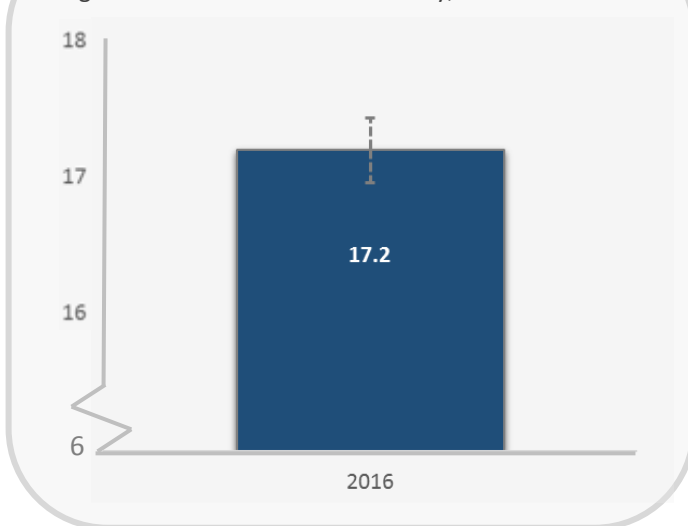
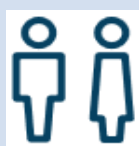


Figure 2: Year 8’s mean self-efficacy, 2016

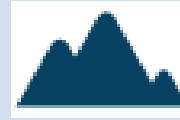


Note: Figure 2 includes the (unrounded) 95% confidence intervals for the estimate. These confidence intervals represent the ranges either side of the estimate which are 95% certain to include the true value for the population.



The mean self-efficacy scores for Year 8s were compared across five differing characteristics; school type, gender, religion, free school meal receipt and urban/rural geographies. For each characteristic there were no significant differences found between the various groups. Please refer to the associated data tables for further details.

Note: Owing to small sample sizes, comparisons for Year 8s across the characteristics deprivation, health and long standing illness have not been included in the analysis.





Young people in Years 9 – 12 in Northern Ireland had a mean self-efficacy score of 17.3 out of a possible 25 in 2016.

Figure 3: Year 9 – 12 self-efficacy scale

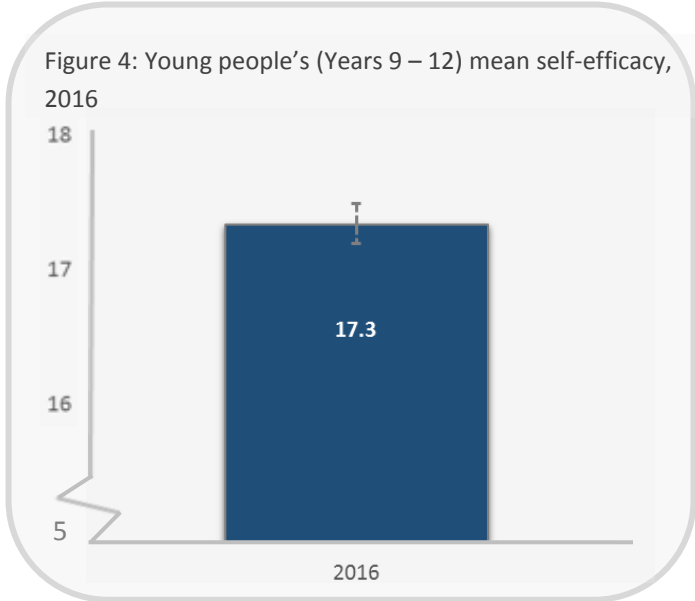
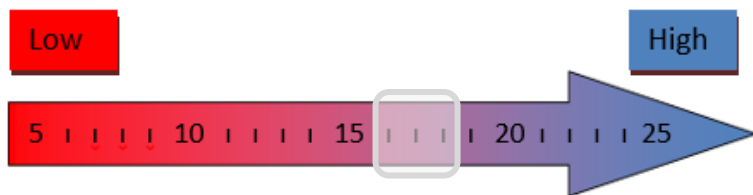


Figure 4: Young people’s (Years 9 – 12) mean self-efficacy, 2016

Note: Figure 4 includes the (unrounded) 95% confidence intervals for the estimate. These confidence intervals represent the ranges either side of the estimate which are 95% certain to include the true value for the population.



There was no significant difference between the mean self-efficacy scores for Year 9 – 12s who attended a Grammar school and those who attended Secondary school.



Young males (Years 9 – 12) in Northern Ireland exhibited a significantly higher mean self-efficacy than females.



There were no significant differences in mean self-efficacy scores amongst Year 9 – 12s from a Catholic, Protestant or Other/Non-determined religious background.



Year 9 – 12s living in the least deprived areas (Quintile 5 (Q5)) exhibited a significantly higher mean self-efficacy than their counterparts from the most deprived areas (Q1).



Young people (Years 9 – 12) who **did not** receive free school meals (FSM) had a significantly higher mean self-efficacy score than those who **did** receive FSM.



Young people (Years 9 – 12) from a rural location had a significantly higher mean self-efficacy score than those from an urban location.



Year 10 respondents had a significantly higher mean self-efficacy score compared to those in Years 9, 11 and 12.



Young people (Years 9 – 12) with 'good' health had a significantly higher mean self-efficacy score than those with 'less than good' health.



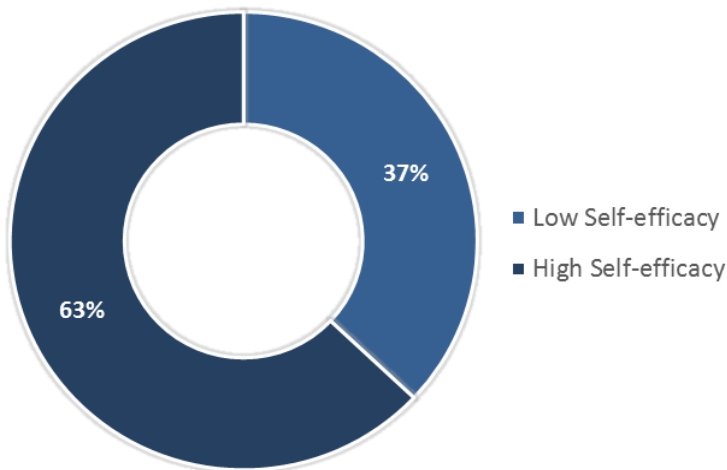
Young people (Years 9 – 12) who were **not** living with a long standing illness (LSI) had a significantly higher mean self-efficacy score than those who **were** living with a LSI.

Definition: Young people in Year 8 are classified as having a **low** self-efficacy if they exhibit a self-efficacy score of **16** or below; Year 8s with a self-efficacy score of **17** and over are classified as having **high** self-efficacy.



In 2016, thirty seven per cent of young people (Year 8s) in Northern Ireland exhibited a low self-efficacy; while the remaining 63% exhibited a high self-efficacy.

Figure 5: Proportion of young people (Year 8s) with low or high self-efficacy, 2016



The proportion of Year 8s with a low self-efficacy were compared across five differing characteristics; school type, gender, religion, free school meal receipt and urban/rural geographies. For each characteristic there were no significant differences in the proportion of Year 8s with a low self-efficacy found between the various groups. Please refer to the associated data tables for further details.

Note: Owing to small sample sizes, comparisons for Year 8s across the characteristics deprivation, health and long standing illness have not been included in the analysis.

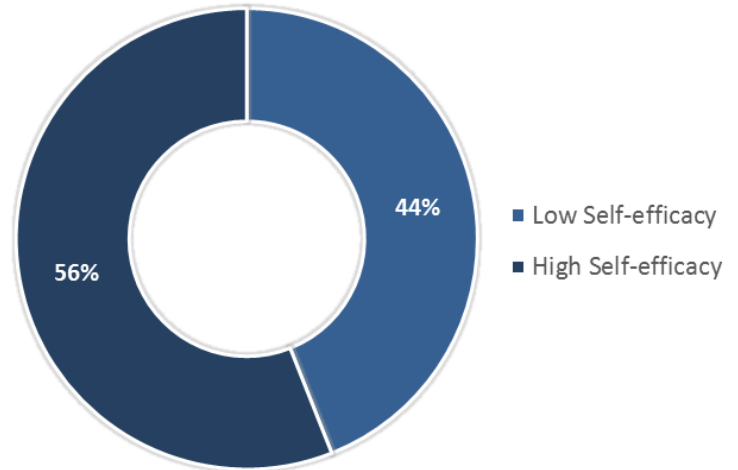


Definition: A young person (Years 9 – 12) is classified as having a **low** self-efficacy if they exhibit a self-efficacy score of **17** or below; young people with a self-efficacy score of **18** and over are classified as having **high** self-efficacy.



In 2016, forty four per cent of young people (Years 9 – 12) in Northern Ireland exhibited a low self-efficacy; while the remaining 56% exhibited a high self-efficacy.

Figure 6: Proportion of young people (Years 9 – 12) with low or high self-efficacy, 2016



Note: The following section provides commentary on the proportion of Year 9 to 12s, disaggregated by differing characteristics, with a **low** self-efficacy only; estimates for **high** self-efficacy can be obtained from the [associated data tables](#). In addition, the charts include the (unrounded) 95% confidence intervals for the estimate. These confidence intervals represent the ranges either side of the estimate which are 95% certain to include the true value for the population.



Forty six per cent of those in Years 9 - 12 who attended Secondary schools exhibited a low self-efficacy; significantly higher than young people who attended Grammar schools (41%).

Figure 7: Proportion of young people (Years 9 – 12) with low self-efficacy by school type, 2016

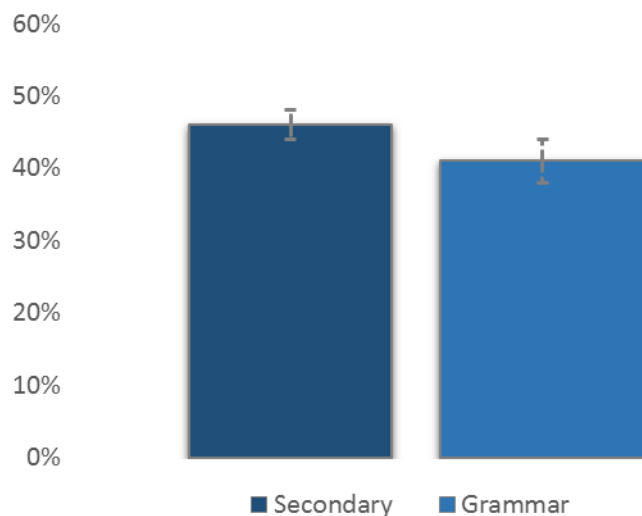
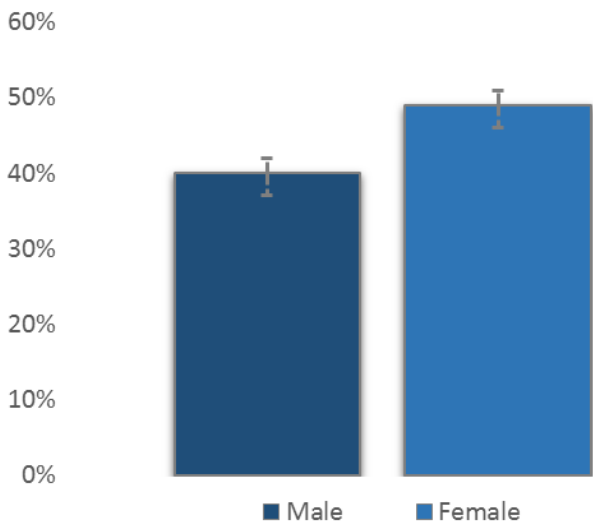


Figure 8: Proportion of young people (Years 9 – 12) with low self-efficacy by gender, 2016



Forty nine per cent of young females (Years 9 – 12) had a low self-efficacy in 2016; this was significantly higher than young males, who exhibited a low self-efficacy in 40% of cases.



Both Catholics and Protestants (Years 9 – 12) had a low self-efficacy in 44% of cases. For young people classified as Other/Non-determined, 49% had a low self-efficacy. These differences were not significant.

Figure 9: Proportion of young people (Years 9 – 12) with low self-efficacy by religion, 2016

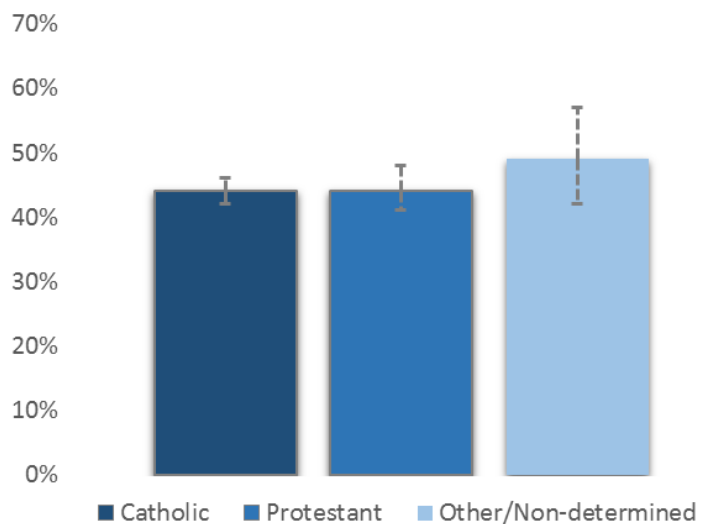
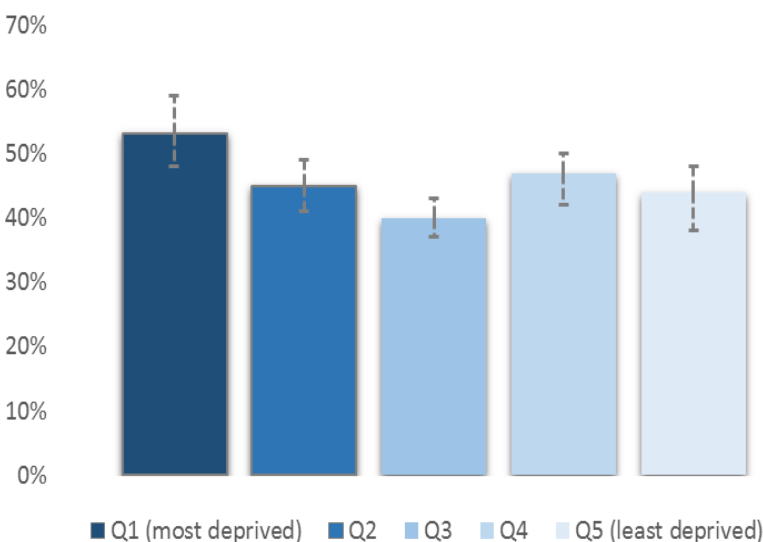


Figure 10: Proportion of young people (Years 9 – 12) with low self-efficacy by deprivation, 2016



A significantly higher proportion (53%) of young people (Years 9 – 12) living in the most deprived areas (Q1) had a low self-efficacy when compared to all other quintiles of deprivation.



Young people (Years 9 – 12) who **did** receive a free school meal (FSM) exhibited a low self-efficacy in 48% of cases, and this was significantly higher than those who **did not** receive a FSM (43%).

Figure 11: Proportion of young people (Years 9 – 12) with low self-efficacy by free school meal (FSM) receipt, 2016

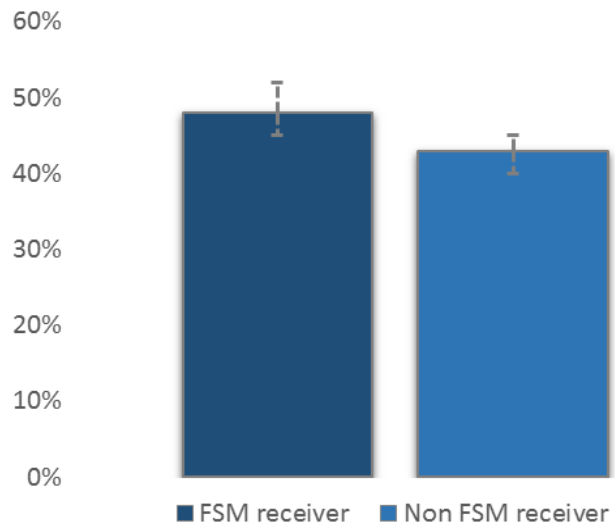
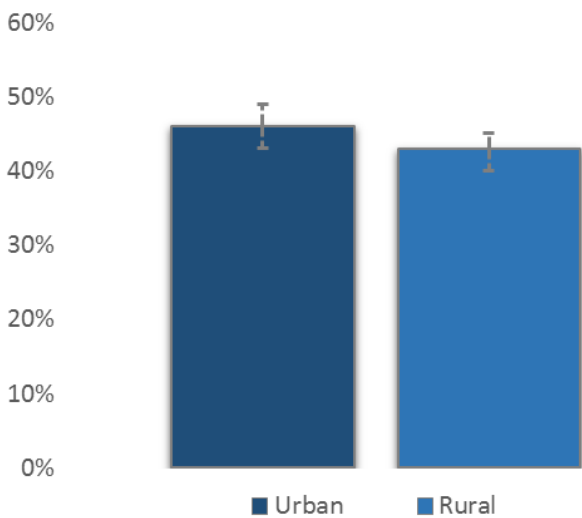


Figure 12: Proportion of young people (Years 9 – 12) with low self-efficacy by NISRA geography (Urban/Rural), 2016



Young people (Years 9 – 12) living in an urban location had a low self-efficacy in 46% of cases. This was significantly higher than young people from a rural location (43%).



Year 10s exhibited a low self-efficacy in 41% of cases; the lowest proportion across all years. This was significantly lower than the Year 12s (47%).

Figure 13: Proportion of young people (Years 9 – 12) with low self-efficacy by year group, 2016

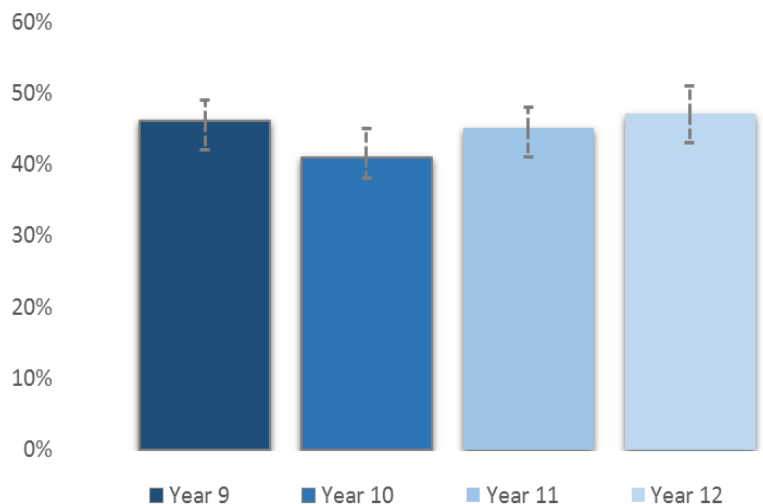
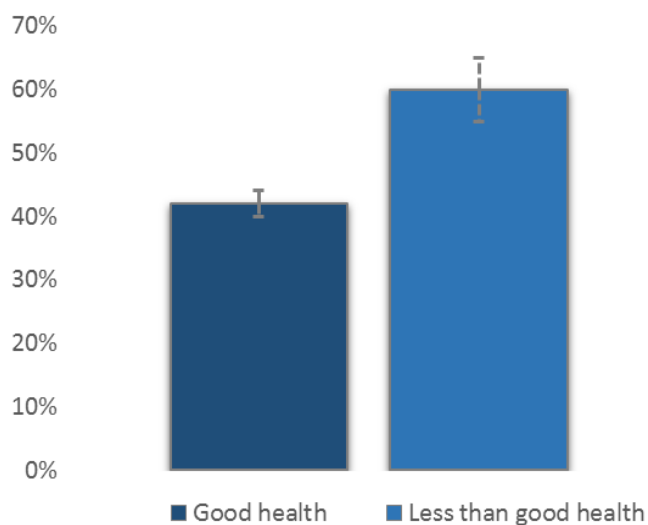


Figure 14: Proportion of young people (Years 9 – 12) with low self-efficacy by reported health, 2016

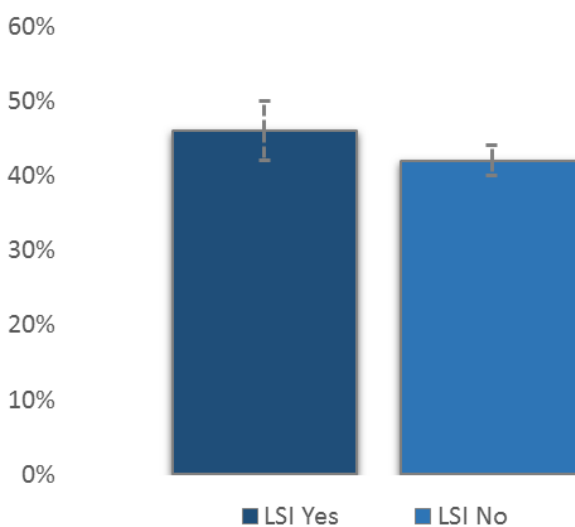


Sixty per cent of young people (Years 9 – 12) who reported having 'less than good' health exhibited a low self-efficacy. This was significantly higher than those with 'good' health (42%).



Forty-six per cent of Year 9 – 12s who were living with a long standing illness (LSI) exhibited a low self-efficacy; while forty-two per cent of Year 9 – 12s who were not living with a LSI exhibited a low self-efficacy. The difference between these two proportions was not statistically significant.

Figure 15: Proportion of young people (Years 9 – 12) with low self-efficacy by long standing illness, 2016



Definition: Locus of Control (LoC) explains the degree to which a person feels in control over their life. Individuals with an internal LoC believe in their own influence and control while those with an external LoC believe control over their life is determined by outside factors.



Year 8s in Northern Ireland were situated towards the internal end of the locus of control scale with a mean score of 16.9 out of a possible 20 in 2016.

Figure 16: Year 8 locus of control scale

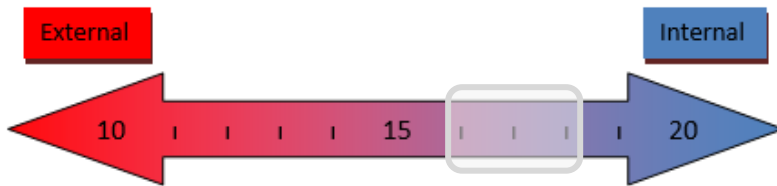
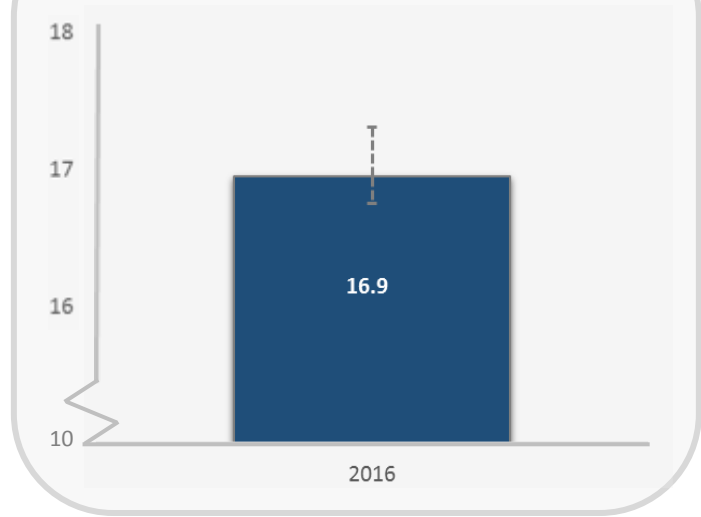


Figure 17: Year 8's mean locus of control, 2016



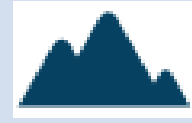
Note: Figure 17 includes the (unrounded) 95% confidence intervals for the estimate. These confidence intervals represent the ranges either side of the estimate which are 95% certain to include the true value for the population.



In 2016, young people (Year 8s) who attended Grammar schools had a significantly higher (more internal) locus of control than those who attended Secondary schools.



In 2016, young people (Year 8s) who **did not** receive free school meals (FSM) exhibited a significantly higher (more internal) locus of control than those who **did** receive FSM.



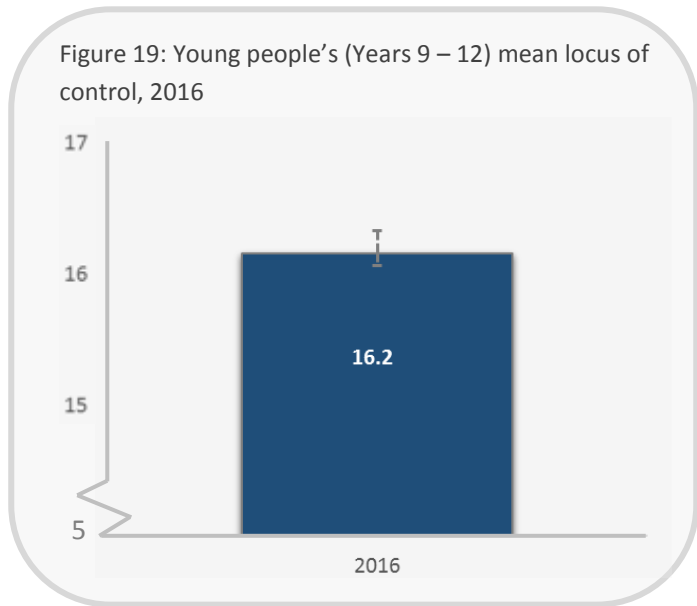
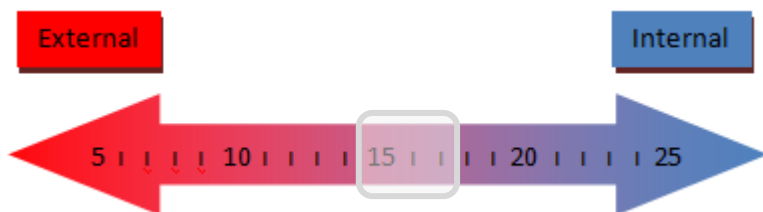
The mean locus of control scores for Year 8s were also compared across a range of additional characteristics; gender, religion, and urban/rural geographies. For each of these characteristics there were no significant differences found between the differing mean locus of control scores. Please refer to the associated data tables for further details.

Note: Owing to small sample sizes, comparisons for Year 8s across the characteristics deprivation, health and long standing illness have not been included in the analysis.



Young people (Years 9 – 12) in Northern Ireland had a mean locus of control score of 16.2 out of a possible 25 in 2016.

Figure 18: Year 9 – 12 locus of control scale



Note: Figure 19 includes the (unrounded) 95% confidence intervals for the estimate. These confidence intervals represent the ranges either side of the estimate which are 95% certain to include the true value for the population.



Respondents from Grammar schools (Years 9 – 12) had a significantly higher (more internal) mean locus of control than those who attend Secondary schools.



Males (Years 9 – 12) on average scored significantly higher than females on the locus of control scale; exhibiting a more internal locus of control.



Mean locus of control scores for Year 9 – 12 Catholics, Protestants and those who were Other/Non-determined were similar, with no significant differences evident.



There was no significant difference in the mean locus of control scores for Year 9 – 12s from the most deprived (Q1) and the least deprived (Q5) areas.



There was no significant difference in the mean locus of control scores between young people (Years 9 – 12) who **did** receive a free school meal and those who **did not** receive a free school meal.



Young people in Years 9 – 12 from urban areas exhibited a significantly higher (more internal) mean locus of control than those from rural areas.



Across Years 9 to 12 there were no significant differences in mean locus of control scores.



Young people (Years 9 – 12) with 'good' health had a significantly higher (more internal) mean locus of control score than young people with 'less than good' health.

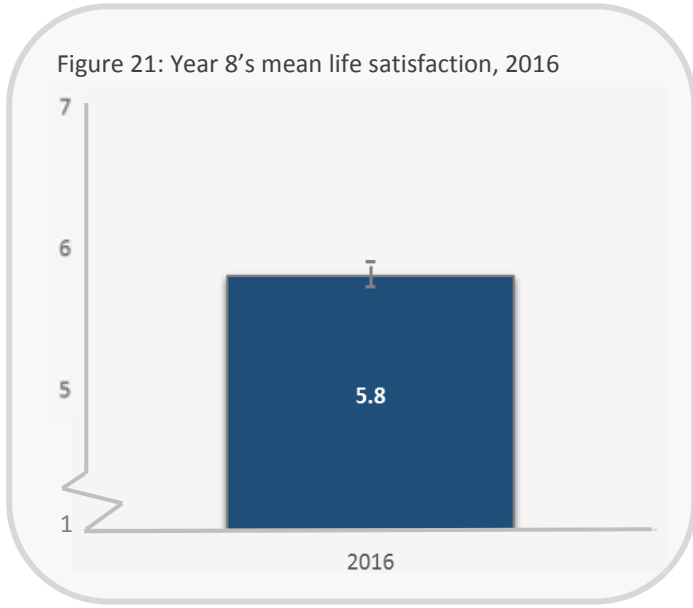
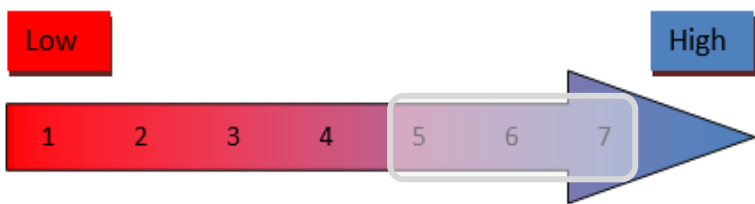


Year 9 – 12s who **were not** living with a long standing illness (LSI) exhibited a significantly higher (more internal) mean locus of control than those living with a LSI.



Year 8s exhibited a relatively high mean life satisfaction score of 5.8 out of a possible 7 in 2016.

Figure 20: Year 8 life satisfaction scale

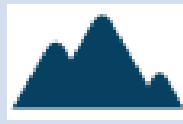


Note: Figure 21 includes the (unrounded) 95% confidence intervals for the estimate. These confidence intervals represent the ranges either side of the estimate which are 95% certain to include the true value for the population.



The mean life satisfaction scores for Year 8s were compared across differing characteristics; school type, gender, religion, free school meal receipt and urban/rural geographies. For each of these, no significant differences in the Year 8 mean locus of control scores were found between the various groups. Please refer to the associated data tables for further details.

Note: Owing to small sample sizes, comparisons for Year 8s across the characteristics deprivation, health and long standing illness have not been included.





The mean life satisfaction score among young people (Years 9 – 12) was relatively high in 2016; 7.6 out of a possible 10.

Figure 22: Year 9 – 12 life satisfaction scale

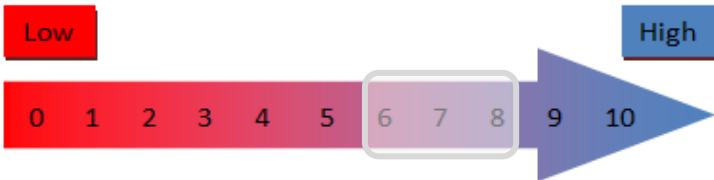
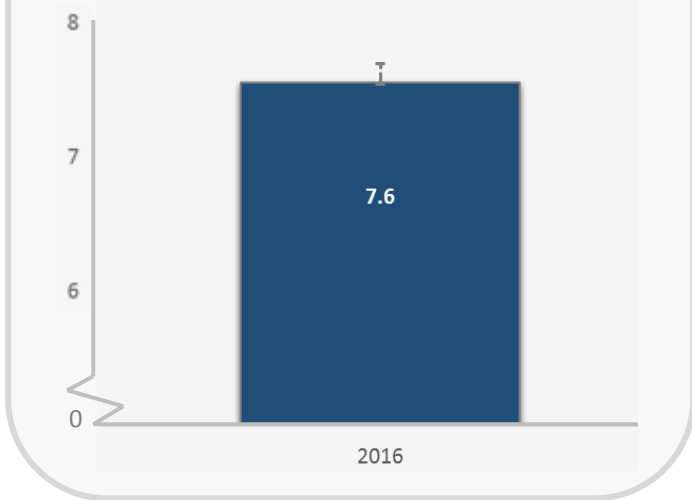


Figure 23: Young people’s (Years 9 – 12) mean life satisfaction, 2016



Note: Figure 23 includes the (unrounded) 95% confidence intervals for the estimate. These confidence intervals represent the ranges either side of the estimate which are 95% certain to include the true value for the population.



There was no significant difference in mean life satisfaction scores between young people (Years 9 – 12) who attended a Secondary school and those who attended Grammar school.

Figure 24: Mean life satisfaction scores for young people (Years 9 – 12) by school type, 2016

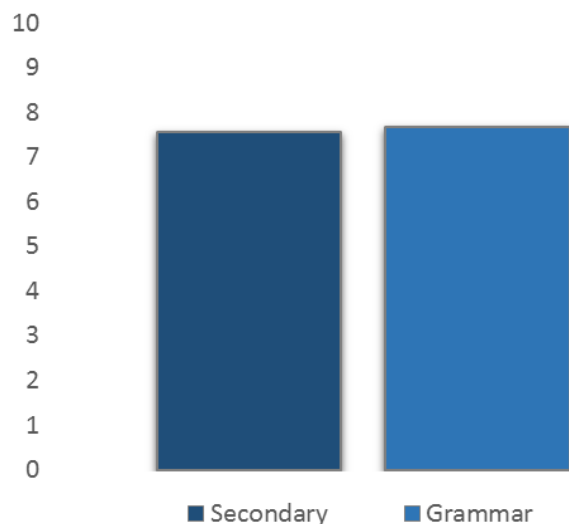
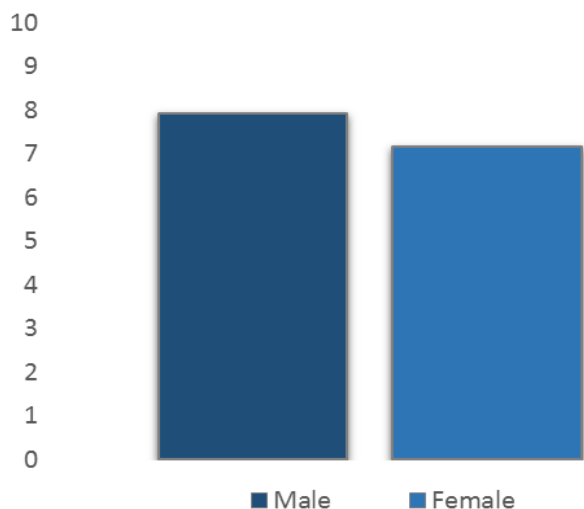


Figure 25: Mean life satisfaction scores for young people (Years 9 – 12) by gender, 2016



Young males (Years 9 – 12) had a significantly higher mean life satisfaction than young females in 2016.



Both Catholics and Protestants (Years 9 – 12) had a significantly higher mean life satisfaction than those classified as Other/Non-determined. Catholics also had a significantly higher mean life satisfaction than Protestants (Years 9 – 12).

Figure 26: Mean life satisfaction scores for young people (Years 9 – 12) by religion, 2016

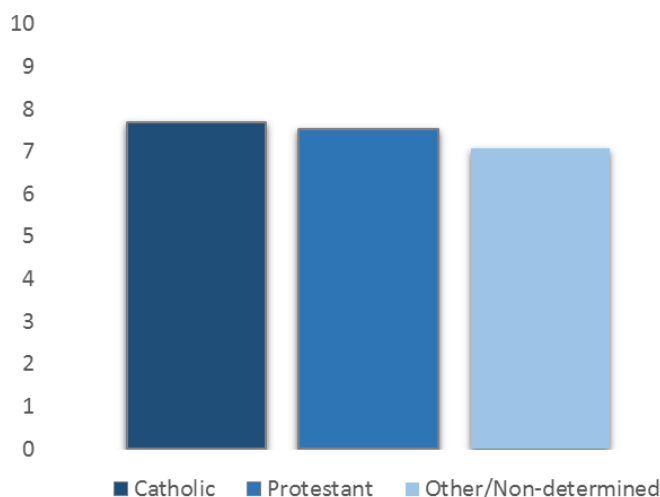
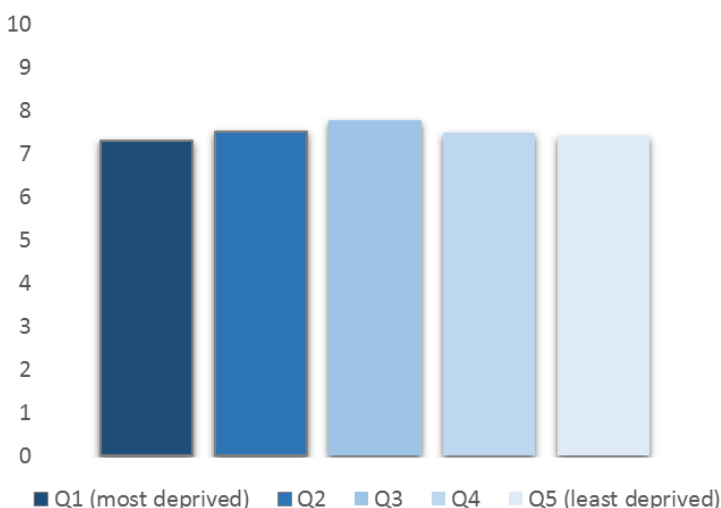


Figure 27: Mean life satisfaction scores for young people (Years 9 – 12) by deprivation, 2016



There was no significant difference between the mean life satisfaction scores for Year 9 – 12s from the most deprived areas (Q1) and those from the least deprived areas (Q5).



Young people (Years 9 – 12) who **did not** receive free school meals (FSM) had a significantly higher mean life satisfaction than those who **did** receive FSM.

Figure 28: Mean life satisfaction scores for young people (Years 9 – 12) by free school meal receipt, 2016

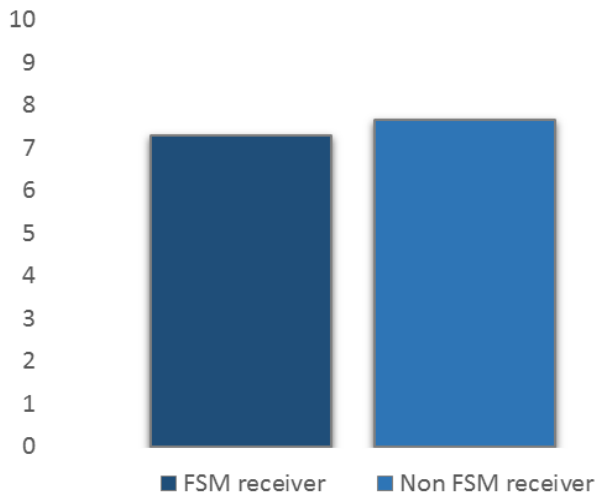
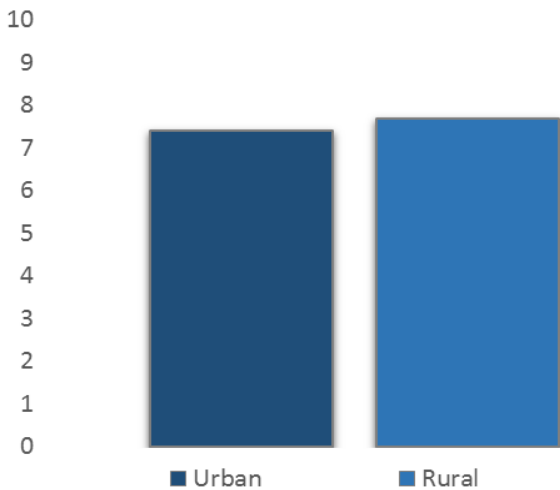


Figure 29: Mean life satisfaction scores for young people (Years 9 – 12) by NISRA geography (Urban/Rural), 2016



Young people (Years 9 – 12) from a rural area had a significantly higher mean life satisfaction than young people from urban areas.



The highest mean life satisfaction scores were exhibited by Year 9s, who had significantly higher life satisfaction than both Year 11s and Year 12s.

Figure 30: Mean life satisfaction scores for young people (Years 9 – 12) by year group, 2016

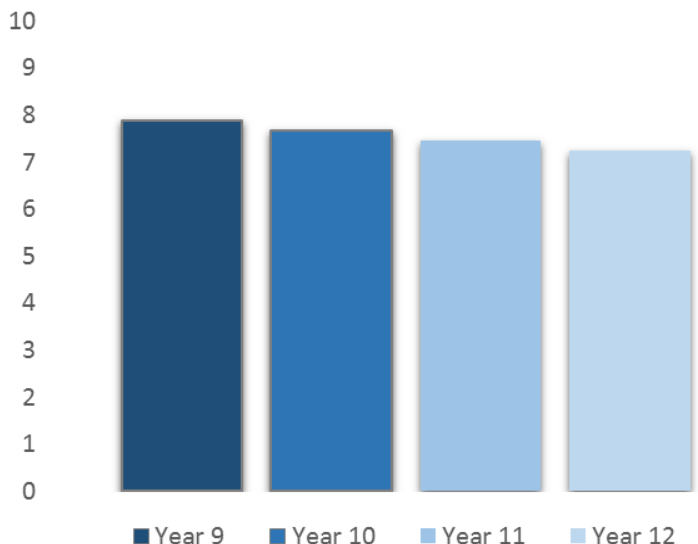
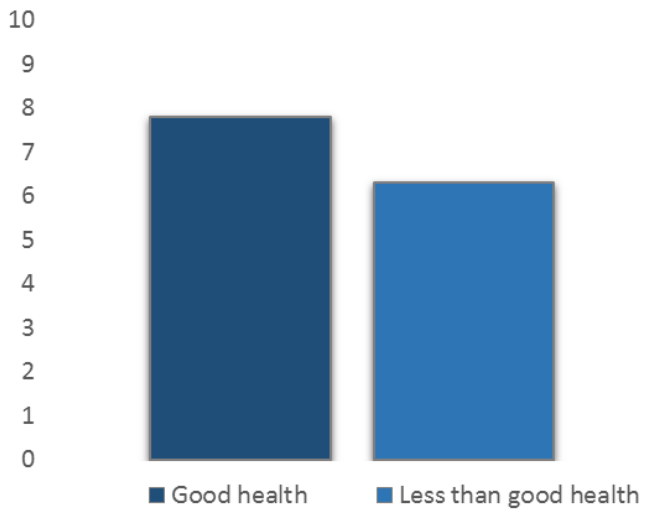


Figure 31: Mean life satisfaction scores for young people (Years 9 – 12) by health, 2016

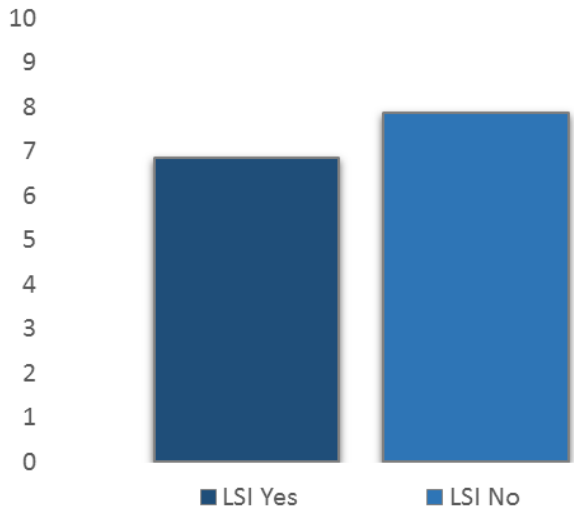


Life satisfaction for young people (Years 9 – 12) with 'good' health was significantly higher than those young people with 'less than good' health.



Young people (Years 9 – 12) **not** living with a long standing illness (LSI) had a significantly higher mean life satisfaction than those young people who **were** living with a LSI.

Figure 32: Mean life satisfaction scores for young people (Years 9 – 12) by long standing illness, 2016



Young Persons' Behaviour and Attitudes Survey

This report presents findings from the 2016 Young Persons' Behaviour and Attitudes Survey (YPBAS) on the perceived general self-efficacy, locus of control and life satisfaction of **Year 8 to Year 12 pupils** in Northern Ireland. The YPBAS is a school-based survey conducted among 11-16 year olds and carried out by the Central Survey Unit (CSU), part of the Northern Ireland Statistics and Research Agency (NISRA). Each year CSU sets the content of the questionnaire in consultation with client departments and asks a range of questions about the behaviour and attitudes of young people; topics of which can be found [here](#).

Sample

The target population for the YPBAS is young people at different stages in post-primary education. A stratified random sample of post-primary schools in Northern Ireland is drawn from a list held by the Department of Education (DoE). The sample is representative of school size, selection type (i.e. Secondary, Grammar), management group (i.e. Controlled, Voluntary, Roman Catholic Maintained, and Grant Maintained Integrated etc.) and Education and Library Board area. Participating schools provide details of the number of classes in Years 8-12, together with class names. A class in each of the five year groups is then randomly selected to take part. Only pupils from the selected classes are included in the survey.

Data Collection

The 2016 YPBAS was conducted using laptops. Selected pupils are assembled in class-sized groups to complete the survey. CSU interviewers and staff set up the computers ready for use and remain with the children throughout the data collection period to help with any technical issues. After all classes are surveyed at each school, the laptops are returned to CSU, where the data is transferred onto SPSS for validation and analysis.

Weighting

To ensure the achieved sample reflects the composition of the population of pupils in post primary education with regard to key characteristics (i.e. gender, year group, religion and school type) the data are weighted accordingly. Up to date figures from the School Census are used to derive the weights. **All reported means and proportions throughout this report are based on weighted data.**

Sample error

The YPBAS is a sample survey; as a result, there is a certain level of sampling error in the reported figures. The accompanying data tables include the 95% confidence intervals for each estimate. These confidence intervals represent the ranges either side of the YPBAS estimates which are 95% certain to include the true values for the population. The confidence intervals for all disaggregated data, i.e. school type, gender, religion, deprivation, free school meal entitlement, SOA urban/rural, year group, health and long-standing illness have been calculated using **un-weighted** data. For the whole school population **weighted** data have been used to calculate confidence intervals.

Publication threshold

It is the nature of sampling variability that the smaller the group whose size is being estimated, the (proportionately) less precise that estimate is. Estimates for groups where the sample base is less than 100 have been omitted from the report, as they are likely to be unreliable. These instances have been denoted with an asterisk (*) in the accompanying data tables.

Statistical Significance

Statistically significant differences between groups (at the 95% level) have been highlighted throughout the report. This means that we can be 95% confident that the differences between groups are actual differences and have not just arisen by chance. The base numbers, mean scores and percentages have an effect on statistical significance. Therefore on occasion, a difference between two groups may be statistically significant while the same difference in mean score or percentage points between two other groups may not be statistically significant. The reason for this is because the larger the base numbers or the closer the percentages are to 0 or 100, the smaller the standard errors. This leads to increased precision of the estimates which increases the likelihood that the difference between the proportions is actually significant and did not just arise by chance.

Measurement instruments

The instruments for measuring self-efficacy and locus of control are each a simple statement based survey tool; in addition, life satisfaction is presented as a single statement question. For the three metrics the individual responds on a Likert scale. However, the statement questions and responses used for the Year 8s and individuals in Years 9 – 12 are different. **As a result, direct comparisons cannot be made between Year 8s and those in Years 9 – 12 for mean self-efficacy scores, the proportion of low/high self-efficacy, mean locus of control scores and mean life satisfaction scores.**

Year 8

The self-efficacy tool for Year 8s takes the form of six simple statements to which the individual indicates to what extent they find the topic very hard to very easy on a four point Likert scale. For Year 8s, self-efficacy is presented as an overall score, maximum 24 and minimum 6, taken from the summated total of the six statement questions. The Year 8 locus of control tool takes the form of 10 simple statements to which the individual answers yes or no. Locus of control is presented as an overall score, maximum of 20 and minimum of 10, taken from the summated total of the ten statement questions. For life satisfaction, Year 8s are asked the single statement question, 'How do you feel about your life as a whole? On a scale of 1 is 'not happy at all' and 7 is 'completely happy''. Life satisfaction is scored from 1 to 7, with 7 being the highest achievable score.

Self-efficacy statement questions (Year 8s):

(How difficult would you find it to...)

- 1) Get teachers to help me when I get stuck on schoolwork?
- 2) Get another pupil to help me when I get stuck on schoolwork?
- 3) Solve difficult maths problems?
- 4) Do schoolwork for English?
- 5) Get myself to concentrate in class?
- 6) Get myself to do homework?

Locus of Control statement questions (Year 8s):

- 1) Do you believe that most problems will solve themselves if you just leave them alone?
- 2) Do you feel that most of the time it doesn't pay to try hard because things never turn out right anyway?
- 3) Do you feel that most of the time parents listen to what their children have to say?
- 4) Do you feel that when you do something wrong there's very little you can do to make it right?
- 5) Have you felt that when people were nasty to you it was usually for no reason at all?
- 6) Do you believe that when bad things are going to happen they just are going to happen no matter what you try to do to stop them?
- 7) Do you feel that when somebody your age wants to be your enemy there's nothing you can do to change matters?
- 8) Do you feel that when someone doesn't like you there's nothing you can do about it?
- 9) Do you usually feel that it's almost useless to try in school because most other children are just smarter than you?
- 10) Are you the kind of person who believes that planning ahead makes things turn out better?

Life Satisfaction statement question (Year 8s):

- 1) How do you feel about your life as a whole? On a scale of 1 is 'not happy at all' and 7 is 'completely happy'

Years 9 – 12

The self-efficacy tool takes the form of five simple statements to which the individual indicates to what extent they agree or disagree on a five point Likert scale. Self-efficacy is presented as an overall score, maximum 25 and minimum 5, taken from the summated total of the five statement questions. The locus of control tool takes the form of five simple statements to which the individual indicates to what extent they agree or disagree on a five point Likert scale. Locus of control is presented as an overall score, maximum of 25 and minimum of 5, taken from the summated total of the five statement questions. Life satisfaction is presented as a single statement question, 'Overall, how satisfied are you with your life nowadays?' to which the individual responds on an 11 point Likert scale (0-10). Life satisfaction is scored from 0-10, with 10 being the highest achievable score.

Self-efficacy statement questions (Years 9 – 12):

- 1) I can always manage to solve difficult problems if I try hard enough.
- 2) I am confident that I could deal efficiently with unexpected events.
- 3) I can remain calm when facing difficulties because I can rely on my coping abilities.
- 4) When I am confronted with a problem, I can usually find several solutions.
- 5) No matter what comes my way, I'm usually able to handle it.

Locus of control statement questions (Years 9 – 12):

- 1) I am in control of my life.
- 2) If I take the right steps, I can avoid problems.
- 3) Most things that affect my life happen by accident.
- 4) If it's meant to be, I will be successful.
- 5) I can only do what people in my life want me to do.

Life satisfaction statement question (Years 9 – 12):

- 1) Overall, how satisfied are you with your life nowadays?

Definitions

Low/High Self-efficacy: For Years 9 – 12, each of the five statements questions on self-efficacy were answered in response on a five point Likert scale (strongly agree = 5, agree = 4, neither agree nor disagree = 3, disagree = 2 and strongly disagree = 1). Individual responses were summated into a total score out of 25, with 5 being the lowest and 25 the highest. High self-efficacy scores were calculated by determining a score of 70% of the total possible (25) and over as being a high self-efficacy (18-25); low self-efficacy was therefore anything under 70% of the total possible score (5-17).

For Year 8s, there are six statement questions on self-efficacy which are answered in response on a four point Likert scale (very easy = 4, easy = 3, hard = 2 and very hard = 1). Individual responses were summated into a total scored out of 24, with 6 being the lowest and 24 being the highest. High self-efficacy scores were calculated by determining a score of 70% of the total possible scale (24) and over as being a high self-efficacy (17-24); low self-efficacy was therefore anything under 70% of the total possible score (6-16).

Deprivation: The NI Multiple Deprivation Measure (NIMDM 2010) is a measure of deprivation at the small area level. The model of multiple deprivation is based on the idea of distinct dimensions of deprivation which can be recognised and measured separately. People may be counted as deprived in one or more of the domains, depending on the number of types of deprivation they experience. Quintiles of deprivation categorise to what extent a person is living in deprivation and experiencing one or more of these dimensions; Q1 represents the 20% most deprived areas in which people live, with Q5 representing the 20% least deprived.

Urban/Rural: The data have also been analysed by whether respondents are living in SOA's that have been categorised as either urban or rural. The definitions for an urban/rural SOA are outlined in the 'Technical Guidance on production of official statistics for Settlements and Urban-Rural Classification' (May 2016). This report classified each settlement in Northern Ireland into one of eight bands (A-H); bands A-E (i.e. those with a population of greater than or equal to 5,000) can be defined as urban, and bands F-H (i.e. those with a population of less than 5,000) as rural.

Health: The YPBAS outlines 5 distinct health categories by which respondents classify their health status; these are 1) Very Good, 2) Good, 3) Fair, 4) Bad and 5) Very Bad. For the purposes of this bulletin both very good/good and fair/bad/very bad have been combined to create two health groups under which respondents are classified. These are 1) good health and 2) less than good health.

Religious classification: Within this report religion is based on school records for the pupil. The religious categories represented within the questionnaire;

- 1) The Catholic Community
- 2) The Protestant Community
- 3) Other
- 4) No Religion/Missing/Refusal

The classifications 'Other' and 'No Religion/Missing/Refusal' have been combined to form the 'Other/Non-determined' group within this report.

For further information please refer to Appendix A – Technical Notes in; 'Self-efficacy, Locus of Control & Life Satisfaction in Northern Ireland, 2014/15 and 2015/16': <https://www.executiveoffice-ni.gov.uk/publications/self-efficacy-locus-control-life-satisfaction-northern-ireland-201415-and-201516>.

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