

PARTICIPANTS	VARIABLES	INSTRUMENTS	RESULTS
<p>Gregg <i>et al.</i>, 2016</p> <p>Homeless male participants N=18 Age Mean: 41.05 ±11.32</p>	<p>PHYSICAL FITNESS VARIABLES Cardiorespiratory Fitness; Lower back hamstring; Hip flexibility; General muscle strength.</p> <p>PSYCHIC VARIABLES Self-efficacy: Dimension of the self-efficacy feature. Quality of Life: Well-being; Relationship with Others; Social Community; Vivid Involvement; Personal Development; Compliance.</p>	<p>Physical Fitness: 1-Mille Treadmill Walk Test; A Sit-and-Reach Test; A Grip Strength Test.</p> <p>Self-Efficacy: The New General Self-Efficacy Scale (NGSE). Quality of Life: The Quality of Life Scale.</p>	<p>Self-efficacy is positively correlated with quality of life. There is no correlation between self-efficacy and quality of life with the physical fitness parameters studied.</p>
<p>McAuley <i>et al.</i>, 2005</p> <p>Older sedentary adults N=174 Grupo 1: Aerobic Activity Program (Walking or Stretching) Group 2: Toning Program Age Mean: 66.71±5.35 Group 1: 67.42 ±5.24 Group 2: 66.02±11.48</p>	<p>PHYSICAL FITNESS VARIABLES Aerobic capacity</p> <p>PSYCHIC VARIABLES Self-perceived physical fitness: Physical fitness; Physical strength. Exercise Self-efficacy: Self-perceived physical fitness and self-efficacy to exercise; Perceptions of the ability to overcome barriers to exercise.</p>	<p>Physical Fitness: VO² Peak Balke Protocol. Self-perceived physical fitness: The Perceived Importance Profile. Eight-Item Measure of Beliefs in Capabilities. Exercise Self-efficacy: Eight-Item Measure of Beliefs.</p>	<p>Self-efficacy is inversely related to positive well-being after the implementation of the program. But these do not refer to the relationships between the parameters of physical fitness and self-efficacy.</p>
<p>Ligibel <i>et al.</i>, 2012</p> <p>Cancer survivors N=61 Group 1: Telephone-Based Exercise Intervention Group 2: Usual Care Control Age Mean: 50.0±12.0 Group 1: 53.1±10.8 Group 2: 55.5±10.6</p>	<p>PHYSICAL FITNESS VARIABLES Functional exercise capacity</p> <p>PSYCHIC VARIABLES Exercise Self-efficacy: Precontemplation; Contemplation; Preparation; Action; Maintenance; Relaxation. Quality of Life: Global quality of life; Pain; Insomnia.</p>	<p>Physical Fitness: The 6-Minute Walk Test (6MWT); Cycle Ergometer and Treadmill Based Exercise. Exercise Self-Efficacy: The Physical Activity Self-Efficacy Questionnaire. Quality of life: The European Organization for Research and Training, Quality of Life Questionnaire - Core 30, Version 3.0 (The EORTC QLQ-C30).</p>	<p>The increase in the amount of weekly physical activity, the improvement in physical fitness, self-perceived physical fitness, and self-efficacy due to the intervention process for group 1. They do not refer to the relationships between physical fitness parameters and self-efficacy and/or quality of life.</p>
<p>Oka <i>et al.</i>, 1999</p> <p>Patients with heart failure N=40 patients Age Mean: 56±12</p>	<p>PHYSICAL FITNESS VARIABLES Functional capacity</p> <p>PSYCHIC VARIABLES Self-efficacy: Confidence to carry out the behavior; Average strength; Expectations of self-efficacy for each behavior.</p>	<p>Physical Fitness: VO² Peak Naughton Protocol; The 6-Minute Walk Test (6MWT). Self-Perceived physical fitness: 5-Item Physical Condition Questionnaire.</p>	<p>There are positive correlations between physical fitness through the 6-minute test with the walking and stair-climbing self-efficacy scales. Perceived physical fitness was associated with emotional wellbeing. No correlation was found between self-efficacy and quality of life.</p>

	<p>Self-Perceived physical fitness: Individual perception of various aspects of physical condition.</p> <p>Quality of Life: Energy; Fatigue; Wellbeing.</p>	<p>Exercise Self-efficacy: The Self-Efficacy Expectation Scales for Walking, Stair climbing and General Activities.</p> <p>Quality of life: The Medical Outcomes Study 36-Item Short Form (SF-36).</p>	
<p>Belza <i>et al.</i>, 2001</p> <p>People with chronic obstructive pulmonary disease (COPD) N=63 patients Age Mean: 65.4±8.0</p>	<p>PHYSICAL FITNESS VARIABLES Functional capacity</p> <p>PSYCHIC VARIABLES Exercise Self-efficacy: self-perceived functional capacity.</p> <p>Quality of Life: Dyspnea; Fatigue; Emotional function; Mastery; Generic health status.</p>	<p>Physical Fitness: The 6-Minute Walk Test (6MWT).</p> <p>Exercise Self-Efficacy: The Self-Efficacy Questionnaire-Walking (SEQ-W).</p> <p>Quality of Life: The Chronic Respiratory Disease Questionnaire (CRQ); SF-36 Health Questionnaire.</p>	<p>The 6MWT is positively and significantly correlated with walking self-efficacy ($r=0.68$) and with SF-36 physical Subscale ($r=0.67$) but not with mental subscale.</p> <p>SEQ-W is positively and significantly correlated with SF-36 physical subscale ($r=0.67$).</p>
<p>Damush <i>et al.</i>, 2006</p> <p>Breast cancer survivors. Group 1: Experimental N=34 patients Age Mean: 59.6±6.6</p>	<p>PHYSICAL FITNESS VARIABLES Aerobic capacity, Lower body strength; Agility; flexibility; health.</p> <p>PSYCHIC VARIABLES Exercise for self-efficacy: Perceived barriers; Benefits and enjoyment of physical activity.</p> <p>Quality of Life: Depression; Fatigue; Physical functioning; Psychosocial functioning.</p>	<p>Physical Fitness: Senior Fitness Test Battery (2 Min Step Test; The 30s Chair Stand; The Arm Curl; The Chair sit and reach; Back scratch; 8ft Get Up and Go).</p> <p>Exercise self-efficacy: Likert Scales (Sallis et al.1988)</p> <p>Quality of life: CARES-SF</p>	<p>This program improves perceived barriers to exercise and physical fitness by improving endurance and strength levels, and quality of life.</p> <p>They do not refer to the relationships between physical fitness parameters and self-efficacy and/or quality of life.</p>
<p>Ries <i>et al.</i>, 2003</p> <p>Patients with chronic lung disease N=172 Group 1: Experimental maintenance program Group 2: Standard care control group Age Mean: 67.1±8.2</p>	<p>PHYSICAL FITNESS VARIABLES Maximum distance possible in 6 minutes.</p> <p>PSYCHIC VARIABLES Exercise Self-efficacy: Change in behavior toward exercise (Range of activity; General effort in moving things; Lifting; Climbing stairs; Tolerating stress; Tolerating anger).</p> <p>Quality of Life: Self-perceived physical fitness; Mental function; Fatigue; Dyspnea; Mastery.</p> <p>Physical Functioning; Body pain; Role limitations due to physical health problems; Role limitations due to personal or emotional problems; General mental health; Social functioning; Energy; Fatigue; General health perceptions.</p>	<p>Physical Fitness: The 6-Minute Walk Test (6MWT).</p> <p>Exercise Self-Efficacy: The Self Efficacy Questionnaire Walking (SEQ-W).</p> <p>Quality of life: The Quality of Well-Being Scale (QWB); The Chronic Respiratory Questionnaire (CRQ); The Rand 36-item Health Survey.</p>	<p>The experimental group shows improvements after the intervention in the 6MWT test; in walking self-efficacy and in quality of life levels.</p> <p>Follow-up over 1 and 2 years shows that the levels of resistance, self-efficacy and quality of life of the experimental group tend to be balanced with the levels of the control group.</p> <p>They do not refer to the relationships between physical fitness parameters and self-efficacy and/or quality of life.</p>
<p>Collins <i>et al.</i>, 2004</p> <p>Individuals with heart failure N= 31 Group 1: Aerobic Exercise Program</p>	<p>PHYSICAL FITNESS VARIABLES: Peak oxygen consumption; Functional aerobic impairment.</p> <p>PSYCHIC VARIABLES: Exercise Self-efficacy: Confidence in designated change towards exercise behavior.</p>	<p>Physical Fitness: Functional Aerobic Impairment (FAI); Naughton Treadmill Test (TNT).</p> <p>Self-Perceived Physical Fitness: SF-36 Health Questionnaire.</p>	<p>Significant gains in fitness levels are shown for those who maintained exercise for 24 to 36 weeks. The exercise group has higher levels of self-perceived fitness. After the intervention, the group that maintained physical exercise showed significant improvements at 24 weeks in self-perceived physical fitness levels.</p>

<p>Group 2: Control group Age Mean: 64±10</p>	<p>Quality of Life: Self-perceived physical fitness; General health; Vitality; Mental health; Physical role; Emotional role; Social function; Body pain.</p>	<p>Exercise Self-Efficacy: The 16-item Cardiac Exercise Self-Efficacy. Quality of Life: The Medical Outcomes 36-Items Short Form (SF-36).</p>	<p>Higher levels of self-efficacy for the intervention group after the program. These improvements are maintained in the subjects who maintained the exercise. No relationships between physical fitness parameters and self-efficacy and/or quality of life are found.</p>
<p>Hea-Young, 2006 People with disabilities N=40 Group 1: Experimental Group 2: Control Age Mean: 53.7 Group 1: 55.1±13.68 Group 2: 52.29±12.11</p>	<p>PHYSICAL FITNESS VARIABLES: Maximum muscle strength of the knee; Grip force; flexibility. PSYCHIC VARIABLES: Exercise self-efficacy: Performance achievements, indirect experience, verbal persuasion and physiological states. (Bandura, 1977). Locus of control; Personal control; Social desire; Ego strength; Interpersonal competence and self-esteem. Sherer and Maddux, (1982) and (1994). Quality of Life: Self-perceived physical fitness; General health; Vitality; Mental health; Physical role; Emotional role; Social function; Body pain.</p>	<p>Physical Fitness: Lafayette instrument company (United Stated of America). Exercise Self-efficacy: Bandura Self-Efficacy Scale 1997; Sherer & Maddux Self-Efficacy Scale (1982) and (1994). Quality of life: The Short Form-36 Health Survey (version 2).</p>	<p>After the intervention, the experimental group shows better levels of maximum muscle strength of the extensors and flexors of the knee and better levels of flexibility, in addition there are improvements in the level of self-efficacy towards exercise and in the levels of quality of life regarding the control group. They do not refer to the relationships between physical fitness parameters and self-efficacy and/or quality of life.</p>
<p>Hospes <i>et al.</i>, 2009 Patients with chronic obstructive pulmonary disease (COPD) N=35 Group 1: Exercise Counseling Group 2: Usual Care Age Mean Group 1: 63.1±8.3 Group 2: 61.2±9.1</p>	<p>PHYSICAL FITNESS VARIABLES Leg strength; Arm strength; Grip force; Cardiorespiratory endurance. PSYCHIC VARIABLES Exercise Self-efficacy: Perceived flexibility; Reaction time; Perceived general strength; Self-perceived physical condition; Smooth movements; Climbing stairs; Perceived strength in hand; Perceived speed of walking; Change in exercise behavior; Perceived balance; Perceived general activity. Quality of Life: Symptoms; Activity; Impacts. Symptoms; Functional state; Mental state.</p>	<p>Physical Fitness: The Chair-Stand-Test; The arm curl Test; The 6-Minute Walk Test (6MWT); Handheld Dynamometer. Self-Perceived Physical Fitness: Self-efficacy in Leisure-Time Physical Activity (LIVAS) Exercise Self-Efficacy: Self-efficacy in Leisure-Time Physical Activity (LIVAS). Quality of Life: The St. George Respiratory Questionnaire (SGRQ-TS); The Clinical COPD Questionnaire.</p>	<p>The program carried out was effective, increasing adherence to daily physical exercise. The experimental group presented significant improvements in leg and arm strength, self-efficacy and quality of life. They do not refer to the relationships between physical fitness parameters and self-efficacy and/or quality of life.</p>
<p>Donesky-Cuenco <i>et al.</i>, 2009 People with chronic obstructive pulmonary disease (COPD) N=29 Group 1: Yoga Program Group 2: Usual care Control Age Mean Group 1: 72.2±6.5 Group 2: 67.7±11.5</p>	<p>PHYSICAL FITNESS VARIABLES: Muscle endurance; Muscle strength; Exercise performance. PSYCHIC VARIABLES: Quality of Life: Self-physical fitness; General health; Vitality; Mental health; Physical role; Emotional role; Social function; Body pain. Dyspnea; Fatigue; Mastery, Emotional function.</p>	<p>Physical Fitness: The 6-Minute Walk Test (6MWT); Symptom-Limited Test; Isokinetic muscle testing. Quality of Life: SF-36 Health Questionnaire; The Chronic Respiratory Disease Questionnaire (CRQ).</p>	<p>After 3 months of intervention with a yoga program, significant improvements are obtained in the 6MWT test for the experimental group. But they do not refer to the relationships between the parameters of physical fitness and quality of life.</p>

<p>Yeh <i>et al.</i>, 2011</p> <p>Patients with chronic heart failure N=100 Group 1: Tai chi group Group 2: Education group Age Mean Group 1: 68.1±11.9 Group 2: 66.6±12.1</p>	<p>PHYSICAL FITNESS VARIABLES Aerobic capacity; Agility.</p> <p>PSYCHIC VARIABLES Exercise Self-efficacy: confidence in the designated change towards exercise behavior. Quality of Life: Swelling in the ankles; Difficulty climbing stairs; Fatigue; Depressive feelings; Monetary expense; Health-related treatment.</p>	<p>Physical Fitness: Bicycle Ramp Protocol (Borg scale); The 6-Minute Walk Test (6MWT); Timed Up and Go.</p> <p>Exercise Self-Efficacy: The 16-Item Cardiac Exercise Self-Efficacy.</p> <p>Quality of Life: Minnesota Living with Heart Failure Questionnaire (MLHFQ).</p>	<p>The intervention group after the Tai chi program significantly improves the levels of quality of life and self-efficacy towards exercise in comparison with the control group. There is improvement in the 6MWT test for the intervention group although there are no relevant differences between groups. There are no relationships between physical fitness parameters with self-efficacy and/or quality of life.</p>
<p>McKay <i>et al.</i>, 2012</p> <p>Patients undergoing total knee arthroplasty N=22 Group 1: Intervention Group 2: Control Age Mean Group 1: 63.5±4.93 Group 2: 60.58±8.05</p>	<p>PHYSICAL FITNESS VARIABLES Quadriceps strength; Mobility; Balance.</p> <p>PSYCHIC VARIABLES Self-efficacy: Pain; Self-perceived physical function; other symptoms. Quality of life: Physical function; General health; Vitality; Mental health; Physical role; Emotional role; Social function; Body pain.</p>	<p>Physical Fitness: Isometric Strength Assessment; 50-Foot Flat Surface Walking Test; Stair Ascent-Descent.</p> <p>Self-Perceived Physical fitness: The Arthritis Self-Efficacy Scale.</p> <p>Self-efficacy: The Arthritis Self-Efficacy Scale.</p> <p>Quality of Life: The Short Form 36 (SF-36).</p>	<p>The intervention affects the improvement of quadriceps strength levels and significantly improves self-efficacy and quality of life for the experimental group. But they do not refer to relationships between physical fitness parameters and self-efficacy and/or quality of life.</p>
<p>Nam <i>et al.</i>, 2012</p> <p>People with type 2 diabetes N=140 Group 1: Exercise Group 2: control Age Mean Group 1: 57.24±6.08 Group 2: 55.53±6.49</p>	<p>PHYSICAL FITNESS VARIABLES Maximum oxygen consumption ;Muscle strength.</p> <p>PSYCHIC VARIABLES Exercise Self-efficacy: Self-perceived ability to perform arm and leg tasks before and after training. Quality of Life: Self-perceived physical fitness; General health; Vitality; Mental health; Physical role; Emotional role; Social function; Body pain.</p>	<p>Physical Fitness: Peak Oxygen Uptake (VO₂) with Treadmill Walking Test. The Borg Rating of Perceived Exertion Scale; 1-Repetition Maximum of 7 Exercises.</p> <p>Exercise Self-Efficacy: The Exercise Self-Efficacy Scale.</p> <p>Quality of Life: Short-form 36 Item Health Survey.</p>	<p>Subjects who participated in the exercise group dropped out of the activity to a greater extent than in the control group; those who dropped out had lower levels of self-efficacy in lifting and less physical fitness. It does not relate physical fitness variables to self-efficacy and quality of life.</p>
<p>Baptista <i>et al.</i>, 2012</p> <p>Patients with Fibromyalgia N=80 Group 1: Dance group Group 2: Control group Age Mean Group 1: 49.5 Group 2: 49.1</p>	<p>PHYSICAL FITNESS VARIABLES Functional capacity</p> <p>PSYCHIC VARIABLES Quality of Life: Self- perceived physical fitness; General health; Vitality; Mental health; Physical role; Emotional role; Social function; Body pain; Physical function and Severity of symptoms</p>	<p>Physical Fitness: The 6-Minute Walk Test (6MWT).</p> <p>Quality of Life: The Quality of Life Short Form 36 (SF-36); Fibromyalgia Impact Questionnaire (FIQ).</p>	<p>The intervention was followed by improved physical fitness and increased quality of life for the experimental group. No correlation is reported between the 6MWT test and quality of life parameters.</p>

<p>Fröhlich-Grobe <i>et al.</i>, 2014</p> <p>Wheelchair users N=128 Group 1: The Staff Supported Intervention group Group 2: Self-Guide Comparison Group Age Mean Group 1: 46.0±12.1 Group 2: 42.9±13</p>	<p>PHYSICAL FITNESS VARIABLES Maximal strength; Aerobic capacity.</p> <p>PSYCHIC VARIABLES Exercise Self-efficacy: Exercise; Nutrition; Responsible health practice; Psychological well-being. Quality of Life: Self-perceived physical fitness; General health; Vitality; Mental health; Physical role; Emotional role; Social function; Body pain.</p>	<p>Physical Fitness: 1-Repetition Maximum Free Weight Bench Press; Discontinuous Arm Crank Test with SciFit Pro Ergometer[®].</p> <p>Self-efficacy: Self-Rated Abilities for Health Practices Scale (SRAHP).</p> <p>Quality of Life: SF-36 Health Questionnaire.</p>	<p>Group 1 increased their physical exercise practice more than group 2, but there were no significant differences in the aerobic capacity or strength. Exercise Self-efficacy improved for the self-guided group. There are no changes in quality of life associated with body pain. But they do not refer to the relationships between physical fitness parameters and self-efficacy and/or quality of life.</p>
<p>Sullivan <i>et al.</i>, 2014</p> <p>Participants with chronic stroke N=11 Group 1: Podometer-Monitored, community-based intervention Age Mean: 60.4±12.1</p>	<p>PHYSICAL CONDITION VARIABLES Walking endurance.</p> <p>PSYCHIC VARIABLES Self-efficacy: Confidence in performing specific outpatient activities. Quality of Life: Strength; Hand function; Activities of daily living / instrumental activities of daily living; Mobility.</p>	<p>Physical Condition: The 6-Minute Walk Test (6MWT); The 10-Meter Walk Test (10MWT).</p> <p>Self-Efficacy: The Activities-Specific Balance Confidence Scale (ABC Scale).</p> <p>Quality of Life: Stroke Impact Scale-16 (SIS-16).</p>	<p>The increase in the number of steps correlates with an increase in Self-perceived physical fitness and this in turn correlates with moderate changes in the 6MWT and quality of life. In addition, barriers to physical exercise are minimized. There are no significant changes in the group over the measurement time.</p>
<p>Cameron-Tucker <i>et al.</i>, 2014</p> <p>Outpatients with chronic obstructive pulmonary disease (COPD). N=84 Group 1: Chronic Disease Self-Management Program (CDSMP)+exercise. Group 2: (CDSMP)-only. Age Mean: 65.8±9.35 Group 1: 64.5±9.13 Group 2: 67.1±9.41</p>	<p>PHYSICAL FITNESS VARIABLES Physical capacity</p> <p>PSYCHIC VARIABLES Exercise self-efficacy: Confidence to exercise behavior. Quality of Life: Self-perceived physical fitness; General health; Vitality; Mental health; Physical role; Emotional role; Social function; Body pain.</p>	<p>Physical Fitness: The 6-Minute Walk Test (6MWT).</p> <p>Exercise Self-efficacy: Exercise Self-Efficacy Scale.</p> <p>Quality of Life: The Short-Form 36 Questionnaire, version 2 (SF-36).</p>	<p>There was a significant improvement in the 6MWT test for both groups. No difference in the comparison between groups. There was no change in both groups in self-efficacy. Physical fitness and the role and physical component of quality of life increased in the exercise group with no difference in treatment. They found no significant correlation between the 6MWT test and self-efficacy and quality of life. Moderate exercise and self-efficacy explained 7.9% of the variation in 6MWT in a multiple linear regression model.</p>
<p>Kersten <i>et al.</i>, 2015</p> <p>People with sclerosis and stroke N=20 Group 1: Experimental Group 2: Control Age Mean Group 1: 57(53-70) Group 2: 54(51-67)</p>	<p>PHYSICAL FITNESS VARIABLES Aerobic capacity</p> <p>PSYCHIC VARIABLES Self-perceived physical fitness: Self-reported mobility. General Self-efficacy: The stable feeling of personal competence to effectively handle a wide variety of stressful situations. Symptom control; Role function; Emotional functioning and communication with physicians. Quality of Life: Mastery; Physical; Psychological; Social; Environmental</p>	<p>Physical Fitness: The 10-Minute Walk Test (10MWT).</p> <p>Self-perceived physical fitness: Rivermead Mobility Index</p> <p>General Self-Efficacy: The General Self-Efficacy Scale; The Self-efficacy for Chronic Diseases Scales.</p> <p>Quality of Life: The World Health Organization Quality of Life questionnaire (WHOQOL-BREF).</p>	<p>The experimental group walks faster than the control group and these values are maintained throughout 12 months of follow-up. There are no significant changes in mobility outcomes for any of the groups. The experimental group obtains better levels of self-efficacy although the values are balanced with the control group over 12 months of follow-up. Quality of life levels are increasing in both groups.</p> <p>No reference is made to the relationships between physical fitness parameters and self-efficacy and/or quality of life.</p>

<p>Nordgren <i>et al.</i>, 2015</p> <p>Rheumatoid arthritis patients N=220 Group 1: Completed the program Group 2: They didn't complete the program. Age Mean Group 1: 58±9.9 Group 2: 60±8.4</p>	<p>PHYSICAL FITNESS VARIABLES Maximal aerobic capacity; Lower limb function Maximum and average grip strength.</p> <p>PSYCHIC VARIABLES Exercise Self-Efficacy: Social support (family, friends) for exercise behavior; Expected long-term health; Beliefs to avoid fear. Quality of Life: Self-care; Pain; Discomfort; Anxiety; Depression.</p>	<p>Physical Fitness: Submaximal Bicycle Ergometer; The Timed-Stands Test; The Grippit Device.</p> <p>Exercise Self-efficacy: The Exercise Self-efficacy Test. Quality of Life: The EuroQol Five-Dimensions Questionnaire (EQ-5D).</p>	<p>The results showed significant changes before and after the intervention programs for the two groups. Levels of physical fitness, self-efficacy and quality of life were significantly improved at one year and greater adherence to the training program was shown, resulting in improved perception of health and self-efficacy towards exercise.</p> <p>No reference is made to the relationships between physical fitness parameters and self-efficacy and/or quality of life.</p>
<p>Feldstain <i>et al.</i>, 2016</p> <p>Advanced cancer patients N=80 Group 1: Quasi-experimental Average age: 64.04±12.50</p>	<p>PHYSICAL FITNESS VARIABLES Maximal oxygen uptaken</p> <p>PSYCHIC VARIABLES Self-efficacy: Self-perceived physical fitness and general self-efficacy.</p>	<p>Physical Fitness: The 6-Minute Walk Test (6MWT). Self-perceived physical condition: General Self-efficacy Scale.</p> <p>Self-efficacy: General Self-efficacy Scale.</p>	<p>The intervention helps to increase exercise levels and reinforce beliefs of self-efficacy. They do not study the changes that occur with 6MWT results. Self-efficacy is the only factor in the intervention that helps reduce depressive symptoms. Exercise and physical endurance are not significant in relation to depression.</p> <p>They do not refer to the relationships between physical fitness parameters and self-efficacy.</p>
<p>Pilleri <i>et al.</i>, 2015</p> <p>People with Parkinson disease N=20 Group 1: (robot assisted gait training) Age Mean: 64.5 (45-71)</p>	<p>PHYSICAL FITNESS VARIABLES Aerobic capacity; Balance.</p> <p>PSYCHIC VARIABLES Self-efficacy: Fear of falling during daily activities. Quality of Life: Activities of daily life; Attention and work memory; Communication; Depression; Quality of life; Social relationship.</p>	<p>Physical Fitness: Timed Up and go Test (TUG); The 10-Minute Walk Test (10-MWT); Berg Balance Scale (BBS).</p> <p>Self-Efficacy: The Fear of Falling Efficacy Scale (FFES) Quality of Life: The Parkinson's Disease Questionnaire-8 (PDQ-8).</p>	<p>After the intervention, aerobic capacity and balance improve, indicating an improvement in perceived stability. It also reflects improved levels of self-efficacy and quality of life.</p> <p>No relationships are expressed between the variables of physical fitness, self-efficacy and quality of life.</p>
<p>Bailey <i>et al.</i>, 2016</p> <p>Pre-diabetic and type 2diabetes participants N=13 Group 1: Standard care (CON condition). Grupo 2: Self-monitoring intervention (SMcondition). Age Mean: 61.14±8.38</p>	<p>PHYSICAL FITNESS VARIABLES Cardiovascular fitness</p> <p>PSYCHIC VARIABLES Exercise Self-efficacy: Adherence to the exercise routine. Quality of Life: self-perceived physical fitness; General Health; Vitality; Mental Health; Physical Role; Emotional Role; Social Function; Body Pain.</p>	<p>Physical Fitness: The 6-Minute Walk Test (6MWT).</p> <p>Exercise Self-Efficacy : Self-Monitor Exercise Behavior (SMEB). Quality of Life: The Short Form 36 Health Survey.</p>	<p>The group 2 shows great effects due to the intervention. Levels of self-efficacy increase. Significant improvement in both behavior and exercise adherence.</p> <p>Quality of life increases in all groups throughout the intervention and follow-up. There is a significant increase in the 6MWT test in both groups. They do not refer to the relationships between physical fitness parameters and self-efficacy and/or quality of life.</p>

<p>Liao <i>et al.</i>, 2016</p> <p>Chronic stroke participants N=84</p> <p>Group 1: Low Intensity Body Vibration Group 2: High Intensity Body Vibration Group 3: Control Age Mean: 61.2±9.2</p>	<p>PHYSICAL FITNESS VARIABLES Muscle strength; Balance; Walking endurance; Functional mobility.</p> <p>PSYCHIC VARIABLES Balance Self-efficacy: Confidence in the performance of specific outpatient activities. Quality of Life: Self-perceived physical fitness; Physical Role; Body Pain; General Health; Vitality; Social Function; Emotional Role; Mental Health.</p>	<p>Physical Fitness: Dynamometer; The 14-item Mini Balance Evaluation Systems Test (Mini-BESTest); The 6-Minute Walk Test (6MWT); Timed Up and Go (TUG).</p> <p>Balance Self-efficacy: The Activities-Specific Balance Confidence Scale (ABC Scale).</p> <p>Quality of Life: Short-Form Health Questionnaire SF-12.</p>	<p>The results showed a significant increase between groups in the parameters of physical fitness, self-efficacy and quality of life with respect to effect size.</p> <p>There are no appreciable differences between group 1 and group 2 in relation to the variables evaluated. The programs are not effective in their purpose.</p> <p>No results are presented for the relationships between physical fitness, self-efficacy and quality of life.</p>
<p>Yeh <i>et al.</i>, 2016</p> <p>Patients with heart failure N=100</p> <p>Group 1: Tai chi Group 2: Education Age Mean Group 1: 69 Group 2: 66</p>	<p>PHYSICAL FITNESS VARIABLES Aerobic capacity; Agility.</p> <p>PSYCHIC VARIABLES Exercise Self-efficacy: Confidence in the designated change towards exercise behavior Quality of Life: self-perceived physical fitness; Physical Role; Body Pain; General Health; Vitality; Social Function; Emotional Role; Mental Health; Ankle swelling; Difficulty climbing stairs; Fatigue; Depressive feelings; Money spent; Health-related treatment</p>	<p>Physical Fitness: Bicycle Ramp Protocol; The 6-Minute Walk Test (6MWT); Timed Up and Go.</p> <p>Exercise Self-Efficacy: The 16-item Cardiac Exercise Self-Efficacy.</p> <p>Quality of Life: Minnesota Living with Heart Failure Questionnaire (MLHFQ); SF-12v2 Short Form Health Survey.</p>	<p>There was no improvement in physical fitness.</p> <p>Group 1 shows significant improvements in self-efficacy over 1 year in comparison with group 2.</p> <p>Quality of life levels are higher in group 1 compared to group 2.</p> <p>The Tai chi program was effective in improving self-efficacy and quality of life with respect to the other group in this type of patient.</p> <p>The 6MWT test is associated with change in self-efficacy.</p>
<p>Bieler <i>et al.</i>, 2017</p> <p>Participants with hip osteoarthritis N=152</p> <p>Group 1: Nordic Walking Group 2: strength training Group 3: Home-based exercise Age Mean Group 1: 70.0±6.3 Group 2: 69.6±5.4 Group 3: 69.3±6.4</p>	<p>PHYSICAL FITNESS VARIABLES Functional performance: Endurance capacity; muscle strength, muscle function.</p> <p>PSYCHIC VARIABLES Self-perceived Physical Fitness: physical function. Exercise Self-efficacy: Self-efficacy for climbing stairs; Pain; self-perceived physical fitness and other symptoms. Quality of Life: Self-perceived physical fitness; General health; Vitality; Mental health; Physical role; Emotional role; Social function; Body pain.</p>	<p>Physical Fitness: The 30-second Chair Stand Test(30Secs); Timed Stair Climbing Test (TSC); 8-Foot Up and Go Test; 15-Second Marching on the Spot Test; 6-Minute Walk Test (6MWT).</p> <p>Self-Perceived Physical Fitness: The Arthritis Self-Efficacy Scale (ASES).</p> <p>Self-efficacy: Task-Specific Self - Efficacy; The Arthritis Self-Efficacy Scale (ASES).</p> <p>Quality of Life: The Danish SF36 Health Survey.</p>	<p>The Nordic Walking group gets the most important improvements in terms of physical fitness. Self-efficacy and quality of life also improve the most in this particular group in terms of mental health levels. The improvement in the hours spent in the most vigorous physical activity during the follow-up period is maintained.</p> <p>The strength training group improves functional performance and quality of life factors at 12 months, more than group 3. Quality of life improves more in group 1 and group 2 than in group 3.</p> <p>They do not refer to the relationships between physical fitness parameters and self-efficacy and/or quality of life.</p>
<p>Zanaboni <i>et al.</i>, 2016</p> <p>Patients with chronic obstructive pulmonary disease (COPD) N=120 Group 1: telerehabilitation</p>	<p>PHYSICAL FITNESS VARIABLES Functional exercise capacity</p> <p>PSYCHIC VARIABLES Exercise Self-efficacy: Maintenance of exercise; Maintenance of self-management routines. Quality of Life: Self-care; Pain; Discomfort; Anxiety; Depression.</p>	<p>Physical Fitness: 6-Min Walking Distance (6MWD).</p>	<p>No results are presented for the relationships between physical fitness, self-efficacy and quality of life.</p> <p>The physical fitness and quality of life in group 1 improves over one year compared to the other two groups.</p> <p>Telerehabilitation can prevent deterioration, improve physical performance, health status and quality of life.</p>

<p>Group 2:Treadmill Group 3: control Age Mean: Between 40-80 years old</p>		<p>Self-Efficacy: The Generalized Self-Efficacy Scale (GSES). Quality of Life: The EuroQol Five-Dimensional Questionnaire (EQ-5D).</p>	
<p>Tang <i>et al.</i>, 2017 Patients with chronic kidney disease N=84 Group 1: Experimental Group 2: Control Age Mean Group 1: 46.26±15.61 Group 2: 43.90±12.44</p>	<p>PHYSICAL FITNESS VARIABLES Endurance; Function of lower body muscle strength PSYCHIC VARIABLES Exercise Self-efficacy: Self-perceived ability to perform arm and leg tasks before and after training. Quality of Life: List of symptoms/problems; Effects of kidney disease; Burden of kidney disease; Physical component; Mental component; Physical function; General health; Vitality; Mental health; Physical role; Emotional role; Social role; Body pain</p>	<p>Physical Fitness: The 6-Minute Walk Test (6MWT); 10 Repetition of Sit to Stand Test (STS10). Exercise Self-Efficacy: The Self-Efficacy for Exercise Scale (SEE). Quality of Life: The Kidney Disease Quality of Life (KDQOL-36); SF-12 Health Questionnaire.</p>	<p>No results are presented for the relationships between physical fitness, self-efficacy and quality of life. Group 1 improves their physical fitness, self-efficacy and quality of life. Improvements in 6MWT and STS10 helped to achieve the reported quality of life improvements. The exercise program is effective in improving the physical fitness and quality of life in these patients.</p>
<p>Tu <i>et al.</i>, 1997 Patients with chronic obstructive pulmonary disease (COPD) N=203 Grupo 1: Subjects with unstable conditions Grupo 2: Subjects with stable conditions Group 3: Lung education subjects Age Mean: 70 years old</p>	<p>PHYSICAL FITNESS VARIABLES Functional exercise capacity. PSYCHIC VARIABLES Self-efficacy: Negative effect; intense arousal emotional; physical effort; climate / environment environment; and behavioral risk factors. Quality of life: Self-perceived physical fitness; General health; Vitality; Mental health; Physical role; Emotional role; Social function; Body pain.</p>	<p>Physical Fitness: The 6-Minute Walk Test (6MWT). Self-Efficacy: Chronic Pulmonary Disease Self-Efficacy Scale (CSES). Quality of Life: The Medical Outcomes Study Short Form 36 (SF-36).</p>	<p>Self-perceived physical fitness scale of SF-36 is more correlated with 6MWT than with emotional function. The physical fitness scale of SF-36 shows a moderate correlation between the physical fitness parameters and the physical fitness scale.</p>
<p>Wang <i>et al.</i>, 2018 Adult with fibromyalgia N=226 Group 1: Tai chi Group 2: Aerobic exercise Age Mean Group 1: 52.1±13.3 Group 2: 50.9±12.5</p>	<p>PHYSICAL FITNESS VARIABLES Physical function; Muscle strength and power; Balance. PSYCHIC VARIABLES Self-efficacy: Pain; self-perceived physical fitness and other symptoms. Quality of Life: Self- perceived physical fitness; General health; Vitality; Mental health; Physical role; Emotional role; Social function; Body pain.</p>	<p>Physical Fitness: The 6-Minute Walk Test (6MWT), Balance Test; The Chair Stand Test; Leg Press. Self-Perceived Physical Fitness: The Arthritis Self-Efficacy Scale (ASES). Self-efficacy: The arthritis self-efficacy scale (ASES). Quality of Life: The Short Form Health Survey</p>	<p>No results are presented for the relationships between physical fitness, self-efficacy and quality of life. The group 1 obtains equal or better results in self-efficacy and quality of life after 24 weeks and greater adherence compared to group 2. Psychological benefits may be associated with longer exercise practice affecting mental health and physical fitness.</p>
<p>Moy <i>et al.</i>, 2009 Persons with severe chronic obstructive pulmonary disease (COPD) N=1621 patients.</p>	<p>PHYSICAL FITNESS VARIABLES Exercise capacity PSYCHIC VARIABLES</p>	<p>Physical Fitness: The 6-Minute Walk Test (6MWT).</p>	<p>Physical fitness values are positively related to quality of life. The self-perception of being disabled is significantly associated with the quality of life.</p>

Age Mean: 66± 6	Quality of Life: Self-perceived physical fitness; Physical role; Body pain; General health Perceptions; Vitality; Social function; Emotional role; Mental health.	Quality of life: The Medical Outcomes Study 36-Item Short Form (The MOS SF-36); The St. George's Respiratory Questionnaire Total Score (SGRQ-TS); Self-Administered Quality of-Well-Being Scale (QWB-SA).	
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