

Health Behavior Intentions Predict Change in Perceived Capacity, Not Controllability: A
Motivational Account of Perceived Behavioral Control

Antonio L. Freitas

Stony Brook University

email contact: antonio.freitas@stonybrook.edu

Keywords: THEORY OF PLANNED BEHAVIOUR; SELF-EFFICACY; LOCUS OF CONTROL;
EXERCISE; PERCEIVED CONTROL

Preregistration: <https://osf.io/38mzw/registrations>

Data Availability: The data analyzed in this study are publicly available (Hagger et al.,
2021). All code is available at <https://osf.io/ufn3g/overview>.

In press, *Journal of Health Psychology*

Abstract

Understanding how control beliefs relate to motivation is central to health psychology, yet whether such beliefs function primarily as antecedents or consequences of motivation remains unclear. Drawing on two national samples from the Theory of Planned Behavior Replication Project (Germany, $N = 2,060$; UK, $N = 2,054$), this research focuses on two different components of perceived behavioral control, perceived capacity (ability, ease) and perceived controllability (external constraint), and examines their temporal relations with intentions to engage in vigorous physical activity. Confirmatory factor analyses supported a two-component structure of control beliefs and demonstrated that intentions and capacity are empirically distinct. In lagged regressions replicated across samples, Time-1 intentions predicted increases in perceived capacity after accounting for prior behavior and controllability, whereas intentions did not uniquely predict changes in perceived controllability. Refining theoretical models of control in health-behavior change, these findings suggest that motivational commitment may selectively shape self-evaluative control beliefs.

Health Behavior Intentions Predict Change in Perceived Capacity, Not Controllability: A Motivational Account of Perceived Behavioral Control

To explain how people initiate and sustain health-promoting behaviors, control-related beliefs have featured prominently in extensive research emphasizing different aspects of people's senses of control over their actions and outcomes (Ajzen, 2002; Bandura, 2001; Bouchard et al., 2017; Steptoe, & Wardle, 2001). Most research has treated control-related beliefs as causal antecedents of health behavior (Hagger et al., 2022). At the same time, classic and contemporary theories suggest that people's goals, commitments, and behavioral experiences can affect their perceptions of control (Bandura, 2001; Lim & Weissmann, 2024). These complementary perspectives imply that control beliefs may operate both as antecedents and outcomes of motivational processes. The conditions under which control beliefs primarily serve each role, however, remain poorly understood.

Within the theory of planned behavior (TPB; Ajzen, 2002), perceived behavioral control (PBC) is regarded as a central determinant of intentions and behavior. Although PBC is often operationalized as a single construct, measurement work has long distinguished at least two related components (Armitage & Conner, 1999; Terry & O'Leary, 1995). One component, perceived capacity, reflects beliefs about one's ability or ease of performing a behavior. The other, perceived controllability (i.e., "*up-to-me*" beliefs), reflects beliefs about whether outcomes are constrained by external forces. For instance, a person considering beginning vigorous exercise might believe, "I am capable of sticking to a regular workout routine" (capacity) while simultaneously believing, "Whether I can actually exercise regularly depends on my work schedule and family obligations" (controllability). Although both beliefs concern behavioral control, they differ in whether they primarily evaluate one's own capabilities or external circumstances, a distinction long central to motivation research (Weiner, 2018). Nevertheless, empirical studies frequently combine these components into a single PBC composite (Hagger et

al., 2022). Doing so may obscure important differences in how these beliefs develop and change over time. The present research therefore examines whether distinguishing perceived capacity from perceived controllability can help clarify how motivational commitment shapes different forms of perceived behavioral control, given that self-referential and externally-attributed control-related beliefs may not be equally responsive to such commitment.

Within TPB, intentions reflect a commitment or readiness to pursue a chosen course of action and are regarded as the most proximal motivational determinant of behavior (Ajzen, 2002). Contemporary theories of action similarly distinguish the process of deciding whether to pursue a goal from the subsequent commitment to carrying it out, arguing that the transition from deliberation to intention fundamentally changes how people think about themselves and their actions (Achtziger et al., 2025). Once individuals form an intention to pursue a goal, cognitive processing becomes increasingly oriented toward successful implementation, accompanied by greater confidence in one's ability to carry out the intended behavior (Hügelschäfer & Achtziger, 2014). Because perceived capacity concerns one's own capability for successful action, psychological commitment should selectively strengthen these beliefs. This prediction is consistent with broader evidence that motivational influences on judgments are strongest when judgments involve individuals' goals, identities, or desired self-views (Kunda, 1990; Shepperd et al., 2007). By contrast, perceived controllability concerns whether outcomes are constrained by external circumstances rather than one's own abilities. Because these beliefs concern external constraints rather than one's own capabilities, they should be less directly affected by the commitment embodied in behavioral intentions. Accordingly, the present analysis proposes that strongly endorsing health-related intentions will selectively increase perceived capacity rather than perceived controllability. This perspective extends existing accounts by identifying behavioral intentions not only as consequences of perceived

behavioral control but also as a source of change in one of its central components, perceived capacity.

Current Research

The present work draws on data collected from two national samples as part of the Theory of Planned Behavior Replication Project (Hagger et al., 2021), allowing examination of temporal relations among intentions, capacity, and controllability in two-wave data on engaging in vigorous physical activity, a key health determinant (Warburton & Bredin, 2017). Analyses were conducted first in the Germany dataset and then in a preregistered replication in the UK dataset (<https://osf.io/38mzw/registrations>).ⁱ Across both samples, analyses proceeded in two stages. Confirmatory factor analyses first tested whether perceived behavioral control to engage in vigorous physical activity is better represented as a multidimensional construct comprising separable perceived capacity and perceived controllability components, rather than as a single unitary factor. Conditional on establishing this measurement structure, lagged regression models next examined temporal relations between the two control components and intentions. These models tested (a) whether Time-1 intentions to engage in vigorous physical activity predicted subsequent changes in perceived capacity and controllability, reflecting the novel hypothesis that intentions selectively increase perceived capacity; and (b) whether Time-1 perceived capacity and controllability predicted subsequent changes in intentions, reflecting traditionally proposed relations between control beliefs and intentions. This design thus permits direct comparison of control beliefs modeled as potential causes versus consequences of motivational commitment.

Methods

Participants

The present study involved secondary analyses of publicly available, de-identified data; therefore, ethical approval to carry out this research was not required. Participants in the TPB replication project were selected to be adults physically able to engage in vigorous physical activity (for further information, see Hagger et al., 2021). In the Germany sample, there were 2,060 participants, aged 18 – 90 ($M = 45.32$, $SD = 16.55$), with 1,112 men, 942 women, and 5 non-binary persons. In the UK sample, there were 2,054 participants, aged 16 – 90 ($M = 51.17$, $SD = 16.52$), with 1,110 men, 1,036 women, and 8 non-binary persons.

Procedure

Participants completed identical online surveys assessing constructs related to engaging in vigorous physical activity at Time 1 and Time 2, approximately five weeks later.

Measures

All measures were assessed on 7-point scales (with specific anchors indicated below; see Supplemental S1, <https://osf.io/mgjzy>, for a list of items analyzed here and Hagger et al., 2021, for all other measures).

Engagement in physical activity. Three self-report items measured participants' engagement in vigorous physical activity over the prior five weeks (e.g., "In the past five weeks, to what extent did you do at least 75 minutes of vigorous aerobic physical activity each week," 1 = a small extent, 7 = a large extent). Items assessed extent, frequency, and truth endorsement of meeting the activity criterion and were averaged to form a composite past behavior score, with higher scores indicating greater prior engagement.

Intentions. Intentions to engage in vigorous physical activity were assessed at both time points using four itemsⁱⁱ reflecting plans to achieve at least 75 minutes of vigorous aerobic physical activity per week over the subsequent five weeks (e.g., "I intend to do at least 75 minutes of vigorous aerobic physical activity each week over the next five weeks," 1 = strongly

disagree, 7 = strongly agree). Items were treated as reflective indicators of a single intention construct and were averaged to form an intention composite.

Perceived behavioral control. Perceived behavioral control (PBC) was assessed at both time points using four items rated from 1 (strongly disagree) to 7 (strongly agree). Consistent with prior work (Armitage & Conner, 1999; Terry & O’Leary, 1995), two items were specified a priori as indicators of perceived capacity, reflecting beliefs about ability and ease of performing the behavior (e.g., “I am confident I can do at least 75 minutes of vigorous aerobic physical activity each week over the next five weeks”), and two items were specified as indicators of perceived controllability, reflecting beliefs about autonomy and external constraint (e.g., “It is mostly up to me whether I do at least 75 minutes of vigorous aerobic physical activity each week over the next five weeks”). Because the present research was based on a theoretically specified, preregistered distinction between perceived capacity and perceived controllability, confirmatory rather than exploratory factor analysis was used to evaluate the proposed measurement structure. The hypothesized two-factor model was tested against a single-factor PBC model. Conditional on establishing this structure, capacity and controllability scale scores were computed by averaging their respective items.

Results

Confirmatory Factor Analyses

Analyses first tested whether the four perceived behavioral control (PBC) items were better represented by a single latent factor or by two separable components reflecting perceived capacity and perceived controllability. In the Germany dataset ($N = 1,948$), a one-factor model showed poor fit, $\chi^2(2) = 501.57$, $p < .0001$, CFI = .863, RMSEA = .358, SRMR = .094. In contrast, a two-factor model specifying separate Capacity (pbc2, pbc3) and Control (pbc1, pbc4) factors fit the data well, $\chi^2(1) = 3.16$, $p = .075$, CFI = .999, RMSEA = .033, SRMR = .004. A chi-

square difference test confirmed that the two-factor model fit substantially better than the one-factor model, $\Delta\chi^2(1) = 498.41$, $p < .0001$. Replicating those results in the UK data, a one-factor PBC model fit poorly, $\chi^2(2) = 581.97$, $p < .001$, CFI = .849, RMSEA = .391, SRMR = .116, whereas the two-factor Capacity–Control model fit well, $\chi^2(1) = 1.83$, $p = .176$, CFI = 1.000, RMSEA = .021, SRMR = .002. The two-factor model again fit significantly better than did the one-factor model, $\Delta\chi^2(1) = 580.13$, $p < .0001$.

Additional CFAs examined whether intentions and capacity could be collapsed into a single factor, as opposed to remaining distinct from each other and from controllability. In the Germany dataset ($N = 1,948$), a two-factor model collapsing Intention and Capacity into a single “Motivation” factor (with Control as the second factor) fit significantly more poorly, $\chi^2(13) = 199.84$, $p < .001$, CFI = .987, RMSEA = .086, SRMR = .014, than did a three-factor model specifying separate latent factors for Intention, Capacity, and Control, $\chi^2(11) = 77.05$, $p < .001$, CFI = .995, RMSEA = .056, SRMR = .007; $\Delta\chi^2(2) = 122.80$, $p < .0001$. In the UK dataset ($N = 1,894$), the two-factor model again fit more poorly, $\chi^2(19) = 463.94$, $p < .001$, CFI = .978, RMSEA = .111, SRMR = .023, than did the three-factor model, $\chi^2(17) = 83.76$, $p < .001$, CFI = .997, RMSEA = .046, SRMR = .007; $\Delta\chi^2(2) = 380.18$, $p < .0001$. Across both datasets, therefore, perceived capacity and perceived controllability were separable components of PBC, and intentions and capacity, despite their strong association, were empirically distinguishable constructs. Latent correlations among Intention, Capacity, and Controllability are reported in Table 1.

Lagged Regressions Predicting Time-2 Control Beliefs

Composite scores showed good to excellent internal consistency in both samples. In the UK data, reliabilities were high for intentions at Time 1 ($\alpha = .98$) and Time 2 ($\alpha = .96$), capacity at Time 1 ($\alpha = .93$) and Time 2 ($\alpha = .96$), and controllability at Time 1 ($\alpha = .73$) and Time 2 ($\alpha = .96$). In Germany data, reliabilities were similarly strong for intentions at Time 1 ($\alpha = .96$) and

Time 2 ($\alpha = .97$), capacity at Time 1 ($\alpha = .90$) and Time 2 ($\alpha = .94$), and controllability at Time 1 ($\alpha = .74$) and Time 2 ($\alpha = .94$).

Analyses next estimated a series of lagged regressions predicting Time 2 perceived capacity and controllability from Time 1 intentions, controlling for the corresponding Time 1 construct. To address concerns about statistical suppression, all models were estimated both without and with covariates. Results are summarized in Table 2 for the Germany data and in Table 3 for the UK data. In both sets of analyses, Time 1 intentions predicted increases in perceived capacity at Time 2, above and beyond baseline capacity. In the UK data, intentions significantly predicted Time 2 capacity in the baseline model, $b = 0.316$, $p < .001$, and remained significant when controllability was included as a covariate, $b = 0.323$, $p < .001$, and when both controllability and behavior were included, $b = 0.232$, $p < .001$. A parallel pattern was observed in the Germany data, where intentions predicted Time 2 capacity in the baseline model, $b = 0.204$, $p < .001$, and remained significant with covariates included, $bs = 0.204$ and 0.143 , $ps \leq .001$.

By contrast, Time 1 intentions showed less evidence of predicting changes in perceived controllability. In the UK, intentions were associated with Time 2 controllability in the baseline model, $b = 0.062$, $p = .0002$, but this effect was no longer significant when capacity was included as a covariate, $b = -0.033$, $p = .38$, nor when both capacity and behavior were included, $b = -0.081$, $p = .09$. In Germany, a similar pattern emerged: intentions predicted Time 2 controllability in the baseline model, $b = 0.055$, $p = .003$, but the effect was non-significant once capacity was controlled, $b = 0.021$, $p = .58$, and remained non-significant in the full model including behavior, $b = 0.046$, $p = .26$. Thus, across both datasets, intentions uniquely predicted changes in perceived capacity but not perceived controllability, and this asymmetry does not appear attributable to statistical suppression or to shared variance between recent behavioral

success in engaging in vigorous physical activity and intentions to engage in vigorous physical activity in the near future.

Lagged Regressions Predicting Time-2 Intentions

Table 4 reports lagged regression models predicting Time 2 intentions from Time 1 perceived capacity and perceived controllability in both samples, controlling for baseline intentions. In the Germany sample, perceived capacity significantly predicted subsequent intentions when entered alone ($B = 0.126$, $SE = 0.044$, $p = .004$) and remained significant when both capacity and controllability were entered simultaneously ($B = 0.136$, $SE = 0.045$, $p = .003$). In contrast, perceived controllability did not predict changes in intentions, either alone ($B = -0.005$, $SE = 0.027$, $p = .865$) or when adjusting for capacity ($B = -0.024$, $SE = 0.028$, $p = .381$). In the UK sample ($N = 1,236$), neither perceived capacity nor perceived controllability predicted subsequent intentions beyond baseline intentions. Capacity was nonsignificant when entered alone ($B = 0.034$, $SE = 0.042$, $p = .421$) and when adjusting for controllability ($B = 0.034$, $SE = 0.043$, $p = .437$). Controllability similarly failed to predict Time 2 intentions ($ps \geq .835$).

Discussion

Perceived behavioral control is traditionally conceptualized as an antecedent of intentions and, together with intentions, as a predictor of subsequent behavior (Hagger et al., 2022). The present findings suggest that these processes may be complemented by reciprocal influences, whereby the transition from deliberation to motivational commitment focuses cognitive processing on successful implementation and, in turn, on one's own ability to carry out the intended behavior. Consistent with this account, across two independent samples, intentions predicted subsequent increases in perceived capacity but not perceived controllability after accounting for prior behavior and the alternate control dimension. This asymmetry suggests that motivational commitment may selectively shape beliefs about aspects of action that are construed primarily as reflecting one's own capabilities rather than external constraints.

Together with the factor-analytic confirmation of earlier evidence distinguishing perceived capacity from perceived controllability (Armitage & Conner, 1999; Terry & O'Leary, 1995), these longitudinal findings suggest that the two components differ not only in measurement but also in motivational dynamics. Treating perceived behavioral control as a unitary construct therefore may obscure meaningful differences in how motivational commitment shapes control-related beliefs.

Further Implications for Theory and Application

These findings also have implications for theories of self-efficacy. Self-efficacy theory long has emphasized mastery experiences as a primary source of efficacy beliefs (Bandura, 2001). From that perspective, intentions should influence perceived capacity largely indirectly, through successful performance. The present results, however, indicate that intentions prospectively predict increases in perceived capacity even after accounting for prior behavior, suggesting that motivational commitment may contribute to changes in capacity beliefs independently of mastery-related experiences. As such, the findings also may have practical implications for intervention. If forming strong intentions strengthens perceived capacity, interventions designed to strengthen motivational commitment may enhance individuals' sense of capability even before behavioral success is consistently achieved. Distinguishing perceived capacity from perceived controllability likewise may help refine intervention targets by identifying which aspects of control are responsive to motivational processes and which instead require changes in external circumstances.

Limitations and Future Directions

Several limitations warrant consideration. First, the present analyses focused on a single health behavior, vigorous physical activity, which may limit generalizability to other domains of health behavior that differ in their structural constraints or social embeddedness. It remains

unclear whether motivational amplification of perceived capacity generalizes to more externally regulated or medically constrained behaviors. Second, all constructs were assessed via self-report using closely related item formats and reference frames, raising the possibility that some of the observed associations reflect shared method variance. Although confirmatory factor analyses supported the empirical distinctiveness of these constructs, future work would benefit from reducing common method measurement, for example by developing indirect assessments of control-related beliefs (Glock & Kleen, 2019). Third, the present analyses cannot disentangle motivated self-evaluation from performance-based updating. Increases in perceived capacity may reflect motivated self-evaluation or early behavioral engagement between waves, an ambiguity unresolved by the present design. Although lagged regression models allow establishing temporal ordering, moreover, such models cannot by themselves support strong causal inferences about change processes. With only two waves of data, the present design precludes alternative modeling strategies that partition stable between-person variance from within-person change (Lucas, 2023). Accordingly, the present findings should be interpreted as identifying asymmetric predictive relations between intentions and components of perceived control rather than as establishing causal effects of intention formation on capacity beliefs. Future experimental research therefore is needed to test whether strengthening behavioral intentions selectively increases perceived capacity while distinguishing motivated self-evaluation from performance-based updating. Such work would further clarify how motivational commitment shapes self-evaluative control beliefs.

References

- Achtziger, A., Doerflinger, J.T., & Gollwitzer, P. M. (2025). Motivation and volition in the course of action. In Heckhausen, J., Heckhausen, H. (eds), *Motivation and action* (pp. 537-584). Cham: Springer Nature Switzerland. https://doi.org/10.1007/978-3-031-87947-0_12
- Ajzen, I. (2002). Perceived behavioral control, self-efficacy, locus of control, and the theory of planned behavior. *Journal of Applied Social Psychology*, 32(4), 665–683. <https://doi.org/10.1111/j.1559-1816.2002.tb00236.x>
- Armitage, C.J., & Conner, M. (1999). The theory of planned behaviour: Assessment of predictive validity and perceived control. *British journal of social psychology*, 38(1), 35-54. <https://doi.org/10.1348/014466699164022>
- Bandura, A. (2001). Social cognitive theory: An agentic perspective. *Annual Review of Psychology*, 52, 1–26. <https://doi.org/10.1146/annurev.psych.52.1.1>
- Bouchard, L.C., Carver, C.S., Mens, M.C., & Scheier, M.F. (2018). Optimism, health, and well-being. In *Positive Psychology: Established and Emerging Issues*. (pp. 112–130). Routledge/Taylor & Francis Group. <https://doi.org/10.4324/9781315106304-8>
- Glock, S., & Kleen, H. (2019). Implicit and explicit measures of teaching self-efficacy and their relation to cultural heterogeneity: differences between preservice and in-service teachers. *Journal of Research in Special Educational Needs*, 19, 24-35. <https://doi.org/10.1111/1471-3802.12475>
- Hagger, M. S., Cheung, M.W.-L., Ajzen, I., & Hamilton, K. (2022). Perceived behavioral control moderating effects in the theory of planned behavior: A meta-analysis. *Health Psychology*, 41(2), 155–167. <https://doi.org/10.1037/hea0001153>

- Hagger, M.S., Hamilton, K., Ajzen, I., et al. (2021). Testing the replicability of the Theory of Planned Behavior: a large-scale multi-sample registered replication study. <https://doi.org/10.23668/PSYCHARCHIVES.4807>
- Hügelschäfer, S., & Achtziger, A. (2014). On confident men and rational women: It's all on your mind(set). *Journal of Economic Psychology*, 41, 31–44. <https://doi.org/10.1016/j.joep.2013.04.001>
- Kunda, Z. (1990). The case for motivated reasoning. *Psychological Bulletin*, 108(3), 480–498. <https://doi.org/10.1037/0033-2909.108.3.480>
- Lim, W. M., & Weissmann, M.A. (2023). Toward a theory of behavioral control. *Journal of Strategic Marketing*, 31(1), 185-211. <https://doi.org/10.1080/0965254X.2021.1890190>
- Lucas, R.E. (2023). Why the cross-lagged panel model is almost never the right choice. *Advances in Methods and Practices in Psychological Science*, 6(1), 25152459231158378. <https://doi.org/10.1177/25152459231158378>
- Pennycook, G., & Rand, D.G. (2019). Lazy, not biased: Susceptibility to partisan fake news is better explained by lack of reasoning than by motivated reasoning. *Cognition*, 188, 39–50. <https://doi.org/10.1016/j.cognition.2018.06.011>
- Shepperd, J., Malone, W., & Sweeny, K. (2008). Exploring causes of the self-serving bias. *Social and Personality Psychology Compass*, 2(2), 895–908. <https://doi.org/10.1111/j.1751-9004.2008.00078.x>
- Step toe, A., & Wardle, J. (2001). Locus of control and health behaviour revisited: a multivariate analysis of young adults from 18 countries. *British journal of Psychology*, 92(4), 659-672. <https://doi.org/10.1348/000712601162400>

- Terry, D.J., & O'Leary, J.E. (1995). The theory of planned behaviour: The effects of perceived behavioural control and self-efficacy. *British Journal of Social Psychology*, 34(2), 199-220. <https://doi.org/10.1111/j.2044-8309.1995.tb01058.x>
- Warburton, D.E., & Bredin, S.S. (2017). Health benefits of physical activity: A systematic review of current systematic reviews. *Current Opinion in Cardiology*, 32(5), 541-556. <https://doi.org/10.1097/HCO.0000000000000437>
- Weiner, B. (2018). The legacy of an attribution approach to motivation and emotion: A no-crisis zone. *Motivation Science*, 4(1), 4–14. <https://doi.org/10.1037/mot0000082>
- Zell, E., Strickhouser, J.E., Sedikides, C., et al. (2020). The better-than-average effect in comparative self-evaluation: A comprehensive review and meta-analysis. *Psychological Bulletin*, 146(2), 118–149. <https://doi.org/10.1037/bul0000218>

Table 1. Correlations among latent variables

	Intention Capacity Control		
Intention	—	.971	.553
Capacity	.955	—	.600
Control	.390	.479	—

Note: Correlations from the Germany sample ($N = 1,948$) above diagonal; correlations from the UK sample ($N = 1,894$) below diagonal.

Table 2. Lagged regressions predicting Time 2 capacity and controllability from Time 1 intentions (Germany sample, *Ns* = 1,301 to 1,302 depending on missing observations)

Outcome (T2)	Model	Predictor	<i>B</i>	<i>SE</i>	<i>p</i>
Capacity	Baseline	Capacity T1	0.539	0.043	< .001
		Intention T1	0.204	0.042	< .001
	+ Controllability	Capacity T1	0.541	0.044	< .001
		Controllability T1	-0.005	0.027	.85
		Intention T1	0.204	0.042	< .001
	+ Controllability + Behavior	Capacity T1	0.478	0.046	< .001
		Controllability T1	0.004	0.027	.88
		Behavior T1	0.128	0.032	< .001
		Intention T1	0.143	0.044	.001
Controllability	Baseline	Controllability T1	0.503	0.024	< .001
		Intention T1	0.055	0.018	.003
	+ Capacity	Controllability T1	0.497	0.025	< .001
		Capacity T1	0.040	0.040	.32
		Intention T1	0.021	0.038	.58
	+ Capacity + Behavior	Controllability T1	0.494	0.025	< .001
		Capacity T1	0.065	0.042	.13
		Behavior T1	-0.051	0.029	.08
		Intention T1	0.046	0.041	.26

Table 3. Lagged regressions predicting Time 2 capacity and controllability from Time 1 intentions (UK sample, $N = 1,236$)

<u>Outcome (T2)</u>	<u>Model</u>	<u>Predictor</u>	<u>B</u>	<u>SE</u>	<u>p</u>
Capacity	Baseline	Capacity T1	0.439	0.042	< .001
		Intention T1	0.316	0.041	< .001
	+ Controllability	Capacity T1	0.411	0.043	< .001
		Controllability T1	0.068	0.027	.013
		Intention T1	0.323	0.041	< .001
	+ Controllability + Behavior	Capacity T1	0.400	0.043	< .001
		Controllability T1	0.068	0.027	.013
		Behavior T1	0.111	0.038	.004
		Intention T1	0.232	0.051	< .001
Controllability	Baseline	Controllability T1	0.554	0.025	< .001
		Intention T1	0.062	0.017	.0002
	+ Capacity	Controllability T1	0.536	0.025	< .001
		Capacity T1	0.113	0.040	.005
		Intention T1	-0.033	0.038	.38
	+ Capacity + Behavior	Controllability T1	0.536	0.025	< .001
		Capacity T1	0.108	0.040	.008
		Behavior T1	0.058	0.036	.10
		Intention T1	-0.081	0.048	.09

Table 4. Lagged regressions predicting Time 2 intentions from Time 1 capacity and controllability (Germany and UK samples)**Germany sample (N = 1,302)**

<u>Model / Predictor</u>	<u>B</u>	<u>SE</u>	<u>p</u>
Model 1: + Capacity only			
Intention T1	0.632	0.043	< .001
Capacity T1	0.126	0.044	.004
Model 2: + Controllability only			
Intention T1	0.747	0.021	< .001
Controllability T1	-0.005	0.027	.865
Model 3: Capacity + Controllability			
Intention T1	0.633	0.043	< .001
Capacity T1	0.136	0.045	.003
Controllability T1	-0.024	0.028	.381

UK sample (N = 1,236)

<u>Model / Predictor</u>	<u>B</u>	<u>SE</u>	<u>p</u>
Model 1: + Capacity only			
Intention T1	0.753	0.040	< .001
Capacity T1	0.034	0.042	.421
Model 2: + Controllability only			
Intention T1	0.781	0.018	< .001
Controllability T1	0.005	0.026	.835
Model 3: Capacity + Controllability			
Intention T1	0.753	0.040	< .001
Capacity T1	0.034	0.043	.437
Controllability T1	0.000	0.027	.996

ⁱ Additional moderation analyses are reported in Supplement S2 (<https://osf.io/mgjzv>).

ⁱⁱ In the Germany (but not UK) dataset, the third intention item was not available at either wave. Accordingly, intention was modeled using three indicators in the Germany CFAs and four indicators in the UK CFAs, accounting for the different model degrees of freedom across datasets.