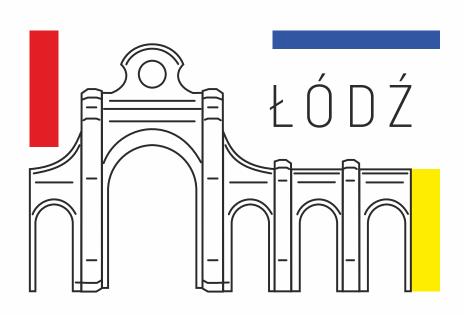
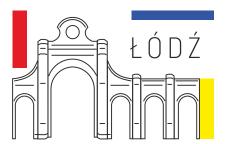
# 7<sup>th</sup> International Conference on Salutogenesis → 19-20.06.2024



# Everyday life and crises as opportunities for salutogenic transformation





## **7<sup>th</sup> International Conference on Salutogenesis**

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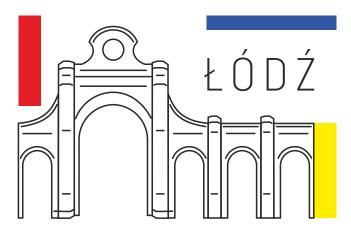
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The 7<sup>th</sup> International Conference on Salutogenesis, June 19-20 in Lodz, Poland, follows the 12<sup>th</sup> IUHPE European Conference on Health Promotion June 17-18, 2024. **The Conference on Salutogenesis is** an event for the global health promotion community for **which a variety of** professionals are invited **such as researchers, health promotion practitioners, civil servants, and policy makers** from around the world for in-person participation, fostering direct engagement, networking, and collaboration.

The Conference on Salutogenesis is focusing on Everyday life and crises as opportunities for salutogenic transformation. The conference is co-organized by the Society for Theory and Research on Salutogenesis (STARS) and aims at advancing and disseminating the theory and research of Salutogenesis, offering a forum for the discussion and sharing of pioneering approaches in salutogenic research, policy and practice.

# **Programme**

#### Wednesday 19 June 2024

8.00-9.00	Registration
0.00 7.00	Registration

9.00-9.25 Plenary: Opening Ceremony & Introduction to the Conference Theme → Room F

Lenneke Vaandrager & Georg Bauer, Conference Co-Chairs

Jolanta Kujawa, Magdalena Wrzesińska, Medical University of Lodz

Everyday life and crises as opportunities for salutogenic transformation

#### 9.30-10.45 Parallel sessions 1: Oral presentations & workshops

- 1.1 Salutogenesis in Times of Crisis (Moderator: Mathieu Roy) → Room F
  - a. Ukrainians coping with war: Which coping resources help them reduce anxiety?
     Svetlana Prokasheva)
  - b. The model of Salutogenesis in crises (Elisabeth Noehammer)
  - c. Coherent processes = coherent outcomes? Applying Salutogenesis to facilitate coherent
    experiences across sectors and actors during the multi-sectoral implementation of local public
    health measures (Ruca Elisa Katrin Maass)
- 1.2 Measuring and Applying SOC (Moderator: Claudia Sardu) → Room G
  - a. The Sense of Coherence scale (SOC-13): Psychometric properties in the Czech adult population and general recommendations for advancing the scale (Martin Tušl)
  - b. Using Measurements to Guide the Salutogenic Transformation (Craig Becker)
  - c. Incorporating the Salutogenic Paradigm within the First 1000 Days of Life (Shimon Waldfogel)
  - d. Salutogenic health promotion interventions: Promoting the Sense of Coherence (Claudia Meier Magistretti)
  - e. Predictors of mental health in adolescents with a salutogenic perspective (Kristina Carlén)
- 1.3 Workshop: Teaching Salutogenesis: what, how, and how to be? → Room A (Jake Sallaway-Costello, Marguerite Daniel, Lenneke Vaandrager, Anna Bonmati)
- 1.4 Workshop: Salutogenesis in Refugees → Room C (Chrysovalantis Papathanasiou)

#### 10.45-11.15 Coffee break

#### 11.15-12.30 Parallel sessions 2: Oral presentations & workshops

- 2.1 Salutogenesis at work (Moderator: Ernest Darkwah) → Room E
  - a. Work-related sense of coherence as a correlate of organisational behaviours and well-being among healthcare workers (Arkadiusz Jasiński)
  - The Relationship between Health-promoting Leadership and Mental Health Stigma in the Workplace (Anja Lehmann)
  - c. The Role of Sense of Coherence in Occupational Health among Employees with Mental Health Issues (Anja Lehmann)

- d. A model of organizational coherence and implications for future research (Dorit Tubin)
- 2.2 Salutogenic Interventions in Communities (Moderator: Jake Sallaway-Costello) → Room F
  - a. Strengthening the Network of Mohanamai to Mobilizing Road Safety at Sub-districts of Thailand: Lesson Learned and Success (Boonruang Khaonuan)
  - b. Community recreation as a salutogenic setting for children and adolescents (Sofie Lundström, Jennie Ryding)
  - c. The Whole Person Salutogenic Assistant (Shimon Waldfogel)
- 2.3 Salutogenesis in Education: Learners (Moderator: Marguerite Daniel) → Room G
  - a. Wellbeing in the school setting: stressor and resources according to adolescence perspective (Claudia Sardu)
  - b. Teaching salutogenesis to medical students: a photovoice experience (Sara Maria Pani)
  - c. Salutogenic by Design: Using Salutogenesis Principles in Designing and Implementing Postsecondary Health Sciences Learning Events (Jaime Mantesso)
  - d. On-the-job vocational training of nonprofessional ethnic health workers of a primary health care team improves their sense of coherence (Karolina Kósa)
- 2.4 Workshop: Advancing the measurement and concept of SoC

(Georg Bauer, Martin Tušl, Paolo Contu) → Room A

2.5 Workshop: Promoting the Salutogenic Transformation using the Heuristic Systematic

Model (Craig Becker) → Room C

#### 12.30-13.30 Lunch break

#### 13.30-14.00 Interactive Poster sessions → Exhibition space/Foyer

#### PS.1 Salutogenesis in Educational Settings (Moderator: Dolors Juvinya)

- a. Salutogenesis and medical practice experiences with a seminar for students of medicine (and other disciplines) (Ottomar Bahrs)
- b. The salutogenesis for a class of post-graduation students in nursing at the Federal University of Santa Catarina (Ivonete Teresinha Schulter Buss Heidemann)
- c. Mental well-being, sense of coherence and sociodemographic factors in family medicine resident physicians (David Ramos Valle)
- d. Categorical versus dimensional models of sense of coherence Part 1: Taxometric analysis using SOC-29 in a Japanese population (Yoshikazu Fukui)

#### PS.2 Salutogenesis in Health Care (Moderator: Arkadiusz Jasiński)

- a. Multimorbidity Care in Lithuania: qualitative approach in addressing patient health priorities (Olga Vasiliauskiene)
- b. Transforming value-based palliative care in the US: A scoping review of salutogenic approaches for optimal outcomes (Shanna Sullivan)
- c. Hospital Design for inpatient forensic psychiatry: a realistic umbrella review (Yuliya Bodryzlova)
- d. Evaluation of Positive Mental Health, Sense of Coherence and Resilience, in Professionals who work in Mental Health Hospitalization and Emergency Services in Girona (Susana Mantas Jimenez)

#### PS.3 Linking Salutogenesis and Pathogenesis (Moderator: Martin Tušl)

- a. Association Between Resilience and Frailty among Chinese Older Adults (Junling Gao)
- b. Examination of factors associated with mental health and wellbeing of people living with HIV in Kazakhstan (Raushan Alibekova)
- c. Sleep and Salutogenesis the epistemological value of paradigm pluralism to close epistemic gaps in sleep medical research (Ludmila Litvin)
- d. Looking on the bright side of life hope and purpose in life as predictors of experiences of Covid-19 in Polish adults (Katarzyna Skrzypińska)
- e. Explaining resilience in potential traumatic event: Trajectories of anxiety and Sense of Coherence during COVID-19 (Svetlana Prokasheva)

#### 14.10-15.30 Plenary Dialogue: Challenges & Opportunities for salutogenic transformation I → Room F

Dialogue between moderators of previous parallel sessions & audience

Moderators: Georg Bauer, Lenneke Vaandrager

Discussants: Mathieu Roy, Claudia Sardu, Anna Bonmati, Chrysovalantis Papathanasiou,

Ernest Darkwah, Jake Sallaway-Costello, Marguerite Daniel, Martin Tusl, Craig Becker

#### 15.30-16.00 Coffee break

#### 16.00-17.15 Parallel sessions 3: Oral presentations & workshops

#### 3.1 Salutogenesis and Migrants (Moderator: Anja Lehmann) → Room F

- a. The Basketball Boys: Young men from refugee backgrounds and the symbolic value of swagger in an Australian state high school (Marguerite Sendall)
- b. Wellness for children in immigrant families: A Salutogenic approach to understanding the experiences of visible minority parents (Grace Ukasoanya)
- c. Community Nursing for salutogenetic transformation in migrant populations in Vorarlberg (Elisabeth Noehammer)
- d. Mentoring for migrants in Norway: how do mentors shape and evaluate their contribution? (Marguerite Daniel)
- e. Sense of coherence and professional quality of life of staff working with unaccompanied refugee minors in Greece (Chrysovalantis Papathanasiou)

#### 3.2 Salutogenesis in Health Care & Oral Health (Moderator: Arkadiusz Jasiński) → Room C

- a. A Health-promotive Approach to Maintain and Sustain Health in Women-dominated Work in Nepal and Sweden A PhD thesis (Dip Raj Thapa)
- b. The Sense of Coherence, Health Literacy, and Empowerment in Irritable Bowel Syndrome (Natalia Płóciennik)
- c. Its' "MyMouth": Salutogenic approach to promote oral health in adolescents through mHealth (Dilini Ratnayake)

#### 3.3 Salutogenesis in Education: Teachers (Moderator: Sofie Lundström) → Room G

- a. Salutogenesis to promote the health of the teacher's voice (Ivonete Heidemann)
- b. Taking an asset-based approach to understanding school exclusion for the purpose of educating teachers (Amanda Corrigan)

c. A salutogenic call in the Canadian wilderness finds other voices: The origins of the Prairie Salutogenic Community of Practice (Jaime Mantesso)

#### 3.4 Workshop: The Missing Link: Creating Coherence Between Individual, Group and

Society (Ruca Elisa Maass, Claudia Meier Magistretti, Paolo Contu, Georg Bauer) → Room A

17.15-19.00 Break

**19.00-20.00** Guided City Tour

**20.00-22.00** Conference Dinner (only for registered participants)

#### Thursday 20 June 2024

#### Salutogenic Rebels event

#### Salutogenic Pathways: Inspiring and Building Connections Across Generations

#### 9.00-9.45 Plenary Opening: Unveiling Salutogenic Narratives → Room F

Moderators: Kristel Polhuis & Heidi Marie Meling

How Salutogenesis changes life, career and practice – Storytelling session

Presenters (confirmed): Gwendolijn Boonekamp and Helena Pombares

#### 9.45-10.30 Parallel sessions round 1

#### A) Apply theoretical knowledge in practice

#### A1: Unlock the Power of Participation in Salutogenic research → Room A

Moderator: Jarosław Rakoczy

What does it mean to be a participant in salutogenic research and practice? (case studies) Presenters:

- Danielle Mullins, Guillem Feixas: Improving Mental Health with an Immersive Exploration of Self-Identity
- Kristel Polhuis: How to use salutogenesis to design a healthy eating programme for people with type 2 diabetes?
- Megan Blin: Understanding Childbearing in Complexity

#### A2: Making salutogenesis comprehensible, accessible and applicable for everyone → Room B

Moderator: Sarah Michaud

How to translate Salutogenesis to practical situations?

Presenters:

- Jake Salloway-Costello: Educational Strategies for Salutogenic Living: Curriculum Design
- Chloe Piper: Architecture of Compassion Developing a ,Human-Informed' Conceptual Design Framework
- Ayse Deliktas: An Illustration of How Salutogenesis Enlighten Development of Psychosexual Nursing Care Model

#### B) Reflection on the role of Salutogenesis

#### B1: Battle of Approaches: Role play with ,sceptical scientists' → Room C

Moderators: Leah Rosen & Heidi Marie Meling

Positive health, capability approach, positive psychology, resilience – what's the difference?! How do these approaches compare to Salutogenesis? Join us for an engaging and interactive session where we will explore and distinguish Salutogenesis from related approaches through a fun role play featuring four presenters, ,skeptical scientists,' and you, the audience.

#### Presenters:

- Yen Thi Pham: Throughout the individual's lifespan: When is it more appropriate to apply the SOC framework?
- Noy Dali: Middle leaders and teachers' sense of coherence
- Nabiha Ramadan: Promotion of Exclusive Breast Feeding in Lebanon through a Salutogenic Intervention
- Sanne Hiemstra: Working naturally: unraveling salutogenic mechanisms for employees with limited work capability working in forestry

#### B2: Salutogenesis and Wicked Problems → Room D

Moderator: Veerle Cannemeijer

Let's get creative and push the boundaries of Salutogenesis! In this session, we will explore how the theory of Salutogenesis could contribute to our understanding of wicked problems and their potential solutions. After being inspired by some great examples, it is up to you to get to work and explore a wicked problem through the lens of Salutogenesis.

#### Presenters:

- Mette Brogden: Identifying salutogens in recovery from slow disasters: Development as restoring healthy biocultural lifeways
- Rashid Iddrisu: Recovering indigenous culture, language, and natural heritage after the Slow Disaster of Colonialism
- Catherine Hørte: Coping strategies of adolescents exposed to substance use in the family.

  A qualitative study in the light of Salutogenesis

#### 10.30-10.45 Coffee break - Coffee and energizer(s)

#### 10.45-11.30 Parallel sessions round 2

#### C) Exchange ideas & perspectives

#### C1: Semi-speed blind-dates with early- and advanced career participants → Room A

Moderator: Ayşe Deliktaş Demirci

An unforgettable opportunity to meet salutogenic faces. Build a connection with new salutogenic friends but in a different way. This session will provide an environment where academic boundaries are eliminated and participants will find themselves in semi-speed blind-dates.

#### C2: Find your perfect match for a future project! → Room B

Moderators: Sanne Hiemstra & Yến Pham

Looking for a collaboration for your dreamed project? In these paired discussions (early & advanced

career), there is space to explore a topic of your liking and develop a concrete plan.

#### D) Innovations in Salutogenesis

#### D1: Exploring AI and Salutogenesis → Room C

Moderators: Heidi Marie Meling & Veerle Cannemeijer

AI - a menace to society or the dream tool for health promotion? In this session, we will use an upcoming project utilising AI technology as a case study and a starting-off point for an interactive workshop and discussion on ways in which salutogenesis can be ,built into' projects using this powerful technology.

#### Presenters:

- Ingrid Hjulstad Johansen & Kaisa Soleng: project "Helsehjelppiloten"

#### D2: Promoting Health and Wellbeing: Insights from Diverse Perspectives and Contexts → Room D

Moderator: Sarah Michaud

An enlightening session delving into diverse research topics aiming to deepen our understanding of salutogenesis and well-being in various contexts, offering valuable insights into fostering positive outcomes in the face of adversity.

#### Presenters:

- Shadia Fouad Sharal: Evaluation of the sense of coherence in individuals with chronic pain in treatment with medical cannabis provided by cannabis organizations
- Jaroslaw Rakoczy: Transforming Crisis into Opportunity: A Salutogenic Perspective on Coping with the COVID-19 Pandemic among a Medical University Community
- Marguerite Daniel : Insight into acculturation of second-generation Vietnamese boat refugees in Norway

#### 11.30-12.30 Creative wrap-up session → Room F

Moderators: Kristel Polhuis & Heidi Marie Meling

#### 12.30-13:45 Lunch break

#### 13.45-15.00 Parallel sessions 4: Oral presentations & workshops

#### 4.1 Salutogenesis in Design (Moderator: Paolo Contu) → Room G

- a. Proposing Eudaemonic Co-Design as an Augmented Approach to Salutogenic Design, Facilitating River of Life Navigation and Empowerment (Jenna Mikus)
- b. Why is a salutogenic approach pivotal to enhanced health and wellbeing of office workers? (Kirsten Brown)
- c. Environmental enrichment for human health: a salutogenic vision (Etienne Bourdon)
- d. Sociological and psychological value of retrofit interventions as means to promote health and wellbeing, community empowerment and local regeneration (Magdalena Blazusiak)
- e. Transforming prison habitats health and wellbeing benefits for prisoners and staff (Alan Farrier)

#### **4.2** Theory of Salutogenesis (Moderator: Claudia Meier Magistretti) → Room F

- a. An overarching coherence motivation for healing and transformation? (Theodor Petzold)
- b. Can restorative justice contribute life experiences that generate a strong sense of coherence?
   (Marguerite Daniel)

- c. Self-discrepancy and spirituality, sense of life and coherence (Katarzyna Skrzypińska)
- d. Differences in levels of sense of coherence effect on the autonomic nervous system under acute stressful situation (Yuki Kamiya)
- e. The role of salutogenesis for the understanding of the health-environment coupling in current medicine and psychology (Laura Menatti)
- **4.3** Workshop: Indigenous Worldviews on Health, Healing, and Addiction Prevention (Cheryl Currie) → Room A
- **4.4** Workshop: Salutogenic settings: exploring coherent processes and experiences (Ruca Elisa Maass, Lenneke Vaandrager and Leah Rosen) → Room C

#### 15.00-15.30 Coffee break

#### 15.30-16.45 Plenary Dialogue: Challenges & Opportunities for salutogenic transformation II → Room F

Dialogue between moderators of previous parallel sessions & audience

Moderators: Ruca Elisa Maass, Jake Sallaway-Costello

Discussants: Anja Lehmann, Arkadiusz Jasiński, Sofie Lundström, Georg Bauer, Paolo Contu,

Claudia Meier Magistretti, Cheryl Currie, Leah Rosen

#### 16.45-17.30 Plenary: Closing ceremony → Room F

Lenneke Vaandrager & Georg Bauer Conference Co-Chairs

- Acknowledgements of organisers
- Round of Reflection of participants
- Concluding remarks on the conference theme:
   Challenges & opportunities for salutogenic transformation

#### 17.30 End of conference



## Host

## **Medical University of Lodz**



The Medical University of Lodz (MUL) is the largest public medical university in Poland. It has over 70 years of medical tradition and there are 11 000 students attending different courses at MUL, including 900 foreign students. We educate future specialists in medical and health sciences.

MUL is considered a leader in the number of scientific publications and citations among medical schools in Poland. We guarantee high quality of teaching and scientific research in the medical and health sciences. We significantly contribute to the development of the health care system.

# Foundation for the Medical University of Lodz



The FUMED Foundation for the Medical University of Lodz has been operating continuously since 2011. Our mission is to support the development and operation of the university through the promotion and integration of the academic community. We are actively involved in the life of the university, supporting its activities organizationally and financially.

Additionally, we deal with organization of conferences, conventions, symposiums, trainings and various types of special events.

# **Partners**

#### **IUHPE**



The International Union for Health Promotion and Education (IUHPE) has been operating for over 70 years. This NGO draws its strength from being a unique worldwide, independent and professional association of individuals and organisations committed to improving the health and wellbeing of people through education, community action and the development of healthy public policy.

IUHPE has proven to be relevant and resilient after periods of major change in the world's external environment and within the field of health promotion. Health promotion aims to empower people to control their own health by gaining control over the underlying factors that influence health. As long as these factors - peace, shelter, food, income, a stable eco-system, sustainable resources, social justice and equity - are not achieved, the IUHPE's existence and activities are vital to accomplish its mission to achieve global health and wellbeing between and within countries. The vision of IUHPE is a world where all people achieve optimum health and wellbeing.

## Society for Theory and Research on Salutogenesis (STARS)



Society for Theory And Research on Salutogenesis

The IUHPE Global Working Group on Salutogenesis has the mission to advance and promote Salutogenesis. As part of its efforts, it founded the Society for Theory and Research on Salutogenesis www.stars-society.org with currently 2000 members. STARS is run by the IUHPE Global Working Group on Salutogenesis and the Center of Salutogenesis, University of Zurich. It provides a transdisciplinary platform for scientific exchange between researchers and practitioners in the field of Salutogenesis. STARS is co-organizing the regularly happening International Conferences on Salutogenesis.

### **UNESCO Chair Global Health & Education**



The UNESCO Chair and WHO Collaborating Centre on Global Health & Education contributes to doing research and sharing available knowledge on health and education issues, and to support institutions and professionals in their work. At the global level, the work of the Chair is based on the strategies of UNESCO and WHO and supports these UN organisations in the development of their programmes and recommendations, as well as in the implementation of the Sustainable Development Goals (SDGs). At the national, regional and local level, it is involved in a range of enactment projects. By creating a global community, the Chair promotes the development of intersectoral policies and practices in the field of education and health.



## **Conference Chairs**



**Prof. Lenneke Vaandrager, Co-chair**IUHPE/EURO Capacity Building
Wageningen University & Research, Netherlands



**Prof. Georg Bauer, Co-chair** IUHPE/EURO Scientific Affairs University of Zurich, Switzerland

# Scientific Commitee



**Prof. Lenneke Vaandrager, Co-chair**IUHPE/EURO Capacity Building
Wageningen University & Research, Netherlands



Jake Sallaway-Costello
University of Nottingham, United Kingdom



**Prof. Georg Bauer, Co-chair**IUHPE/EURO Scientific Affairs
University of Zurich, Switzerland



**Prof. Claudia Meier Magistretti**University of Applied Sciences and Arts Northwestern Switzerland (FHNW), Switzerland



**Avishai Antonovsky, PhD**Formerly Ben Gurion University of the Negev, Israel



**Arkadiusz M. Jasiński, PhD, MBA** University of Opole, Poland



**Prof. Mathieu Roy** University of Sherbrooke, Canada



**Prof. Marguerite Daniel**University of Bergen, Norway



**Anja Lehmann, PhD**University of Zurich, Switzerland



**Prof. Maria Kaźmierczak** University of Gdansk, Poland



Shefaly Shorey, PhD National University of Singapore, Singapore

## **Conference Chairs**



Veerle Cannemeijer, MSc

Policy Advisor Capacity & Expertise for the Transition of Rural Areas at the Dutch Ministry of Agriculture, Nature and Food Quality

Guest Researcher at Bergen University



Ayse Deliktas Demirci, PhD, RN

Akdeniz University, Türkiye



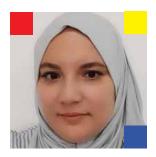
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Kristel Polhuis, PhD
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**Leah Rosen, MSc**PhD student Health and Society, Social Science Group Wageningen University, The Netherlands



**Jarosław Rakoczy, Msc** Medical University of Lodz, Poland

# **Joint Organising Committee**



**Prof. Dolors Juvinyà Canal, Co-chair** University of Girona, Spain



Magdalena Kostyła, PhD, Co-chair Medical University of Lodz, Poland



**Jake Sallaway-Costello**University of Nottingham, United Kingdom



**Liane Comeau, PhD**Executive Director of IUHPE, Canada
Université de Montréal, Canada



**Prof. Anna Bonmatí Tomàs** University of Girona, Spain



**Prof. Merita Berisha**National Institute of Public Health of Kosova, Medical Faculty
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Prof. Didier Jourdan

Chair Holder of the UNESCO Chair "Global Health and Education" and Head of the WHO Collaborating Centre for "Research in Education and Health", France



**Jarosław Rakoczy, Msc** Medical University of Lodz, Poland



**Katarzyna Binder-Olibrowska, PhD**Medical University of Lodz, Poland



**Prof. Karolina Kósa** University of Debrecen, Hungary

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#### INNOVATIONS IN SALUTOGENESIS

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# **Abstracts**

#### Ukrainians coping with war: Which coping resources help them reduce anxiety?

Adi Mana, Svetlana Prokasheva, Shifra Sagy

Introduction: The Ukrainian nation is currently dealing with a catastrophic humanitarian crisis due to military incursion and partial occupation by the Russian army. Such a crisis affects civilian's emotional health. The purpose of this study was to examine levels of anxiety among Ukrainians and the coping resources that help them reduce these levels.

<u>Method:</u> Data collection took place during April 9th to 15th, 2022. Recruitment of participants was conducted via an anonymous online survey distributed by social media networks, using QUALTRICS. The current data analysis included 852 Ukraine participants, 495 of them (58.1%) male (age 45.47) and 340 (39.9%) female. Mean age was 39.1 (Std=106.12) and range from 18-97. Most of the participants (515, 60.4%) claimed that they had already left their home due to the war or estimated that they would need to do it very soon.

Levels of general anxiety and perceived existential and financial risks were explored, in addition to coping resources: sense of coherence, social support, sense of national coherence, and trust.

<u>Results:</u> 36.9% of the participants reported severe anxiety and 75.6% reported high existential risk. The overall regression model of risk factors and coping resources predicted approximately 29.4% of the variance in general anxiety scores. Sense of coherence was found as the main resource associated with lower levels of anxiety.

<u>Discussion:</u> Anxiety is a common reaction in a crisis situation such as war. Understanding the resources that could help Ukrainians to cope with the war might allow health professionals to deal both with the immediate situation and with post war effects.

#### The model of Salutogenesis in crises

Elisabeth Nöhammer

<u>Background:</u> Models that depict health demands and resources are very helpful to understand the determinants of health and their interactions. However, most models fail to incorporate (a) the results of shocks like crises and (b) time as factor. Both can alter a settings' demands-and-resource-structure as well as the relevance and boundaries of settings. In addition, new demands and resources can emerge.

<u>Aim:</u> The aim of health promotion is to identify and strengthen health potentials by empowerment, advocacy, and mediation. Even in regular times it is difficult to ensure that individual and collective health potentials can be maximised. Safeguarding that settings are kept and designed in a health promoting way is even more challenging in times of crisis. Therefore, the available models need to be checked for applicability in crises.

<u>Methods:</u> This paper theoretically explores the complexities arising from a crisis. These are checked against existing models and the complexities they allow for the analysis of health resources, stressors, and their interactions. Pandemic situations are used as example for considerations that could be added to the model of salutogenesis.

Results: The model of salutogenesis should include the option of public health measures turning into stressors. Examples for this include the reduction of social capital by bans on physical social interaction or socially unequally distributed stress of confinements for those in narrow housing conditions. Depending on their duration, these stressors can reduce resources in settings and for individuals, thus negatively impacting the determinants of health. In contrast, resources can be created by a focus on manageability and community. Also, increasing transparency and information availability on the crisis and crisis responses can improve all aspects of the Sense of Coherence. Moreover, collectively working on crisis competence can generate a generalized resource in the population.

# Coherent processes = coherent outcomes? Applying Salutogenesis to facilitate coherent experiences across sectors and actors during the multi-sectoral implementation of local public health measures

Ruca Maass, Kari Jørgensen, Monica Lillefjell

<u>Background:</u> Applying Salutogenesis as a theory for Health Promotion demands to expand the focus-of-research from individual experiences, to how these are facilitated by (societal) processes, structures and settings. This presentation aims at outlining how coherent experiences can be described and achieved during local multi-sectoral collaboration processes; and how these experiences in turn contribute to the development of coherent local structures.

Methods: Research was conducted in Trøndelag County as part of a 10-year national Program for Public health Work in municipalities, initiated by the Norwegian government and carried out in close collaboration with regional and local authorities. Municipalities utilized the Trøndelag Model for Public health Work to develop and implement a local, health-promoting measure targeting minor's mental health. Prior to initiating the process, in-depth interviews with key stakeholders including political and administrative leaders, and project workers. Follow-up interviews were conducted six years into the project. Analysis was carried out in close collaboration between research and practice to ensure the co-creation of relevant knowledge and feasible solutions. To validate emerging findings, these were communicated back to and discussed with practice partners continuously.

Results and discussion: Applying the framework of Salutogenesis gives valuable insights into how collaboration processes are experienced from various points in the municipal organization. The three dimensions of coherence – comprehensibility, meaningfulness and manageability- provide valid points for understanding challenges and emerging solutions in the development of coherent approaches across sectors and actors. Comprehensibility issues are closely tied to shared goals and understanding of one's role and responsibilities in the collaborative effort. Meaningfulness is linked to influencing outcomes at the personal; the process or the goal-level; expectations of "making a difference"; acting in line with shared and/or personal values, as well as opportunities for joined learning and personal development. Manageability to 'translating' global issues to locally overcomeable challenges, resource distribution in line with responsibilities and establishing inclusive processes. Challenges arise within each dimension and in the interplay between them, emphasizing the interconnected nature of the three dimensions. Approaches targeting any dimension impact overall experiences of coherence.

# The Sense of Coherence scale (SOC-13): Psychometric properties in the Czech adult population and general recommendations for advancing the scale

Martin Tušl, Georg F. Bauer

Our study examines the psychometric properties of the short version of the Sense of Coherence scale (SOC-13) in a representative sample of the Czech adults (N = 498). First, we describe the general characteristics of the scale summarizing existing evidence about its psychometric properties in other populations and provide a brief overview of SOC-related research in the Czech Republic. We then examine the factorial structure of the SOC-13 and SOC-12 scales using confirmatory factor analysis. Further, we examine the differences in SOC-13 based on sociodemographic characteristics, and we test the convergent validity of the scale using the short form of the mental health continuum scale as a positive mental health outcome and the general anxiety disorder scale as a negative mental health outcome. SOC-13 showed an acceptable fit for a second-order three-dimensional model with a specified residual covariance between items 2 and 3. SOC-12 showed an acceptable fit for a one-dimensional model and a second-order three-dimensional model. SOC-12 models were superior to SOC-13. Based on our results and the existing evidence, we make general recommendations for future advancement of the SOC addressing the heterogeneity in the formulation of the SOC items. Specifically, we recommend transforming the SOC scale into an inventory so that all items are formulated as statements rather than a mix of questions and statements. Further, we recommend using a single Likert-type scale response anchor with ascending format rather than multiple response anchors with altering regular and reverse-coded format. We apply our recommendations to the full SOC-29 scale and we provide its English and Czech versions to the researchers for further use and testing.

#### Using Measurements to Guide the Salutogenic Transformation

Craig Becker

<u>Background:</u> Salutogenesis focuses on the presence of health and well-being rather than identifying and treating disease. The Sense of Coherence (SOC) is a concept developed by Antonovsky that refers to a person's ability to cope with stress and maintain good health. The SOC scales measure three components: comprehensibility, manageability, and meaningfulness. SOC measurements help professionals develop a strategy for enabling people to create a stronger sense of coherence and better health. The SWPS is a tool used to measure health-promoting actions in seven domains: physical, emotional, social, spiritual, intellectual, vocational, and environmental. Higher engagement in measured items has been significantly associated with higher health status and better performance. Combining the SOC and SWPS scales creates data for fostering well-being. The scales can also provide a method to reassess individuals to track progress and guide adjustments regularly.

<u>Aim:</u> To show participants how the combined use of the SOC and SWPS identifies impactful areas for promoting improved health and a stronger sense of coherence.

(planned) Methods: Participants will learn how college health professionals planned an environment to nurture, encourage, and support engagement in health-promoting actions. Their plans were informed by the physical, social, spiritual, intellectual, emotional, environmental, and vocational SWPS outcomes. The goal was to design a campus for success based on the data about behaviors associated with higher performance. Specifically, information will be shared about how SWPS relates to and can be aligned with SOC constructs to help people develop a stronger sense of coherence and better performance. Using this data, explanations about how these results could strengthen meaningfulness, manageability, and comprehensibility - the SOC constructs- will be shared.

(expected) Results: Participants will see how a focus on individuals' strengths identified through the SWPS scale can serve as building blocks for fostering a sense of coherence using a data-informed environmental design process.

#### Incorporating the Salutogenic Paradigm within the First 1000 Days of Life

Shimon Waldfogel

This presentation delves into the application of the Salutogenic Paradigm during the critical first 1000 days of life, a foundational period for long-term health and well-being. The Salutogenic Paradigm, conceptualized by Aaron Antonovsky, emphasizes health promotion over disease prevention, focusing on a sense of coherence, resource accessibility, and effective stress management. Central to this paradigm is the Sense of Coherence (SOC), which encapsulates an individual's view of life as meaningful, manageable, and comprehensible. In early childhood development, nurturing SOC in parents and caregivers is crucial. This foundational aspect fosters a nurturing environment for children, promoting a positive outlook and a propensity for healthy behaviors. Resource accessibility is another critical facet. This includes tangible resources like healthcare, nutrition, and safety, and intangible ones like social support and education. The initiative underscores the need for comprehensive resource provision to families during these early years, laying a robust foundation for lifelong health. Additionally, effective stress management is a significant component. The initiative focuses on identifying early life stressors and implementing support strategies, enhancing coping skills, and fostering resilience to create a positive environment that mitigates stress impacts.

Learning Objectives: Understanding the Salutogenic Paradigm: Gain insights into integrating the Salutogenic Paradigm, particularly the concept of SOC, into early childhood development. Impact of Resource Accessibility: Learn the importance of providing comprehensive resources during the first 1000 days and their influence on long-term health. Strategies for Stress Management in Early Development: Discover methods to identify and address early life stressors, enhancing resilience and creating supportive environments for children and families. This presentation advocates for a holistic approach to health, aiming to create a supportive ecosystem that nurtures the well-being of infants, children, and their communities, thus applying the principles of the Salutogenic Paradigm to foster optimal development during the first 1000 days of life.

#### Salutogenic health promotion interventions: Promoting the Sense of Coherence

Eva Langeland, Lenneke Vaandrager, Claudia Meier Magistretti

<u>Background:</u> There is a call for knowledge about the effectiveness of salutogenic interventions and how they work to positively change the Sense of Coherence (SOC). Purpose of study: To understand what salutogenic interventions are and whether interventions based on the theory of salutogenesis are effective in promoting SOC. An example from salutogenic talk therapy will be presented.

<u>Methods/Theory:</u> A scoping review including quantitative intervention studies with SOC as an outcome have been systematically searched for and appraised. The existing research evidence on intervention studies with the SOC as a primary or secondary outcome were summarized.

<u>Findings:</u> The following five criteria for salutogenic interventions were developed: 1) A focus on health-promoting factors: general resistance resources (GRRs) and/or specific resistance resources (SRRs). 2) A whole-person approach. 3) Active adaptation. 4) Stressors and Tension as potentially health-promoting. 5) A focus on the SOC as a learning process. A total of 41 interventions studies were identified and 24 studies reported significant improvement in the SOC from before to after intervention. The interventions aiming to strengthen the SOC seem to comprehend at least three qualities: they facilitate access and use of GRRs and/or SRRs, they foster active adaptation of participants, and they induce a learning process. A randomized controlled intervention study about salutogenic talk therapy groups fulfilled all the criteria.

<u>Conclusion:</u> Awareness of the interplay between the crucial resistance resources; identity and social support, seems prominent in strengthening participants' SOC. We need further development and more research on salutogenic intervention and especially on long-term effects of salutogenic health promoting interventions aiming to promote the SOC.

#### Predictors of mental health in adolescents - with a salutogenic perspective

Kristina Carlén

<u>Background:</u> Mental health comprises of both mental well-being and mental ill-health (including mental health problems and mental disorders). The development of mental health during the transition from childhood to adulthood is dependent on coping strategies when encountering everyday stressors. The applied framework is salutogenic, looking at the world from a resource perspective to promote mental well-being. However, finding predictors also includes identifying riskfactors of mental ill-health.

<u>Aim:</u> The aim of the thesis (substudies 1 – !V) was to investigate predictors of mental health in adolescents from a longitudinal perspective.

<u>Methods:</u> The Finnish Family Competence study was used with adolescents at 15 years and their parents, with a follow-up at 18 years. Also, Swedish data i.e., The 'Longitudinal Research on Development In Adolescence with adolescents at 12-13 years and a follow-up at 17 years' was used. The outcome was a probable mental health diagnosis determined by a standardised Development and Well-being Assessment interview (I-III), and perceived mental health status (IV).

<u>Results:</u> A strong sense of coherence was associated with a decreased risk for subsequent mental disorders (I) and that self-esteem was negatively associated with future mental well-being (IV). Further, low levels of mental health problems reported by adolescents (II) or by their parents (III) were related to a decreased risk for subsequent mental disorders. A gender aspect was detected showing girls having more internal mental health problems or mental disorders as compared to boys. Other risk factors of mental ill-health were parental low age at childbirth and socioeconomic factors.

The overall results underline the importance of a salutogenic approach when dealing with mental health in adolescence to identify coping resources for stressors according to the concept 'River of Life'. The school is an arena for interventions for strengthening the sense of coherence and self-esteem, and for alleviating perceived mental health problems.

# Work-related sense of coherence as a correlate of organisational behaviours and well-being among healthcare workers

Arkadiusz Jasiński

<u>Background:</u> There is increasing interest in psychological research concerning sense of coherence and its associations with psychological functioning in workplace. The contemporary theoretical proposition inspired by the salutogenic model is the conception of a work-related sense of coherence (Bauer & Jenny, 2007). In present view, coherence at work constitutes a personal variable expressing the durable possible degrees of coping with work-related phenomena.

<u>Aim:</u> The objective of the study is to describe the links between work-related sense of coherence and organisational behaviours and well-being among healthcare workers.

<u>Methods:</u> Study will be cross-sectional in nature. The regression and intergroups differences model will be tested. Research sample will be obtained N=500 employees. The Polish version of work-related sense of coherence scale will be used first time beyond adaptation study.

<u>Results:</u> According to theoretical foundations work-related sense of coherence should be in negative relationships with: intention to leave the work, counterptoductive work behaviours and negative mental health outcomes. Furthermore, response variable should be in positive relationships with work engagement, work performance and subjective well-being at work.

# The Relationship between Health-promoting Leadership and Mental Health Stigma in the Workplace Anja Lehmann

<u>Background:</u> Mental health issues (MHIs) are common and costly in the working-age population. Although people with a MHI are both able and willing to work, empirical evidence indicate these people are more likely to be un- and underemployed compared to people without a MHI. One important reason concerning the issues of work participation among people with MHIs is stigma. Stigma is a devaluation of a group of persons often part of a minority group leading to their exclusion and discrimination. Although there is empirical evidence of the severity of mental health stigma at the workplace, up to now, there is lack of research that has investigated the role of organizational factors in addressing mental health stigma.

<u>Aim:</u> This research examines whether health-promoting leadership as a salutogenic predictor is associated with mental health stigma in the workplace.

Methods: A representative sample of 482 participants from Switzerland, Austria, and Germany took part in the online study and provided information on the health-promoting leadership of their supervisor. Participants were randomly presented with two of four case vignettes depicting job applicants who had been treated for a mental health condition. Cognitive (warmth and competence) and behavioral (desire for social distance) stigma towards vignette targets with different diagnostic labels (alcohol use disorder/schizophrenia vs. burnout/depression) were assessed.

<u>Results:</u> Comparisons of stigma across diagnostic labels revealed more negative evaluations of people with alcohol use disorder/schizophrenia than for people with burnout/depression in terms of warmth and social distance. Hierarchical regression analyses showed that health-promoting leadership was negatively related to all stigma outcomes.

<u>Conclusion:</u> These findings highlight the important role of health-promoting leadership as a salutogenic predictor for addressing mental health stigma in the workplace.

# The Role of Sense of Coherence in Occupational Health among Employees with Mental Health Issues Anja Lehmann

<u>Background:</u> A growing number of employees experience mental health issues (MHIs) at work resulting in significant impacts for both employees, organizations, and society as a whole. However, little is known about occupational health among employees with MHIs, including the experiences of when and why these employees stay, remain productive, and even thrive at work. The Salutogenic Model (Antonovsky, 1987) with Sense of Coherence (SOC) as a key concept may be useful in explaining why employees with MHIs can maintain their workability, and work engagement, and why they can prevent burnout.

<u>Aim:</u> By utilizing a two-wave design, the present study examined the experience of occupational health (work ability, work engagement and burnout) among employees with and without MHIs. We hypothesized that SOC would prevent detrimental effects on occupational health among employees with MHIs.

<u>Methods:</u> Employees with (N = 92) and without MHIs (N = 746) from Germany, Switzerland were recruited via a high-quality panel provider in 2022 (Time 1) and six months later (Time 2). SOC (SOC-13; Antonovsky, 1987) was measured at Time 1, and work engagement (UWES-6; Schaufeli & Bakker, 2003), work ability (WAI measure; Ilmarinen, 2006), and burnout (CBI; Kristensen et al., 2005) were measured at both time points.

<u>Results:</u> Employees with MHIs experienced decreases in occupational health over time compared to employees without MHIs. However, SOC buffered the decreases in work ability and burnout, but not in work engagement.

<u>Conclusions:</u> A strong SOC can protect occupational health among employees with mental health issues (MHIs), as those with a strong SOC are more likely to remain at work and avoid burnout. A strong SOC can thus contribute to enhancing diversity and inclusivity in the workplace.

#### A model of organizational coherence and implication for future research

Dorit Tubin, Noy Dali

Background. The Salutogenic approach, as proposed by Antonovsky (1996), offers a theoretical framework for understanding individual health through the concept of Sense of Coherence (SOC), which comprises comprehensibility, manageability, and meaningfulness. While the salutogenic model focuses on individuals and how they see, perceive, and sense their surroundings, we found salutogenesis to be an inspiration for examining organizations' health' and effectiveness. In our study, we perceive organizational coherence (OC) as an objective characteristic of the organization structure, reflected through the organization's hierarchy, role definition, and communication channels, as a complementary approach to aggregate individuals' work-SOC (Jenny et al., 2022).

<u>Our definitions are as follows:</u> A Salutogenic organization is an organization that constantly copes successfully with internal and external threats; Organizational coherence is a combination of the three components: meaningfulness is clear goals, prioritization, and vision; comprehensibility is well-developed and coupled organizational routines; and manageability indicated by adequate resources. We claim that OC facilitates the balance between stability and flexibility in organizational structures that promote organizational effectiveness.

<u>Aim.</u> The study aims to develop a conceptual model of OC, that explores the relationships between organizational structure and organizational effectiveness.

<u>Method.</u> This theoretical research is based on scientific and empirical organizational and salutogenic literature. In developing an analytical model, we followed Turner's (1986) guidelines and the salutogenic theory ideas in defining the concepts, their variability and measures, and the relationships between them.

Results and further research. Applying the OC model to school organizations yields several assumptions: (1) OC enhances organizational effectiveness as measured by student achievement; (2) OC fosters a work environment that positively influences the educational staff's work-SOC, although not equally for everyone; (3) OC contributes to enhancing a school's reputation and its relationships with external stakeholders; (4) OC largely depends on the leadership styles of the school principals.

### Strengthening the Network of Mohanamai to Mobilizing Road Safety at Sub-districts of Thailand: Lesson Learned and Success

Boonruang Khaonuan

Road traffic injury was one of the most important health problems in Thailand. It should be the national agenda that required integrated operations of all sectors to tackle problems. Thus, it is extremely necessary to develop existing systems and build up a new mechanism to deal with the subsequent problems. Mohanamai is a group of primary public health personnel who take a very significant role in developing the community health system, well-being, health promotion, determinants of health, disease prevention and control. This study aimed to strengthen the network for mobilizing road traffic injury. The research and development were using in this study for developing potential of network for dealing with road traffic injury and mobilizing safety communities. The study implemented in all regional healths of Thailand. The target group includes leaders of Mohanamai network at the provincial level nationwide, community leaders, and general public in the community. The implementation period took 28 months from June 2021 – September 2023. The implementation included to develop academic performance and carry out knowledge management for the Mohanamai network through a major learning program, learning from experiences, participatory learning, community-based activities, information retrieval, post-implementation analysis, lesson learned, and reflection. Both quantitative and qualitative data were collected.

The results of this study revealed that the "Mohanamai network" formed as a group of people with ideology to have synergy in managing health risk factors and road traffic injury in the communities. All Mohanamais managed to tackle road accidents at the community and district level. It could move on problem-solving in the community, providing a good lesson for driving a management mechanism in sub-district and a district level, resulting in various community prototypes for road traffic injury management. The findings of this study clearly indicated that Mohanamai network provided supports for driving the implementation at a local level, and the extension of the implementation area ought to be promoted consistently. It is carried out by means of learning by doing and participatory learning. The arrangement of knowledge sharing forums enables other networks to be connected for mutual learning for purpose of dealing with strengthen of road traffic injury management in the communities and districts. It is essential for the networking approach to seek a flexible type of organization which features a flat structure and maintains independence as it is able to respond to complicated problems, changes, and high competition. It is likely that this network will be able to achieve sustainability in managing road traffic injury and safety community in the local communities.

### Community recreation as a salutogenic setting for children and adolescents

Sofie Lundström, Jennie Ryding, Sabina Kapetanovic

<u>Background:</u> In Sweden, community recreation is a strong and longstanding tradition, and for many children and adolescents, sport, culture, and nature activities, constitute a large part of everyday life. In this study, community recreation refers to non-profit and volunteer-based associations, where the commitment of members constitutes a prerequisite for its existence. Having access to meaningful leisure activities can promote mental as well as physical health and provide young people with a supportive social context. Meaningful leisure time and social context are examples of general resistance resources which can contribute to mental well-being among children and adolescents. What constitutes health promoting leisure activities is, however, complex, and previous research argues that it is not necessary the activity itself that is promoting, but also other contributing factors.

<u>Aim:</u> To explore community recreation representative's perspectives of factors promoting health among children and adolescents as members in community recreation life.

<u>Method:</u> Semi-structured interviews are currently ongoing. The planned number of participants are 15-20 adults holding a leadership position in community recreation. Data will be analyzed by using a thematic analysis. In addition, workshops with representatives from participating associations will be held to discuss study results and share experiences.

Expected results: Some general patterns of importance from a salutogenic perspective can be discerned in the interviews conducted so far. Regarding children and adolescents, the participants describe a fostering role of the association, promoting not only health but also qualities and characteristics of importance as a human being, in society. Promoting development in the focused activity was, naturally, considered important, but also to promote a social and safe context that can offer participation and inclusion for children and adolescents. Participants talked about their associations and the activities as a context with the possibility to promote learning and development that can serve as a resource for young people in dealing with future life experiences.

### Building agency, building wellbeing in public housing in Malaysia

Uta Dietrich, Zaime Bujor

<u>Background:</u> Malaysia has been very successful in rehousing its urban poor into mostly high-rise estates almost eradicating its slum dweller population. However, with social and physical infrastructure deteriorating, social, economic and environmental wellbeing are declining posing a risk for individuals and society alike. Vertical slums, social unrest, poverty traps and loss of human development gains are quite likely.

<u>Aim:</u> The K2K (Kita untuk Kita = by us for us) initiative aims to build agency of residents in ten housing estates through a collective understanding of their site, identifying goals and building their capacity to act among themselves, with building management and other government and non-government organisations. It is embedded in a wider programme focusing on community empowerment, housing co-management, strengthening income generation and policy reform. This presentation focusses on the first stage, the cultural mapping.

<u>Methods</u>:Ten housing estates of 3 to 5000 residents each were chosen in greater Kuala Lumpur. Cultural mapping was selected as a methodology to facilitate a deeper understanding of the site because it considers multiple interdependent dimensions. Three key mapping components consisted of focus groups representing eight perspectives, open day activities to engage and validate focus groups findings and a rapid physical assessment informed by residents.

Interactions with residents from children to older adults were designed to engage and build trust. Hands-on activities such as drawing or sticker placing on visual boards increase inclusivity. Data was coded and analysed.

<u>Results:</u> The methodology itself provided opportunity to connect, collaborate and envision collective action. The three key factors influencing wellbeing identified via focus groups were cleanliness, safety and maintenance. The wider resident community prioritised family, health and education over maintenance. Since the mapping, housing estates have set up resident committees and debated actions to be taken. This is facilitated by a small grant programme and leadership development.

### The Whole Person Salutogenic Assistant

Shimon Waldfogel

The Whole Person Salutogenic Assistant is an innovative AI-powered digital assistant specifically designed to enhance health and well-being along the life course of individuals. The initial salutogenic assistant, The Salutogenic APGAR focuses on providing information and tools to maximize the healthy foundation during the critical first 1000 days of life. Built on the salutogenic model, which emphasizes enabling health and wellness, The Salutogenic Assistant offers personalized, evidence-based health assessments and actionable insights. This executive summary attempts to encapsulate the myriad features of The Whole Person Salutogenic Assistant, highlighting its focus on both individual and community health, its cutting-edge technological foundations, and its alignment with broader societal and democratic goals.

#### Wellbeing in the school setting: stressor and resources according to adolescence perspective

Claudia Sardu, Claudia Piga, Andrea Chessa, Shakhova Kristina, Paolo Contu, Luigi Minerba, Alessandra Mereu

In Italy, health promotion in school settings is mainly focused on lifestyle. The salutogenesis theory offers the possibility of overcoming this approach. Last year, the University of Cagliari was invited to carry out an "Education for Well-Being' intervention in an upper secondary school of low-middle socioeconomic context and proposed to involve students in analyzing factors affecting their wellbeing in the school setting.

Four classes participated in a collective photovoice on determinants of student's well-being at school; an exhibition was set up at the final meeting allowing the involvement of other classes. Results highlighted that the school setting generates tension in relation to: spaces and rules for their use, relationships with classmates and professors, teaching methods, tests and grades, homework, too short breaks, sense of self-efficacy. This tensions often lead to ,anxiety', one of the words most frequently used by students; sometimes, instead it triggered a salutogenic process. For example, let us consider the bad grades. Students highlighted the pathogenic process associated with this stressor: "When I get a bad grade, I feel useless; a bad grade makes me feel more useless than I am" or "It makes you sick to study and not get the result, it demoralises you". However, some students also highlighted the resources that can turn a bad grade into a salutogenic experience, characterised by comprehensibility (the student understands why he/she got a bad grade), manageability (the student is able to recover), meaningfulness (the student is motivated to recover). It is noteworthy that for each aspect that generates tension in the everyday school life, the collective photovoice has made it possible the identification of resources that enables a salutogenic pathway in school setting. At this point, the question "how can the school community promote the mobilization of these resources?" needs to be answered!

### Teaching salutogenesis to medical students: a photovoice experience

Sara Maria Pani

Introduction: There is a strong need for health professionals to take on a more salutogenic and person-centered approach. Healthcare reorientation implementation strongly depends on professionals' willingness to participate actively. For this purpose, professionals should be able to reflect on the salutogenesis vs pathogenesis paradigm and their own experiences in light of the two orientations. Different strategies could be adopted for salutogenesis and health promotion integration in professionals' routines; however, future professionals' education and role definition are often overlooked. Aware that learning salutogenesis is a lifelong process, we examined whether photovoice is suitable to increase future health professionals' awareness of users' needs and expectations, increase self-tuning capability, and enable a process of critical self-reflection on role definition.

<u>Methods:</u> 172 medical students participated and were asked to produce one photo with an accompanying caption, responding to a pre-identified question: "What is, in your opinion, the main aspect affecting users' satisfaction/dissatisfaction in a healthcare facility?". Participants discussed their photos in group discussions (n=16) and participated in data analysis sessions (n=4).

<u>Results:</u> Participants' contributions revolved around how services were delivered (e.g., kindness, accessibility, attention to additional needs) rather than the service provided. The students showed their empathic side, proposing smart and inclusive solutions to improve users' overall experience.

<u>Conclusions:</u> Photovoice proved to help build medical students' salutogenic capacity and promote reorientation to the salutogenic holistic (physical, mental, social, illness, and health aspects) approach to people in everyday practice. The photovoice process opened a breach into traditional thinking about aspects of healthcare services often overlooked. The students seemed to recognize salutogenesis as a way of working, a way of being. Their proposals, often implying changes in professionals' (their future selves) behavior towards patients, acknowledged the impact of how we implement our everyday professional tasks on patients' ease and well-being.

## Salutogenic by Design: Using Salutogenesis Principles in Designing and Implementing Post-secondary Health Sciences Learning Events

Jaime Mantesso, Sheryl Mills

<u>Background:</u> The biomedical model underpins health science education in Canadian universities. Salutogenic theory is virtually absent from many health science programs, including nursing programs, despite the stated emphasis on health promotion within the nursing profession. For many, taking a salutogenic approach is foreign territory, as the majority of pre-service undergraduate health courses take on an illness assessment, diagnosis, and treatment approach.

In this way, we are focusing on three innovative interventions: (1) developing a program-specific course (Nursing), (2) interprofessional learning events spanning all health science programs at our universities, and (3) writing about salutogenesis in an accessible and practical way.

By incorporating salutogenic theory and practice into pre-service undergraduate training, we hope to provide learners with an additional perspective on caring with patients and their close ones, as well as with their inter- and intra-professional team members and colleagues.

We anticipate that learners, being introduced to salutogenic theory and practices early in their careers, will have an expanded paradigm of what it means to care with patients, be more aware of self-care, and value how working with respect and kindness with colleagues makes for a more thriving and joyful workplace.

<u>Aim:</u> Our contribution will be to share how we are using salutogenic principles in designing and implementing post-secondary health sciences learning events.

<u>Methods:</u> (1) Share examples of designing health professions education learning events to be manageable, meaningful, and comprehensible by using a salutogenic framework for an upper-year undergraduate nursing course, in structuring and implementing IPE (interprofessional education) events, and sharing salutogenic ideology through accessible blog posts. (2) Invite participants to contribute ideas through open discussion.

<u>Results:</u> We will have collectively expanded on the ideas and examples we initially provided. Participants will have ideas on how to use salutogenic principles in designing and implementing learning events in health sciences education.

## On-the-job vocational training of nonprofessional ethnic health workers of a primary health care team improves their sense of coherence

Éva Bíró, Cintia Katona, Szilvia Vincze, Karolina Kósa

A Primary Care Model Programme had been implemented in Hungary between 2013-2017 in which group practices (general practitioner [GP] clusters) were established in four rural areas that employed among others full-time nonprofessional health workers, so-called health mediators to facilitate access to primary care for disadvantaged groups. The health of mediators, themselves mostly disadvantaged Roma who were recruited from the serviced communities was monitored every odd year of the Programme.

Three cross-sectional health interview surveys had been carried out inviting all health mediators who were employed at the time of the surveys (2013, 2015, 2017). The same questionnaire was used in all 3 surveys containing items from the European Health Interview Survey 2009 and validated versions of other scales, including pathological distress and the abbreviated version of Sense of Coherence.

Sense of coherence among health mediators was significantly higher already in 2013 compared to their peers (females with primary education) in the general population, and this difference became even greater by 2017. Significant difference in sense of coherence was observed among those health mediators who obtained vocational qualification at the beginning of the Programme compared to those mediators who did not. The proportion of highly stressed showed significant increase by 2017 among those mediators who had no vocational training. Improvement was detected in all mediators regarding health awareness, dysfunctional attitudes, and smoking prevalence.

The dominantly ethnic Roma health mediators worked as equal members of the newly organized primary care teams (GP clusters). They contributed to health promotion programs and improved access to care for disadvantaged groups while their own mental health also improved. However, the legal re-structuring of primary care services towards group practices after 2017 did not mandate the employment of health mediators even in areas with large numbers of disadvantaged population groups.

## Salutogenesis and medical practice - experiences with a seminar for students of medicine (and other disciplines)

Ottomar Bahrs

<u>Background:</u> What does "health" actually mean? How does health develop, and why is it worth being healthy? With these guiding questions, the course outlined here introduces Antonovsky's concept of salutogenesis and places it in the context of health science and professional discussion. What the promotion of a salutogenetic orientation can mean in everyday therapeutic practice is explored based on video-documented conversations from GP practices using qualitative methods of interpretation. Group discussion, utilising the skills already available to the students, is critical ("group as a productive force"). The course also introduces qualitative survey and evaluation methods, mainly structural hermeneutics and biographical analysis. The course was a weekly holiday block (5 days of 5 lessons each) for up to 15 participants.

<u>Working method:</u> Keynote speeches (mainly by the students) and thematic discussion; joint empirical analysis based on video recordings and transcripts of conversations from different contexts.

<u>Aim:</u> The course is intended to promote interdisciplinary thinking and sensitise participants to the individual meaning of "health" - concerning clients, patients, relatives and healthcare providers themselves. It is intended to impart basic skills about qualitative research and evaluation methods and motivate further use and qualification.

<u>Results:</u> The event concept has been proven in over 20 sessions and could be transferred to other areas. Anyone who wants to enable participation (as the central basis of health education) should be able to experience the involvement for themselves. Group coherence acts as an additional productive force. The students report intensive learning experiences that impact their life practice.

<u>Keywords:</u> salutogenesis; interaction analysis; biographical analysis; socialisation; professionalisation; qualitative research; text analysis; narrative interview; motivation to behaviour change; review dialogue.

### The salutogenesis for a class of post-graduation students in Nursing at the Federal University of Santa Catarina

Ivonete Teresinha Schulter Buss Heidemann, Claudia Bruck Marçal, Michelle Kuntz Durand, Aline Megumi Arakawa-Belaunde, Leandro Martins Costa Do Araujo

Introduction: The concept of Sense of Coherence originates from Aaron Antonovsky's salutogenesis framework, which aims to understand the factors contributing to health development. Sense of Coherence aims to explain why some people regardless of highly stressful situations or severe adversities, remain healthy, while others do not. The Sense of Coherence consists of three dimensions: intelligibility, manageability, and significance, reflecting the interaction between the individual and the environment and is strongly associated with the positive perception of health.

<u>Objective:</u> To report on the process of preparation and presentation of the seminar on Salutogenesis, carried out by post-graduate nursing students of the Federal University of Santa Catarina in the second semester of 2023.

Material and methods: this is a description of academic experience in conducting a Seminar on the Salutogenic Paradigm presented to 12 students of the discipline of Health Promotion in the process of human living and nursing of the Post-Graduate Program in Nursing, Federal University of Santa Catarina, in October 2023.

Results: Dialogue was held and knowledge was built on the importance of promoting individual and collective health, regardless of the complexity of health care. The seminar on Salutogenesis generated deliberation and insights about the importance of promoting the health of individuals and groups, regardless of the complexity of health care. Based on the application of the concepts of a sense of coherence and the general resources of resistance, the health professional can plan the care taking into account the attributes of the meaning and the capacity of management of stress factors, moving towards knowledge and care that generate health equities both individually and collectively.

<u>Conclusion:</u> In this experience of conducting a seminar, different resources and teaching-learning methodologies were put into practice to establish relationships between the presented contents and the student's daily activities, whose approach resorted to active methodologies. This teaching-learning experience provided moments of reflection on Salutogenesis, productively for all the participants.

## Mental well-being, sense of coherence and sociodemographic factors in family medicine resident physicians David Ramos-Valle, María Guadalupe Saucedo-Martínez, Pedro Alberto Muñoz-Reyna

Introduction: The World Health Organization considers that the university should be a social space in which health is promoted to improve or prevent diseases in the school community. In the various clinical-educational settings in which medical residents carry out their specialization, situations occur that affect their physical and mental health. The sense of coherence is their ability to perceive that you are competent and to handle any of these situations, regardless of what is going in their life, is an ability to select the coping style that best fits a given situation.

<u>Objective:</u> To determine the relationship between mental wellness, sense of coherence and sociodemographic factors of interest in resident physicians specializing in family medicine.

<u>Method:</u> A cross-sectional predictive study was carried out, with the participation of family medicine residents, with prior informed consent, sociodemographic factors were collected, their sense of coherence and mental wellness were measured by applying valid and reliable instruments. Using a generalized linear model, the relationship between these variables was estimated, adjusting for academic grade,  $p \le 0.05$  values were considered statistically significant.

<u>Results:</u> Sense of coherence was significantly associated with mental wellness (B = 0.223, CI 95% [0.137, 0.309], p = 0.000), in first-degree residents (B = -7.573, CI 95% [-12.637, -2.508], p = 0.003) and in second-degree residents (B = -6.336, CI 95% [-11.925, -0.748], p = 0.026). The deviance analysis (D2 = 0.6427) indicates that sense of coherence and academic degree reveal 64% of the variability of mental well-being.

<u>Conclusions</u>: The sense of coherence had a significant relationship with the mental well-being in resident physicians specializing in family medicine; therefore, interventions aimed at promoting a sense of coherence can be designed and used to mitigate their mental well-being.

# Categorical versus dimensional models of sense of coherence Part 1: Taxometric analysis using SOC-29 in a Japanese population

Yoshikazu Fukui, Tomomi Nakatani, Soutarou Isowa, Takahiro Imaida, Satoshi, Unzai, Mami Imaida & Kazuya Nakai (Matsuo)

Background: Sense of Coherence (SOC) is a core concept in salutogenesis proposed by Antonovsky (1987) and consists of three components: comprehensibility, manageability, and meaningfulness. Although there is controversy about the factor structure of SOC, it is generally proposed that SOC is a continuous variable as a single-factor concept. However, no study using taxometric analysis has examined whether the concept is categorical or dimensional. In addition, the SOC scale was developed through interviews with people who had maintained their health through difficult life situations, such as experiences of loss of loved ones, migration, living in a concentration camp, etc., which raises questions about its applicability to the general population. Confirmation of the dimensionality of the SOC would provide a theoretical basis for the hypothesis that the individual differences of the SOC are developed through the interaction of multiple dispositional and ecological factors rather than being derived from a single biological factor or too challenging life experience.

<u>Objective:</u> The present study examined the latent structure of the SOC through taxometric analysis using the original SOC-29 scale (Antonovsky, 1987).

<u>Method:</u> Data from 2568 university students and adults were extracted from several survey datasets, including the SOC-29. Although there are arguments against using the subscale scores instead of the single-factor score, for technical reasons the three subscale scores, comprehensibility, manageability, and meaningfulness, were used for the taxometric analysis.

<u>Results:</u> The results of the taxometric analyses showed that the SOC is dimensional rather than categorical, although only the result of the LMode indicated betweenness.

<u>Conclusions:</u> The present study suggests that the SOC is a dimensional concept. Given the background of the SOC scale development through the facet approach, future research needs to examine the reproducibility of the result using the scores of multiple items that can measure the different facets of the SOC, rather than using the three subscale scores.

### Multimorbidity Care in Lithuania: qualitative approach in addressing patient health priorities

Olga Vasiliauskiene, Ida Liseckiene, Ausrine Kontrimiene

Background: Patient Priority Care (PPC) methodology was designed to help organize the treatment and disease monitoring process, to help align the personal priorities of the patients with the course of action of the healthcare team, and to better correspond to the personal patients 'goals and requests. The current approach to the healthcare of patients with multimorbidity is typically oriented toward the health disorders rather than the patient, and therefore often lacks continuity and personalized care. Such approach is likely to be burdensome and ineffective for certain patients, furthermore, often disregards the patients 'needs and goals. Recent studies show evidence that patient priority-oriented care can help solve a number of these healthcare-related problems for patients with multimorbidity.

Aim: to determine the priorities of multimorbid patients in Lithuanian health care settings.

Methods: The Lithuanian version of the PPC was conducted within the framework of the TELELISPA project (Project number 08.4.2-ESFA-K-616-01-0003), which aims to improve the health care management of multimorbid patients in Lithuanian primary health care centers by implementing a new health care model that included case managers, a multidisciplinary team approach and patient-oriented personalized health care. The study included patients from seven different Lithuanian primary care centers. The participants were multimorbid and had two or more long-term health conditions.

Results: The study involved 796 participants with a mean age of 64.38 (±9.4) years. The majority of patients were women (61%), and approximately one-third of patients had obtained higher-level education (34.9%). Upon analysis, it was found that patient priorities could be categorized into two predominant themes. The first involved personal health goals, with sub-themes of enhancing quality of life, improving health status, and increasing productivity in personal affairs. The second theme highlighted barriers faced in achieving these health goals, which mainly included physical and psychological challenges that patients encountered.

## Transforming value-based palliative care in the US: A scoping review of salutogenic approaches for optimal outcomes

Shanna Sullivan

<u>Background:</u> Salutogenesis has been used globally as a framework to guide health promotion, improve patient outcomes, and inform healthcare policy in a variety of populations including patients at the end of life. There is a growing need for high quality and cost-effective palliative and end-of-life care in the US. Pathogenically focused funding models have proven limited in their ability to support integrated nursing care that promotes quality of life and optimal outcomes for patients and families. There is an increasing interest in value-base care models to drive higher quality and financially sustainable healthcare nationally.

Salutogenesis, not widely known in the US, may provide a framework for funding nurse-led integrative, palliative care in a value-based healthcare model.

<u>Aim</u>: The purpose of this project is to conduct a scoping literature review of salutogenic research in palliative care to identify 1) how salutogenic care was provided 2) how outcomes of care were measured and 2) cost implications of these approaches.

<u>Methods:</u> A scoping review process will be conducted using the internationally recognized process by Hempel, et al. (2008). Databases will include CINHAL, Medline, Cochrane, APA PsychInfo, & PubMed. Search terms will include: Salutogenesis, Palliative care, Value-based care, Sense of Coherence, Outcomes and Costs.

<u>Theoretical Framework:</u> The Conceptual Model of Nursing and Health policy (CMNHP), developed by Russel & Fawcett (2005) was used as the framework for this project because it provides an understanding of health policy within the nursing discipline and a framework to guide research that furthers nursing specific knowledge regarding health policy development, implementation, and evaluation.

<u>Results:</u> A summary analysis will be provided of the integrative approaches, outcomes measured, tools used, populations studied, and costs analyzed in the literature. Implications for healthcare policy will be discussed in relation to the conceptual, theoretical, and empirical dimensions of the CMNHP.

#### Hospital Design for inpatient forensic psychiatry: a realistic umbrella review

Yuliya Bodryzlova, Ashley J. Lemieux, Mathieu Dufour, Annie Côté, Stéphane Lalancette, Anne Crocker

<u>Objectives</u>: The effect of architecture and design on patients' and staff experience in inpatient psychiatric facilities is frequently assessed based mainly on final outcomes (e.g., disease progression), i.e. from the perspective of evidence-based medicine. Meanwhile, the evidence-informed, realist approach addresses how the intervention works. This approach demands assessing not only the effect of the intervention on the outcome but also the underlying action mechanism. To date, no review of the effect of architecture and design on inpatient psychiatric care has been conducted from the realist perspective. This umbrella review reports in which ways architecture and design have an effect on patients' and staff's experience.in inpatient psychiatric hospital

<u>Methods</u>: The search was constructed around three key concepts (psychiatric hospital, design, and staff and patient outcomes) and was conducted across three reference databases (Embase, Medline, and PsychINFO). Academic and gray literature was analyzed. Information on design and architectural features in psychiatric hospitals, their effects on patients and staff experience, and the acting mechanisms enabling these effects was extracted.

<u>Results</u>: From 951 original references, 14 full texts were included in the analysis. Design and architectural features (e.g., aesthetic appeal of places, home-like environment) in psychiatric hospitals address patients' stress, boost social interaction, foster patients' autonomy and feelings of control, ensure respect for patient's privacy and dignity, and prevent under-and overstimulation. Among the improved outcomes were patients' well-being and staff security.

<u>Conclusions</u>: Psychiatric hospital managers should not overlook the potential of architecture and design to improve patient and staff outcomes. Ideally, their effect should be considered in the early stages of hospital renovation or planning. Further evaluation studies in the field may consider the complex nature of the association between the architecture and design of psychiatric hospitals and patients' and staff's experience. Using theory-driven evaluation may facilitate future evaluation in the field.

# Evaluation of Positive Mental Health, Sense of Coherence and Resilience, in Professionals who work in Mental Health Hospitalization and Emergency Services in Girona

Dolors Juvinyà Canal, Emiliano Castro Gómez, Susana Mantas Jimenez

<u>Background:</u> The promotion of mental health from a positive perspective and, in accordance with the salutogenic approach, seeks a balance between preventive actions and those that enhance the health of people and communities, considering assets relevant to health. In this sense, the conceptual and metric constructs of positive mental health, the sense of coherence, resilience and perceived health of professionals in the work context are proposed.

<u>Aims:</u> Assess positive mental health, sense of coherence and resilience of professionals; relate the three constructs with the number of years worked, perceived health status and job satisfaction.

<u>Methodology:</u> Non-experimental, observational, transversal and analytical quantitative study. The relationship between sociodemographic and work variables, Perceived Health, Resilience scales, Positive Mental Health and Sense of Coherence is described. The study population is made up of 104 Mental Health professionals from Girona.

Results: The professionals obtained high scores on all scales. Statistically significant differences were found between the number of years worked, perceived health status and SOC. A statistically significant negative relationship was found between the number of years worked and the attitude of helping others (less predisposition towards social issues). Statistically significant differences were found between job satisfaction, SMP+ and SOC. Professionals who declare they are more satisfied with their work obtain high scores on the SOC and SMP+ scales. A significant positive relationship was found between perceived health status and global SOC and by dimensions. The professionals' high scores on the SOC scale were related to the absence of health problems. The positive relationship between the scales used was confirmed.

Keywords: Sense of Coherence, Positive Mental Health, Resilience, Perceived Health, Mental Health Professionals

### Association Between Resilience and Frailty among Chinese Older Adults

Junling Gao, Hua Fu, Yujie Wang

<u>Purpose:</u> Resilience is a multidimensional concept determining healthy aging, however, there were limited studies examining the association between frailty and resilience in detail. In this study, we aimed to examine the association of frailty with three dimensions of resilience-strength, optimism, and tenacity among Chinese older adults.

Methods: A cross-sectional study was conducted among 10,209 participants who were sampled by three-stage sampling method, from three cities in China from June 2020 to July 2021. The Chinese version of the Connor-Davidson Resilience Scale (CD-RISC) was used to measure resilience's 3 dimensions (strength, optimism and tenacity), which were converted into quartiles for the analysis. Frailty status was measured using the Chinese version of the FRAIL scale, categorized into robustness, pre-frailty and frailty. Multinomial logistic regression was used to examine associations between frailty status with strength, optimism and tenacity.

Results: The overall proportions of robustness, pre-frailty, and frailty were 42.7, 48.7, and 8.6%, respectively. After controlling for sociodemographic characteristics, self-rated health, and health behaviors, compared with older adults with the lowest quartile of strength, older adults with the second quartile (odds ratio, OR = 0.67, 95% CI: 0.57-0.78), third quartile (OR = 0.60, 95% CI: 0.50-0.72), and fourth quartile (OR = 0.58, 95% CI: 0.46-0.73) of strength had lower ORs for pre-frailty, and who also had lower ORs (0.44, 95% CI: 0.33-0.58; 0.42, 95% CI: 0.30-0.59; 0.34, 95% CI: 0.20-0.56, respectively) for frailty. There were no homogeneous associations between optimism and tenacity with frailty status.

<u>Conclusion:</u> Higher strength was associated with lower chance of being pre-frail and frail among Chinese older adults. This finding implies that community-based training programs aiming to enhance psychological resilience, especially strength, may contribute to healthy aging. Future studies should examine the effects of resilience on frailty using longitudinal or experimental study designs in cross-cultural contexts.

## Examination of factors associated with mental health and wellbeing of people living with HIV in Kazakhstan Adel Abenova, Raushan Alibekova, Faye Foster

The human immunodeficiency virus (HIV) is a serious public health problem worldwide. While the global HIV pandemic remains stable, in Central Asian countries, including Kazakhstan, new HIV cases are actively increasing. According to UNAIDS estimates, 35,000 people (15 years and older) are currently living with HIV infection in Kazakhstan (Mussina et al., 2023). In spite of notable achievements in ensuring the access to free life-saving antiretroviral treatment in Kazakhstan, people living with HIV (PLHIV) still experience high levels of stigma, discrimination and poor quality of services (Stigma Index 2.0 study, 2022). Studies showed that health-related quality of life is worse among PLHIV than in the general population, which is associated with poorer mental and physical health (Skogen et al., 2023).

Despite the prevailing number of studies, examining mental health a pathological perspective (Heissel et al., 2019; Andini et al., 2019), in recent years there has been a growing interest in investigating positive mental health and flourishing in PLHIV (Ammirati et al., 2015; Lyons et al., 2016). A review of longitudinal studies by Ironson (2008) concluded that optimism, active coping and spirituality were associated with slower HIV progression and better response to treatment. While positive mental health and wellbeing is defined as a balance of subjective well-being and full functioning (Huppert, 2005), flourishing is defined as an active process of living in accordance with personal values, commitments and vision for the future as an individual, within the context of the community to which one belongs (Willen et al., 2021). The definition of flourishing is similar to how mental health was defined by Antonovsky as a continuum which ranges from "excruciating emotional pain and total psychological malfunctioning at one extreme to a full, vibrant sense of psychological wellbeing at the other" (Antonovsky, 1985; Mjøsund, 2021). Thus, flourishing is a salutogenic concept which focuses on people's potentials and strengths taking into account the social structures and context which shape the ability to cope with adverse life experiences (Joseph & Sagy, 2022), while also considering the prevalence of mental illnesses (Eriksson & Bengt, 2014).

According to a recent theoretical development of two continua model, mental health and mental illness are related but distinct phenomena (Keyes, 2002). Therefore, presence of mental illnesses cannot exclude flourishing, which involves high levels of emotional, psychological and social wellbeing; while people who do not have any mental illness symptoms, may also languish in life if they experience low levels of emotional, psychological, and social well-being. Research based on the two-continua model supported categorization of individuals as flourishing, moderately mentally healthy, or languishing, regardless of whether a diagnosis of mental illness is present or not (Keyes, 2005). Two continua model of mental health is an important contribution to the salutogenic orientation and the knowledge base of health promotion (Mjøsund, 2021).

There is a lack of national programs to promote and support mental health of PLHIV in Kazakhstan. Research based on salutogenic orientation is needed to identify mental health needs and establish comprehensive programs aimed to improve their quality of life and well-being, which is an important element of care and support for PLHIV. Thus, the purpose of our cross-sectional study is to examine the association of a range of demographic, physical health and psychosocial factors with mental health of PLHIV in Kazakhstan, applying the two-continua model of mental health and mental illness. Standardized validated scales will be used to measure flourishing (Diener et al., 2009), depressive and anxiety symptoms (PHQ-2; GAD-2), HIV stigma (Kalichman et al. 2009), and social support (Santiago et al., 2023). Researchers will collaborate with the staff of the Kazakhstan Union of People Living with HIV on various steps of this study, including the development and pre-test of the online questionnaire, dissemination of the survey link via social networks of people living with HIV in various regions of Kazakhstan, and discussion of the obtained results and recommendations.

The study findings will inform future public health interventions aimed not only to treat or prevent mental illness, but also to promote mental health and well-being in HIV-positive people.

### Sleep and Salutogenesis – the epistemological value of paradigm pluralism to close epistemic gaps in sleep medical research

Ludmila Litvin

Traditional medical research shows a strong methodological focus on pathogenetic processes, while research dedicated explicitly to exploring salutogenesis is less present. This may be partly linked to pragmatic factors like methodological advantages of pathogenetic research or structural advantages due to a biased funding landscape through the influence of the pharmacological industry. [van den Tweel 2010; Bekelman, Li, & Gross, 2003] At the same time, there is empirical evidence for the value of salutogenetic research, and one of the research fields that prominantly shows this potential is sleep medicine.

On the one hand, poor quality and quantity of sleep are considered to be risk factors for health. A short-term lack of sleep can reduce concentration, alertness, and productivity. Long-term consequences are increased morbidity and mortality. [Chokroverty 2010] Sleep deprivation and insomnia are associated with a lowering of the body's immune system performance. [Palagini 2022] Insomnia is linked to the occurrence of neuropsychiatric disorders such as bipolar disorder, anxiety disorders, PTSD, substance use disorders, and Alzheimer's disease. [Winkelman 2020]

On the other hand, sleep is considered to be a health-promoting, salutogenetic factor, supporting physical and mental well-being and resilience. [Buysse 2014] Sleep maintains and promotes the health of the nervous system. Toxic substances such as beta-amyloids (Aβ) are removed during sleep.[Semyachkina-Glushkovskaya 2023] Also, sleep is associated with the consolidation of memories, learning mechanisms, and synaptic plasticity.[Tononi 2014; Klitzing 2019]

It becomes clear, that the absence of disease-promoting factors and salutogenesis are not interchangeable. The strong focus on pathogenetic research causes an epistemic gap, which can only be closed by raising awareness of the epistemic potential of salutogenetic research in the field as well as on the structural and institutional level and motivating the active pursuit and funding of a variety of research paradigms. [Hucklenbroich 2021; Anacker 2012]

### Looking on the bright side of life - hope and purpose in life as predictors of experiences of Covid-19 in Polish adults

Justyna Michałek-Kwiecień, Maria Kaźmierczak, Judyta Borchet, Aleksandra Lewandowska-Walter, Katarzyna Skrzypińska

The normal way of human functioning is a dynamic state of unstable balance. As part of the salutogenetic concept, we assume that the pandemic has caused hope to be shaken, but at the same time it has mobilized the psychological mechanisms of hope and purpose. Both hope and purpose in life are treated as personal resources in the process of coping with stress, which became essential for dealing with the adversarial life situation of Covid-19 pandemic. The current study is a part of a larger project on international and multidimensional perspectives on the impact of Covid-19 across Generations (IMPACT-C19) led by the Research Initiatives Working Group at the Pandemic Task Force of the American Psychological Association. The current study aimed to test the role of hope and purpose in life in experiences related to situation of pandemic, with the inclusion of sociodemographic characteristics. A cross-sectional quantitative online survey was performed. The sample consisted of 1031 both emerging and established adults aged 18-45 (M = 26.84, SD = 7.45, 59.9% females and 40.1% males). The following measures were used: The Herth Hope Index, Brief Purpose Measure, the Experiences related to Covid-19 Scale. The health-related data were also collected. Results indicated that individuals with higher levels of hope and purpose in life declared fewer negative experiences of COVID-19, particularly among females. In addition, women declared more maladaptive responses to the COVID-19 pandemic than men. The present study confirms the need of inclusion of positive health continuum and personal resources within the predictors of adaptation during pandemic among emerging and established adults. Therefore, in response to the stress that affected the population in 2020 and later, the respondents mobilized generalized resistance resources. This process was important for their sense of coherence to survive. The study shows that other research tools can also be used to measure this type of hope. In addition, focusing on pursuing purpose in life and developing hope might become elements of prevention and interventional programs on wellbeing in crises, also outside the health sector.

Keywords: hope, purpose in life, experiences related during Covid-19, emerging and established adults

### Explaining resilience in potential traumatic event: Trajectories of anxiety and Sense of Coherence during COVID-19

Adi Mana, Yossi Mana, Svetlana Prokasheva, Shifra Sagy

Background: Longitudinal studies have shown that most individuals can manage and stay well in response to potential traumatic events (PTEs). The mechanisms, however, underlying such resilience are studied from various and even competitive approaches. Our study suggests an integration between two main approaches in the area of mental health: Bonanno's model of managing PTEs (Bonanno, 2021) and the Salutogenic approach of Antonovsky (1979) which focuses on the Sense of Coherence construct as a determinant variable affecting health and wellbeing consequences. We expected that anxiety trajectories would be associated with SOC. This hypothesis was tested in a longitudinal study in the context of the Covid-19 pandemic in Israel. Data were collected from 560 adults (300 males) through an online questionnaire administered at 7 time points between March 2020 and February 2022.

Results: Using Latent Profile Analysis (LPA) four anxiety trajectories were found: (a) resilience- consistently low symptom levels or resilience, (b) Chronic- consistently elevated symptoms, and (c) Improving- initially elevated symptoms that gradually decrease over time. These trajectories confirmed Bonanno's model (2004). Additionally, a highly resilience trajectory was found in people who consistently did not report being anxious. As expected, SOC significantly distinguished between the four trajectories. The highly resilient group reported the strongest levels of SOC, followed by the resilience group, and the improving. The chronic group reported the weakest levels of SOC.

Conclusion: This research suggests that SOC is a significant predictor for the trajectories of anxiety in managing a longitudinal PTE.

# The Basketball Boys: Young men from refugee backgrounds and the symbolic value of swagger in an Australian state high school

Marguerite C Sendall

<u>Introduction:</u> Schools are critical spaces for young men from refugee backgrounds. They play an integral role in literacy development, educational attainment, and providing a sense of belonging. This sense of belonging to school creates a tangible bridge between stress and coping and reflects a salutogenic approach to wellbeing. Inclusive education practices for this group are largely absent in Australian schools. Research shows focusing on these young men from a non-deficit position assists with inclusivity. There is a lack of research exploring the agentic practices of young men from refugee backgrounds within schools.

<u>Material and Methods:</u> This ethnographic research explores the symbolic value of swagger for a group of young men from refugee backgrounds at a high school in Australia. A Bourdieusian theoretical framework guided critical awareness of power in schools.

<u>Results:</u> Our qualitative findings show how a group of young men found a meaningful and salutogenic way to acquire social and cultural capital. Despite the school's constraints, this group developed a group identity reflected in their clothing and embodied dispositions referred to here as swagger.

<u>Conclusion:</u> Our findings demonstrate the complex power relations at work, including the opportunity for the young men to resist, and be included. In the spirit of Bourdieu's concern for reflexivity, our findings point to the need for schools, teachers, and education policy makers to consider the workings of power in schools in more considered and salutogenic ways.

# Wellness for children in immigrant families: A Salutogenic approach to understanding the experiences of visible minority parents

Grace Ukasoanya

Immigration presents complex challenges for the wellness of young people and exposes their parents to various uncertainties and disruptions in their previous approach to fostering children's wellness. However, immigration also provides opportunities for transformation and empowerment relating to wellness promotion in the family. This presentation is based on a qualitative study in counseling that employed a salutogenic perspective to explore how immigrant parents from visible minority backgrounds understand and promote wellness for their school-age children (ages 6-17) during the early years of settling in Canada.

<u>Aim:</u> The primary objective is to illustrate how the Salutogenic theory offers a useful approach for organizing visible minority parents' experiences regarding their children's wellness and how they frame the resources that account for whether they survive or thrive while striving to ensure their children's wellness. The secondary goal is to demonstrate how the Salutogenic theory provides a practical framework for translating research on the wellness parenting practices of immigrant parents into pedagogy with graduate-level counselor trainees.

Method: By utilizing a conversational approach, I will encourage participants to learn and discuss collaboratively (1)the findings from the primary research; (2) an example of how the Salutogenic themes derived from the study were used to create diversity and inclusion workshop that considers the liminal space of immigration as an essential determinant of wellness for clients with minority identities, and, (3) the reflections of the graduate counseling students on their transformative learning experiences during the workshop.

Results: Participants will learn about how the principles of salutogenesis are used in organizing the process and findings of qualitative research on the wellness of a marginalized population, as well as its application to knowledge translation in counseling education.

### Community Nursing for salutogenetic transformation in migrant populations in Vorarlberg

Judith Battlogg, Elisabeth Noehammer

<u>Background:</u> The health of migrants is often more challenged compared to the majority population. Often, their health needs differ due to another constellation of generalized resistance resources, while the reasons for and the act of migration often present major stressors. However, migration can also lead to gains in health-related resources, creating more opportunities for health. To allow these to be reaped, health interventions and their design must be aligned with migrants' needs.

<u>Aim:</u> The aim of the study was to investigate health related needs of migrants so that the development and implementation of health offers is targeted to their requirements, builds on and expands existing resources while taking potential migration-related and culture-specific stressors into account. A specific focus was placed on Community Nursing as low-threshold public health offercovering prevention and promotion for physical, social, and emotional health.

<u>Methods:</u> Seven in-depth problem-centered interviews with (3) migrants (4) and setting-specific experts and gatekeepers were conducted, transcribed, and analyzed using qualitative content analysis. This was done in the context of (a master thesis in a) pilot project for Community Nursing in the federal state of Vorarlberg, Austria.

Results: Stressors like traumatization, (emotionally) exceptional situations and acculturation processes influence health status and behavior. As the new context not only partly requires but also allows for new health behavior, incorporating health promotion into existing and created resources is advised for and can result in reinforcing cycles: e.g., building on their social capital, adding the offer of culturally sensitive health intervention to events organized by the community, using children's health as starting point and schools as neutral settings for health information. Health personnel from the majority population needs to be very culturally aware and develop trust, ideally also via cocreating health (promotion) offers with the target group.

### Mentoring for migrants in Norway: how do mentors shape and evaluate their contribution

Marguerite Daniel, Ragnhild Hollekim

Mentoring is a type of informal learning where the mentor, who has more local knowledge and experience, guides the mentee who has less local knowledge and experience. Mentoring programmes for migrants – whether mentoring for social integration, mentoring to work or mentoring at work – have shown to be highly successful for migrants. However, the experience and contribution of mentors is less well documented. In this paper we use the dimensions of Sense of Coherence (SOC) to frame how mentors shape and evaluate their contribution to migrants' learning.

<u>Methods:</u> We conducted 17 semi-structured interviews with programme leaders (four), mentors (seven) and mentees (nine) in three mentoring programmes run by three separate organisations in two cities in Norway (three of the interviews were conducted in pairs). We asked all participants what contributes to success in mentoring and what they learn from the process.

<u>Findings:</u> Meaningfulness – mentors first make an emotional connection, with trust as a foundation to the relationship; they build on this to encourage proactivity, taking responsibility and belief in self. Attitudes of respect, equity and reciprocity generate a context for meaningful participation. Manageability – mentors introduce mentees to resources that help them to cope with the stressors they experience. Mentors contribute resources such as support with CVs and cover letters, joining networks and being a reference person to help mentees get work. Mentors introduce mentees to local activities, leisure groups and resources for their children as well as interpreting local culture and customs to help mentees integrate socially. Comprehensibility – mentors provide necessary information, explain how the system works and help mentees understand the Norwegian context. Together, these contributions from mentors create conditions that strengthen mentees' sense of coherence.

### Sense of coherence and professional quality of life of staff working with unaccompanied refugee minors in Greece

Chrysovalantis Papathanasiou

<u>Background:</u> Professionals in shelters for unaccompanied refugee minors are at a high risk of secondary traumatic stress and burnout. The extent to which professionals are exposed to the traumatic events of unaccompanied refugee minors determines their levels of health and well-being.

<u>Aim:</u> The aim of this study was to investigate the professional quality of life of the Greek staff working with unaccompanied refugee minors, their sense of coherence, and the relationship between the professional quality of life and the sense of coherence.

<u>Methods:</u> The sample consisted of 104 employees in accommodation structures for unaccompanied refugee minors. A research package was used to collect the data, which consisted of the Sense of Coherence (SOC) and Professional Quality of Life (ProQOL-5) scales, as well as a questionnaire that included social and demographic characteristics.

Results: Participants show a moderate to high degree of meaning-making ability, a moderate degree of comprehension and management ability, and a moderate to high levels of sense of coherence. Also, they show moderate levels of compassion satisfaction, secondary traumatic stress, and burnout. The factors of the SOC scale showed a positive correlation with the factors of the ProQOL-5 scale. In addition, women showed further developed comprehension skills and lower levels of secondary traumatic stress compared to men. Participants who were <30 years of age showed further developed management skills compared to the participants aged 41-50 years. Participants from a small town or village showed a greater ability of meaning-making than corresponding participants from a city of 10,000-50,000 inhabitants. Finally, it was found that the participants that were less conservative, had a greater capacity for meaning making, while participants that were more religious, presented a better sense of coherence.

## A Health-promotive Approach to Maintain and Sustain Health among Nursing Professionals in Nepal and Sweden – A part of a PhD thesis

Dip Raj Thapa

<u>Background:</u> The prevalence of work-related health problems has led to an increase in sick leave causing both economic damage and the health of individuals around the globe. Stress-related illnesses are particularly reported within high-income countries. There is a need for more preventive measures and health-promotive actions to solve global work-related health challenges among nursing professionals. The thesis had a salutogenic framework and this paper highlights the results of two subsidiary studies from a PhD thesis.

<u>Aim:</u> This conference paper aims to illuminate nursing professionals' experiences of their work-related health resources as well as barriers in Nepal and Sweden.

<u>Methods:</u> Both of the included studies had qualitative designs based on individual semi-structured interviews. Data were collected from 13 nursing professionals (registered nurses and registered midwives) during spring 2018 in Sweden and from 19 registered nurses during autumn 2018 in Nepal. Interviews were transcribed, and translated from Nepali into English. Data were analyzed using qualitative content analysis and thematic analysis.

<u>Results:</u> Nursing professionals experienced several but similar challenges in both Nepal and Sweden. The common challenges were lack or limited support from the manager, work overload, and organizational dysfunction. Nursing professionals in Nepal described a more physical work environment as a hindrance whereas nursing professionals in Sweden described more psychosocial work-related problems. Collegial support, time for recovery, skills and competence development opportunities, rewards, and appreciation from the manager were described as the main resources at the workplace in both Nepal and Sweden. Nurses in both contexts found patient-related work meaningful and colleagues' support added both happiness and made them feel the workplace as joyful.

<u>Conclusion:</u> A more Salutogenic focus with increasing work-related health resources as described by the nursing professionals is necessary to promote and sustain the health of nursing professionals in Nepal and Sweden.

### The Sense of Coherence, Health Literacy, and Empowerment in Irritable Bowel Syndrome

Natalia Płóciennik, Katarzyna Binder-Olibrowska, Jarosław Rakoczy

<u>Intrduction:</u> Irritable Bowel Syndrome (IBS) is a prevalent functional gastrointestinal disorder which affects the health and well-being of individuals and it has implication for the overall quality of life. Understanding the interplay between IBS and SOC is crucial for comprehending how individuals navigate and make sense of their condition. Additionally, empowerment and health literacy play a pivotal role in managing chronic conditions.

<u>Aim of the study:</u> This study sets the stage for exploring the relationships between IBS, SOC, health literacy and empowerment, shedding light on the holistic dimensions of individuals' experiences with gastrointestinal disorders.

<u>Materials and Methods:</u> 94 participants diagnosed with IBS (83 females and 11 males), aged 18 to 58 (Me=34.44; SD=9.46) were included. SOC-13 questionnaire, Psychological Health Empowerment Scale (PHES) and health literacy questions were used in the online survey.

<u>Results</u>: The positive and statistically significant correlation between health literacy and the PHES was observed (p>0.001). The correlation between SOC-13 and PHES was also determined signifying a positive and statistically significant relationship (p>0.001). However, no statistical significance was noted in correlation between SOC-13 and the level of health literacy. The mean values resulting from the assessments of SOC-13, health literacy, and PHES were noted as 15.19, 20.86, and 58.54, respectively, with corresponding standard deviations of 7.82, 3.48, and 16.93.

<u>Conclusions:</u> Results encourage a holistic approach in understanding and addressing the challenges faced by individuals with IBS, acknowledging the impact of sense of coherence and the role of health literacy and empowerment in shaping various dimensions of their physical health outcomes.

## Supporting employee mental health with proactive vitality management and needs-based crafting: Outline for a randomized controlled trial on salutogenic interventions

Philipp Kerksieck, Georg F. Bauer, Dirk Richter, Simeon J. Zürcher

Mental disorders (MD) are emerging as the primary factor of exclusion from the labour market and cause substantial health care and societal costs. A substantial proportion of employees affected by MD is at risk of job loss. Such job loss is associated with high risks of adverse outcomes and is costly at all levels [1]. Consequently, we suggest supporting affected employees with proactive individual-level strategies for promoting employee health. This suggestion aligns with the call for strengthening positive (mental) health in line with the Health Development Model [2], offering a salutogenic perspective on health. More specifically, the emergence of mental health issues in the workplace is a call for a focus on interventions fostering positive health in the future of work [3–5] instead of reducing detrimental or pathogenic developments only.

Therefore, we aim to address this emerging issue of employee mental health by taking a salutogenic perspective on this affected employee group [5]. We are doing so by suggesting new approaches to proactive vitality management in the workplace [6], referring to the pioneering Integrative Needs Model of Crafting [7, 8]. This model refers to proactive adjustments employees make to their jobs to align them better with their basic psychological needs. This approach is substantially promising since it may help vulnerable employees adjust working conditions to their demanding situation and better satisfy their needs[9]. However, so far, this approach remains untested in employees affected by mental health issues and at risk of job loss.

We aim to evaluate this new and salutogenic approach within the Swiss sickness insurance scheme, which offers support schemes for job retention or return to work for employees affected by mental health issues. Interventions for proactive vitality management can enrich these support schemes, emphasising crafting employees' basic psychological needs. Consequently, satisfying psychological needs may increase positive health and initiate a salutogenic process [2]. At the conference, we will present and discuss the study design and its potential for implementing a new approach to salutogenic proactive vitality management in the workplace [10, 11].

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### Its' "MyMouth": Salutogenic approach to promote oral health in adolescents through mHealth

Ratnayake D.L, Ekanayake L

<u>Background:</u> Salutogenesis, a personal health promoting resource, has great potential to develop and implement digital health interventions, many of which are focused on self-care to promote oral health in adolescents.

<u>Aim:</u> To develop and assess the feasibility of the use of a mobile application consisted of salutogenic features to improve oral health in adolescents

<u>Methods:</u> A mixed method was used to develop the "MyMouth" mobile application that included salutogenic features. The components of the mobile app were developed by triangulation of evidence synthesis from key informant interviews and an extensive literature review. Feasibility of using the app was evaluated based on a quasi-experimental study conducted among a convenient sample of 33, fifteen-year-old adolescents. Acceptability of the app (primary outcome), SOC and selected oral health behaviours (secondary outcomes) were assessed prior to and six weeks after introducing the app. Data were collected through an online questionnaire. Ethical Review Committee of the Faculty of Dental Sciences, University of Peradeniya, Sri Lanka provided ethical clearance for the study.

Results: "MyMouth" mobile app included several features of a salutogenic intervention; focus on generalized resistance resources (self-mouth assessment guide-video/audio and resources); active adaptation (activity to identify a personal oral health goal and instructions to achieve the goal); focus on SOC as a learning process (activity to identify resources to maintain oral health).

Of the 33 students, 81% were aware (exposure) of the "My Mouth" app. Only 48% (n=16) had installed the app (reach) and 14 responded to the questionnaire. Among the 14 respondents, all except one agreed/ strongly agreed to all five items related to satisfaction of using the "My Mouth" app. The median (range) SOC score at pre-test and post-test stages were 18 (11) and 17 (11) respectively. Self-mouth examination increased from 14 % from the pre-test to post-test stage.

#### Salutogenesis to promote the health of the teacher's voice

Ivonete Teresinha Schulter Buss Heidemann, Claudia Bruck Marçal, Michelle Kuntz Durand, Aline Megumi Arakawa-Belaunde, Leandro Martins Costa Do Araujo

<u>Introduction:</u> The salutogenic conception seeks to overcome the dichotomy between health and disease, fight for ways to promote a healthy life, and increase people's feelings about well-being and quality of life.

Objective: This study sought to understand the contribution of salutogenesis to the promotion of teacher voice health in the school context.

<u>Material and methods:</u> This is a convergent mixed study, carried out in two stages: quantitative and qualitative research carried out with 30 teachers from the initial grades of five schools in the state education network - Brazil. Quantitative data were obtained through a questionnaire that contained sociodemographic questions and a sense of coherence from teachers. For qualitative data, individual interviews were conducted with thematic analysis. A high sense of coherence from teachers was identified, but with a prevalence of vocal disorders. Qualitative data revealed that teachers have difficulties and the potential to promote voice health and mobilize internal and external resources for good vocal health.

<u>Results:</u> As salutogenic resources to promote voice health, they highlight water intake, quality of sleep, healthy habits, mental health. As difficulties report stress, low wages, high workload, and noise in the classroom. They reinforce the importance of salutogenic resources to promote the health of the teacher's voice.

<u>Conclusions:</u> The sense of coherence and the generalized resources of resistance as health promotion practices for the teacher's voice are fundamental to increase the positive health status of these professionals

## Taking an asset-based approach to understanding school exclusion for the purpose of educating teachers Amanda Corrigan

In Scotland you are more likely to be excluded from school if you are male, have additional support needs and/or live in poverty. School exclusion can lead to a range of additional negative impacts, including reduced social capital and decline in attainment. Designed as a deterrent to unacceptable behaviour, school exclusion can exacerbate other forms of rejection in a child's life and has been shown to be a significant determinant of negative outcomes in adulthood, including involvement in the criminal justice system, homelessness, unemployment and addiction.

In this study, school exclusion is cast as a social wellbeing issue where social wellbeing is a health determinant.

Using a community-based participatory approach, the researcher has established a research hub to explore how members of the community with experience of school exclusion can support the education of teachers. Within a community that experiences considerable challenges, the community members' experiences are treated as assets and all members of the research hub work together to achieve the aims of the project. After capturing their own experiences of education, the community members are currently exploring how teachers can develop a deeper understanding of the experiences of children and families where school exclusion is an issue.

Using field notes, group research journals, and timeline interviews, this group are working to develop resources and artefacts to support teachers' knowledge and understanding with the aim of disrupting negative outcomes for young people in future. The development of resistance resources that can support children to navigate the stressors they encounter in school is a key focus.

This talk will explore the challenges and opportunities that have arisen in developing a power-sharing research arrangement that prioritises and respects the experiences and voices of participants. It works from Antonovsky's notion that looking at problems from a new direction can change what we see and how we see it.

# A salutogenic call in the Canadian wilderness finds other voices: The origins of the Prairie Salutogenic Community of Practice

Fries, Christopher MacDonald, Laura; Mantesso, Jaimie; Mills, Sheryl; Moon, Michele; Ukasoanya, Grace

When a population of ~40 million lives within a land mass of 9.985 million km², it simultaneously is easy to know someone who knows someone but less than easy to find anyone who is aware of salutogenesis. Such is the case in Canada. Though the Ottawa Charter on Health Promotion and the Okanagan Charter on Health Promoting Universities and Colleges inform education in Canada, salutogenesis as a philosophical orientation is less known—at times, it is advised to find a user-friendly word explaining the processes and outcomes of salutogenesis. When a salutogenic, lone wolf at one University howled into the Canadian prairies, he hoped to find others. Six people heard his cry in the wilderness forming the Prairie Salutogenic Community of Practice (PSCoP), a pack with a pact to infuse salutogenesis within education and scholarship.

<u>Aim:</u> The PSCoP aims to share its story, a case study drawing upon general and specific resistance resources (G/SRR) and affirming a community's sense of coherence.

<u>Method:</u> Our story is told using Antonovsky's Salutogenic Model. The process began with the GRR for salutogenic scholars (i.e., Society for Theory and Research on Salutogenesis). Prairie-identifying members were emailed and invited to meet at minimum for introductions. Within a year, the six invitees formed the PSCoP, a space to commune on salutogenic educational developments and research projects.

<u>Findings:</u> The members serendipitously discovered salutogenesis, finding their health-creating philosophical orientation. Finding each other mediated the loneliness of seemingly being lone wolves and provided a salutogenic-grounded sounding board with knowledgeable others. For example, the PSCoP held an inaugural event (Spring 2023). We hope sharing our experience encourages others to find their packs too.

<u>Discussion:</u> The PSCoP helps navigate the common experience of struggling for the salutogenesis voice to be heard amidst the loudness of a pathogenic approach in education and research.

### Workshop: Teaching Salutogenesis: what, how, and how to be?

Jake Sallaway-Costello, Marguerite Daniel, Eva Langeland, Lenneke Vaandrager, Anna Bonmatti

Objectives: As a major unified theory and orientation of health promotion, salutogenesis is learnt and taught across diverse disciplines all over the world. But the pedagogic guidance and evidence base on how to teach salutogenic concepts, their application and how to teach in a salutogenic way, is limited. This workshop expands an evolving pedagogic initiative of the Global Working Group on salutogenesis, inviting contributions from learners and teachers everywhere on the state of the art in teaching salutogenesis. Initially framed as questions of what to teach, how to teach it, and how health promoters can be salutogenic, the workshop seeks to be salutogenic in itself, recognising and scrutinising established and emerging practices in the teaching of salutogenesis, across disciplines, geographies, applications and pedagogies.

Learning goals: By the end of the workshop, participants should be able to:

- Reflect on individual and collective experiences of salutogenic learning and teaching.
- · Identify successful and unsuccessful experiences of teaching salutogenesis.
- Envision new methods of salutogenic learning inspired by global colleagues.
- Conceptualise the start of the art in teaching salutogenesis across disciplines.

The workshop will generate an initial draft of a pedagogic framework on the teaching of salutogenesis, valuing insights from both learners and teachers, the experienced and the emerging.

Activities: The Teaching Salutogenesis workshop promises a participatory approach to pedagogic reflection:

- 1. Check-In (5 minutes)
- 2. A salutogenic and relational learning experience: the ETC summer school (15 minutes)
- 3. A gap in the pedagogic literature: what, how, and how to be? (15 minutes)
- 4. Group discussion with a salutogenic format: what worked, what did not work, and why? (30 minutes)
- 5. Harvesting: teaching in the River of Life! (20 minutes)
- 6. Next steps, sharing practices, and future pedagogic collaboration (5 minutes)

# <u>Workshop:</u> Salutogenesis In Refugees: "Giving voice to refugees": The use of Photovoice as a collaborative approach to enhance resilience among forcibly displaced persons

Chrysovalantis Papathanasiou

Details of the topic: Photovoice is a participatory action research strategy that provides, through a specific photographic technique, a collective reflection on a community's challenges and possibilities, with the intention fostering social change. Photovoice is used effectively with socially excluded and marginalised groups, enabling their voice to be heard in public decision-making spheres. It is used commonly with refugee communities, aiming at their empowerment and their social integration. Several mental health professionals in Western societies tend to focus on refugees' traumatic lived experiences to the neglect of their coping strengths and recovery abilities. They are trying to understand and explain refugees' reactions to stressful life events in terms of psychopathology. However, psychopathology does not always follow adverse life events. The literature shows that many refugees demonstrate remarkable resistance and resilience. Taking this as given, recently there has been interest in turning towards the study of those factors that allow such individuals to remain largely unaffected in terms of psychopathology. During the workshop, participants will have the opportunity to learn the basic principles and concepts of Photovoice, become aware of ethical issues, and follow the steps of project implementation. This will be achieved through the presentation of three Photovoice projects with refugees: a) Community Psychosocial Workers (trained non-specialist "helpers" from refugee backgrounds); b) Asylum seekers residing in the Closed Controlled Access Centre of Samos; c) Forcibly displaced Ukrainian women. These projects were carried out in the context of the programme titled "Community-based interventions for mental health care of refugees and asylum seekers in Greece", which was implemented by the Association for Regional Development and Mental Health (EPAPSY) in partnership with UNHCR, the UN Refugee Agency, and the EU.

<u>Moderator:</u> Dr. Chrysovalantis Papathanasiou holds a PhD in Health and Social Psychology from Aix-Marseille University and a Master's degree in Sociology of Health from Ecole des Hautes Etudes en Sciences Sociales in Paris. He is the founder and director of the Psychosocial Support Centre for Refugees (PSCR) in Athens, Greece and the Director of the MSc programme in Human Rights and Migration Studies (Aegean Omiros College, affiliated with the University of Essex).

Exact format of the session: The workshop duration is 60 minutes, and it consists of three parts: a) introduction of the topic (What is Photovoice? How is it used with refugees?); b) participatory group work (the participants will learn to analyse the visual data); c) plenary session (reflection and discussion about the processes and the outcomes of the training).

### Workshop: Advancing the measurement and concept of SoC

Georg Bauer, Martin Tusl, Paolo Contu

Issue/topic: Sense of coherence (SOC) constitutes the core concept of Salutogenesis. The SOC scale exists in over 50 languages and is mostly used as the short, 13-item scale (rather than 29-items). However, there are ongoing debates about the unclear factor structure of the scale (e.g., one-, two or three-factors) and the complex, heterogeneous item formulations capturing multiple facets of the SOC concept. More fundamental questions are related to origin of the SOC concept based on a set of interviews in a specific cultural and historical context, building on the one-sided notion that we are "all, always in the dangerous river of life" (Aaron Antonovsky, HPI 1996). Interviewees were selected based on having had past severe traumatic life experience. This opens up the question in how far the original SOC scale also well predicts thriving in the enriching parts of the river of life.

Debaters: CS and IP will introduce their work on network analysis of the SOC-13 structure. MT will present the validation of SOC-13 in Czech language, where he suggests harmonizing and simplifying the wording of the 13 items and to use factor analysis to select 12 different items from the SOC-29 scale. GB will suggest revisiting SOC scale development by conducting fresh interviews in a range of cultural contexts, asking for factors that help both for surviving and thriving. Format: After the introduction to the session (2 minutes), the debaters will introduce the three issues and suggestions how to address them in future research (3x6 minutes). They will mutually respond to each other's approaches (3x3 minutes). Finally, the audience will be invited to contribute their perspectives on the suggested approaches or to propose additional avenues to advance SOC (30 minutes). If possible, participants will circulate between three desks dedicated to the themes, and each debater will share in the plenary the 3 key insights (s)he gained during discussions.

### Workshop: Promoting the Salutogenic Transformation using the Heuristic Systematic Model

Craig Becker

<u>Background:</u> Fusing the Heuristic-Systematic Model (HSM) and salutogenic principles offers a strategy for cultivating better salutogenic messages. HSM evolved from the Elaboration Likelihood Model (ELM). Both focus on developing persuasive communication. HSM posits two distinct processing routes—systematic and heuristic. The systematic route involves thoughtful analysis and cognitive effort, while the heuristic route relies on mental shortcuts and cues that demand less cognitive processing. These models use psychology, communication, and health promotion to provide an adaptable framework for developing effective messages.

<u>Aim:</u> To provide practical tools for message creation that facilitate the active processing of salutogenic promotion campaigns, which aim to transform people from a pathogenic to a salutogenic mindset.

(planned) Methods: Grounded in Aaron Antonovsky's salutogenic paradigm, which emphasizes factors contributing to health and resilience, this workshop will depart from the traditional illness-centric approach to explore the application of HSM in promoting a salutogenic transformation. Participants will be exposed to how and why the HSM message is more likely to start this transformation by interactively adapting model HSM messages that use systematic processing and/or mental shortcuts to messages that foster a salutogenic transformation. This integration of HSM and salutogenesis will have participants develop ideas for a promotion campaign that cultivates a positive and health-oriented mindset. Participants will examine and use messages crafted to provide substantive evidence and detailed information on the benefits of embracing health-promoting behaviors to foster a deep and enduring commitment to positive change. Simultaneously, participants will explore addressing the heuristic route with simple, impactful cues such as relatable stories, vivid imagery, and endorsements from trusted figures to engage clients with lower motivation or less cognitive capacity.

(expected) Results: Participants will learn techniques to design messages that use systematic and heuristic cognitive routes, a framework for a more personalized, effective, enduring salutogenic message.

### Workshop: The Missing Link: Creating Coherence Between Individual, Group and Society

Ruca Elisa Maass, Claudia Meier Magistretti, Paolo Contu, Georg Bauer

<u>Details of the issue:</u> Current evidence speaks for the effectiveness of Antonovsky's model for Salutogenesis mainly on the individual level. To explore the model's full potential demands to expand our scope; and develop the understanding of how health is developed and coherence created in the complex interplay between individuals, settings, and societies. Therefore, six members of the Global Working group undertook the task of developing how to build coherence further, on both community and society level. This has developed into a core model on what participatory and collaborative processes can develop societal capacity in respect to coherent processes, experiences, agency and navigation particularly in complex conflict situations. This is the key innovation and element of the present state of the project delivered as a COST proposal October 2023. The result has the potential of becoming a new universal model for salutogenic interaction in the interplay of individual, group and society.

Format of the session: Following an introduction, the workshop itself will place the participants in each corner of the triangle (individual, group, society). After given practical examples of how coherence is created they will reflect on the issue themselves and if time suffices change corner to experience what is different in each corner. Thereafter, the discussion will elevate to interlevel i.e. what happens between the corners. The original 6 GWG members will be actively involved to give practical examples and guidance to the participants and ensure we work on the same map. The workshop will end in a plenary discussion focusing on what has been learnt. To make the process visible and practical it will be based on real issues such as planetary health and conflict resolution (such as wars).

#### Improving Mental Health with an Immersive Exploration of Self-Identity

Danielle Mullins, Miquel Alabèrnia-Segura, Sonia Lorente, Alba Garcia-Monzó, Guillem Feixas

<u>Background:</u> Metacognitive capacities (e.g., understanding mental states of self and others) have been recognized as contributing to effective self-regulation, adaptive coping, this way enhancing psychological well-being. We assume that they foster a sense of order, control, and a coherent understanding of life, essential ingredients for a sense of coherence (SOC) and good mental health.

<u>Aim:</u> The study investigates the potential effectiveness of a three-session immersive metacognitive training program using the digital platform "EYME-Explore Your Meanings." Grounded in the repertory grid technique, the platform prompts users to articulate personal meanings regarding self and significant others, which is then explored in a virtual reality environment with therapist guidance.

<u>Methods:</u> This quasi-experimental pre-post study with a single group included correlational analyses of baseline variables. Young participants (18-29 years old) without known psychiatric conditions underwent three individual sessions devoted to elicit and explore personal meanings of self and others in a 3D mental map using virtual reality and reflexive questions.

<u>Results:</u> Initial results from 18 consecutive participants who completed the training illustrate the transformative potential. Baseline measurements revealed that heightened psychological distress (CORE) may be associated with reduced distress coping capacity (Scale D MSAS). Post intervention, we found significant improvements in subjective well-being, life functioning, and the global CORE-OM score (Wilcoxon signed-rank effect sizes: 0.57 to 0.65, p-value < 0.01). Self-esteem increased (RSES; r = .48, p-value = .03), and problem-solving abilities improved (Scale D MSAS; r = .36, p-value = .03). A notable decrease in depressive, anxiety and stress symptoms (DASS-21) was evident, with medium to high effect sizes (r = 0.38 to 0.59, p-value < 0.05).

<u>Conclusions:</u> Preliminary findings supported the use of "EYME" for improving mental health, self-esteem, and mastery, one of the metacognitive capacities evaluated. Taken together, these findings suggest that our intervention holds promise for enhancing SOC in young people by helping them gain a meaningful understanding of themselves and significant others. Future studies should follow up on this first step and test these assumptions in order to expand the range of resources available to increase resilience and promote a satisfactory SOC.

### How to use salutogenesis to design a healthy eating programme for people with type 2 diabetes? Kristel Polhuis

<u>Background:</u> Improving dietary habits significantly impacts the well-being and disease management of individuals with Type 2 diabetes (T2DM). However, sustaining dietary improvements through conventional diabetes lifestyle programs remains a challenge. This study aimed to create and evaluate a salutogenic intervention targeting healthy eating in individuals with T2DM.

<u>Methods:</u> Employing the salutogenic model of health, guiding principles were derived and applied to design the intervention. A developmental approach blending quantitative and qualitative methods was employed, including life-course interviews to uncover intricate connections between eating habits, stress levels, and social support in individuals with T2DM.

Results: The intervention, SALUD, approached behavioral change through introspection and emphasized social support, prioritizing participant engagement and flexibility. Evaluation via a randomized controlled trial showcased consistent improvements in resilience, food literacy, dietary intake, and body weight in the SALUD group compared to controls. Qualitative feedback highlighted its positive impact on health, enhancing participants' sense of control and overall quality of life.

<u>Discussion:</u> This salutogenic intervention differentiated itself by offering a holistic, flexible, and supportive approach to promoting healthy eating among individuals with T2DM. The initial findings demonstrate its efficacy in initiating dietary changes. Furthermore, the evaluation process refined design principles and contributed to a comprehensive understanding of salutogenic interventions.

### Understanding childbearing in Complexity: A Qualitative Case Study

Megan Blinn, Emerita Marlene Sinclair, Lesley Dornan, W G Kernohan

<u>Background:</u> There is limited qualitative evidence about women's pregnancy and antenatal care experiences in many low-income countries, especially those with large numbers of displaced persons and limited or disrupted public services.

<u>Aim:</u> This Salutogenesis-informed qualitative study is exploring how women living as internally displaced persons experience pregnancy and antenatal care. A better understanding of women's lived experiences can inform strategies to improve pregnancy outcomes in remote and fragile contexts.

<u>Methods:</u> A case study approach with an exploratory and descriptive design informed qualitative interviews in two internal displacement camps in Southeast Asia. Due to travel restrictions, we have worked with local data collectors experienced in qualitative research. Semi-structured interviews were undertaken with women, who have experienced pregnancy while displaced, and members of the women's local support network. The research team will undertake an inductive thematic analysis of the data to explore whether women's responses to semi-structured interviews about their environment, social support, and culture exhibit characteristics that align with elements of Salutogenesis.

Expected results: Interviews with displaced women (n=20), stakeholders in the local support network (n=10) and members of the local research team (n=3) have been transcribed. Translation of local-language transcripts and data analysis are in progress. Preliminary findings will be ready for presentation at the conference in June 2024. This study will inform our understanding of a salutogenic approach to culturally and contextually relevant maternal health interventions for pregnant women in an internal displacement camp setting. In relation to the conference themes of transformation, the study touches upon social ease and cohesion for health at the level of individuals and community or settings.

### Architecture of Compassion - Developing a 'Human-Informed' Conceptual Design Framework Chloe Piper

Over the past decade, there have been increasing calls for a 'trauma-informed' approach to care and practice within all health and social services. Despite the substantial body of research linking physical aspects of healthcare environments to both physical and mental health outcomes and wellbeing, a trauma-informed approach to design is still in its infancy. Published research literature on the subject is limited, and there is yet to be a consensus definition (Design Resources, 2016). Its implementation in process and practice is still in the early stages of development, with little evidence at present to provide guidance (Shopworks Architecture Group, 2020).

Drawing on new and complex understandings of wellbeing and the interrelationship between mind, brain, and body, this research investigates how knowledge derived from scientific findings can be utilized to inform the design of architectural and built spaces that are sensitive to the impacts and effects of complex trauma and responsive to the needs of individuals in recovery. The approach is through the development of a 'Human-Informed' conceptual design framework positioned within a Salutogenic health paradigm.

### An Illustration of How Salutogenesis Enlighten Development of Psychosexual Nursing Care Model

Ayse Deliktas Demirci

<u>Background:</u> Psychosexual Nursing Care Model which the researchers developed as a PhD project work identifies nursing interventions, approaches, and processes to promote women's sexual well-being. The model has concepts related to the practice which is handled by the nurse to generate and/or motivate resources of women.

Aim: The present study identifies how Salutogenesis enlightens the development process of the Psychosexual Nursing Care Model.

<u>Methods:</u> The model was developed by using the theory-research-theory strategy. This strategy was transferred to the study with the use of Salutogenesis Model and experimental study design. The present study includes clarification of which parts of the research have a reflection of Salutogenesis.

Results: Salutogenesis served as a "background" of the Psychosexual Nursing Care Model, which is interested in a health promotion approach, "aimed to promote the sexual well-being of women". It also serves as the determination point of the "study outcome" which is the "sexual well-being" point that focuses not only on sexual function or dysfunction but also emotional-cognitive dimension. During the experimental study design, interventions that aimed to generate and/or motivate women's resources were structured by using Salutogenesis and measured sense of coherence level with the pre-post test design. During the combination of Salutogenesis and experimental study results, Salutogenesis reflected the Psychosexual Nursing Care Model concepts. It also determined how the nursing meta-paradigms are defined, the point of the place of the nurse, people, environment, and health/disease, and how they are placed in the Model. It presents broadened perspectives that are interested not only in women's resources but also in nurses' resources which are needed to promote sexual well-being and present good psychosexual nursing care. Therefore, Salutogenesis has implicitly and/or directly provided "knowledge" and an "approach" to determine the background, aim, method, and results of the model development study.

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### Throughout the individual's lifespan: When is it more appropriate to apply the SOC framework?

Yen Thi Pham, Marguerite Lorraine Daniel

The literature describes that SOC is strengthened with age. Our findings from research with second-generation boat refugees from Vietnam confirmed this. In seeking to identify strengths and what enables health, we consider using different theoretical frameworks at different points in the lifespan. This paper explores and discusses possible answers to two questions: At what point in an individual's lifespan, 1) Is it more appropriate to apply the SOC framework? 2) Might an alternative to the SOC framework be reasonable?

This discussion emerged from semi-structured interviews with second-generation Vietnamese boat refugees in Norway, in the context of intergenerational trauma – the children experienced high expectations as the effects of their parents' trauma. The participants, in their 30s and 40s, were asked about how they have dealt with stress during their lives.

The experiences of the participants in their childhood indicated they had a weak SOC. The sense of manageability was undermined by high parental expectations which contributed to overload. The sense of meaningfulness was not fostered because whatever the children did, they seemed to not matter to their parents. Lack of consistency between home and school environments contributed to incomprehensibility when the participants were young. However, their stories show that even at an early age they had strategies for coping with the pressures experienced, in particular cultural negotiation and navigation. Additionally, in their 30s and 40s, some participants think that they would have dealt differently with the high pressures from their parents had they come back to their childhood – their sense of comprehensibility seems to be fulfilled later.

Therefore, we suggest that in seeking what enables healthy outcomes: 1) the SOC framework might work better in exploring adults' rather than children's experiences; 2) For research on coping with adversities experienced in childhood, Resilience theory could be an alternative.

#### Middle leaders and teachers' sense of coherence

Noy Dali, Dorit Tubin

<u>Background:</u> Middle leaders (MLs) in schools are teachers who, in addition to their teaching role, play pivotal roles in the mid-level of the school hierarchy, between senior management and classroom teachers. This position allows them to bridge administrative vision and classroom reality, making them critical in fostering a sense of coherence (SOC) among teachers. That is, from the mid-level, they are able to translate the school's actions and regulations into comprehensible and consistent daily activities, manage resources in accordance with these activities, and explain the meaning and motives of the teachers' activities in alignment with the school's goals. However, it remains unclear if the MLs actively utilize their position to help teachers in developing a SOC.

<u>Aim:</u> This study explores the role of MLs in enhancing salutogenesis in the school by helping teachers to "see the world as 'making sense', cognitively, instrumentally, and emotionally" (Antonovsky, 1996:15).

<u>Method:</u> A multi-case study method was employed in four large, high-performing Israeli high schools. Data was collected through 35 interviews with MLs and school principals, observations on team meetings, and relevant documents and analyzed in accordance with the conceptual framework of salutogenic theory.

<u>Results:</u> Findings reveal that MLs promote comprehensibility, as seen in their explanations of how a curriculum schedule enables students to prepare for exams, and manageability by allocating private hours for teachers to assist struggling students. However, we found that MLs rarely deal with teacher motivations and the meaningfulness of their educational work.

We conclude that MLs' activities that promote comprehensibility and manageability contribute to teachers' ability to survive work challenges. However, the lack of engagement with motivation and meaningfulness results in only a partial SOC for them and the teachers under their leadership. This limitation could impede their ability to enhance professional skills, consequently limiting the school's growth and improvement.

### Promotion of Exclusive Breast Feeding in Lebanon through a Salutogenic Intervention

Nabiha Ramadan, Anna Bonmati Tomas, Dolors Juvinya Canal, Ali Ghaddar

<u>Background:</u> WHO recommends breastfeeding initiation within the first hour after birth and exclusive breastfeeding (EBF) for 6 months. Despite widespread efforts and programs designed to reinforce exclusive breastfeeding, rates lag behind targets. A Salutogenic approach is introduced to support the perception of the challenging breastfeeding journey as comprehensible, manageable and meaningful. The intervention aimed at supporting mothers in addressing daily stressors and enhancing their sense of coherence (SOC) to improve exclusive breastfeeding.

Aim: This study assesses the impact of a salutogenic intervention on maternal SOC and duration of exclusive breastfeeding.

Methods: This is a randomized controlled trial where 101 women residing in Lebanon, were randomly assigned to either the intervention (n=52) or a control group (n=49). Both groups received standard breastfeeding education in the maternity ward. In addition to the standard antenatal care, the intervention consisted of participating in whatsapp groups created by infant feeding helpers (IFHs) who followed up mothers for 6 months. IFHs delivered four informative and supportive videos at different time intervals. Whatsapp groups and videos aimed to increase SOC. In the whatsapp groups, mothers were encouraged by IFHs to self-identify GRRs and to describe employed coping mechanisms (comprehensibility) and to express the role of BF in their life (meaningfulness). Videos not only were designed to enhance manageability by giving relevant information and helpful coping techniques, but also to foster a better understanding of this new BF journey. Measured outcomes included exclusive breastfeeding initiation and the evolution of SOC and its dimensions.

Results: Rates of EBF at 6 months was higher among the intervention group's participants as compared to standard care (36.5% vs. 10.2%, p=0.00). SOC increased from baseline to six months postpartum in both groups, with a more significant change observed in the intervention group (F=11.358, p=0.001).

<u>Conclusion</u>: The salutogenic intervention demonstrated significant improvements in SOC and led to an increase of EBF rates. This study underscores the importance of comprehensive support systems to enhance maternal well-being, breastfeeding initiation and duration.

# Working naturally: unravelling salutogenic mechanisms for employees with occupational disabilities working in forestry

Hiemstra, S.R., Naaldenberg, J, De Jonge, A., Vaandrager, L.

<u>Aim:</u> Having a job is important for the well-being and inclusion of people with occupational disabilities (OD), but it requires a work environment that enables participation. This paper explores how successful inclusive employment in nature-management for people with OD might be explained by the salutogenic model of health. Specifically, this study aims to explore mechanisms contributing to coherent work experiences, i.e. perceiving work as manageable, comprehensible and meaningful (Work-SoC).

Method: 32 semi-structured interviews with employees with OD, their supervisors, job coaches and foresters were held at four worksites of a governmental organisation in the Netherlands that provides structural jobs for people with OD in nature management. Employees with OD contributed to the design and analysis of the study as co-researchers. To identify salutogenic mechanisms, a thematic content analysis was conducted. The analysis focused on job demands and resources, coherent work experiences and the processes through which coherent experiences emerged. Fragments were coded inductively and clustered in themes, which were grouped into overarching salutogenic mechanisms.

<u>Results:</u> Six salutogenic mechanisms contributed to coherent work experiences of employees with OD: 1) having constructive working relationships, 2) experiencing structure and clarity, 3) receiving practical help and support, 4) support in the process of interpreting situations and their meaning, 5) experiencing and learning in practice, and 6) physical activity and (absence of) stimuli. Identified mechanisms can create a positive spinoff when leveraged, boosting (new) salutogenic mechanisms.

<u>Conclusion:</u> Our findings illustrate that work in nature management can provide resources that promote coherent work experiences of people with OD through the identified mechanisms. However, employees, colleagues, supervisors, and close stakeholders must recognise and use these resources to leverage the identified mechanisms.

# Identifying salutogens in recovery from slow disasters: Development as restoring healthy biocultural lifeways

Mette Brogden

I offer a research/practice theory to: define a "slow disaster" in a region; analyze pathogenic trajectories; and conduct "thought experiments" to co-create means of pathogenesis reduction and community-led action research to plan implementation.

My research engages community-determined action research to address recovery from slow disasters spanning eras in the life of indigenous peoples. Research questions explore "illness/wellbeing" processes in systems—taking a holistic view that asks, what is "pathogenic" in a system? Are systemic processes self-reinforcing & becoming a "chronic disease"? Can "wicked" or "super wicked" emergent properties of systems change, and if so, how? What "menu" of "salutogens" could be introduced to shift patterns slightly but enough to disturb a dynamical system so it reorganizes to support greater wellbeing while extinguishing pathogeneses? The framing takes ideas from complexity science, clinical training, indigenous healing case studies, and my long-term interest in indigenous medicine and science.

The presentation builds from current conversations and research among international aid agencies about recovery/resilience from sudden environmental disasters (e.g., floods, fires, earthquakes)—to extend attention to recovery from war, its aftermath, and colonialism. The latter slowly and imperceptibly begins to strangle biocultural diversity, until the culture and natural heritage of the colonized seem unrecoverable—a sort of slow genocide.

#### The paper:

- describes a phenomenology and pathogenic legacies of "slow disasters" in rural northern region of Ghana; what populations are doing to self-organize their recovery; and how universities and NGOs can play a useful role.
- elaborates research-practice partnerships (RPPs) as platforms to host and facilitate long-term collaboration with indigenous communities to assist recovery.

Brief PPT slides present work toward biocultural salutogenesis in her African field site. Session participants will gain a new perspective on launching salutogenesis in wicked systems.

### Recovering indigenous culture, language, and natural heritage after the Slow Disaster of Colonialism Rashid Abubakar Iddrisu

The poster presentation will include charts detailing what is continuing to happen from processes of governance and resource extraction started by colonials and missionaries during the colonial era--their impacts to culture, biodiversity, land tenure, and indigenous governance traditions that had overseen the survival and thriving of African tribes for millennia. The impacts continue via the establishment of the public K-12 schools in rural northern Ghana which teach about European culture, philosophy, history, great men, language, flora and fauna, and nothing about Africa cultures, traditions, and native species.

#### Photos will show current projects to:

- retrieve names of native species in local languages so as to preserve traditional ecological knowledge encoded in their names
- replenish native tree species which have been cut down and replaced by foreign trees such as teak
- institute indigenous education in K-12 schools so culture and natural heritage are available to future generations, AND young people can find opportunities in their home region.

### Coping strategies of adolescents exposed to substance use in the family. A qualitative study in the light of Salutogenesis

Cathrine Hørte, Eirik Abildsnes, John-Kare Vederhus

<u>Background:</u> Substance use in the household is a substantial contributor to the global burden of disease and one of the most prevalent adverse childhood experiences. It negatively affects children and adolescents, posing considerable risk to future health. However, we know less of how they cope. The globally increasing numbers of harmful substance use calls for sustained attention to meet the future needs of affected children and adolescents.

<u>Aim:</u> In this study, we explore experiences and coping strategies of adolescents growing up affected by substance use. Our aim is adding knowledge about coping, balancing the description of adversities and capabilities. There is a lack of theoretical underpinning within this field of research, including The Salutogenic Model of Health (SMH). Thus, we aim to contribute to the consideration of its application, in developing the field of practice engaged in this population.

<u>Methods:</u> A qualitative study design was suitable, applying methods founded in hermeneutic phenomenology. We recruited participants within the age range 17-21 years from a psychoeducational program for affected family members. We conducted six in-depth semi-structured interviews and applied Systematic Text Condensation, a thematic cross-case analysis. Insights from SMH informed the later stages of analysis and discussion of findings, thus constituting the theoretical framework of the study.

Expected Results: Our preliminary findings are in line with research concerning children and adolescents' burdens living with substance use in the household. However, findings contribute to knowledge of their capabilities to cope. They apply strategies that may become a double-edged sword as well as strategies aiming to foster independence and focus on constructing a better future. By discussing our findings in light of the dimensions of SOC, we gain insights to the multifaceted aspects of growing up affected by substance use, which may inform directions for practice in mediating movement towards health within this population.

### Semi-speed blind-dates with early- and advanced career participants

Moderator: Ayşe Deliktaş Demirci

An unforgettable opportunity to meet salutogenic faces. Build a connection with new salutogenic friends but in a different way. This session will provide an environment where academic boundaries are eliminated and participants will find themselves in semi-speed blind-dates.

Find your perfect match for a future project!

Moderators: Sanne Hiemstra & Yến Pham

Looking for a collaboration for your dreamed project? In these paired discussions (early & advanced career), there is space to explore a topic of your liking and develop a concrete plan.

**Exploring AI and Salutogenesis** 

Moderators: Heidi Marie Meling & Veerle Cannemeijer

AI - a menace to society or the dream tool for health promotion? In this session, we will use an upcoming project utilising AI technology as a case study and a starting-off point for an interactive workshop and discussion on ways in which salutogenesis can be 'built into' projects using this powerful technology.

Presenters: Ingrid Hjulstad Johansen & Kaisa Soleng: project "Helsehjelppiloten"

# Evaluation of the sense of coherence in individuals with chronic pain in treatment with medical cannabis provided by cannabis organisations

Shadia Fouad Sharaf El Din, Adriana Marcassa Tucci, Alessandra Mussi Ribeiro

<u>Background:</u> The Sense of Coherence (SOC) is a health research instrument that measures an individual's ability to use internal resources (cognitive and emotional) and the physical and social environment to maintain healthy. There is limited information regarding SOC of individuals managing with chronic pain in use of medical cannabies.

<u>Aim:</u> This study evaluated the SOC of individuals in treatment for chronic pain with medical cannabis oil provided by therapeutic organizations of medical cannabis.

Methods: This is an observational, cross-sectional study with quantitative data analysis. Volunteers were recruited through contact with therapeutic organizations. After the initial contact with each volunteer, general instructions for completing the online form were presented. The evaluation was carried out in electronic format, through the Google Forms platform. SOC was evaluated, as well as symptoms of anxiety, depression and stress by the DASS-21 scale, pain intensity by the Brief Pain Inventory, quality of life by the WHOQOL-BREF and sleep disorders by the Pittsburgh Sleep Quality Index. Sociodemographic data of the research participants were also collected. This study was approved by the Research Ethics Committee, under the number CAAE: 66045922.5.0000.5505

<u>Results:</u> The preliminary data collected with 97 individuals (77 women/ -79,3%) with different types of non-cancer chronic pain, showed a mean SOC of 58. Furthermore, the mean age was 49 years, most of them caucasian (80,4%) with fibromyalgia (45,4%) in use of high THC cannabis oil formulation (42.3%). This population group demonstrated mild levels of pain in the last 24h, moderate symptoms of depression and anxiety and mild symptons of stress. A low score was verified in the quality of life, mainly on the physical and social domains, and "regular" on in psychological and environmental domains.

Keywords: Salutogenesis, persistent pain, cannabinoids, citizen strategy

# Transforming Crisis into Opportunity: A Salutogenic Perspective on Coping with the COVID-19 Pandemic among a Medical University Community

Jarosław Rakoczy, Magdalena Kostyła, Katarzyna Weronika Binder-Olibrowska, Magdalena Agnieszka Wrzesińska

<u>Background:</u> The COVID-19 pandemic presented challenges to the academic community, significantly impacting health and wellbeing.

<u>Aim:</u> This study aims to characterize resources related to health and well-being identified and used by students and employees of the medical university during the initial phase of the pandemic. Moreover, the study proposes a new indicator called Resource Utilization Rate (RUR) and explores its relationships with sense of coherence (SOC), gratitude and subjective health assessment (SHA).

Methods: A mixed-method survey was conducted among students and employees of one of the Polish medical universities in May 2020. An online survey, including four open-ended questions on maintaining health and wellbeing and questionnaires on the level of SOC (SOC-29), gratitude (GQ-6), and SHA were also measured. Responses of 144 participants were analyzed using a general inductive approach. The RUR was calculated based on the number of responses indicating resource usage.

<u>Results:</u> The main categories of resources of health and well-being were interpersonal relationships, views of reality, physical activity, pleasure activities, social contacts, and healthy diet. Physical activity was the most frequently reported strategy for building health and emotional state, especially among students. The RUR showed a significant positive association with SOC in male employees and with GQ-6 in both male and female students. This suggests that the analyzed relationships are potentially modified by factors such as age and gender.

<u>Conclusions:</u> The relationships between health and well-being, resource utilization, gratitude, and SOC are worth exploring further, particularly in terms of identifying cause-and-effect dynamics. This exploration could enhance our understanding of the effectiveness of health promotion strategies during crises and more broadly.

### Insight into acculturation of second-generation Vietnamese boat refugees in Norway

Yen Thi Pham, Marguerite Lorraine Daniel

Benz et al. (2014), in describing cultural pathways of an individual's SOC, note that cultural stressors and cultural GRRs in an individual's life situation combine to create SOC-enhancing life experiences characterized by consistency, load balance, and participation. Second-generation Vietnamese refugees in Norway experienced cultural clashes between their heritage Vietnamese culture at home and Norwegian culture outside their home. However, now in their 30s and 40s, the second generation of Vietnamese boat refugees have all managed well. In this paper, we use Benz et al.'s (2014) model to frame what enables health outcomes of the second generation of Vietnamese boat refugees in the context of cultural clashes throughout their lives.

Methods: We conducted semi-structured interviews with the second generation of Vietnamese boat refugees and the religious leaders of the Vietnamese community in Norway. We asked all participants how the second generation of Vietnamese boat refugees in Norway have successfully dealt with cultural clashes.

Findings: Three types of acculturation emerged during the life course of participants including integration (engaging in both cultures), assimilation (orienting to Norwegian culture), and separation (orienting to Vietnamese culture). One participant was clearly oriented to Vietnamese culture (separation). Some participants pursued becoming Norwegian at an early age (assimilation) but later all developed the harmonization between both cultures (integration). At the ages of 30 and 40, all participants ended up satisfied with either integration or separation. Their life experiences of either separation or integration characterize consistency, load balance, and participation.

Discussion: Sam and Berry (2010) suggest integration could be the most adaptative acculturation type. This study confirmed this but added a new understanding of separation. Aligning with Antonovsky's notion of SOC within boundaries, those who are in the separation type might not thrive in Norwegian society but still develop a high SOC within their Vietnamese community in Norway.

# Proposing Eudaemonic Co-Design as an Augmented Approach to Salutogenic Design, Facilitating River of Life Navigation and Empowerment

Jenna Mikus

This proposed talk builds on recent eudaemonic design scholarship (Mikus & Grant-Smith, 2021) that promotes curating physical environments and research experiences with an aim toward Aristotle's concept of eudaemonia (i.e., being one's best self), a relational approach to flourishing. Salutogenic design offers a "perspective" for promoting health and fighting illness (Antonovsky, 1987, p. 47) or working as a "theory to guide health promotion" (Antonovsky, 1996, p. 11) no matter the applied context. Thus, the salutogenic model is suitable for health-promoting design consideration (Antonovsky, 1996). However, it has primarily been limited to good health, not flourishing health and well-being design. Rather than applying a conventional salutogenic lens (Antonovsky, 1987, 1996) that is health-focused, the presented research adopts a novel eudaemonic viewpoint that considers optimal health, happiness, and well-being using a positive psychology approach.

Antonovsky advocated the benefit of implementing action research-related methodologies and methods, which offered a sound foundation for co-design. Similar to the UK-based example project (Clarke et al., 1992) Antonovsky (1996) references that put salutogenic orientation into practice, the eudaemonic design doctoral research presented here was conducted with older adults living alone. However, this project was conducted in Australia, for one year, with all co-design conducted remotely (due to COVID-19 lockdown). The research interrogates Antonovsky's arguments for collaborative exploration to facilitate humans in navigating the river of life, given that "all are in the river, as all are exposed to stressors and illness" (Vinje et al., 2022, p. 34). A resulting Eudaemonic Design model and set of principles are presented and considered in the context of salutogenic design and the corresponding river. Here, the author positions design for (eudaemonic) well-being as an enhancing alternative to conventional (salutogenic) health-promoting design approaches (Antonovsky, 1987, 1996) as eudaemonia's positive psychology approach considers underexplored yet important subjective perspectives on flourishing environments and is inherently rooted in intentional, respectful design praxis.

### Why is a salutogenic approach pivotal to enhanced health and wellbeing of office workers?

Kirsten Brown

A growing portion of the global workforce is employed in sedentary indoor office environments, putting them at increased risk of cardiovascular disease and cancer, as well as metabolic, musculoskeletal and psychiatric disorders. To understand the effect of the office environment on workers' health, my study used a salutogenic approach to examine the relationship between office workers' health and the designed and policy-based elements of their workplace.

My research used a mixed-methods convergent parallel case study design to examine the workplace elements that impacted the perceived health of office workers' occupying two buildings then relocated to a new building. Key informants were interviewed about their approach to health in these workplaces and 1200 employees were surveyed (including SF-12) to determine the impact and importance of workplace elements on perceived health. Site analyses were also conducted.

Interviews revealed shortcomings such as lack of communication and health promotion that limited the potential positive impact of the physical environment. Survey results identified specific elements to support health and enable physical activity that should be prioritised.

Contrary to the current siloed approach, workplace design must incorporate health expertise and evidence-generating workplace policies that reframe practice to be positive and encompass health-impacting facets of the workplace. Integrating workplace policies into workplace design and implementation, ensuring that occupants' health is a priority. Finally, the need for measurement of occupant health is clear to generate data for future evidence-based solutions.

A proactive multi-disciplinary salutogenic approach incorporating both policy-based and physical elements to workplace design will advance current practice by placing worker health and well-being at the centre of decision-making.

#### Environmental enrichment for human health: a salutogenic vision

Etienne Bourdon

At a time when public health challenges are adding up to an alarming degree, with chronic diseases accounting for 7 of the top 10 causes of death worldwide, and demographic transition highlighting the ageing of the population, it's exciting to see that environmental enrichment can provide a relevant response based on solid scientific research.

Environmental enrichment was first described in 1951 and was studied almost exclusively in the animal model over the following decades. These works highlighted the positive role of environmental enrichment on brain plasticity.

The role of the physical environment on the health of nursing home (NH) residents was intensively explored for its support of ageing faculties. The existing body of literature has failed to provide useful recommendations for the design of NH environments.

As Salutogenesis focuses on the origins of human health and produces a comprehensive approach to health promotion, it brings a major paradigm change in the approach of public health issues.

This abstract presents the first transposition of enriched environment to humans through clinical studies conducted on NH resident's with Alzheimer disease and consecutively on major health issues such as oncology, addiction, depression, human ageing, autism, mental and physical handicap and professional diseases.

It opens a door that should be immense if we imagine the fields of application that could be positively and sustainably addressed. It is no longer a question of conceiving the environment as an obstacle or a risk, but of enriching it so that it plays a direct part in improving the health and well-being of the aged adults, by striving to preserve their capacities.

This concept of environmental enrichment if when extended to humans may address, environmental health issues at all stages of life.

# Sociological and psychological value of retrofit interventions as means to promote health and wellbeing, community empowerment and local regeneration

Magdalena Blazusiak

Adverse physical health has been linked with poorly performing buildings where vulnerable groups are at particular risk. Current drivers for retrofit interventions are primarily dictated by the requirement to reduce carbon emissions and recognition of the effects of physical ill health resulting from poor housing conditions. Sociological and psychological dimensions of retrofit are not yet well recognised nor represented in this scenario.

This research aims to evaluate how health and wellbeing of individuals and communities can be supported through application of a salutogenic framework to retrofit strategies of housing and community assets. Due to the complexity of the subject, traditional literature review will allow to explore correlation between salutogenic approaches and standards. Review of selected relevant retrofit standards, guides and Green Building Rating Tools will be conducted to determine compatibility and divergence with the three dimensional salutogenic model of sense of coherence (SOC). The definition of SOC will be supported by identification of context specific generalized resistance resources (GRRs), such as environment, community, support, knowledge, economy, wellbeing, trust, comfort and happiness. The GRRs will be defined through review of standards and further evaluated through case studies, appraisal of lived experiences and community engagement. This may include participatory processes and evaluation of qualitative individual responses to existing and improved environment of retrofitted dwellings.

Application of framework defining health and wellbeing in the salutogenic model will focus on assessing SOC of the communities through the perspective of manageability, comprehensibility and meaningfulness in the context of the existing build environment. The framework will support identification of intangible indicators of retrofit interventions undefined in the current standards. This will promote local resilience, adaptability, regenerative approach and community cohesion, in a holistic understanding of sustainability and deliverables at a local scale.

### Transforming prison habitats - health and wellbeing benefits for prisoners and staff

Alan Farrier, Michelle Baybutt, Angela Julian

This presentation discusses the findings of a two-year evaluation of a prison-based nature connectedness project, co-ordinated by the Amphibian and Reptile Groups of UK (ARG UK) within UK prisons. ARG UK is an NGO which preserved native amphibians and reptiles by supporting a network of volunteer-led conservation groups. ARG UK aims to encourage all members of society to become involved with wildlife conservation, working with individuals and groups who may find it harder to connect with the natural world. This includes a programme to work with those within the criminal justice system in England and Wales, by developing a series of amphibian and reptile-themed workshops and practical sessions to enhance the natural environment within prisons and by engaging prisoners in outdoor 'green activities' to improve their wellbeing.

The Healthy and Sustainable Settings Unit, based at the University of Central Lancashire (Preston, UK) conducted the evaluation of this programme, framed using a case study methodology to examine five prison sites, detailing how and why the programme works (or doesn't work) in contrasting contexts. The approach was both collective, drawing learning from multiple cases; and instrumental, using the cases to build broader understanding of prison-based horticulture. The study combines a range of qualitative (focus groups with prisoners and staff, observational sessions) and quantitative (SWEMWBS and CNI) data collection methods, to capture the multi-faceted nature and complexity of the cases and enable an integrated holistic perspective, focusing not only on their constituent parts but also on how they function as bounded integrated systems.

The study explores the wellbeing impacts resulting from the programme, to explore and analyse the projects. The findings demonstrate that this novel approach has the potential to enable the creation of a more attractive and engaging environment for the prison community which may have multiple benefits for prisoners and staff.

### An overarching coherence motivation for healing and transformation?

Theodor Petzold

<u>Background:</u> In health work with patients as well as in cooperation in the family, in institutions and in politics, shared motivation and intentionality are crucial for the process and for success. Therefore, the findings of motivation-research and neuropsychology were examined to determine what kind of motivation can be helpful in solving the current crises. Is there a motivation to find new solutions together? A motivation that induces a transformation of habitual behaviors?

<u>Aim:</u> To find a basic human intrinsic motivation that induces both implicit healthy self-regulation and coherent behavior in all dimensions of life.

<u>Methods:</u> To find coherence between many practical experience in solution-oriented counselling, psychotherapy, supervision and teamwork in various projects and organizations and, on the other hand, the neuropsychological findings on motivation.

<u>Results:</u> In addition to the two neuro-endocrine motivation systems that have long been known in motivational psychology: appetence- (approach-) and aversion motivation, there is a superordinate motivation that enables us to happily abstain from a drug and to remain calm and composed and confident in the face of a threat despite fear (SOC).

In 2017, the neurophysiologist and doctor Tobias Esch spoke for the first time of a third "motivation type C", which is responsible for a feeling of serenity, pleasure and other good feelings. On closer examination of the research results, including research on Salutogenesis and SOC, it seems appropriate to speak of an overarching basic motivation for coherence, a coherence motivation. This is decisive for coherence in all dimensions of our lives: in the body for a coherent interplay of all organs and cells and holistic healing, in the social sphere for harmonious interpersonal relationships, for successful cooperation, in the cultural sphere for human laws, justice, peace and a good life in the biosphere ("planetary health").

### Can restorative justice contribute life experiences that generate a strong sense of coherence? Marguerite Daniel

Antonovsky (1987) notes that the source of a strong sense of coherence (SOC) is a set of life experiences characterised by consistency, load balance and participation in shaping outcome. Restorative justice (RJ) is a set of principles and practices that view harm as a violation of relationships and people rather than as a violation of rules and regulations (Zehr, 2002). RJ as practiced in schools consists of two tiers: firstly, to build the context by familiarising learners and teachers with RJ principles and practices such as mutual respect and good listening skills; and secondly, to address harm when it occurs and repair relationships. RJ as practiced when crime occurs tends to focus on the second tier only. This paper explores whether RJ, particularly the first tier, can contribute to experiences of consistency, load balance and participation in shaping outcome.

Studies on the practice of RJ in schools or among young offenders are critically evaluated. Firstly, specific practices and processes used in RJ are outlined in terms participants, procedures, timing and expected outcomes. Secondly, each of the practices is analysed and evaluated using a framework of those life experiences identified by Antonovsky (1987) that strengthen the dimensions of SOC. Consistency is linked to norms and guidelines, continuity and harmony; load balance refers to availability of resources to meet demands (and underload may be as damaging as overload); participation implies that we take part in (not necessarily control) decisions that impact life outcomes. Finally, the potential link between the two theories is explored to investigate whether and how the practices of RJ might contribute a set of life experiences that strengthen the dimensions of SOC.

### Self-discrepancy and spirituality, sense of life and coherence

Katarzyna Skrzypińska, Małgorzata Ostrowska

The condition of spirituality, sense of meaning and purpose in life are often mentioned among the factors determining the sense of high quality of life and happiness, so they can be treated as determinants of the overall well-being of an individual. The topic of the research is the relationship between the discrepancy within the structure of the Self as defined by Tory Higgins (1987) - in the real, ideal and duty sense - and the spiritual sphere, the sense of meaning in life and coherence. The aim of the research was to verify whether large discrepancies in self-perception - the actual self-image (real self) as opposed to who we would like to be (ideal self) and who we feel we should be (duty self) - are related to with poorer functioning within the spiritual sphere, a weakened sense of meaning in life and a reduced sense of coherence. We used Self-Standard's Measure (Bąk, 2017), The Expressions of Spirituality Inventory - R (MacDonald, 2000), Purpose in Life Test (Crumbaugh & Macholick, 1963), Sense of Coherence (Antonovsky, 1993). All six hypotheses veryfied on a sample of 200 participants were confirmed. Discrepancies within the self may be an important factor for the spiritual sphere, the sense of meaning in life and the sense of coherence. This conclusion is worth taking into account when building a therapeutic strategy for clients/patients suffering from existential void.

### Differences in levels of sense of coherence effect on the autonomic nervous system under acute stressful situation

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<u>Background:</u> Physiological mechanisms, especially stress responses of the autonomic nervous system, are important in discussing what is needed to enhance sense of coherence (SOC). However, little study has been reported regarding physiological research on the stress response in different SOC levels.

<u>Aim:</u> The aim of this study was to clarify how the differences in levels of SOC effect on the autonomic nervous system under acute stressful situation by using the heart rate variability (HRV) method, which is considered to be a valuable and appropriate marker of acute stress.

Method: Thirty healthy students (15 males and 15 females, 22.0 ± 1.1 years) who were given consent were included in this study. SOC was assessed by the Japanese version of the SOC-13 questionnaire. Participants were classified into two groups (low SOC group and high SOC group) by median score of SOC-13 questionnaire. We selected the speech preparation task as an acute psychosocial stressor because it has been reported to be more similar to everyday stress situations. HRV values were measured and quantified continuously over each phase of the experiment (baseline, stress task, recovery). For time-domain measurements, we used the log-transformed using the root mean square of successive differences (RMSSD), which represents parasympathetic activity. For the statistical analysis we used two-way analysis of variances with repeated measures to determine the effect of each factor and interaction.

<u>Results:</u> The analyses revealed that there was significant interaction between the two groups and each phase for HRV values (p=.026). Post hoc analyses revealed that the change in HRV values from the stress task phase to the recovery phase was much larger in the high SOC group (d=.81, p=.02) than in the low SOC group (d=.16, p=.84). These results indicate that those with high SOC increase the activation of parasympathetic nerve and facilitate recovery after stress phase.

# The role of salutogenesis for the understanding of the health-environment coupling in current medicine and psychology.

Laura Menatti

Research in contemporary medicine and environmental sciences is increasingly stressing the need to address and cope with the effects of climate change and of understanding the role of the environment on health (Romanello et al. 2022). While these disciplines focus on the current issues and the related interventions, they often adopt a pathogenic account. In medical documents and medical theory, the environment is mostly framed as a factor which may lead to diseases or a lack of health in general, exemplified for instance by climate change sensitivity or the case of endocrine-disrupting chemicals. The potential of salutogenic approaches are unexplored as well as the rich history of ideas and concepts that frame the health-environment interactions in salutogenic terms. Thus, in this paper, I propose to look at the potential salutogenic role of the environment for health. I will provide a specific example in environmental psychology about salutogenic environments and I will analyze how this example fit into the salutogenic framework and approach. Environmental history, history of medicine, landscape theory and human geography, have underlined a continuity in the attention to the salutogenic role of the environment from ancient times to the contemporaneity; from the ancient Persians, to the Greek Egyptian and Roman cities, to the therapeutic use of landscapes in the English Landscape Garden movement or the urban parks movement in the 18th century (Ward Thompson 2011; Milligan and Bingley, 2007; Gesler 1992; Geltner 2019; Meloni 2021). Considering the historical literature, the paper presents a recent example of the application of the notion of salutogenesis from contemporary psychology where the term is applied to the relationship between health and environment in healthcare facilities. More specifically the salutogenic lens will be used to understand the following example: Psychology usually employs the notion of 'restoration' or 'restorative environments' meaning those natural or urban green spaces which have the potential to restore attention and reduce stress. As such, the concept was introduced to study how green spaces could mitigate pathogenic conditions such as stress and attentional fatique (Labib et al. 2022; see also Ulrich et al. 1991;). Less studies have been developed inside healthcare facilities, about the use of natural environments within the walls of the hospitals or as a part of the prevention and treatment of health conditions. Nevertheless, there are evidence-based studies that have been conducted with this respect and are worthy of interest. One of the first in terms of time is a study dated 1984, in which R. Ulrich demonstrated that a view through a window could influence recovery from surgery. The study was pioneering in environmental psychology, as it shows that patients in a suburban Pennsylvania hospital between 1972 and 1981 who were assigned to a room with a window view of a natural setting had shorter postoperative hospital stays; and received fewer negative evaluative comments from nurses' notes; took fewer potent analgesics than 23 matched patients in similar rooms with windows facing a brick building wall. This example will be scrutinized according to a salutogenic perspective, trying to understand how this study and the subsequent literature about restorative environments fit into a salutogenic orientation (see also Von Lindern et al. 2022). Salutogenesis can in this sense provide both a historical and practical lens to understand the relationship between health and the environment and can implement the studies design in environmental psychology. Specifically, salutogenesis can enhance a better comprehension regarding the beneficial impact of the environment on health as well as provide a broader, and not exclusively pathogenic, consideration of the role of the environment, (Antonovsky 1979, 79,125,138) Moreover, in the literature on salutogenesis, there is a growing interest in how: "Physical and social environment can enhance well-being and performance" (Mittelmark & Bauer 2022, 12). In health promotion research, this is referred to as 'supportive environments' (Mittelmark & Bauer 2022, 12; see Dilani 2008) as a tool to provide an intra-personal and social application of the salutogenic theory.

### Workshop: Indigenous Worldviews on Health, Healing, and Addiction Prevention

Cheryl Currie, Treena Tallow, Mahala Swisterski

Details of the Issue: Indigenous peoples worldwide hold unique worldviews that provide a sense of coherence and meaning in their lives. These value systems are paired with ceremonial practices that strengthen individual and social resources that promote Indigenous well-being. Studies with Indigenous peoples in North and South America, Oceania, and the Sami people in Northern Europe demonstrate that Indigenous cultural continuity strengthens health. While Indigenous ways of knowing have relevance for all humans, these perspectives can be difficult for non-Indigenous audiences to understand. Indigenous perspectives often differ markedly from Western practices and belief systems. The purpose of this presentation is to engage an audience in Indigenous ways of conceptualizing health and healing, and to consider how Indigenous worldviews could be engaged to shape novel interventions to prevent and heal substance addiction.

#### Moderators: Cheryl Currie, Treena Tallow, Mahala Swisterski

Format of the Session: This 60-minute workshop will begin with a 10-minute presentation about Indigenous perspectives on interacting with and demonstrating respect for the energies of health and disease at the level of the individual, with a special focus on substance addiction. These perspectives are based on research we have conducted in partnership with Indigenous peoples in western Canada since the opioid crisis began. Moderators of this session will include a non-Indigenous academic (Currie), an Indigenous community member (Tallow), and an MSc student trainee (Swisterski) from Canada. For 30 minutes, the audience will reflect on these perspectives in small groups using a series of questions the moderators have prepared to promote discussion (relevance of an Indigenous salutogenic lens for promoting their potential to sustain their own health and the health of the populations they serve). The audience will then be engaged in an interactive exercise to consider how Indigenous perspectives may be engaged in the development of innovative addiction prevention innovations.

### Salutogenic settings: exploring opportunities for coherent processes and experiences

Ruca Maass, Lenneke Vaandrager, Laura Bouwman, Mathieu Roy

<u>Details of the topic:</u> In Salutogenesis, a "sense of coherence" (SOC) is described as a central resource for healthy, salutogenic coping. The SOC is developed through experiences with societal structures that contribute to perceptions of comprehensibility, manageability and meaningfulness. While making major contributions to our understandings about "health development"; the individual-centered approach to investigate SOC poses challenges for Health Promotion; which emphasizes approaches targeting settings and societal institutions.

In order to explore the full potential of Salutogenesis, the development of knowledge about what constitutes salutogenic settings is essential; how these settings can enable opportunities for participation and coherent experiences. Exploring how settings can support the development of a strong SOC will make major contributions to health promotion efforts and theory.

Format of the session: This workshop aims at providing participants with a transformative learning experience, and together start to develop approaches to describe and assess "coherence" at the settings-level. To ensure a common starting point and address comprehensibility, moderators will shortly present examples of how they applied the framework of Salutogenesis on different settings; including settings like work (Lenneke); institutions and organisations (Universities and commercial actors) (Laura); as well as communities, neighborhoods and cities (Ruca, Mathieu, Laura). After the presentations; participants define settings or topics of special interest; and then self-select into discussion groups defined by these to ensure meaningful discussions. In the discussion groups we exchange experiences and start to built knowledge about how a "salutogenic setting" can be described; outline factors that support or challenge coherence within (and between) settings; and explore how coherent settings can contribute into the salutogenic model of health from the various starting points. Groups will be facilitated by the organisers to ensure that participation is manageable for participants with differing experiences and expertise. We conclude the workshop by bringing together emerging insights from the discussion groups in a plenary session; and highlight how the developed knowledge can be applied to further develop our understandings by applying new knowledge on the initial examples.

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