

## FOCUS ON

## Salutogenesis and Health Promotion



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## Introduction

Health promotion is an internationally practiced discipline with a long history. Widely recognized as a core function of public health,<sup>1</sup> health promotion is defined as “the process of enabling people to increase control over, and to improve their health,<sup>2</sup> and its determinants”.<sup>3</sup> Health promotion’s vision of health goes beyond viewing it as the absence of disease (the biomedical model), or as the outcome of individual behaviours (the lifestyle model).<sup>4,5</sup> Rather, health promotion views health as socio-ecological: health is shaped by the structural and social determinants of health.<sup>5</sup> Health promotion aims to transform the social conditions that shape health and the distribution of health by addressing those determinants of health.<sup>4</sup>

Recently, health promotion researchers have begun to explore the theory of salutogenesis and its application to the field of health promotion. Salutogenesis was included in the most recent Health Promotion Glossary, released in 2021 by the World Health Organization.<sup>6</sup> In recent work undertaken by Public Health Ontario (PHO), salutogenesis was identified as a topic of interest by health promoters working across Ontario.

Salutogenesis is the study of the origins (genesis) of health (saluto).<sup>7</sup> Rather than focusing on the factors that cause disease (i.e., pathogenesis), salutogenesis focuses on the factors that support human health and well-being.<sup>8</sup> In a pathogenic approach, one would identify obstacles to health and health deficits,<sup>5</sup> in other words, what makes people sick. In salutogenesis, one asks the question “what keeps one healthy?”<sup>5</sup>

This Focus On will explore the concept of salutogenesis and its application to the health promotion field. This Focus On would be beneficial to those who work in health promotion, community health, health education, and public health as a whole.

## Methods

This Focus On is part of a larger project to redevelop PHO’s health promotion materials and products. The project included several literature searches conducted to identify and describe: the evolution and development of health promotion, including the development, criticisms, implementation and effectiveness of the Ottawa Charter; the current state of health promotion; the values that ground health promotion; ethical considerations for health promotion; and future trends for the field of health promotion. Search strategies included published literature databases (MEDLINE, CINAHL, PsycINFO, Embase, and Scopus) and grey literature, with search strategies developed by Public Health Ontario Library Services, as well as hand searching of the last three years of four health promotion journals (Health Promotion International, American Journal of Health Promotion, Health Promotion Practice, Global Health Promotion) and the Canadian Journal of Public Health. Detailed search strategies are available upon request from Public Health Ontario.

In the results from these search strategies, salutogenesis was identified as one of several emerging topics. Health promoters attending a full-day health promotion workshop held in March 2023 expressed an interest in learning more about salutogenesis. This Focus On was developed in response to this interest.

The results of the literature searches were reviewed to identify papers relevant to salutogenesis. Reference lists from each article were reviewed to find additional applicable sources, and additional reference lists were identified by key informants. The primary author screened all papers for relevance. Papers were included if they focused on salutogenesis and had a health promotion application. Papers were excluded if salutogenesis was not the main focus; the paper did not have a health promotion focus; and the papers were not in English.

Seventeen (17) papers met the inclusion criteria. Following full text screening, a data extraction template was developed with the following categories: author, date, country, article title, article type, method, purpose of paper, definition of salutogenesis, key terms/definitions, application for health promotion, and other. Data extraction and analysis was completed by the primary author.

## Results

Of the 17 included papers, 14 were narrative reviews/ theoretical explorations and three were primary studies. These included two longitudinal studies and one cross sectional study. All 17 papers made reference to Antonovsky’s work on salutogenesis.<sup>9</sup> Additional concepts included in the papers were sense of coherence (n=8), generalized resistant resources (n=4) and specific resistant resources (n=1). Each of these terms will be explored in this Focus On.

## History of Salutogenesis

Salutogenesis was developed by Aaron Antonovsky, a professor in medical sociology at the University of the Negev in Israel. In 1970, Antonovsky was conducting an epidemiological study investigating the symptoms of menopause in women of different ethnic backgrounds who had survived concentration camps in the Second World War.<sup>10</sup> Among these women, there were those who kept the ability to maintain good health and lead a successful life despite what they experienced in the camps.<sup>10</sup> Asking “How can this be explained?” Antonovsky theorized that a “sense of coherence” is the key to understanding why, when two people are exposed to the same stressor, one may become ill and another may have the capability to stay healthy.<sup>10</sup>

Antonovsky critiqued health promotion’s focus on pathology,<sup>11</sup> commonly referred to in health promotion as the biomedical model, which views health as the absence of disease. Antonovsky viewed health as a state of being, rather than the product of lifestyle and personal choices.<sup>12</sup> The theory of salutogenesis looks at health from both sociology and social psychology lenses. It is a theoretical vision of health that encompasses various dimensions of health including physical, mental, and social and spiritual.<sup>13</sup> Salutogenesis aims to explore what creates health and how health can be developed in a society. In this context, “healthy” is defined as an active and productive life.<sup>13</sup>

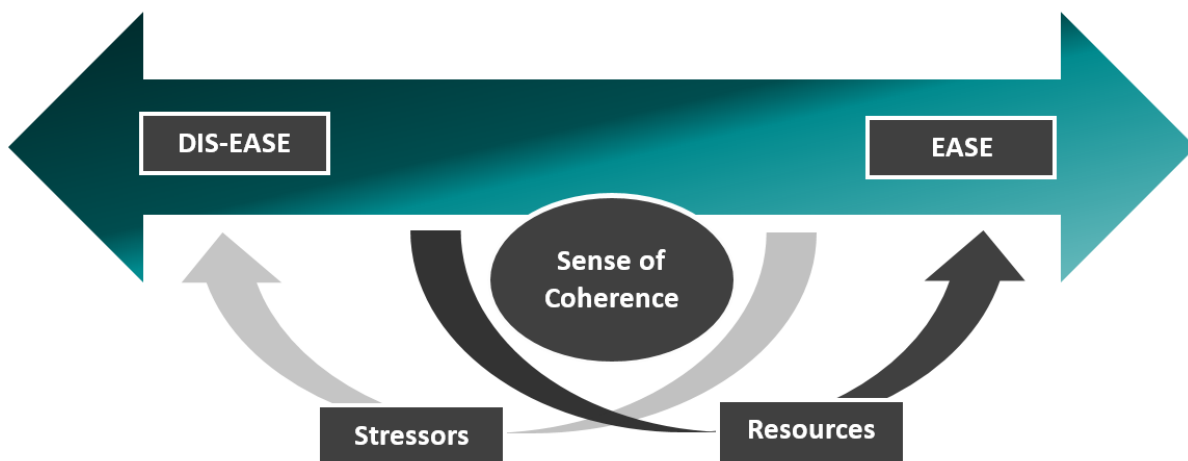
## Key Concepts in Salutogenesis

The papers reviewed for this Focus On discussed four key concepts: the health continuum, resources, sense of coherence, and self-identify. We will explore each below.

### HEALTH CONTINUUM

In salutogenic theory, health is seen as a position on a health ease and dis-ease continuum.<sup>7</sup> Rather than positioning health and disease as binary and opposite to each other,<sup>14</sup> Antonovsky considered health as both relative and on a continuum: as long as we are alive, we are in part both healthy and sick.<sup>15</sup> Antonovsky theorized that the stressors we face in our daily lives push us down the continuum towards dis-ease, and the resources we have available to us help mitigate how far they move us.<sup>7</sup>

**Figure 1: The Ease and Dis-Ease Continuum**



## **GENERALIZED AND SPECIFIC RESISTANCE RESOURCES**

In salutogenesis, “resources” are the biological and psychosocial factors that make it easier for people to perceive life as structured and consistent.<sup>8</sup> Antonovsky theorized two types of resources: generalized and specific. Generalized resistance resources (GRRs) provide feedback to the body of some kind, almost as if they were sending messages such as “Here is the right track; you can handle things; you are of worth.”<sup>15p 78</sup> Examples of GRRs are material (such as income and housing), cultural or social resources in one’s surrounding environment and self-identity. Antonovsky defined specific resistant resources (SRRs), which are used only in specific situations,<sup>10</sup> such as using a mental health hotline when in mental health crisis, using a nicotine patch or vape to quit smoking, or getting a flu shot during flu season. However, there is some debate around the differences, or lack thereof, between generalized and specific resistant resources.<sup>10</sup>

## **SENSE OF COHERENCE**

A sense of coherence is described as an orientation within one’s personality that enables one to cope with adverse experiences.<sup>14</sup> When you have a strong sense of coherence, you see the world as something that is manageable, understandable, and meaningful.<sup>14</sup> Manageability is one’s ability to cope and solve problems. We are willing to invest our time and energy to solve such problems, and see these problems as a challenge to be overcome rather than a burden.<sup>16</sup> Understandability refers to the extent to how one may perceive the problem as being understandable in a rational way.<sup>16</sup> Meaningfulness is how we see our lives, if one feels that they have some kind of emotional meaning. Certain characteristics, such as perceived family support and trust, can mediate the relationship one has between sense of coherence and mental health.<sup>17</sup> The answer to the salutogenic question “what makes us healthy?” is believed to lay in sense of coherence.<sup>12</sup> For example, some studies have shown that females with a lower sense of coherence have higher states of anxiety. This low sense of coherence is a predictor of burnout, even after controlling for socio-demographic variables.<sup>18</sup>

## **SELF-IDENTITY**

Self-identity is how we see and perceive ourselves and the role we play in society. In salutogenesis, self-identity is a crucial resource for coping and is a necessary trait for a strong sense of coherence.<sup>19</sup> Self-identity has also been said to be a steering mechanism that has the ability to guide whether an individual changes their life towards health and wellbeing.<sup>15</sup>

## **Salutogenesis in Health Promotion**

The underlying theories of health promotion research were discussed in a seminar held at the WHO Regional Office in Copenhagen in 1993.<sup>5</sup> Antonovsky attended this event and presented his salutogenic model as one direction for health promotion.<sup>5</sup> There was agreement at the seminar that health promotion’s focus should be on health rather than on disease.<sup>5</sup> This was a fundamental shift from the old and previous theoretical perspectives that largely stemmed from the biomedical model of disease,<sup>5</sup> and in alignment with the definition of health and the health promotion framework outlined in the Ottawa Charter for Health Promotion.<sup>2</sup>

Three papers examined for this Focus On were primary studies that investigated the application of salutogenesis in health promotion. We will explore each study below in order to provide concrete examples for the application of salutogenesis in health promotion.

## **PREDICTING MENTAL BURNOUT AMONG ISRAELI HOME FRONT COMMAND SOLDIERS DURING THE COVID-19 PANDEMIC<sup>17</sup>**

This study examined personality, situational and organizational predictors of burnout in military workers during the COVID-19 pandemic using the salutogenic theory of health, by identifying the factors that protected military workers from burnout. Rather than focussing on the risk factors that contribute to negative outcomes, through the application of the salutogenic framework researchers are able to shift to identifying factors that promote health.

Questionnaires were completed by Israeli Home Front Command medical staff, with questions regarding background variables (such as gender), personality variables (sense of coherence), situational variables (sense of threat, anxiety) and organizational variables (satisfaction with military's and government's handling of the COVID-19 crisis). The results identified several factors related to military work-related burnout. Factors that were found to lower ones chance of burnout included high social support, high sense of coherence, and a high self-efficacy.

## **AN EMANCIPATING-SALUTOGENESIS CONCEPTUAL FRAMEWORK & MODEL OF ANISHINAABE BALANCE PROMOTION FOR HEALTH<sup>20</sup>**

This paper presents a conceptual framework and model for health promotion that merges Anishinaabe and non-Anishinaabe perspectives. The salutogenesis framework was incorporated with the Anishinaabe view of health. This paper illustrates ways that salutogenesis can be applied in Indigenous health promotion initiatives to support Anishinaabe communities to contribute to health services, redesign their own health education while counteracting the impacts of colonization and ongoing marginalization.

## **DEVELOPMENT OF A SALUTOGENIC INTERVENTION FOR HEALTHY EATING AMONG DUTCH TYPE 2 DIABETES MELLITUS PATIENTS<sup>19</sup>**

This study describes the development structure and content of a salutogenic intervention for healthy eating. The theory of salutogenesis and its framework was used to develop an intervention for healthy eating in Dutch people with type 2 diabetes mellitus (T2DM) patients, taking the preferences, needs and priorities of all stakeholders into account. A systematic review was conducted, which identified features of effective interventions (for example, number of weeks and settings), as well as the General Resistant Resource important for healthy eating. The General Resistant Resources of self-identify and social support were particularly important for healthy eating and weight management. A 'healthy-eater identity' was also identified, which has been shown to be a significant predictor of healthy eating behaviour, even after controlling for nutrition knowledge. In addition to the systematic review, a number of conversations and interviews were held with type 2 diabetes patients and health care providers. The resulting intervention was a 12-week, group-based intervention that aimed to enable important resources for healthy eating via self-examination, reflection, setting goals and sharing experiences.

## Discussion

Salutogenesis has many commonalities with health promotion and can be applied in both health promotion research and practice.<sup>10</sup> The Ottawa Charter defines health promotion as:

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“The process of enabling people to increase control over, and to improve, their health, and its determinants. To reach a state of complete physical, mental and social well-being, an individual or group must be able to identify and to realize aspirations, to satisfy needs, and to change or cope with the environment. Health is therefore, seen as a resource for everyday life, not the objective of living. Health is a positive concept emphasizing social and personal resources, as well as physical capacities. Therefore, health promotion is not just the responsibility of the health sector, but goes beyond healthy life-styles to well-being.”

[World Health Organization, 1986]

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Health promotion and salutogenesis both share a positive/asset based outlook on health, rather than the negative/deficit outlook that we see more often in pathogenesis and the biomedical model. Health promotion’s emphasis on enabling people to increase control over their own health is aligned with salutogenesis’ focus on individual empowerment through the sense of coherence and generalized resistant resources. As previously stated, when one has a strong sense of coherence they are able to see the world as more manageable and meaningful. Salutogenesis, like health promotion, relies on the appropriate social conditions for one to be healthy. In the case studies investigated using the salutogenic framework in health promotion application there was an emphasis on enabling people to have control over their own health and an understanding that, when we shift our thinking to focus on what characteristics we already possess to help us in stressful situations instead of what we are lacking, we are more equipped to deal with stressful situations. This can also be seen in applications with communities that are marginalized, when health promoters frame the way of thinking to focus on how many hardships one has already overcome with their available resources rather than focusing on what they are missing and need to obtain in order to make it over the next hurdle it helps one to see the world as more manageable.<sup>20</sup>

The below table provides a summary of the commonalities between health promotion and salutogenesis.

**Table 1: Similarities between Salutogenesis and Health Promotion**

Ottawa Charter for Health Promotion <sup>2</sup>	Salutogenesis framework <sup>8</sup>
Health promotion is the process of enabling people to increase control over, and to improve, their health.	Salutogenesis aims for one to have a high sense of coherence. When you have a strong sense of coherence, you see the world as something that is manageable, understandable, and meaningful this is similar to health promotions want to have people have their own control of their health.

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Ottawa Charter for Health Promotion <sup>2</sup>	Salutogenesis framework <sup>8</sup>
To reach a state of complete physical, mental and social well-being, an individual or group must be able to identify and to realize aspirations, to satisfy needs, and to change or cope with the environment.	The resistant resources are the biological and psychosocial factors that make it easier for people to perceive life as structured and consistent. Antonovsky theorized that all of the generalized resistance resources provide feedback to the body of some kind.
Health is a positive concept emphasizing social and personal resources, as well as physical capacities.	Salutogenesis focuses on positive health – what makes us healthy, the things that can help us move up the health continuum. The opposite of pathogenesis which is a negative framework of what makes one sick.

In addition to these similarities, there are differences between salutogenesis and health promotion. Salutogenesis does not try to get to the root causes of issues causing health. Rather, it focuses on how people can manage the world just as it exists around them by identifying the resources that someone possesses that makes stressful situations easier for them. Salutogenesis also has an individualistic focus, versus the community and population focus of health promotion. It is currently unclear how salutogenic concepts could be incorporated into strategies that have a population health focus.

The paper by Santos Sanchetta et al points out the relevancy of salutogenesis for Indigenous health promotion.<sup>20</sup> A key principle from Anishinaabe culture is that balance is necessary for health, and that health is achieved through connection with others. Antonovsky’s philosophy is that health is a metaphor for liberation and change, and focus on factors that support human health and wellbeing can build on Anishinaabe principles.<sup>20</sup> This demonstrates a place for health promotion projects with a salutogenic lens in health promotion. This would mean that health promotion projects need to recognize and honour Indigenous people’s history and celebrate their traditional ways as a way to support their healing process.<sup>20</sup> For Indigenous people living off reserve these projects would nourish and create a sense of belonging and keep them connected with their culture.<sup>20</sup> If the application of these methods are successful they would lead to a high sense of coherence in an individual. Health promotion could also aim to empower people through encouraging them to use their resources in stress inducing situations.<sup>11</sup> Studies suggest that interdependent empowerment may be relevant to strengthen sense of coherence through health promotion activities.<sup>11</sup>

In salutogenesis, self-identity is regarded as a crucial resource for coping and possibly as even a necessary precondition for a strong sense of coherence.<sup>13</sup> In the paper summarizing the development of a type 2 diabetes intervention,<sup>19</sup> the authors suggest salutogenic research questions. Rather than asking “why do people make unhealthy choices?” the authors reframe the question to ask “how can people deal with challenges to healthy eating in a health-promoting manner?”<sup>13</sup> Salutogenesis would help health promoters shift away from a deficit based approach that may ask “*why aren’t people eating healthy even if we tell them to?*” to “*what conditions allow people to make the healthiest decisions for themselves?*”



## Limitations

This Focus On did not involve a literature search specific to health promotion and salutogenesis, instead leveraging previously conducted literature searches. Therefore some papers may have been missed. In the searches conducted and the papers included here, the majority were narrative reviews or theoretical explorations, with only three being primary studies. It is unclear whether that demonstrates the “newness” of the application of salutogenesis in health promotion, or is a result of the search strategy.

## Conclusion

While salutogenesis originated in the 1970s, it is only more recently that its relevance for health promotion is being discussed. This Focus On provides an introduction to the theory of salutogenesis, summarizes recent primary studies using salutogenesis as a framework, and outlines the parallels and distinctions between health promotion and salutogenesis. Three specific aspects from salutogenesis could be leveraged in health promotion practice: the orientation towards problem solving/finding solutions to challenges; the concept of resources which help people to move in a positive direction on the health continuum; and the sense of coherence to understand one’s own mental ability to make these decisions for themselves and recognize how they view their own experiences.<sup>10</sup> Antonovsky felt that health promoters (in the sense no different from disease preventers) had not adequately confronted the question of the creation of appropriate social conditions which facilitate health-promotive behaviours.<sup>15</sup> In implementation, health promotion initiatives are often reduced to lifestyle and behaviour approaches focused on individuals, rather than the comprehensive, multi-sectoral interventions aimed at the social conditions called for in health promotion’s founding documents.<sup>21</sup> Incorporating salutogenic concepts and principles into health promotion practice may help practitioners re-orient their work in the social conditions that create health. The question that salutogenesis asks, “what keeps one healthy?” provides a starting point for health promoters.



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