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Child, Adolescent and Family Health

Professor of Salutogenesis, HIST/NTNU, 2011- , **NO**Professor II of Health Promotion, HiBu, 2008-2011, **NO**Professor of Public Health and Health Promotion, NHV 2006-, **SE**Docent i Social Politik, Åbo Akademi Vasa, 2007 -, **FI**Docent i Child Public Health ,NHV 2002, **SE**Docent i Folkhälsovetenskap Tammerfors Univ. 2002, **FI**

Head of Health Promotion Research Programme at Folkhälsan Research Center, Helsinki, 2005 - 2011 **FI**

THESIS: THE ESSENCE OF EXISTENCE – On The QoL of Children and Families in the Nordic Countries 1994 NHV

Chair of the IUHPE Global Working Group on Salutogenesis 2007 - se www.rchpr.org; www.salutogenesis.hv.se

IUHPE GWG-SAL 2007

<u>www.salutogenesis.fi</u> <u>www.salutogenesis.hv.se</u>

UNRAVELLING THE MYSTERY OF SALUTOGENESIS **M.E** . 2007

4 RESEARCH SEMINARS ON SALUTOGENESIS 2008-2011 (2012 TRONDHEIM)

THE HITCHHIKER'S GUIDE TO SALUTOGENESIS

EN 2010

ES 2011 (+ CAT + E-BOOK)

FR 2012

DE 2012

NATIONAL NETWORKS

THE CORE GROUP 2010

THE SALUTOGENIC SOCIETY

RESEARCH AGENDA





HEALTH??

The WHO Definition from 1948 stating:

"Health is a *state* of complete physical, mental and social wellbeing and not only the absence of disease or Infirmery"

WHO as a UN special Organisation: defending Human Rights from a perspective of Health

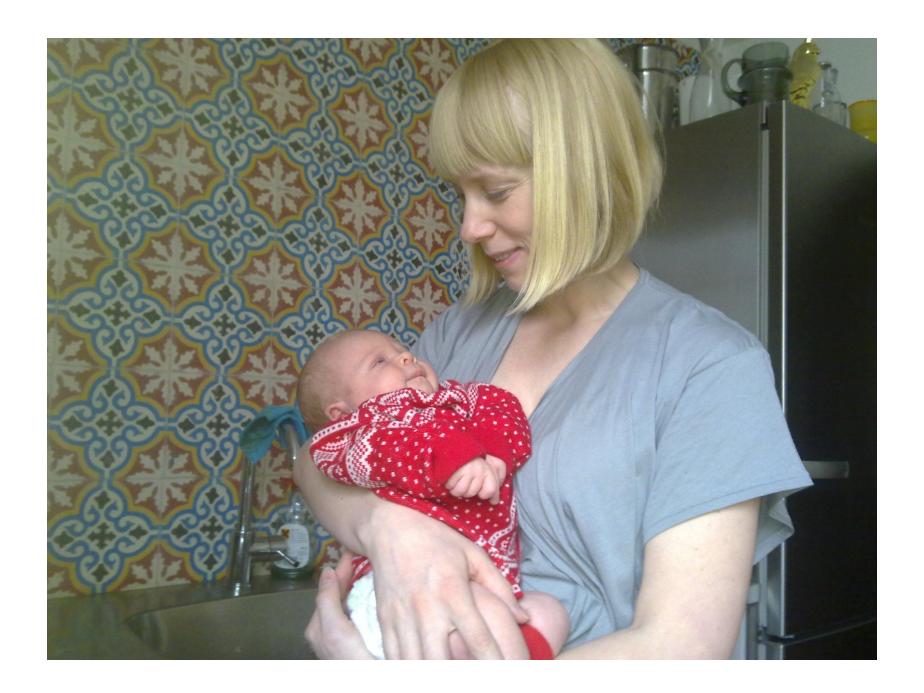
The Study of Health has mainly focused on The Absence of Disease

What if we look at a state of WELLBEING?

HEALTH AS A STATE OF WELLBEING











VAD VILL BEFOLKNINGEN?

- LEVA LÄNGE
- LEVA ETT GOTT LIV, DET LIV DE VILL LEVA
- UNDVIKA SJUKDOM
- OM SJUK FÅ ALL HJÄLP SOM FINNS OMEDELBART

VAD VILL HÄLSOPOLITIKEN?

Probably the most important Health Policy change so far:

The WHO HFA Strategy 2000 of 1984

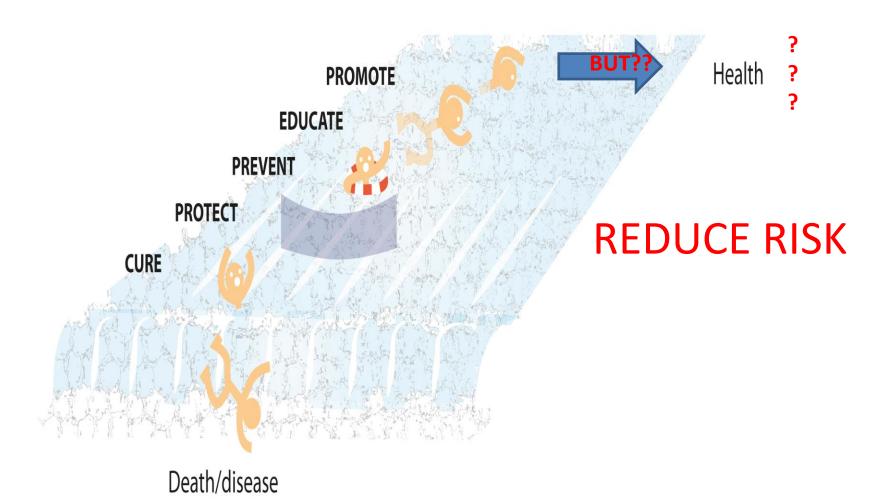
- Adding Years to Life (AYL)
- Adding Life to Years (ALY)
- A Sustainable Development
- Equity in Healthand 38 Targets.

HEALTH AS A PROCESS

Lehtinen "there is a lot of misunderstanding and misuse concerning the concept of mental health. Even many professionals and experts think that it refers solely to severe mental disorders. In reality, mental health is a broad concept, and in some way or other concerns everyone in society". He continues, ..." mental health can be seen as a process that comprises predisposing factors (e.g. childhood experiences), actual precipitating factors (e.g. life events), and supporting or protecting factors (e.g. social network) as well as various consequences and outcomes (e.g. health behavior)" (Lehtinen, 2008).

Lehtinen, V. (2008) Building up good mental health. Guidelines based on existing knowledge, Stakes, Helsinki.

WHAT IS THE TRADITIONAL APPROACH OF HEALTH PROFESSIONALS?



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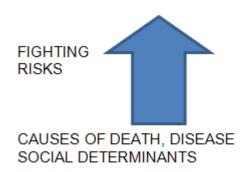
MODIFIED AFTER THE CLASSIC "RIVER OF HEALTH" Mc KNIGHT 1972)

Health, Disease, Quality of Life

What is the added value of salutogenesis and health promotion in this context?

TWO DIRECTIONS OF HEALTH RESEARCH







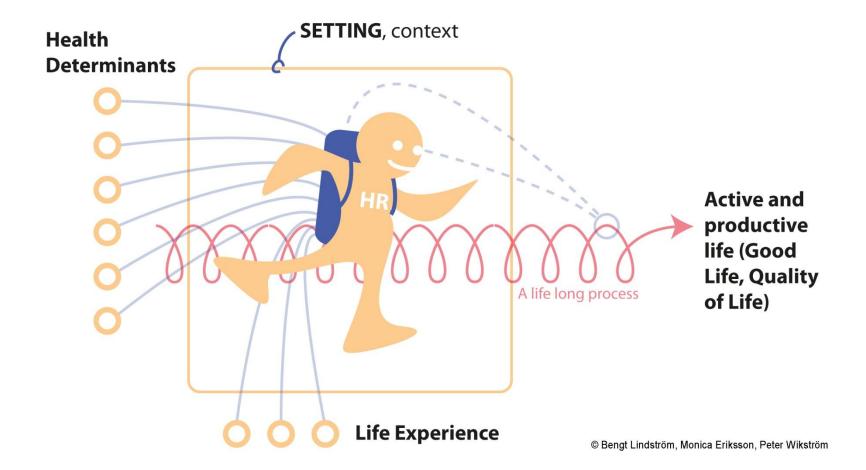




The "Genetic Code" of Health Promotion



Lindström B, Eriksson M. The Hitchhiker's Guide to Salutogenesis. Salutogenic pathways to health promotion. Helsinki 2010.





Salutogenesis, the exploration of the origin of health, is on the leading edge of a class of academic movements that emphasise human strengths and not just weaknesses, human capacities and not just limits, well-being and not just illness, and so on... It is a system approach to health that also can be applied on organisations like schools, hospitals, business organisations....

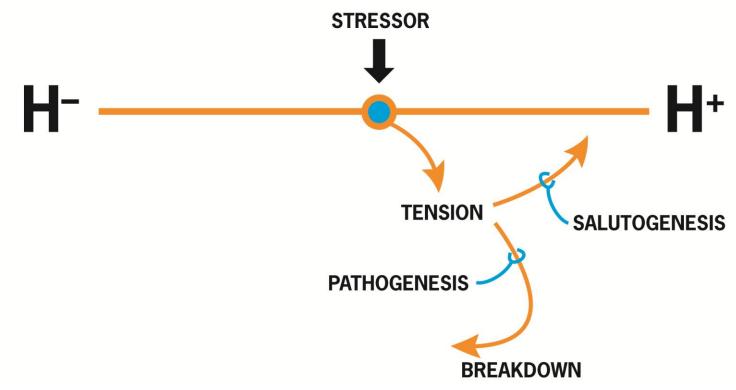
"How come anybody ever make it and stay healthy???"

	Survivors	Non concentration camp
+	28%	63%
-	72%	37%

p< 0.001

- + did well in menopausis
- problems in menopausis

Table Antonovsky's four field plot that made him discover Salutogenesis.



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"Mental health ... refers to the location, at any point in the life cycle, of a person on 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. It is about understanding how people move from the use of unconscious psychological defense mechanisms toward the use of conscious coping mechanisms; from the rigidity of defensive structures to the capacity for constant and creative inner readjustment and growth; from a waste of emotional energy toward its productive use; from emotional suffering toward joy; from exploitation of others toward reciprocal interaction" Antonovsky, 1985).

SALUTOGENES SOC TEORIN (ANTONOVSKY)

RESURSFAKTORER FÖR HÄLSA

1)KÄNSLA AV SAMMANHANG – en faktor med tre dimensioner

BEGRIPLIGHET (kognitiva)

HANTERBARHET (beteende/instrumentella)

MENINGSFULLHET (motivation)

Antonovsky 1987; Klepp et al. 2007; Bernabé et al. 2009... m.fl.

MULTIDIMENSIONELLT BEGREPP Feldt 2000; Eriksson 2007...m.fl.

2) GENERELLA MOTSTÅNDSRESURSER

ERIKSSON, M. & LINDSTROM, B. 2005. Validity of Antonovsky's sense of coherence scale: a systematic review. *Journal of Epidemiology and Community Health*, 59, 460-466.

Development of a strong SOC

Psychoemotional rather than socioeconomical factors

Contact with inner feelings
(Antonovsky 1979, 1987)

Intimate relationships (Antonovsky 1979, 1987)

Social support (Antonovsky 1979, 1987; Shawn et al. 2007)

Meaningful activities (Antonovsky 1979, 1987)

Existential issues (Antonovsky 1979, 1987)

Load balance and consistency (Sagy & Antonovsky 1996)

Participated in shaping the outcomes (empowerment)
(Sagy & Antonovsky 1996)

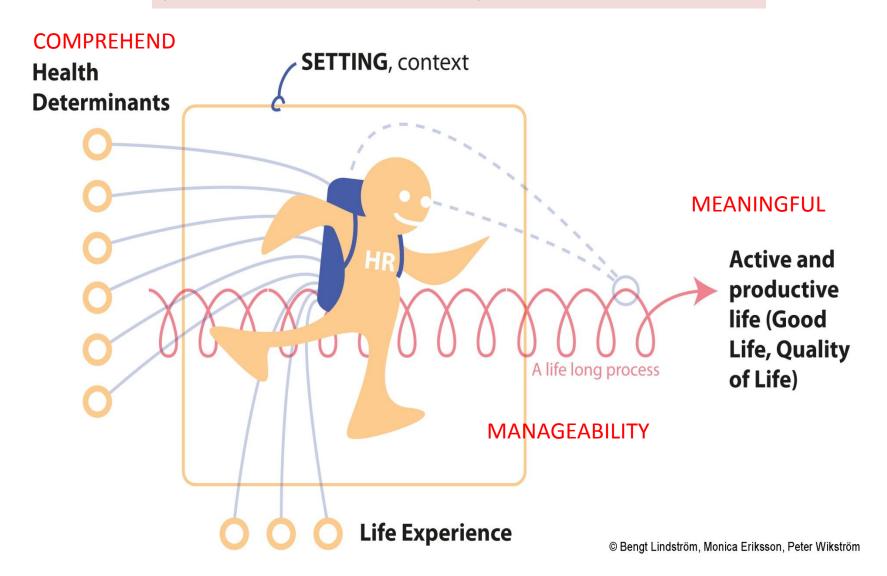
Good childhood conditions (Antonovsky 1979, 1987)

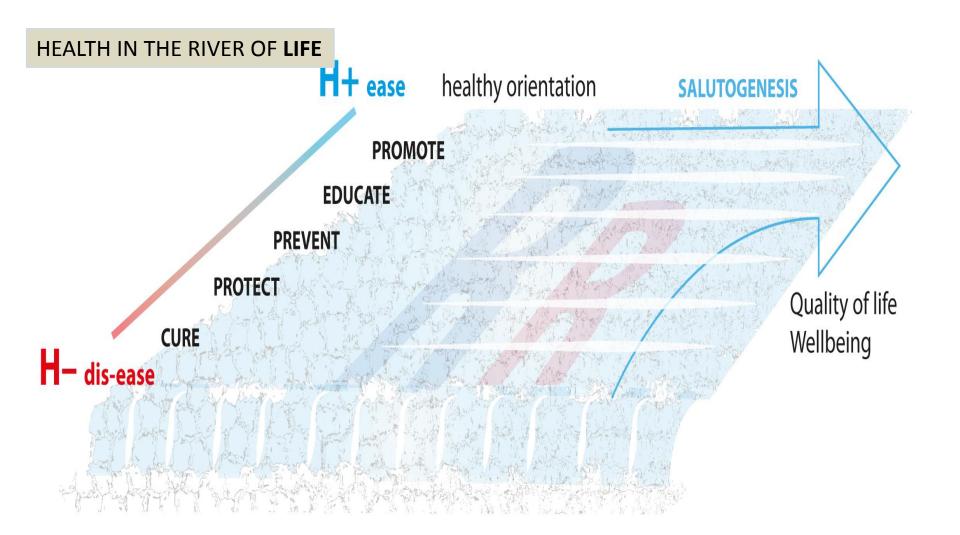
Absence of family conflict and prevalence of neighbourhood cohesion (Shawn et al. 2007)

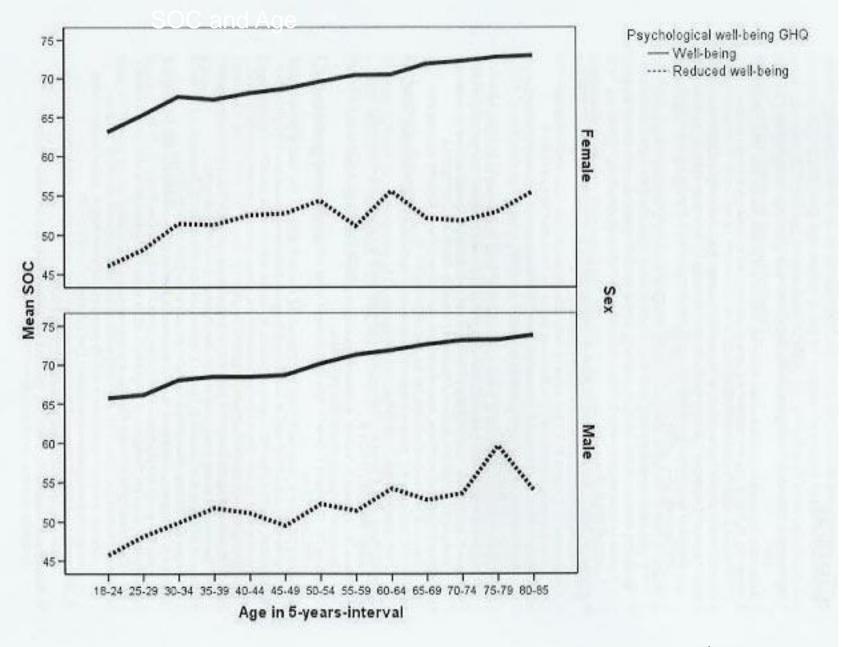
Introspection and reflection about job engagement
(Forbech Vinje & Mittelmark 2007)

© Monica Eriksson 2010

BUILDING BLOCKS IN HEALTH PROMOTING PROCESSES (or SALUTOGENIC PROCESSES)







Nilsson KW Journal of Epidemiology and Community Health 2009;19:19 August 2009. doi:10.1136/jech.2008.081174.



Generally - A strong SOC ...

- ... protects against anxiety, depression, burnout and hopelessness
- ... is strongly and positively related to health resources such as optimism, hardiness, control, and coping
- ... predicts good health and QoL from childhood to adulthood
- ... the stronger the SOC the fewer the symptoms of mental illnesses

Eriksson M, Unravelling the Mystery of Salutogenesis, 2007; **Nielsen AM**, **Hansson K** Stress and Health 2007;23(5):331-341; **Sagy S**, **Braun-Lewensohn O**. Global Health Promotion 2009;16(4):5-15; **Simonsson B**, **Nilsson KW**, **Leppert J**, **Diwan VK**. BioPsychoSocial Medicine 2008;2(4):doi:10.1186/1751-0759-2-4; **Buddeberg-Fischer B**, **Klaghofer R**, **Schnyder U**. Soz Praventivmed 2001;46(6):404-410...



The stronger the SOC the better the QoL of children, adults and in families.

Findings from both quantitative and qualitative studies support the SOC to be a factor enhancing good QoL.

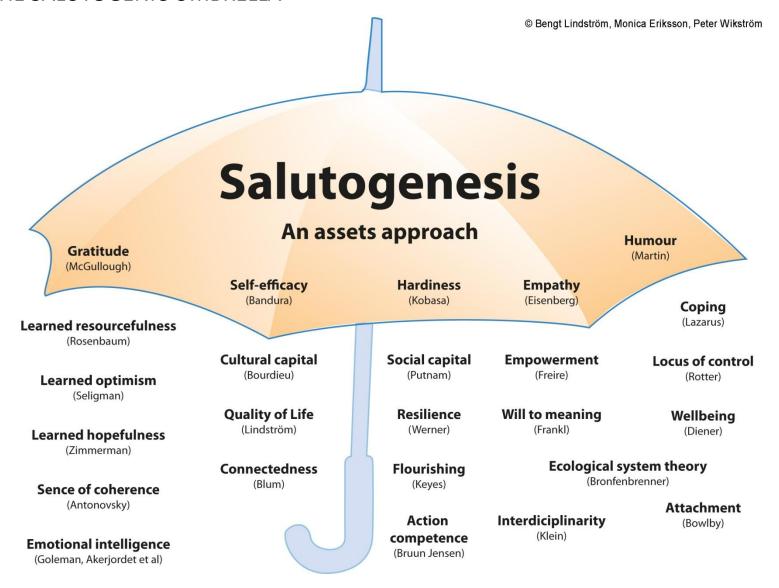
Results from longitudinal studies confirmed the findings from the cross-sectional ones.

Most of the studies are using specific questionnaires for measuring HRQL on varying samples (patients).

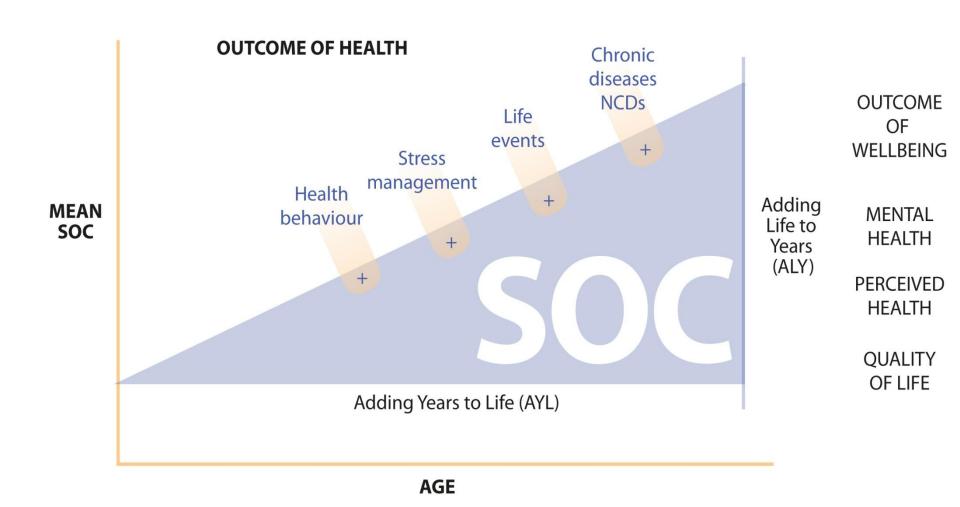
Studies measuring QoL on general populations are scarce.

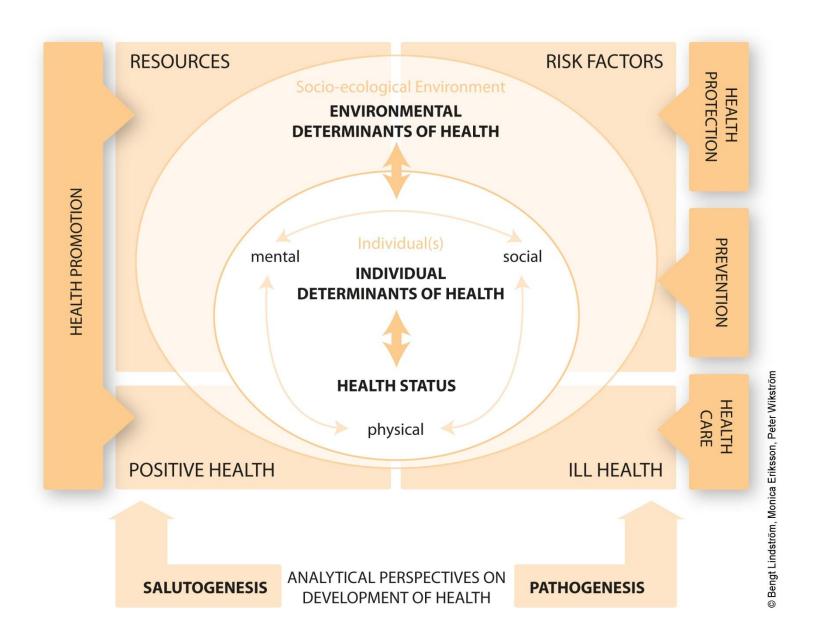
Eriksson M, Lindström B. J Epidemiol. Community Health 2007;61:938-944

THE SALUTOGENIC UMBRELLA



THE HFA 2000 POLICY AND OUTCOMES RELATED TO DO-WELL FACTORS





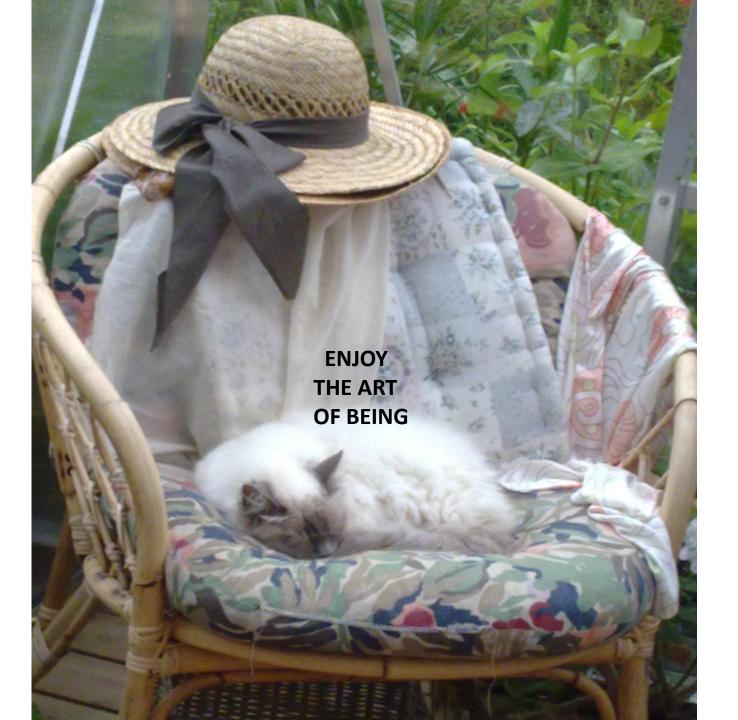
Bauer G Davies JK et al Advancing a model for health, EJPH 2003, 107-113

$$HP_{oc} = (SAL+QoL) HR$$

HEALTH??

A NEW DEFINITION OF HEALTH??

HEALTH IS WHAT IT TAKES TO MAKE LIFE WORTH LIVING



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Antonovsky A. Health Stress and Coping, Jossey Bass, SF, 1979

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Relat Sci, 22, 273-280

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Koelen MA, Lindström B. Making healthy choices easy choices: the role of empowerment.

European Journal of Clinical Nutrition 2005;59(suppl 1):10-16.

Bauer G Davies JK et al Advancing a model for health, EJPH 2003, 107-113

Lindström B The Essence of Existence NHV Report 3 1994

Websites: www.salutogenesis.fi and www.salutogenesis.hv.se, www.rchpr.org

Pictures: Private Bengt Lindstrom





FINLAND VS SCOTLAND

FINNISH CVD MORTALITY

1950 - 1990

MASSIVE INTERVENTIONS FROM 1972 ONWARDS

THE NORTH CARELIA
PROJECT
THE GLOBAL FLAGSHIP
FOR CVD PREVENTION and
COMMUNITY INTERVENTIONS

SCOTTISH CVD MORTALITY 1950 - 1990

NO INTERVENTIONS AT ALL

NOTHING except for

HAGGIS, WHISKY, SMOKE, and

EXELLENT DEPRIVATION STRATEGIES

THE PATTERNS EXACTLY THE SAME

from 1950 to 1960 an increase - thereafter a decline almost in parallel

In Finland

and Scotland

WHY?

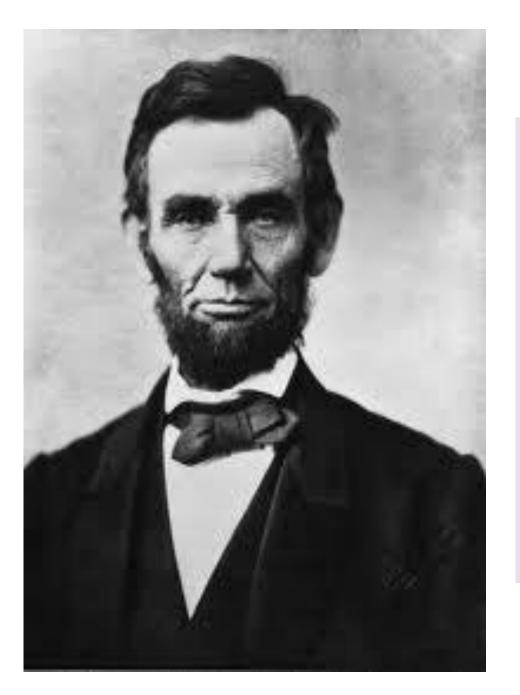
WHY?

Are our explanations and interventions too simplistic?

HOW DOES ONE EXPLAIN THE CVD EPIDEMIC IN FINLAND ??

- Genetics
- Lifestyle (alcohol, tobcco, Food exercise....)
- The social gradient Not good to be poor at all
- Mental problems
- A great stressor behind the border - Sovjet (FI)

- What about epi genetics?
- What about stress theories?
- What about history?
- Was North Carelia only timed right by chance??
- However The Research and Intervention gave us a lot of experience to build further
- BUT at the same time a belief in a paradigm that has been impossible to break over 40 years!!



You can fool
Some of the people
All of the time,

All of the people Some of the time,

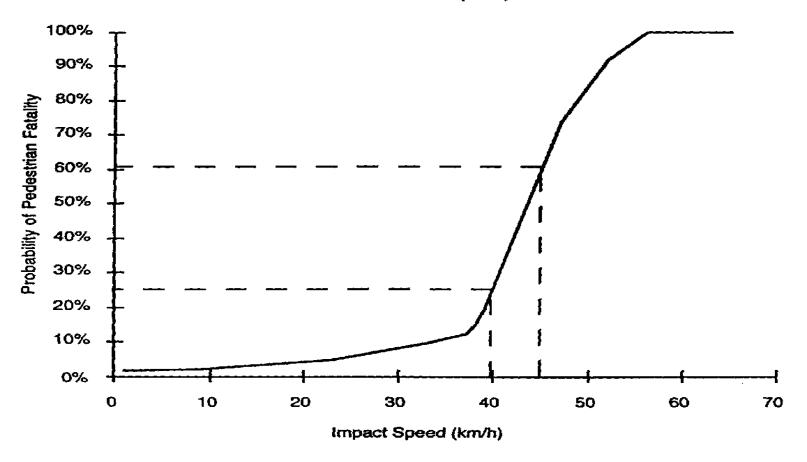
But You can never fool All of the people All of the time.

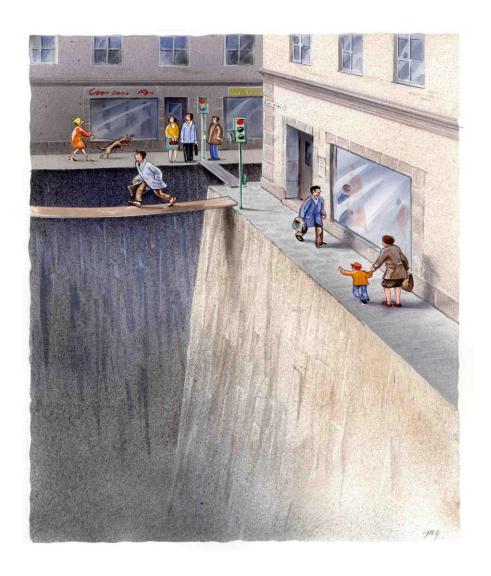
Abraham Lincoln



Figure 2: Probability of Pedestrian Fatality by Impact Speed.

Derived from the Interdisciplinary Working Group for Accident Mechanics (1986) and Watz, Hoefliger and Fehlmann (1983)





Mats-åke Belin Trafikverket, SE

FOLKHÁLSAN RESEARCH CENTRE HEALTH PROMOTION RESEARCH Research Report 2010:2

THE HITCHHIKER'S GUIDE TO THE SALUTOGENESIS

Salutogenic pathways to health promotion

Bengt Lindström and Monica Eriksson

NEW BOOK DECEMBER 2010 order at :

www.salutogenesis.fi