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Professor II of Health Promotion, HiBu, 2008-2011, NO
Professor of Public Health and Health Promotion, NHV 2006, SE (Emeritus 2013)
Associate Professor Social Policy, Åbo Akademi Vasa, 2007 -, FI
Associate Professor Child Public Health, NHV 2002, SE
Associate Professor Public Health Tampere Univ. 2002, FI
Head of Health Promotion Research Programme at Folkhälsan Research Center, Helsinki, 2005 – 2011, FI
Visiting Professor Wageningen University 2011-, NL

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 -see www.rchpr.org
www.salutogenesis.hv.se
Health, Disease, Quality of Life

H-  ---------------------------------------------  H+

D-  ---------------------------------------------  D+

QoL-  -------------------------------------------  QoL+

EFFECT OF A STRONG SOC
HEALTH IN THE RIVER OF LIFE

SALUTOGENESIS IS A LIFE ORIENTATION

H+ ease  healthy orientation  SALUTOGENESIS
PROMOTE
EDUCATE
PREVENT
PROTECT
CURE

H− dis-ease
Quality of life Wellbeing

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SALUTOGENESIS IS A LIFE ORIENTATION
CONCEPTS RELATED TO RESILIENCE - THE SALUTOGENIC UMBRELLA

Salutogenesis
An assets approach

Gratitude (McGillough)
Learned resourcefulness (Rosenbaum)
Learned optimism (Seligman)
Learned hopefulness (Zimmerman)
Sense of coherence (Antonovsky)
Emotional intelligence (Goleman, Akerjordet et al)

Self-efficacy (Bandura)
Cultural capital (Bourdieu)
Quality of Life (Lindström)
Connectedness (Blum)

Hardiness (Kobasa)
Social capital (Putnam)
Resilience (Werner)
Flourishing (Keyes)

Empathy (Eisenberg)
Empowerment (Freire)
Will to meaning (Frankl)
Action competence (Bruun Jensen)

Humour (Martin)
Coping (Lazarus)
Locus of control (Rotter)
Wellbeing (Diener)
Ecological system theory (Bronfenbrenner)
Attachment (Bowlby)

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Figure 1.1. Schematic representation of the major sources of life-strengths from different theoretical perspectives.
The core question

<table>
<thead>
<tr>
<th>SALUTOGENESIS</th>
<th>RESILIENCE</th>
</tr>
</thead>
<tbody>
<tr>
<td>The origin of health?</td>
<td>Why do some people stay healthy and others do not, regardless of severe hardships and adversities?</td>
</tr>
<tr>
<td>What creates health?</td>
<td></td>
</tr>
<tr>
<td>Who are the people staying well?</td>
<td></td>
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<tr>
<td>What can their experience tell us about health resources?</td>
<td></td>
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</tbody>
</table>

### The Framework

<table>
<thead>
<tr>
<th>SALUTOGENESIS</th>
<th>RESILIENCE</th>
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<tbody>
<tr>
<td>Attention on</td>
<td>Stress</td>
</tr>
<tr>
<td>Approach</td>
<td>Contextual, situational, systems</td>
</tr>
<tr>
<td>Orientation</td>
<td>Life orientation, a dynamic process in a continuum of ease/dis-ease Health promotion</td>
</tr>
<tr>
<td>Focus</td>
<td>Resources, abilities, capacities, potentials, assets</td>
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## Definitions

<table>
<thead>
<tr>
<th>SALUTOGENESIS</th>
<th>RESILIENCE</th>
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<tbody>
<tr>
<td>The original definitions of salutogenesis and the sense of coherence are generally accepted.</td>
<td>Hard to get a hold of the complete content of resilience.</td>
</tr>
<tr>
<td>Salutogenesis is much more than only the measurement of the SOC.</td>
<td>Many different definitions of the concept, because of different available applications on different levels.</td>
</tr>
<tr>
<td>There are many other theories and concepts with salutogenic elements available for explaining health.</td>
<td>Across the definitions a general consensus of the community resilience has emerged.</td>
</tr>
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</table>

## Key concepts

<table>
<thead>
<tr>
<th>Concepts</th>
<th>SALUTOGENESIS</th>
<th>RESILIENCE</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Sense of Coherence (SOC)</strong></td>
<td>Multidimensional construct</td>
<td>Resilience, “bouncing back”, beating the odds Multidimensional construct</td>
</tr>
<tr>
<td><strong>Dimensions</strong></td>
<td>Comprehensibility Manageability Meaningfulness</td>
<td></td>
</tr>
<tr>
<td><strong>Prerequisites</strong></td>
<td>Generalized Resistance Resources</td>
<td>Protective factors</td>
</tr>
</tbody>
</table>

### Theoretical foundation

<table>
<thead>
<tr>
<th>SALUTOGENESIS</th>
<th>RESILIENCE</th>
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</thead>
<tbody>
<tr>
<td>Coherent theoretical framework</td>
<td>Lack of coherent theory base</td>
</tr>
<tr>
<td>Extensively and empirically examined</td>
<td>Many theories depending on the level and dimensions explored</td>
</tr>
<tr>
<td>Systematically and analytically synthesized</td>
<td>Conceptually diffuse, ”slippery” concept, principle</td>
</tr>
<tr>
<td>Evident</td>
<td>Evident</td>
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</tbody>
</table>

The operationalisation

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<tr>
<th>SALUTOGENESIS</th>
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| The Orientation to Life Questionnaire  
The original SOC-29 and SOC-13-item-scales  
Some modified versions with the *same questions* but with differing scoring alternatives | Different questionnaires with *different items* depending on the level and dimensions explored |

A methodological review of resilience measurement scales

Gill Windle¹*, Kate M Bennett², Jane Noyes³

Results: Nineteen resilience measures were reviewed; four of these were refinements of the original measure. All the measures had some missing information regarding the psychometric properties. Overall, the Connor-Davidson Resilience Scale, the Resilience Scale for Adults and the Brief Resilience Scale received the best psychometric ratings. The conceptual and theoretical adequacy of a number of the scales was questionable.

Conclusion: We found no current ‘gold standard’ amongst 15 measures of resilience. A number of the scales are in the early stages of development, and all require further validation work. Given increasing interest in resilience from major international funders, key policy makers and practice, researchers are urged to report relevant validation statistics when using the measures.
## The implementation

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<tr>
<th></th>
<th>SALUTOGENESIS</th>
<th>RESILIENCE</th>
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</thead>
<tbody>
<tr>
<td><strong>Applicability</strong></td>
<td>Individual, group (family), societal level</td>
<td>Individual, group (family), societal level</td>
</tr>
<tr>
<td><strong>Outcome</strong></td>
<td>Good perceived health (mental, physical, social) and Quality of Life</td>
<td>Survival, good perceived health and Quality of Life</td>
</tr>
<tr>
<td><strong>Evaluation</strong></td>
<td>The key concepts of the salutogenic theory, the SOC</td>
<td>No clear way to evaluate dependent on the lack of a sound coherent theory base</td>
</tr>
<tr>
<td><strong>Effectiveness</strong></td>
<td>The global evidence base proves the health model works</td>
<td>Lack of coherent and comprehensive evidence</td>
</tr>
</tbody>
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Conclusions

Is Salutogenesis the same as Resilience?  

NO

There are similarities and differences

Both constructs contribute to the explanation of health and quality of life
THE PROJECT WORKING DEFINITION OF RESILIENCE:

“The ability to exercise constructive life skills to meet the challenges of life”
SOME BOOKS

Promoting Mental Health

Health Assets in a Global Context

Exploring Mental Health: Theoretical and Empirical Discourses on Salutogenesis

Wayfinding Through Life’s Challenges

Hitchhiker in NORWEGIAN 2015

Guía del autoestopista salutogénico

Hälsa och välstånd i ett föränderligt samhälle

Well-being and Beyond: Broader the Public and Policy Discourse

ON GOING 2015 HANDBOOK ON SALUTOGENESIS