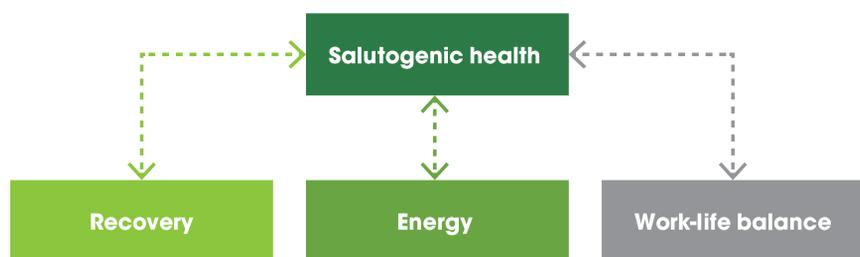


Salutogenic health and work experience factors among primary health care workers in Sweden

Ejlertsson Lina, Heijbel Bodil, Ejlertsson Göran, Andersson Ingemar • Centre of Public Health, School of Health and Society, Kristianstad University, Kristianstad, Sweden

Conclusion

Positive work experiences of recovery and energy but also work-life balance related highly to salutogenic health indicators. Substantial variation in salutogenic factors between primary health care centres could be used in individualised interventions to promote health.



Background

The workload in Swedish primary health care has increased during the last decades in connection with an extensive reduction of the hospital based health care. Impact on work health among primary health care workers has been studied in a pathogenic perspective. The salutogenic approach, of importance to health promotion, is mostly missing.

Aim

To study work experiences and health in primary health care from a salutogenic perspective as a basis for intervention with a salutogenic approach.

Method

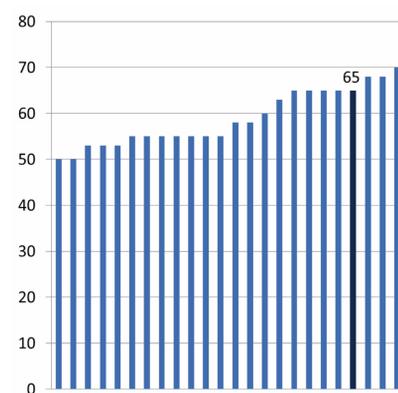
- Cross-sectional study in 26 primary health care centers (PHCC) in the northeast of Scania.
- Questionnaire to all PHCC employees (n= 599) with questions from three sources: questions developed from initial individual and focus group interviews, from validated instruments, SHIS (Salutogenic Health Indicator Scale) and WEMS (Work Experiences Measurement Scale) and from studies of work-life balance.
- Questions included demographic data, health, work experiences including relations, support, autonomy, leadership as well as work-life balance and energy.
- Spearman's correlation, one-way ANOVA and linear regression models were used for the analyses. Several questions were combined into indexes.

Results

The response rate was 84% (n= 501). Experience of salutogenic health (SHIS) was strongly correlated with recovery ($r_s=0.63$) and work experiences (WEMS, $r_s= 0.51$). Except recovery, significant factors associated with salutogenic health experiences were in a multivariate model, satisfaction with work-life balance, a meaningful and challenging work situation and experience of energy excess from work. Outcomes of the salutogenic factors varied significantly between different PHCC (fig 1-2) giving possibilities for future interventional discussions.

Fig 1

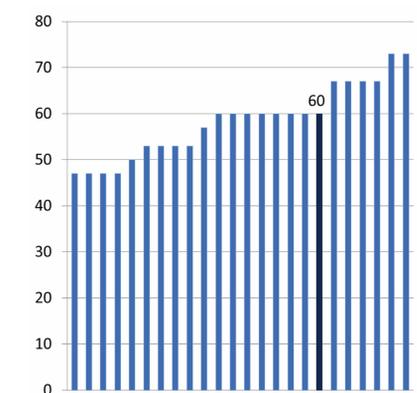
Index of recovery¹ (Scale 0-100) among the PHCC (n=24, two small PHCC merged with nearby PHCC). The value of one of the PHCC is marked as an example.



¹ Index includes questions on experiences of recovery at work, at home and during travel time to work

Fig 2

Index of excess energy from work¹ (Scale 0-100) among the PHCC (n=24, two small PHCC merged with nearby PHCC). The value of one of the PHCC is marked as an example.



¹ Index includes questions on experiences of the work and workmates giving positive energy to the individual.