приділяється особлива увага, оскільки з цим пов'язується досягнення більш стабільного і безпечного світу для всіх. Для України верховенство права на міжнародній арені сьогодні набагато більше, ніж важливий принцип взаємодії держав в глобальному світі. Це питання її виживання.

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TEACHER'S SENSE OF COHERENCE IN A SALUTOGENIC PERSPECTIVE

The school is the place where children spend a large part of the day, and teachers have a significant influence on the development of the learner identity. Teachers are the first to notice the symptoms of emotional stress or instability, therefore, being a member of the health promotion team, the teacher must maintain stable mental health and sense of coherence. However, research in different countries shows that teachers themselves increasingly face emotional exhaustion (burnout), physical and mental health issues, stress, and symptoms of depression and anxiety at work (Javtokas, 2009). Burnout is related to a lower degree of engagement, decreasing self-efficiency, and an increasing feeling of stress, which is related to worsening physical and emotional health; symptoms of depression and anxiety are related to excessive requirements at work; mental health is related to job satisfaction (European Agency for Safety and Health at Work, 2019).

Traditionally, research on health issues was based on pathogenic approach. However, the focus on the causes of illness and the sick person prevented looking into other – psychosocial, environmental and cultural – factors, which are important when trying to understand why some individuals cope with stress, large workloads, and stay healthy, whereas others fall ill. Mental health is more than absence of mental diseases, as it is a state of complete wellness indicating the person's ability to enjoy life, accept themselves and others, and deal with arising challenges (Dore & Caron, 2017). The pathogenic approach to health, which is oriented to different aspects of illness, has been criticized for the dichotomy of personal health – the symptoms of a disease are

^{1.} Furtherance of remedy and reparation for aggression against Ukraine (7 November 2022). https://digitallibrary.un.org/record/3993657/files/A_ES-11_L.6-EN.pdf.

^{2.} Giorgetti Ch., Kliuchkovsky M., Pearsall P. & Sharpe J.K. Historic UNGA Resolution Calls for Ukraine Reparations. www.justsecurity.org/84146/historic-unga-resolution-calls-for-ukraine-reparations.

^{3.} Rule of Law Essential for Maintaining International Peace, Secretary-General Says at Open Debate, Stressing Security Council's Critical Role in Upholding Principle (12 January 2023). https://press.un.org/en/2023/sgsm21653.doc.htm.

attributed to illness, whereas the absence of such symptoms is associated with health (Kymantienė & Bulotaitė, 2016, p. 46). Therefore, the theory of salutogenesis has been emphasiszd lately. Generally, salutogenesis is a scientific orientation with the research focus being on the origins of health instead of illness and risk factors. In the narrow sense of the meaning, it is associated with a part of the model – the sense of coherence. A. Antonovsky, a prominent theorist of the salutogenic theory, defined the sense of coherence as a global personal lifetime orientation expressed through positive relationships with the world and themselves (Antonovsky, 1996). He raised the question of the origins of health, and argued that the sense of coherence is essential (Antonovsky, 1996, p. 13).

The aim of research was to reveal the state of schoolteachers' sense of coherence on the basis of salutogenic indicators. The problem questions: How school teachers assess their sense of coherence according to the salutogenic health indicators? How the teachers' sense of coherence depends on the length of a teaching career, age and gender? What do the SHIS mean values indicate? Research methodology. This study is based on the theory of salutogenesis which allows to focus on the origins of health and not on illness, which determine maintenance of health resources. The research sample consisted of 212 teachers of Klaipeda schools. The participants were included only after their oral consent to participate in the research was obtained. The Salutogenic Health Indicator Scale (SHIS) (Bringsén, Andersson & Eilertsson, 2009) was used as a research instrument. The SHIS scale consists of 17 statements divided into 3 areas: the life situation in relation to work (2 statements), routines (3 statements), well-being during the last 4 weeks (12 statements). Each statement is evaluated on the scale 1 (negative response) to 6 (positive response). The sense of coherence is assessed on the basis of average score, a higher score indicating a more positive assessment of the sense of coherence. The key results are provided in the tables below.

Table 1
Teachers' self-rated health status based on salutogenic health indicators i
n relation to length of career

	Length of career (years) /Age			ANOVA	
SHIS	1-5 /25-30	6-16/31-41	over17 / over 42		
areas				F test	p-value
	m (95 % PI)	m (95 % PI)	m (95 % PI)		
Life situation in	5,04 (4,68-	4,76 (4,38-	4,78 (4,64-	0,768	0,465
relation to work	5,40)	5,14)	4,92)		
Routines	4,50	4,44	4,37	0,188	0,829
	(4,02-4,98)	(4,03-4,85)	(4,21-4,52)		
Well-being during	4,25	4,60	4,51	1,060	0,348
the last 4 weeks	(3,83-4,68)	(4,32-4,87)	(4,39-4,64)		
SHIS mean value	4,59 (4,28-	4,60 (4,30-	4,56 (4,44-	0,055	0,946
	4,90)	4,90)	4,67)		

The analysis of the research data showed that the situation was rated the highest (5,04) by the teachers having 1to 5years of teaching career aged 25 to 30 as they believed that a) they encourage and support each other at work; b) there is good working atmosphere in the workplace, c) they have adequate and well-organized work routines; d) they receive feedback on the work completed; e) they feel good at their workplace; f) they believe that the employer invests in their health; g) if needed, they can get advice and support from others in respect to work, etc. These results indicate that this group of research participants are satisfied with their life situation in respect to work, and work – life balance, which ensures their sense of coherence.

In the area of routines (sleep, exercise and nutrition) this group also assessed their health the highest (4,50). However, the well-being during the last 4 weeks in respect to the indicators (felt uneasy, tense; had problems sleeping; had concentration difficulties; lacked imagination, creativity; have been irresolute, hesitant; felt low-spirited, gloomy; felt ill; had little energy; have been functioning poorly when in contact with other people; my body has been functioning poorly in relation to my way of living) was rated the lowest (4,25) when compared to other groups of research participants. The decreasing SHIS average scores indicate decreasing health resources, which may be linked with the challenges of professional integration or adaptation at the workplace.

The well-being during the last 4 weeks, in relation to the indicators (p=0,348) was rated the most positively (4,60 (95 % PI 4,32-4,87)) by the teachers having 6 to 16 years of career aged 31 to 41, and less positively (4,51 (95 % PI 4,39-4,64) by those having over 17 years of career, and the least positively (4,25 (95 proc. PI 3,83-4,68)) by those having 1 to 5 years of career.

Table 2

Teachers' self-rated health status based on salutogenic health indicators in relation to gender

SHIS	Gender		ANOVA	
areas	Female	Male	F test	p-value
	m (95 % PI)	m (95 % PI)		
Life situation in relation to work	4,79	4,87	0,290	0,591
	(4,65-4,92)	(4,57-5,17)		
Routines	4,34	4,58	1,744	0,188
	(4,19-4,50)	(4,28-4,88)		
Well-being during the last 4 weeks	4,47	4,64	1,474	0,226
	(4,34-4,59)	(4,39-4,90)		
SHIS mean value	4,54	4,69	1,495	0,223
	(4,43-4,64)	(4,44-4,95)		

The assessment of the statements of the areas of the health indicator scale according to the gender, Pearson Chi-square indicated that there was a significant difference in respect to gender: "felt well" ($\chi^2 = 5.0$ lls=5 p=0,415). All SHIS areas

were rated more positively by male participants than by female participants.

Conclusions. There has been identified a significant impact of the psychosocial work environment on teachers' health and sense of coherence – positive moderate correlation (r=0,566, p<0,001) between length of career and health assessed by salutogenic indicators, which indicates that the more positive teachers' rating of work experience factors was linked with the more positive assessment of their health.

The assessment of the teachers' health in salutogenic approach in relation to length of career, age and gender showed that the teachers having 1to 5 years of career assessed the life situation more positively in relation to work than those with 6to 16 years of career, and they assessed the routine area more positively than those with over 17 years of career. The teachers with 6 to 16 years of career rated their well-being during the last 4 weeks better in respect to the indicators than the teachers with 1to 5 years of career.

The research results indicated that male teachers have stronger inner resources and greater possibilities to cope with stress, challenges and problems at work, and to feel the sense of coherence as their standardized SHIS mean values were 4,69. Lower SHIS mean values show lesser health resources.

^{1.} Antonovsky, A. (1996). The salutogenic model as a theory to guide health promotion. *Health promotion international*, 11(1), 11-18. Retrieved from: https://doi.org/10.1093/heapro/11.1.11

^{2.} Bringsén, Å, Andersson, H.I, & Ejlertsson, G. (2009). Development and quality analysis of the Salutogenic Health Indicator Scale (SHIS). *Scandinavian Journal of Public Health*, 37, 13–9.

^{3.} European Agency for Safety and Health at Work, 2019. Psychosocial risks and stress at work. Retrieved from: https://osha.europa.eu/en/themes/psychosocial-risks-and-stress

^{4.} Dore, I., & Caron, J. (2017). Santé mentale: concepts, mesures et déterminants [Mental Health: Concepts, Measures, Determinants]. Sante Ment Que. 2017 Spring; 42(1), 125-145. French. PMID: 28792565. Retrieved from: https://pubmed.ncbi.nlm.nih.gov/28792565/

^{5.} Javtokas, Z. (2009). *Salutogeninio modelio panaudojimas mokinių sveikatai stiprinti*. Valstybinis aplinkos sveikatos centras, 1-13. Retrieved from: http://www.smlpc.lt/media/file/Skyriu_info/Sveikatos_mokymas/Lektura/Salutogeninio_modelio_panaudojimas_mokiniu_sveikatai_stiprinti.pdf.

^{6.} Kymantienė, J., Bulotaitė, L. (2016). Kompleksinio sveikatos vertinimo modelis. Visuomenės sveikata, 2(73), 46-53. Retrieved from: http://www.hi.lt/uploads/pdf/visuomenes%20sveikata/2016.2.73/VS%202016%202(73)%20ORI G%20Sveikatos%20vertinimas.pdf