



Existential health

A valuable dimension when promoting health throughout the life-course in Sweden

Background

According to the World Values Survey Sweden is one of the most secular countries in the world. However, there is a high demand for forums to discuss existential questions and spiritual beliefs. Sweden provides an opportunity for research on existential health promotion in a secular context, providing knowledge and practice for other contexts internationally undergoing a secularization process. In international studies, the existential dimension of health is increasingly recognized as an important addition to physical, mental, and social health. The World Health Organization (WHO) and several other organizations and authorities emphasize the existential dimension of self-rated health. Additionally, research has established a connection between existential health and increased quality of life. There is a need for methods to study how the existential health dimension effect human beings and therefore methodological development was the objective.

Methods

The WHOQOL-SRPB instrument developed by the WHO in 2002 which focus on health related quality of life including aspects related to spirituality, religiousness and personal beliefs was validated to the secular context of Sweden. The validated version was used measuring the function of the existential dimension in four Swedish contexts – 1) to enhance patient's self-care capabilities in self-help groups 2) interventions for suicide prevention 3) treatment for persons on long time sick leave and, 4) promoting health in a global age friendly city (Melder, in press; WHO, 2007).

Results

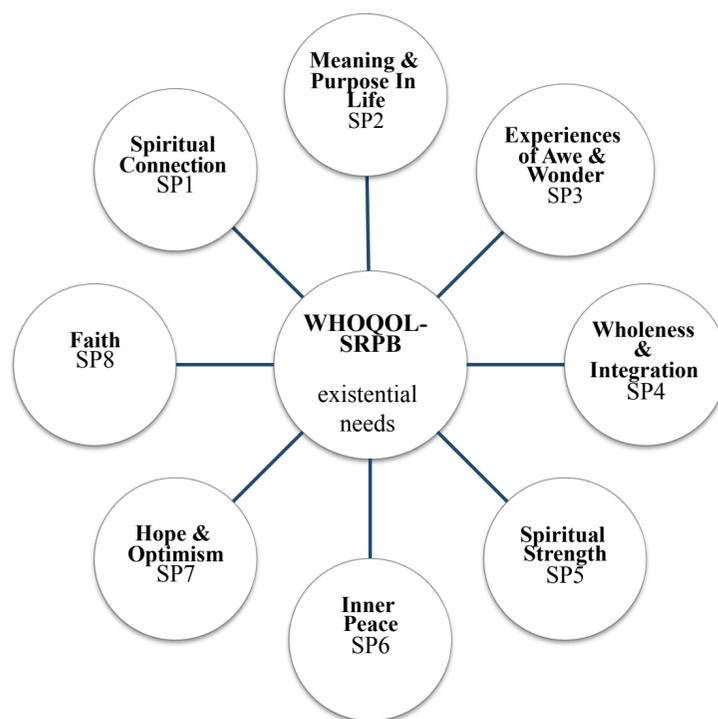
The results were promising when promoting health throughout the life course in these four Swedish contexts. The instrument focus on personal health and quality of life through eight aspects of existential health; spiritual connection, meaning and purpose in life, experience of awe and wonder, wholeness and integration, spiritual strength, inner peace, hope and optimism, as well as faith. The questions relate to existential *approach* rather than the *content* of existential beliefs, which make it applicable to a secular context.

Discussion

Based on the findings we suggest using this instrument through the life-course in Sweden and other secular contexts adding the dimension of existential health as a way to explore the combined processes of essential thoughts, actions and feelings as humans relate to different life situations in relation to themselves, their context and personal beliefs.



(Photo: Catrine Kostenius)



(WHO, 2002; Melder 2011; Melder & Kostenius 2016)