Salutogenisis and coaching: Testing a proof of concept to develop a model for practitioners

Dee Gray, Bron Fedw, Caernarfon, Gwynedd. UK.
Ambra Burl, UK UNESCO Man and Biosphere Urban Forum, UK.
Marina Kogan, Kogan Coaching, Llandudno, UK.

Contact email: grays100@gmail.com

Abstract

This paper presents findings from a proof of concept pilot study that explored the usefulness of a new Salutogenic model in coaching practice. The model aligns with the positive mindset inculcated in coaching, health, and wellbeing initiatives, and was developed and tested by three coaches who work in executive coaching, eco-coaching and life coaching. The study enabled the study coaches to test whether the Salutogenic model could contribute to the wellbeing of the study coachees, and was generic enough to be of use in different coaching areas of expertise. In order to ascertain this the study coaches ran a triangulated study, using not only the three areas of coaching expertise but also multiple sources of data collection and both individual and team coaching; all of which implies robustness of the study findings. The model was developed and refined through reflective iterative cycles, during which the study coaches identified ways the model could be used in practice. The model proved to be adaptable for use by each of the study coaches, and produced positive outcomes for the study coachees.

Key words: Coaching Model, Salutogenisis, Health and Wellbeing.

Introduction

Much of what is core to coaching practice relates to encouraging a sense of wellbeing through positive emotions, positive individual traits, and creating positive environments (Seligman, 2007) for people to thrive in. The development of coaching practice is often informed through qualitative research (De Haan and Duckworth, 2013), and often with an idea or hypothesis worthy of exploration. This paper is the culmination of a study conducted by three coaching professionals (the study coaches), who became interested in the concepts of wellbeing and how these may be practically incorporated into coaching practice. In order to understand ‘wellbeing’ the study coaches explored the literature surrounding Salutogenisis, and this in turn informed the development of the model tested in this study. This study aims to contribute to the growing body of knowledge by presenting findings that provide a Salutogenic structure and focus for coaching practice.

The term Salutogenisis was coined by Aaron Antonovsky in 1979. Antonovsky identified that the prevalent pathogenic paradigm was insufficient to deal with human health and wellbeing, and that health and wellness is part of a continuum and not a binary state. Antonovsky used the metaphor of “being in the river of disease” (Antonovsky, 1979 p. 2) to describe the context of ill-health, and went on to say that, as health and wellbeing are not fixed states, we can all expect to either fall or be pushed into the ‘river’ at some stage in our lives. In order to support individuals to view their health and wellbeing position as belonging to part of a continuum, Antonovsky developed the concept of the
Sense of Coherence (SoC). There are three components of SoC; these are, comprehensibility, manageability and meaningfulness.

Antonovsky identified that the greater the SoC, the greater the chance of moving along the continuum towards a desired future state. He further stated that as there is no ‘magic bullet’ (Antonovsky, 1979 p.8) to climbing out of the river, we should foster a SoC as we may need to learn to live with a new stage of our lives at any time. Parallels with Antonovsky’s SoC can be found in De la Vega’s notion of ‘primordial centre’ (PC) (De la Vega, 2009 p.157) or wholeness of the individual and the motivational aspects of Self-Determination Theory (SDT) (Pearson, 2011). These emphasise the relocating of the sense of self so that the individual can negotiate what is happening in their lives and construct new behaviours (Pearson, 2011).

Developing a SoC about a current state and facilitating the return of an individual to a sense of wholeness is one that resonates with coaching practice. In practical coaching terms this requires bringing the coachee back to their ‘primordial centre’, and in order to do this it requires the coach to develop within the coachee a sense of being away from the centre and on the ‘periphery’ (De la Vega, 2009 p.163). A process suggested by De la Vega that helps to achieve this is one familiar to coaches as it falls into the realm of ‘challenging their assumptions...bring them to the truth’ (De la Vega, 2009 p.163). The state of truth may result in seeing how we contribute to our own wellbeing and discover ways in which this may be improved upon (Wissing, 2002). By facilitating possibilities of a new wellbeing world view, the coach can encourage positive goal orientated (Edwards and Cooper, 1998; Luthans, Avey, Avolio & Peterson, 2007; Pearson, 2011) actions that re-engage the coachee with a sense of self-determined purpose. The authors suggest that the coach is in a position to act as one of the ‘salutary resources’ (Antonovsky, 1990) available to an individual who wishes to improve their wellbeing and positive life outcomes (Passmore and Fillery-Travis, 2011). The potential is not just to enable individuals to better cope with the ‘river of disease’, but to help them to detect and manage stressors that may lead to an undesired state.

Given that coaching is recognised to incorporate a range of disciplinary approaches, this paper details the development of the Salutogenesis coaching model and explores how it may be a useful tool in coaching practice. The study coaches have used the Salutogenesis coaching model within their particular area of coaching expertise, this incorporates executive coaching, life/identity coaching and eco-coaching. Testing the model was based on the premise that its primary purpose was meant to “enhance wellbeing, improve performance and facilitate individual and organisational change” (Grant, 2005 p.1).

**Salutogenesis and the study coaches practice**

**Executive coaching and Salutogenesis**

Within the realm of executive coaching, much of coaching practice focuses on working with clients to deal positively with workplace stressors. Often brought about through organisational change (Steger, 2009; Seligman, 2007), these unwanted stressors tend to surface, and are experienced when individuals find themselves in a state of professional flux and uncertainty (Ladkin, 2010; Campbell, 2009, Cilliars and Ngokha, 2006). During this hiatus new roles and responsibilities have yet to be decided and defined (Gray, 2011). Facilitating the development of individuals through this period may be achieved both by providing opportunities for individuals to see patterns (Steger, 2009) in previous career choices, by encouraging a positive mindset towards goal setting (Bennis & Thomas, 2002; Grant, Curtayne & Burton, 2009; Osman, 2012) and guiding individuals towards a more desirable way of being (Grant, 2005; Pearson, 2011).

Inculcating a positive mindset through Salutogenesis is gaining ground in organisational development practices (Cilliers & Kossuth, 2002; Carr, 2004) and, because of its theoretical basis (Cilliers & Ngokha, 2006), alignment with executive coaching (Aked, Marks, Cordon & Thompson, 2005).
2008; Grant, et al, 2009, Govindji and Linley, 2007, Sonn, 2009). This is because executive coaching involves encouraging a range of positive psychological practices that purport to sustain professional performance (Cilliars and Ngokha, 2006, Hultgren, Palmer and O’Riordan, 2013), and by developing a Salutogenic mindset individuals are able to navigate complex changing environments by maintaining both a strong locus of control (Antonovsky, 1990, Rotter 1990, Cilliars and Ngokha, 2006) and a sense of humanity (Williams, 2012). It is these individuals who are likely to not only survive organisational change, but also to flourish.

Eco-coaching and Salutogenisis

Eco-coaching is a new approach that combines coaching with outdoor experiential work, these elements act as a catalyst to stimulate deep changes in personal responses towards our natural ecosystem. Eco-coaching aims to encourage personal, holistic and sustainable health and to explore personal action in sustainability terms. It integrates developmental, educational coaching, therapeutic and facilitation methods to establish an ‘ecological sense of self and place’ (Kickbusch, 1996 p. 5). Within eco-coaching Salutogenisis aims to align the mental, physical and social well-being of humans with the health of the environment in which we exist. The approach incorporates the concepts of eco-health (Lebel 2003) and mental capital (Foresight, 2008), which have been applied in a variety of situations requiring behaviour change and personal development. Working with people’s primordial core sense of identity, eco-coaching stimulates individuals to think more about the interconnectedness with nature and our relationship with it, sometimes leading to uncomfortable truths about the choices we all make in our daily lives. Where these uncomfortable truths could in fact distract from being proactive and positive about one’s ability to influence self and others towards more ‘eco-holistic’ thought processes, eco-coaching seeks to enrich the mind with a sense of discovery, agency and hope. ‘Embracement’ (Burls and Caan, 2004) of a wider system becomes possible and a realisation that anyone can act to change and influence the status quo is fostered. From this stance the coachees are helped to develop a positive psychological state, which promotes confidence to make the necessary effort to succeed in the challenging task of persuading others to become more sustainable (Luthans et al, 2007; Avey, Luthans and Jensen, 2009). This ‘positive psychology capital’ (Luthans et al 2007; 2010) development in the coachee is conducive to sustaining their resolve and builds resilience to attain success.

Eco-coaching reflects ‘the health-promoting benefits of participatory, empowering, multi-stakeholder processes’ highlighted by Parkes and Horwith (2009, p 8), and, with the addition of an ‘eco-salutogenic’ dimension through reflection, it could encourage and motivate ‘green health literacy’. The potential for this is to facilitate new ways of working, which will encourage further development of sustainable health actions.

Life coaching and Salutogenisis

Salutogenisis as a model within life coaching has been found to be useful to reduce stress and to help coachees gain control of their own life (Gyllensten and Palmer, 2005). The Salutogenic model also aligns with Kauffman’s (2006) suggestion that “diagnosing” strengths and finding ways to reliably measure and assess changes over time, contributes to the coachee moving forward from a position of strength. Wood, Linley, Maltby, Kashdan, & Hurling (2011) and Biswas-Diener (2010) found that people who use their strengths are more likely to achieve their goals. Determining the coachee’s values and beliefs are crucial in life coaching as it is this that depicts the life map of each client, his or her perception of the world and the blood line for a decision-making process (O’Connor and Seymour, 1990). Defining values as moral principles or accepted standards of a person or group shows the way people build their lives, sustaining congruence with values may determine happiness and satisfaction and how we value others (Chippendale, 2001). For life coaching, values and beliefs are at a person’s core or the primordial centre and it is here that coachees can develop a SoC (Antonovsky, 1990) with the world.
In the modern world stress is omnipresent, but not all individuals have negative health outcomes in response to stress. Even being exposed to potentially disabling stress factors some people are in good health and managing their situations comfortably. Antonovsky described different influences on people’s survival and what enabled them to adapt and overcome the most severe life-stress experiences; key to achieving this is the ability to perceive events as salutary through what have become known as ‘Generalized Resistance Resources’ (GRR). A life coach supports the coachee to locate GRR’s and develop a SOC by inculcating self-belief of being in control in new and challenging situations. These factors are crucial for life coaching processes and enable coachees to either gain control of events, or to develop a reliable working strategy to achieve desired outcomes.

**Methodology**

The Salutogenic model was borne out of reflective discussions amongst the study coaches during Coaching Network Continuing Professional Development (CPD) Action Learning (AL) sessions. The study coaches realised that the literature and recent Salutogenic practices incorporated into health and wellbeing initiatives (Aked, et al 2008) aligned with their tacit knowledge of professional coaching practice. This awareness initiated further discussion and exploration of Salutogenisis and ultimately in the undertaking of the pilot study.

The methodology that underpins this study falls within phenomenology and the ‘lived experience’ of the study coaches and coachees (Schwandt, 1994). Each study coach undertook the dual role of coach/researcher similar to that of teacher/researcher, which is common in Action Learning practice (McGill and Brockbank, 2004). Through a process of ongoing reflective discourse (Brockbank and McGill, 2006) the study coaches developed the Salutogenic model, identified a workable study design and peer reviewed study findings.

**Method**

The methods adopted for the study include a literature review which used the following key words, coaching, life coaching, executive coaching, Salutogenisis, eco-therapy, and health and wellbeing. This provided sufficient material with which to explore the potential for a Salutogenic coaching model.

The method of sampling for the study was that of purposeful sampling (Honigmann, 1982). Study coachees were accessed by the study coaches through their client base; clients were invited to be part of the pilot study and in doing so became ‘study coachees’. Data collection was facilitated by the study coaches gaining permission from the study coachees to take notes that pertained to research and not just a coaching report. Each of the study coaches collected data immediately after each of the coaching ‘episodes’ and, in order to gain a sense of face validity, the interpretation of each episode was opened up for confirmation/disconfirmation with the study coachees. In addition, each study coach recorded their thoughts in a reflective journal. Data from both sources were subsequently explored through the use of mind maps and analysed at intervals by each of the study coaches, over a period of 8 months. This formed part of the overall reflective iterative process (Schwandt, 1994; Steier, 1991; Thomas, 2004).

**Data analysis**

Data analysis consisted of searching coaching notes and journals for themes and trends that indicated whether the three mains aspects of the constructed model may have had a positive effect on the study coachee’s wellbeing, and whether the study coaches themselves found the model useful in their coaching practice. This clustering of data centred on whether the study coachees arrived at an understanding or appreciation of what lay at their ‘primordial centre’, and how they may have ended up at the periphery from this. It also explored what might alert them to being away from their primordial centre in the future and, finally, whether the metaphor of a pathway that included...
developing a SoC through ‘comprehension, management and meaning’ was helpful in moving them towards a better state of wellbeing.

**Development and testing of the model**

The model developed for this study was primarily drawn from De la Vega’s (2009) model of the arc of ontological coaching and Antonovsky’s seminal work on developing a sense of coherence. The Salutogenic model underwent 5 iterative cycles before field testing and was constructed (Schwandt, 1994) as an empirical representation of the lived experiences and perceptions of the study coaches. The model has three significant features as shown in Figure 1: the first is located at the centre and depicts the ‘primordial centre’ or ‘best self’; the second is the ‘periphery’ and is where you will become alerted to that something is wrong with your chosen path; the third is the ‘pathway’ that takes you back to being or realising your full potential.

![Salutogenic coaching model](image)

**Fig.1 Salutogenic coaching model.**

Through each of the 5 cycles the elements of ‘comprehensibility, manageability and meaning’, known to contribute to a Salutogenic mindset, were explored by the study coaches. During each discussion a mind map was constructed to represent the lived experiences of the study coaches in relation to their previous and current coaching practice. Over time this exploration enabled the study coaches to develop indicators that would be used within the model. So, for example, during the testing of the model the study coaches looked for where the model supported:

- Comprehension and understanding of current situation - ‘I know what is happening and I can reasonably predict some future outcomes’

- Manageability of current situation – having a locus of control – being resourceful- becoming resilient

  ‘I know what can I do about it, I have skills, support and resources that will bring things into my control’

- Finding meaning in current situation – self efficacy and self-determination and potency ‘I know why is this happening, and I can learn from it, there is a good reason or purpose to care about what happens’

The model was tested by each of the study coaches within their professional area of practice. Each study coach used the qualitative experiential and reflective case study approach (Fazey and Marton, 2002) and each of the study coaches went through the same coaching/research process. This process

The current and full text archive of this journal is available at [http://business.brookes.ac.uk/ijebcm](http://business.brookes.ac.uk/ijebcm)

International Journal of Evidence Based Coaching and Mentoring
Vol. 12, No.2, August 2014
Page 45
enabled testing of the model for usefulness and positive outcome in relation to the perceived wellbeing of the study coachee. Once established, the coaching relationship facilitated both the testing of the model and the collection of data.

The strength of the overall study lies in the fact that it was triangulated across three cases, each focusing on a specific coaching speciality and each with a different case study sample size. The study coaches also used a range of data sources that included note taking, reflective journals and observations in the field. Generalisation of the study findings are however restricted due to the fact that the study used only small purposeful or 'judgment sampling' (Honigmann, 1982, p. 80). Study one used one study coachee and detailed the coaching experience over 10 sessions. Study two used a sample of 8 study coachees that were university staff and students from various departments who engaged with the eco-coaching programme for 12 weeks. Members were self-selected as they had a particular interest in exploring the domains of eco-health and eco-coaching. Study three used a sample of three study coachees who were coached over a period of three months.

Permission was sought from all study coachee participants to engage with a process that required explicitly testing the Salutogenic model and the process itself. All study coachee participants were assured anonymity, that all data would remain confidential, and that they would be able to confirm/disconfirm data so that findings would be accurate and trustworthy. All study coachees were informed that they could withdraw from the study at any time and continue solely with coaching sessions if they wished. Permission to publish findings was gained retrospectively after study coachees had been offered the opportunity to confirm and edit the data findings.

Findings

Case Study One: Salutogenesis and resilience in executive coaching

For this single Case Study the Salutogenic model was tested with Ms S, a successful professional businesswoman who had initially requested coaching in order to feel confident ‘presenting business opportunities to clients’. The backdrop to the request was that Ms S’s business needed to adapt to market trends and was undergoing significant change. During the transition Ms S had seen an opportunity to increase her client base if she could develop her skills in public speaking and presentations. Ms S was a senior business partner but her leadership had traditionally operated from behind the scenes. Taking centre stage and representing the business in a climate of financial uncertainty was something that had caused her to challenge her long held assumptions about her leadership and management skills. Through our initial discussion it became apparent that the opportunity of changing her leadership style had resulted in feelings of being ‘overwhelmed’ and was negatively affecting her sense of wellbeing (Steyn, 2011).

Ms S was coached for 6 sessions over a period of 10 weeks. In-between coaching sessions Ms S was given ‘homework’ designed to reframe (Goffman, 1974) negative perceptions. The Salutogenic model was used during the sessions and the client was provided with the model and encouraged to use it to identify when/if she found herself moving away from her desired primordial centre. Ms S’s path to finding ‘comprehension, management, meaning’ (Sense of Coherence) was revisited in each coaching session and feedback to the client was framed in positive terms, this was designed to augment the Salutogenic approach of focusing on a positive mindset that contributes towards resilience (Palmer, Cooper, & Thomas, 2003, Govindji and Linley, 2007).

During the first coaching session Ms S was asked to identify what she deemed to be her ‘primordial centre’. Once this had been identified, Ms S was asked how she could recognise when she had moved away from it towards the ‘periphery’. Ms S initially stated that her primordial centre was ‘to be a good public speaker’ and that her periphery was one where ‘I don’t speak out, it means I am not criticised but I also don’t get the reward of knowing what needs to be done’.
A further exploration of being on the periphery surfaced in Ms S ‘feeling overlooked’, ‘feeling frustrated’, ‘feeling less worthy’. These personal features of being on the periphery proved to be important because, once these had been identified, Ms S could be encouraged to view these in a positive light. This was achieved by supporting Ms S to reframe the signal that her peripheral feelings were sending her a positive message to act.

Once the primordial centre and periphery had been established, a Salutogenic path between the two could be determined. In essence what this meant was that Ms S could use planned positive actions to progress towards her ideal state (De la Vega, 2009). The pathway was marked by key questions that focused on what Ms S comprehended of the situation; how she would manage the situation and what meaning she would find from ending up in the periphery, and in ultimately finding her way back to her primordial centre.

The process enabled Ms S to comprehend and become adaptive to (Bennis and Thomas, 2002) the emerging emotions and challenges that surfaced during the sessions (Gray, 2011). These ranged from realising that she was afraid her new visibility would render her vulnerable, discovering that she lacked ‘ownership’ of her voice so that her usual confidence was challenged, and recognising a mindset which had meant she steered away from leading from the front and had been less authentic as a leader as a result (Ladkin, 2010). By comprehending how she had moved away from her primordial centre helped us to revisit what the centre was for her. This time the response was different as Ms S stated that in reality her primordial centre was to be ‘a real leader, to be seen, to be myself’. In essence Ms S’s newly developed SoC had led her to discover authentic leadership lay at the heart of her primordial centre.

In order to facilitate Ms S to become independent of the coaching relationship, a process of identifying resilient cognitive and behavioural patterns were encouraged and practiced. These included the projection of a positive self-image, engaging the support of others, practicing leading publicly and rewarding her efforts, especially when she had experienced setbacks (Fredrickson, 2001; Grant, Curtayne and Burton, 2009). Resilient behaviour, such as moving forward with her action plan even when feeling afraid or uncertain, or persistence when presented with obstacles was highlighted during coaching sessions and used to reinforce a positive self-image (Aspinwall and Staudinger, 2003). To augment resilient cognition and behaviour (Osman, 2012) Ms S was asked to do two things. First she was given the Salutogenic model and asked to record if she felt herself moving towards the periphery and what she had done to move back towards her primordial centre. Secondly Ms S was encouraged to keep a reflective diary in which to record positive thoughts she had about planned changes, the support and resources she was able to access to achieve change and lastly to identify where her experience might be used to help others.

**Outcomes of study one**

Some of these were self-reported outcomes, some were observed by the study coach who attended sessions where Ms S presented in public.

The study coachee’s progress began initially through coaching role-play sessions in which she assumed the role of leading meetings and presenting to a new customer/client group. This was followed by the study coachee setting and attaining new goals (Cilliars and Ngokha, 2006) of speaking publicly by making short speeches and announcements at meetings. During these critical phases the study coachee referred to the Salutogenic model to ascertain where she felt she was on her designated pathway and was encouraged to gain feedback from external sources as to her change in leadership behaviour (Kossuth and Cilliers, 2002; Gray and Williams, 2012).

The coaching sessions followed the Salutogenic approach of focusing on the positive feedback Ms S had received and the positive feelings she had from it (Cilliars and Ngokha, 2006; Seligman, 2007). When the study coachee felt there was ‘room for improvement’ the opportunity arose for her to move...
forward and develop her leadership skills further. Ms S approached this by undertaking shared presentations with business partners to potential clients and then leading presentations to potential clients. Having and promoting a new positive sense of self, which included changing how existing clients viewed Ms S’s leadership, resulted in her developing and presenting new workshops to existing clients that introduced them to a new product range.

While the change in Ms S’s leadership behaviour was made explicit through a range of practical actions, the pivotal outcome came when Ms S reached a critical stage in her own understanding of self (Gray, 2011). This occurred during a coaching session in which we were revisiting what lay at her primordial core and culminated in Ms S declaring that ‘this isn’t just about learning how to speak publicly is it, it is about being heard but it also about being seen to be heard!’ By reaching this new understanding Ms S gained a SoC about her true situation and was able to restate her leadership goals accordingly.

**Discussion of study one**

Studies undertaken on how having a Salutogenic mindset has contributed towards a state of well-being are well documented (Fredrickson, 2001; Wissing, 2002; Cilliars and Ngokha, 2006, Grant, 2012; Steyn, 2011). Taking Salutogenic theories and putting them at the centre of executive coaching practice, aligned with the positive stance upon which coaching is premised (Peltier, 2001, De la Vega, 2009), and contributed towards a positive presentation of self (Goffman, 1959; Weick and Sutcliffe, 2007; Gray and Williams, 2012) for the study coachee. This suggests that incorporating the Salutogenic model within coaching practice was significant in achieving a desired behaviour change (Pearson, 2011). As the weeks progressed the Salutogenic coaching model was useful in surfacing constructive and destructive patterns of behaviour; these insights became central to coaching a new way forward (Palmer, et al, 2003, Ladegård, 2011) and were recorded as actions on the ‘pathway’ back to the primordial centre. In addition, use of the Salutogenic model produced evidence that enabled both study coach and coachee to evaluate progress, and to embed resilient thought and behaviours (Fredrickson, 2001). The Salutogenic model combined stimulating actions with reflective thinking (Ducharme, 2004); over time this may contribute to longer term resilience through self-directed neuroplasticity (Schwartz, Stapp and Beauregard, 2005; Mezirow, 1990).

**Case study two: Salutogenisis and eco-coaching**

In this case study the Salutogenic model was tested within an eco-coaching pilot programme for university staff and students with the aim of developing a collaborative ‘green health literacy’ philosophy across the university population. The programme ran for 12 consecutive weeks and members self-selected from a previous university green space collaborative group.

The approach was one of team coaching, with the specific aim of helping the study coachees to discover and seize collective resources towards more effective and coordinated wellbeing (Hackman & Wageman, 2005). The Salutogenic model was used during the team coaching sessions and study coachees were encouraged to use the model to ascertain if they found themselves moving away from an identified primordial centre.

The theories of *biophilia* (Wilson, 1984) and *attention restoration* (Kaplan & Kaplan, 1990) helped to explain to study coachees that they are naturally drawn to being in a healthier frame of mind and body when in direct contact with nature. In a metaphorical way their coaching journey relied on working from ‘roots to canopy’ (Burls, 2012), and included developing a personal growth action-plan that was borne from their coaching experience. The study coachees were encouraged to use the analogy located within the Salutogenic model of a journey from the periphery position, towards a more proactive and enabling position of sustainable healthy living.

A non-judgemental exploration helped the study coachees to see where their ‘roots’ of thinking about personal wellbeing lay, what they may have been ‘feeding off’ in the social and personal sense,
and what may become part of their behaviour and values (Wahl, 2006). Being more proactive about personal well-being, by going further in the discovery of what lay at their primordial centre, was the key to the coachees’ own exploratory questions. These questions were used to trigger discussion and helped participants to reflect on their individual interests, and how they may translate into actions such as an interest in growing healthy food and/or taking up a healthy pastime. By using a non-threatening approach (Blakey & Day, 2012) to discover how sustainable living is healthy and is self-directed, the study coachees began to develop a ‘Salutogenic’ attitude (Wahl, 2006). This attitude was surfaced by a team coaching approach (Hackman and Wageman, 2005), which helped study coachees openly share outcomes that they might derive from their reflections. Through this they began to detect new leverage points (Meadows, 2008) for sustainable behaviours within their organisation and at home.

**Outcomes of study two**

Overall the study coachees evaluated the Salutogenic coaching model as enabling them to gain a new perspective and understanding of the importance of wellbeing through eco-health (Lebel, 2003).

Through team coaching (Hackman and Wageman, 2005), the Salutogenic model facilitated a co-produced and more practical sustainable attitude to everyday work and personal lives. The study coachees stated that they were now able to link their own primordial core health beliefs to the principles of well-being (Goodwin, Mills & Spretnak, 2001) and to the eco-system. The study coachees also reported that they now felt confident to influence work colleagues and family members towards behaviour change that aligned with theirs. In short, the study coachees were able to connect health benefits with a self-elected role as pre-emptive and pro-environmental wellbeing change agents (Steg and Vlek, 2009). The study coachees also stated that they felt that the Salutogenic coaching model enabled them to gain new skills, which would help to sustain eco-health activities in the future.

**Discussion of study two**

Using the Salutogenic model helped the study coach to better locate the processes of behaviour change in the coaching episodes of this group. The journey was reflective in nature and developed through the progressive discovery of personal values and behaviours, in the interface afforded through team coaching (Hackman and Wageman, 2005). Members of the group started from varied personal positions of engagement with the ecosystem. Some had a blurred understanding of the reciprocal Salutogenic potential of a healthy person and healthy ecosystem, but over the 12 weeks programme they were able to assess their levels of self-determination and self-efficacy in developing or strengthening their resolve to be or become ‘systemic thinkers and actors’ (Burls 2012). By using the Salutogenic coaching model the study coachees were able to assess their own and others’ comprehension of the level of choice and locus of control (Rotter, 1990). From here they found themselves being able to set ‘courageous goals’ (Blakey & Day, 2012), which included being instrumental in influencing others to protect their ecosystem’s health. Ultimately the study coachees expressed that they should work together to evolve their own understanding of the ‘Salutogenic attitude’ (Wahl, 2006). The Salutogenic coaching process guided the study coachees to a renewed sense of coherence with their own ecological ‘best self’ (or primordial centre), which in turn developed an ‘ecological mindset’ to be taken forward in their work and home lives.

**Case study three: Salutogenisis and life coaching**

In this case study the Salutogenic model was explored with three study coachees who had approached the study coach for professional life coaching. Duration of coaching for each person lasted for a three month period. The Salutogenic model was used to structure and guide each of the coaching sessions. The coachees were asked to use the model in between sessions in order to locate their position in regard to the primordial centre and periphery over time. This was augmented by asking the study coachees to state their desired goals at the beginning of each session, and to chart their progress towards these at the beginning of each new session.
The initial coaching session for each of the study coachees began by establishing their primordial centre by clarifying their values (Chippendale, 2001; Wahl, 2006). The process was not simple as the study coachees were addressing these issues for the first time in their lives, and as values are abstract notions the study coachees had to adjust to a reflective way of thinking. Investing time to surface values was important to enable the determining of “how strengths are manifested”, (Biswas-Diener, Kashdan & Minhas, 2011). This was followed by asking the study coachees to establish their values in priority order to determine which of the surfaced values lay at the heart of their primordial centre. Through this process the study coachees assessed whether they were true to these values, or whether they may have been away from them on the periphery. While each study coachee considered ways in which to develop a SoC in relation to their current circumstances, each naturally appeared to focus on a separate element within the SoC paradigm (Cilliars and Ngokha, 2006). In order to convey this, the outcomes from each of the coaching sessions are discussed under each of the relevant headings.

**Comprehensibility as a component of SoC – a belief that you can understand events in your life and reasonably predict some outcomes in the future** (Cilliars and Ngokha, 2006; Steger, 2009)

During the coaching session Ms T discovered that her desire for adventure was very strong and negatively affected her business as she did not like routine. Ms T would do her best to win a contract and would conduct sophisticated negotiations with a new potential client. This activity unlocked her desire to be ‘risky [and] adventurous’ but then Ms T avoided proceeding with the required work since this led to routine. By assessing and comprehending (Steger, 2009) her values at her primordial centre Ms T discovered that ultimately these amounted to ‘adventure and a sense of freedom’. By using the Salutogenic model Ms T was able to see for the first time the imbalance of her current state and how this was affecting her wellbeing. She began to realise that being on the periphery from her primordial centre led her to pursue adventure in her work. By compartmentalising her “adventure” and “routine” activities she could better manage them by filling the “adventure” compartment the moment it was emptied from non-work related sources.

As a result Ms T developed a meaningful understanding of her primordial centre. Ms T addressed the three components of SoC, comprehensibility, manageability and meaningfulness but it was through her growing comprehension (Steger, 2009) that it became clear to her why she was not being true to herself, and repeating a pattern that was ultimately destructive. Comprehending this led to empowerment (Crampton, 2000), and developing a more balanced systematic approach to her business operations, increased both her self-efficacy and her Locus of Control (LoC) (Pounds, 2012).

**Manageability as a component of SoC - a belief that you have skills, ability, support and resources necessary to manage events and take care of things within your control** (Evered, and Selman, 1989 Cilliars and Ngokha, 2006)

During the initial coaching session, Ms W addressed an overriding feeling of helplessness and lack of control in her life (Pounds, 2012). We used the Salutogenic model to direct Ms W thoughts towards eliciting her core values, and through this process Ms W realised her core strength (Evered and Selman, 1989; Wahl, 2006) of resourcefulness. This enabled Ms W to re-establish her LoC and had the effect of increasing her confidence to deal with her life situation and reduce associated stress (Gyllensten and Palmer, 2005). A picture of resourcefulness was practically co-constructed (Linley & Garcea, 2011) by drawing on Ms W’s success as a teacher, and using specific examples of planning lessons, providing relevant learning material, and sustaining interest and motivation of the students. This process led Ms W to reconsider and deal with issues she had perceived as out of her control, such as gaining parental support for her students. Together we were able to devise her periphery to centre pathway action plan, which resulted in parents becoming more actively involved in supervising her students’ learning, and paying for tuition on time.
The process culminated in Ms W gaining a SoC; manage a ‘totally unmanageable’ situation and being able to sleep as she was free from ‘worrying all night’. By identifying and establishing Ms W’s resourcefulness (Linley & Garcea, 2011), she was able to deal with other life situations with a sense that these too could be managed and that a positive meaning could be found in life challenges.

Meaningfulness as a component of SoC - a belief that things in life are interesting and satisfactory, that events in life are really worth it and that there is good reason or purpose to care about what happens (Antonovsky, 1979; Steger, 2009)

Ms. F’s request for coaching sessions was motivated by her feelings of being lost in life ‘working day after day, drifting, dreading weekends’. By utilising the visual aspect (Antonovsky, 1979) of the Salutogenic model we were able to draw out her core values and use them to determine what lay at her primordial centre. This culminated in Ms F depicting someone who needed to live a creative life and acknowledging that supporting others to reach their potential had taken priority over her own creativity. By ignoring her true self Ms F was experiencing a lack of direction and confidence. The coaching sessions were dedicated to elicit her creative passion, unlock desires in order to pursue it, and to give Ms F the skills to realise when she was on the periphery from these.

The coaching process enabled Ms F to make crucial changes in her life which identified her need for a creative life at the heart of these.

Outcomes of study three

Overall each of the study coachees gained benefit from using the Salutogenic model and it enabled the coach to structure each of the coaching sessions in such a way that the process remained focused and coherent.

Once each of the study coachees had established their primordial centre it was easy for each of them to develop an action plan that facilitated the move from the periphery to the centre. Each of the study coachees reported feeling more positive and proactive in finding new ways to achieve their desired goals.

1) The study coachee ‘Ms T’ stated that she had realised a new perspective (Cilliars and Ngokha, 2006; Steger, 2009) of how to conduct her business, and this included follow-up strategies to deal with her clients. She also reported that using the Salutogenic model helped her to balance her business and personal life adventures which would contribute towards sustainability in the future (Sonn, 2009).

2) After reporting feeling a ‘new sense of empowerment’, study coachee ‘Ms W’ successfully introduced new practical strategies into her business. The study coachee relayed that she had found a new sense of herself by realising she had the power (Linley & Garcea, 2011) to move from the periphery to the primordial centre, which made her ‘even more determined to succeed’.

3) By using the Salutogenic model study, coachee Ms F stated she was able to reassess her life plan. She kept a reflective diary from the coaching sessions which she used to describe in detail the values at her primordial centre, and all the positive feelings and thoughts connected with that (Passmore and Fillery-Travis, 2011; Seligman, 2007).

Discussion of study three

The coachees in this study stated that they felt more empowered, in control, motivated and liberated from worries. The author suggests that the Salutogenic model acted as a superior force (Antonovsky, 1987), encouraging the study coachees to find an alternative identity that developed with a strong SoC. While each of the study coachees discussed all aspects of the SoC model, each focused on one of the three elements within SoC as being a deficit in their current lives (Antonovsky, 1990). The three study coachees reported that by engaging with the Salutogenic model they were able to make sense of their lives and respond to stressful situations in a constructive way. It brought about
a realisation in them that they could take control of their lives and return to their best self, located within their primordial centre (Antonovsky, 2005). By surfacing GRR’s (Generalized Resistance Resources), and presenting these back to the study coachee, each was able to see that not only was there potential for positive change, but that this relied totally on them as individuals to act. By revisiting previously held assumptions about their lives, each coachee began to reconstruct a new world view that incorporated an understanding of their own SoC.

Discussion of findings

The Salutogenic model underwent testing by three professional coaches in three different contexts. The iterative reflective process enabled the study coaches to discuss emergent themes and consider a range of explanations for the efficacy of the model as tested in the field (Brockbank and McGill, 2006). As a proof of concept the study coaches needed to ascertain whether the Salutogenic model fulfilled the primary purpose to “enhance wellbeing, improve performance and facilitate individual and organisational change” (Grant, 2005 p.1). Part of this purpose was to make the process of Salutogenic coaching simple for professional coaches, in essence there were two key questions: a) did the Salutogenic model work for the study coaches? and b) did it work for the study coachees? Testing of the Salutogenic model did not include comparing it with other models or processes, this study was simply to identify whether the Salutogenic model actually worked in practice.

The study coaches discovered during and after the study that the structured three step process of locating the study coachee’s primordial centre, identifying factors that alerted the study coachee to when they are on the periphery of this, and constructing a pathway back to the primordial centre was made accessible through the visual model. The model was efficacious in as much as it contributed to achieving known constructs within the Salutogenic paradigm (Cilliers and Ngokha, 2006); this resulted in progress towards self-actualisation and sustained resilience at an individual and group level (Carr, 2004; Campbell, 2009). The study coaches also found that, after an initial explanation of Salutogenic terminology, the study coachees found using the Salutogenic model easy to understand, and that it was also helpful between coaching sessions in keeping them focused on a desired positive future state.

What was of particular interest in the data was the range of possibilities the Salutogenic model brings to achieve personal coaching goals. This was identified in the differences in which the study coachees naturally used the Salutogenic model to identify the core of their primordial centres. For example, in case study one the study coachee ultimately identified leadership as being at the core of her primordial centre, in case study two health linked to environmental action lay at the core of the study coachees’ primordial centres, and in case study three adventure, control and creativity. Unlike some coaching, the initial objective was not to identify goals to improve performance, but to facilitate a process whereby the study coachees re-discovered who they were at their primordial centre and then to find a way back. The inference was that by doing so this would improve the wellbeing of the study coachees and, with that, their performance.

There was an assumption by the study coaches that a primordial centre exists in each coachee, that it can be located, and that coachees were prepared to follow the Salutogenic model process. After reflecting on each of the case studies, the study coaches realised that some coachees may be too far from their primordial centre, perhaps caused by serious health issues or life traumas, and in these instances an incremental approach might be adopted to enable coachees to become their ‘best selves’.
Fig 2. Demonstrating the model: incorporating the primordial centres that emerged through the study and the methods used to facilitate the pathway from the periphery back to centre.

The variety of techniques used to facilitate personal change towards ‘comprehensibility, manageability and meaningfulness’ (Antonovsky, 1990; Cilliars and Ngokha, 2006) along the ‘pathway’ were congruent with the professional coaching practice of each study coach. These were, the use of ‘framing’ (Goffman, 1974, Ducharme, 2004) in study one, ‘reflective discussions and mindful approaches’ in study two (Pearson, 2011) and ‘questioning and reflecting’ in study three (Crampton, 2001) and are located within the updated model in Figure 2.

In order to ensure that the findings were valid and reliable the study coaches explored whether there may have been any external influences on the experiences of the study coachees (Brink, 1991) and data analysis was subjected to peer review discussion (Stier, 1991; Sayer, 1992). While it would have been impossible to identify all external factors that may have impacted on the study coachees, for the purposes of this study, the study coaches were able to ascertain that during the study period none of the study coachees had any other form of coaching or therapeutic intervention such as counselling, and all retained the same individual influences from their working and social environment. Apart from the variety of techniques used by the study coaches with coachees on the ‘pathway’, they all provided coaching using the same three step method. Although generalisability is limited due to the fact the pilot test was a small qualitative study (Honigmann, 1982), reliability can be inferred due to the fact that the model was robustly tested in what amounted to a triangulated study (Merriam, 2009).

Conclusion

For the three coaches this has been a positive and rewarding collective and collaborative exercise, which has stretched their competence and provided an opportunity for continuing professional development. It is always a challenge to experiment with new approaches and the expectations of both coachee and coach need to be considered very carefully to ‘protect them from harm’ during the
research. Professionalism, self-awareness and the absolute regard for safety of the participants are at the utmost importance when pioneering new models. The theoretical foundations for the Salutogenic coaching model were robust and were applied with care and attention to ethical and professional parameters. Peer-mentoring was regularly used by the three study coaches to reflect on their work with clients. It was therefore with some relative confidence that they planned, implemented and evaluated their coaching sessions.

The philosophy and research upon which the Salutogenic model was based (Antonovsky, 1979, 1987, 1990; De La Vega, 2009, Cilliars and Kossuth, 2002; Cilliars and Ngokha, 2006; Eriksson and Lindstrom, 2005; Sonn, 2009), support the views of the study coaches that the Salutogenic model not only aligns with the positive psychology that underpins much of coaching practice, but is worthy of further exploration and attention. Since this study was undertaken the Salutogenic model has continued to be used by the study coaches in their professional coaching practice, and they have remained vigilant about the nature of coachees’ evaluation as this will go some way to provide further data. A further testing of the Salutogenic model is planned in order to: a) identify long term benefits from the approach; b) identify what coaching strategies may be adopted in order to enable coachees to locate their primordial centre; and c) evaluate any influences and differences when the Salutogenic model is used with individual and group coaching. However the fact that this first ‘group of coachees seems to have received the model with positive results goes some way to legitimising it as a useful approach. The relative homogeneity of their outcomes and evaluation is encouraging.

References


The current and full text archive of this journal is available at [http://business.brookes.ac.uk/ijebcm](http://business.brookes.ac.uk/ijebcm)


The current and full text archive of this journal is available at http://business.brookes.ac.uk/ijebcm

International Journal of Evidence Based Coaching and Mentoring
Vol. 12, No.2, August 2014
Page 57


Dr. Dee Gray is the Director of grays, which is based in North Wales, and is the founder and leader of The Coaching Network. Dr. Gray’s coaching practice focuses on workplace wellbeing and performance improvement. Dr. Gray is currently authoring ‘*Coaching for Wellbeing in the Workplace – a beginner’s guide*’.

Dr. Ambra Burls, FRSA, is Vice Chair and Fellow of UNESCO UK Man and Biosphere (MAB) Urban Forum. She is an Ecohealth/Green Health and Eco-coaching practitioner; Ecotherapist; Chair of the National Parks and Wellbeing Forum Chair of the Human Health Group for the UK Wildlife Gardening Forum supporting the Centre for Sustainable Healthcare/Outer Space/NHS Forest.

Marina Kogan is the business owner of Kogan Coaching. Originally a teacher, interpreter/translator in Siberia, Marina is now an international businesswoman. Marina’s coaching focuses on Life Coaching, and contributing to the organisational development of all businesses. Marina is lead for International Coaching World, a SIG of The Coaching Network.