Mini Review

Sense of coherence and lifestyle in young university adults: review

Abstract

Introduction: Research has shown that the young university student must adopt and effectively develop assets in health, in order to develop a high sense of coherence, which will allow for an adaptive coping to maintain wellbeing and health, and to adopt a lifestyle that promotes health.

Aim: To identify the factors that directly or indirectly affect the young university student to strengthen the sense of coherence and thus acquire a lifestyle that promotes health.

Methodology: Review of original articles in Spanish and English, systematic search in databases: Virtual Health Library, Scientific online e-library and Google Scholar, use of keywords from Health Sciences Descriptors, i.e. 'sense of coherence, students, young adults and lifestyle'. Seven original articles were analysed.

Results: The sense of coherence related to the lifestyle of young adults can be negatively affected when they are single, do not work, are women, are 18-21 years old, suffer from sadness and anxiety, consume alcohol, tobacco and illicit drugs. The sense of coherence positively related to lifestyle, to general and psychological health, and it can also predict students' quality of life.

Conclusions: The sense of coherence allows to identify young university students' health assets, with the aim to modify a lifestyle that promotes their well-being, and contributes to improve their health and quality of life.

Keywords: sense of coherence, student, young adult, lifestyle

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Introduction

The sense of coherence (SOC) is a personal willingness that allows people to value life events as understandable, manageable and meaningful.[1] Young adults must show their ability to receive and evaluate their experiences, so that they can act constructively in relation to their health.[2] Salutogenesis aims at 'providing the necessary knowledge to people and to empower them, so that they can maintain their health in good condition.[3] Young university students' health shows alarming figures that affect their health, due to the internal and external determinants to which they are exposed,[4] and that directly influence the quality of their personal health and quality of life.[5] This age group is exposed to multiple factors resulting from a globalized world, experiences a demographic transition, environmental changes and the growing use of new communication technologies,[6,7] exposing them to the adoption of unhealthy or risky behaviours.

No communicable chronic diseases are a latent threat that affects the entire population,[8] affecting young women and men indistinctly.[9] However, this problem can be prevented at early ages, such as adolescence and young adulthood, by modifying behaviours or behaviours linked to young people's lifestyles, such as physical inactivity/sedentary lifestyle, inadequate nutrition that can trigger malnutrition, overweight or obesity, tobacco, alcohol and illicit drug consumption, risky sexual practices (without protection), among others.[10] These health risks constitute "one third of the years of healthy life lost worldwide," meaning that they reduce healthy life expectancy on average of "about five years in developing countries and ten years in countries developed ".[10]
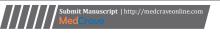
It is important to consider that lifestyle is influenced by multiple factors such as internal (personal, biological and psychic) and external factors (physical and social environment).[11] In addition, we must recognize that the levels of influence of the environment on the lifestyle of individuals come from an direct level, such as family, work environment and friends, to a macro level influenced by social aspects, values and beliefs that intervene in the person and in all the components of the social system,[11] resulting in behaviours that can promote or harm health.[12] Therefore, it is important to promote healthy behaviours in university students, which positively influence their health by performing actions that affect the probability of obtaining physical, physiological and psychosocial results in the short or long term that maintain their physical well-being, their longevity and improve their quality of life.[13] In addition, healthy and better prepared people are essential for individual and collective development.[14] The main objective was to identify which factors directly or indirectly affect young university students at strengthening the sense of coherence for the acquisition of lifestyle that promotes health.

Methodology

A review of original articles published in Spanish and English was carried out. These articles were found after a systematic search in databases - Virtual Health Library, Scientific electronic library (SciELO) and Google Scholar, from 2007 to 2017. Keywords used: sense of coherence, students, young adults, lifestyle, and also AND/OR. In order to select articles that studied the sense of coherence in university students, the key words 'sense of coherence', 'university students', 'young adult' and 'lifestyle' in titles, abstracts and articles were referred to.

Then, a selection was made among the preliminary works selected as a sample of university students, using the 19-29 years old young adult age groups as criteria. In situations where the age range was

wider than the previous criterion, the average age of the participants was taken as reference. We excluded research papers that measured the sense of coherence in other populations (adolescents, children, adults with some disease, among others). Finally, seven articles were obtained that met the criteria above.

Results

After reviewing the literature, seven articles were identified and analysed, which are described in Table 1. All the selected articles were descriptive, quantitative, and not experimental. Population: university students from Colombia, Poland, India, Istanbul, Australia, Spain and Iran. Among the most relevant results, it was found that university students who showed a lower SOC were 18 to 21 years old, women, middle-class students, single, students with greater habitual consumption of alcohol and those who suffered from sadness and anxiety. In addition, the SOC showed dependency with academic level, age ranges, marital status and working or not working condition.[15] Students with average SOC levels presented low intensity of healthy behaviours.[16] Other authors did not find significant statistical differences between gender and SOC. However, the student's lifestyle showed a positive correlation with SOC.[17]

Table 1 Results of selected studies

Author/country	Aim	Methodology	Results
Amaya M, Gaviaria GA[15] (Colombia)	To describe the lifestyle, psychological well-being index and SOC of adult students at a university in Medellin.	Quantitative, No experimental, descriptive and cross-sectional.	They showed the lowest SOC among 18-21 years old, women, middle-class, not working, single, more alcohol consumer, sadness and anxiety suffering students. SOC showed a relation with academic level, marital status, age ranges, working or not, leisure time activities, an illegal drug boyfriend consumer and sleeping pills daily consumption.
Binkowska-Bury M, Januszewicz P[16] (Poland)	To assess the relationship between SOC and the intensity of health-related behaviour among university students.	Quantitative, Descriptive Correlational	The SOC average level and low intensity behaviour was related to health. SOC was related to healthy behaviours.
Suraj S, Singh A[17] (India)	To determine the SOC scores and to investigate determinants that promotes students' health behaviours.	Quantitative, Descriptive and cross	Women went to the doctor more frequently due to their health problems and are more responsible about health than men. Men did more physical exercise. They found no statistically significant difference among gender, religion and SOC. They showed a positive relationship between students' lifestyle and SOC.
Peker K, Bermek G, Uysal O[18] (Istanbul)	To examine the association between general resistance resources and SOC in dental students.	Descriptive and cross-sectional.	They did not find a significant association between SOC and students' socio-demographic variables. A strong SOC reported low levels of stress, high levels of social support, better self-perceived health, brushing teeth more frequently, lower sugar intake in-between meals and smoking less frequent than students with low SOC.
He FX, Lopez V, Leigh MC[19] (Australia)	To explore the level of stress culture and to examine the SOC level of Chinese international nursing students who study and live in Australia.	Quantitative Descriptive Exploratory.	Students with a high level of stress culture had a low level of SOC.
Fernández-Martínez E, Liébana-Presa C, Morán AC[20] (Spain)	To research about the relationship between SOC and psychological health in health sciences students.	Quantitative Descriptive.	Men achieved a global higher SOC average. A statistically significant relationship between SOC and both general and psychological health was found. When college students have a higher level of SOC, their health will be better.
Rakizadeh E, Hafezi F[21] (Iran)	To assess the predictive value of SOC as a determinant of students' quality of life.	Quantitative Descriptive.	Marital status was not related to SOC. Married students had significantly higher quality of life scores in psychological, environmental and social relationships. There were strong and positive significant relationships between all SOC components and physical, psychological, environmental and social relationships. The SOC is a strong predictor for students' quality of life.

When examining the socio-demographic variables of the students and the SOC, not a significant relation was shown. When students obtain a high SOC, they show less stress, a higher level of social support, have greater self-perception of health, brush their teeth more frequently, eat less sugar in-between meals and smoke less - compared to students who showed low SOC.[18]

Foreign students who showed a high level of stress culture had a low level of SOC.[19] Among health sciences students, men showed a greater overall average of SOC. Besides this, a statistically significant relationship was found between SOC with general health and psychological health.[20] Among Iranian students, the marital status was not related to the SOC, but being married showed higher scores of quality of life in the areas such as psychological health, environmental and social relationships. We found that SOC is a strong predictor for quality of life in this student population.[21] It is recognized that a university student with low SOC scores is exposed to risky behaviours, such as inadequate nutrition, physical inactivity, excessive alcohol, tobacco and illicit drug consumption, and also suffers from stress and anxiety due to an academic or social burden. Therefore, it is essential to set up some strategies that promote behavioural changes among university students, so that they can determine which decisions could be beneficial or harmful for their health.

Conclusion

The sense of coherence can be easily measured among university students. It allows to identifying their health assets, in order to modify those behaviours that contribute to their wellbeing, improve their lifestyle and lead to a healthier behaviour. It was shown that the SOC was related to healthy behaviours, as it leads to adopting a healthy lifestyle. In addition to this, it can strongly foresee students' quality of life. Among the reviewed articles, there is little scientific literature in Spanish that links healthy lifestyle and the sense of coherence among university students and, especially, there is a lack of research in Mexico in this area.

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Conflict of interest

The authors declare that there is no conflict of interest.

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