

of 0.72 among Indian anaesthesiology post-graduate students.

Another study was undertaken by Marie Holmefur, et al., in which a group of 623 healthy people were examined using Rasch analysis. In conclusion, the SOC's overall measurement qualities reveal that it is a psychometrically sound scale [9,10]. Eriksson, carried out an observational research with a methodical combination of the present existing expertise on salutogenic research published between year 1992 and 2003 to consolidate results on the salutogenic concept, Sense of Coherence (SOC) and its association with Quality of Life (QoL).

A study was conducted to see if there was a link between the Sense of Coherence (SOC) and university students' fear of public speaking. The highest SOC is seen among university students over 30 years old, who have respiratory difficulties, do not indicate dread of public speaking and perceive themselves as more prepared for presentation skills. Given the significant involvement of emotional components in public discourse, it is necessary to consider the SOC as a key coping resource [11]. Efforts will be undertaken through research, education, service provision and the advocacy of healthy practices to enhance the quality of life of the population. Aim of this research is to measure the sense of coherence and health promoting behavior among students of medical and paramedic field.

Objectives

- To calculate SOC of students in medical and paramedic field.
- To assess the stress management part of health promoting behaviors of these students.
- Comparison of the sense of coherence in students of different medical and paramedic field.
- Finding any association between sense of coherence and stress management as a health promoting behavior in these students.

This is a cross-sectional study, undergraduate students ageing from 18 to 24 years of age will be selected and study will be conducted by the department of public health dentistry, Sharad Pawar dental college, Sawangi Meghe Wardha. Male and female candidate were selected for the study from different colleges of medical and paramedic field that is medical, dentistry, physiotherapy, ayurveda and nursing [12]. The sense of coherence scale with 13 items *i.e.*, shorter version in which five items analyze comprehensibility, four evaluate manageability and four assess meaningfulness. In this scale the score ranges from 13 to 91.

CONCLUSION

Only individuals who answered frequently or routinely or a similar choice or who scored 3 or 4 on each question, were deemed to be engaging in health promoting behavior in the HPLP item analysis. The people who answered never or sometimes and had a score of one or

two were judged to be not engaging in the behavior that promotes health. The initial three replies for SOC were given a lower score, whereas the last three were given a better score. The fourth respond was deemed ambiguous. The questionnaire will include 15 questions on stress management component of health promoting behavior.

ETHICAL CONSIDERATION

The DMIMSU institute ethics committee will provide ethical approval. Permission to do the research will be acquired from the university's vice chancellor and the heads of the individual colleges. The research will be briefly discussed on the front pages of the questionnaires and the respondents will be given instructions on how to fill it out. It will also include information on the researcher, as well as assurances that identity and confidentiality would be preserved, as well as the fact that student involvement will be entirely voluntary and confidential. It is assured that the data will only be utilized for statistical analysis. Descriptive statistic will be used to check the SOC and health promoting behavior of the students of different medical and paramedic fields. Kruskal Wallis, test will be applied to compare the difference of SOC between different fields. To find out correlation between sense of coherence and health promoting behavior Pearson's correlation will be applied.

CONFLICT OF INTEREST

None.

FUNDING

Nil.

REFERENCES

1. Rajesh G, Eriksson M, Pai K, et al. The validity and reliability of the sense of coherence scale among Indian university students. *Glob Hlth Prom* 2016; 23:16-26.
2. Super S, Wagemakers MA, Picavet HS, et al. Strengthening sense of coherence: Opportunities for theory building in health promotion. *Hlth Prom Intern* 2016; 31:869-878.
3. Holmefur M, Sundberg K, Wettergren L, et al. Measurement properties of the 13 item sense of coherence scale using Rasch analysis. *Qual Life Res* 2015; 24:1455-1463.
4. Mahammadzadeh A, Poursharifi H, Alipour A. Validation of Sense of Coherence (SOC) 13 item scale in Iranian sample. *Proc Soc Behav Sci* 2010; 5:1451-1455.
5. Gandhi K, Chhabra KG, More R, et al. Impact of COVID-19 and social distancing on mental health. *Intern J Res Pharm Sci* 2020:1469-1472.
6. Eriksson M, Lindstrom B. Validity of Antonovsky's sense of coherence scale: A systematic review. *J Epidemiol Comm Hlth* 2005; 59:460-466.
7. Sharma A, Chhabra KG, Agarwal S, et al. Association between health related quality of life and sense of

- coherence among health professionals working in primary health centers consuming tobacco in Jaipur, India. *J Fam Med Prim Car* 2020; 9:2963.
8. Suraj S, Singh A. Study of sense of coherence health promoting behavior in north Indian students. *Indian J Med Res* 2011; 134:645.
 9. Tyagi A, Kumar S, Sethi AK, et al. Factors influencing career choice in anaesthesiology. *Indian J Anaesth* 2012; 56:342.
 10. Eriksson M, Lindström B. Antonovsky's sense of coherence scale and its relation with quality of life: A systematic review. *J Epidemiol Comm Hlth.* 2007; 61:938-944.
 11. Pantuza JJ, Alexandre IO, Medeiros AM, et al. Sense of coherence and the fear of public speaking in university students. *InCoDAS* 2020; 32.
 12. Nair AR, Prashant GM, Naveen Kumar PG, et al. Dental education: Challenges and changes. *J Oral Health Comm Dent* 2017; 11:34-37.