

## Arts, Health and Well-being

The arts can make a powerful contribution to health and well-being. There are many examples and much evidence of the beneficial impact they can have. This briefing provides an overview of the resources, findings and useable data that show the effectiveness of the arts in promoting and improving people's health and well-being.

### **Key Points**

Arts and health is a wide-ranging field of activity – there are as many ways in which the work is described as there are types of activity. Evidence has been compiled exploring the potential of the arts to impact on health and well-being in a variety of social contexts.

Access to arts opportunities and participation in the arts can dramatically improve health outcomes and well-being, counter inequalities and increase social engagement. As a supplement to medicine and care, the evidence suggests that engagement with the arts can improve a person's physical and mental well-being. The benefits of arts activities are being seen beyond traditional settings, and their role in supporting communities and individuals who would otherwise be excluded is increasingly being recognised.

Four primary programmes have emerged from the existing research as the most common ways people engage with the arts in health: music engagement; visual arts; movement-based creative expression; and expressive writing. Other forms of engagement with the arts include drama

classes and storytelling. With a variety of approaches, we need to consider whether some art-based programmes are more effective than others; whether the impacts can be tied to other important variables and preconditions; and whether health benefits are sustained over the long term.

A lot of arts in health work happens at grass roots levels, in community-based programmes that address both the clinical and social determinants of health. There is a need to scale-up this work and increase public awareness and understanding of the role of arts in health. We need to encourage best practice, shared ethics, research and evaluation, while celebrating and supporting the passion and drive of the many arts in health activities that make a difference. We have an excellent opportunity to do this through the Memorandum of Understanding between the Arts Council of Wales and the Welsh NHS Confederation.





### **Overview**

The creative impulse is fundamental to the experience of being human. This impulse may be expressed through art, craft, creative writing, dance, design, drama, film, music-making or singing, by ourselves or with others, and we are making more creative use of digital media. We may access art by walking around our cities or heritage sites, visiting concert halls, galleries, museums, theatres or libraries. The act of creation, and our appreciation of it, provides an individual experience that can have positive effects on our physical and mental health and well-being.

Participatory arts and crafts activities in community and healthcare settings provide opportunities for people to engage with each other and their own creativity, directly improving their sense of well-being. The arts can reduce stress and increase social engagement as well as provide opportunities for self-expression.

Research demonstrates the benefits of the arts in healthcare in hospitals, nursing homes, community centres, hospices, and other locations within the community. As highlighted in the Arts Council of Wales report, 'Arts and Health in Wales: A Mapping study of current activity', creative arts therapies have been applied to a broad range of physical and mental health issues including post-traumatic stress disorder, autism, chronic illnesses, dementia, neurological disorders, brain injuries and physical disabilities to improve patients' well-being and quality of life.

There are four key areas where we can see the positive impact of arts and health:

Patient Care: The incorporation of the arts into healthcare has a positive impact on patient health outcomes. The arts benefit patients by supporting their physical, mental, and emotional recovery, relieving anxiety and decreasing the perception of pain. In an environment where the patient often feels out of control, the arts can serve as a healing tool, reducing stress and loneliness and providing opportunities for self-expression.

Research also shows that the arts can reduce patients' use of pain medication, reduce their length of stay in hospital and improve compliance with recommended treatments, offering substantial savings in healthcare costs.

Healthcare Environments: The arts create safer, more stimulating, supportive and functional environments in healthcare settings. From architectural design to art on the walls, from access to natural lighting to the inclusion of nature through landscape and healing gardens, the physical environment has a significant impact on reducing patient and caregiver stress, improving health outcomes, enhancing patient safety and overall quality of care, and reducing costs. Evidence suggests that an attractive and inviting workplace also improves job satisfaction for NHS staff.

Caring for Caregivers: Caregivers and patients' family members are faced with the realities of human suffering, illnesses, and death on a daily basis. Arts programming for caregivers creates a common, more normative environment, and offers caregivers an opportunity for creativity and selfexpression that allows them to process their experiences and emotions instead of carrying them home or into the workplace. The Arts Council of Wales found in their mapping report that activities that involved caregivers taking part in art therapy alongside patients often challenged the caregivers' perceptions of what the patient was capable of. In addition, the arts give medical professionals new tools for improving diagnostic and communication skills and can be used to improve communication of key messages.

Community Well-being: Arts in health can benefit communities by supporting the promotion of prevention and wellness activities, improve knowledge, increase self-esteem and develop more effective coping mechanisms. For students in medical and other healthcare fields, the arts can enhance their skills and improve their observational, diagnostic, and empathic abilities.

### Research and evidence

The research around the arts in health settings, and the effectiveness of arts and health interventions, has steadily grown in recent years. These are some of the key findings to date:

- Art enhances the psychosocial treatment of cancer, including decreased symptoms of distress, decreased levels of fatigue, improved quality of life and perceptions of body image, reduction of pain perception, and general physical and psychological health;
- Research with children with cancer indicates that engaging in drawing and painting is an effective method for dealing with pain and other symptoms of illness and treatment;
- Research on art therapy with children with asthma indicates that it reduces anxiety, improves feelings of quality of life, and improves self-confidence;
- Evidence indicates that art stimulates cognitive function in older adults who have dementia or related disorders, and may reduce depression in those with Parkinson's disease;
- Engagement with arts and crafts may reduce anxiety and stress reactions as measured by cortisol;
- Art reduces acute stress symptoms in paediatric trauma patients; and
- Arts and culture can be used directly to improve clinical outcomes.

In recent years, there have been a number of reviews of the benefits of arts interventions on health and well-being. Lelchuk Staricofs' systematic review of the medical literature in 2004 was one of the first robust studies to carry weight with those responsible for delivering health and care services and several reviews have followed.

The remit of these reviews varies – for example, while some are concerned with building a case for the value of art in a specific person's treatment plan, others tend to critically review the evidence available for the involvement of art in healthcare more generally.

In 2014, the UK Department of Culture, Media and Sport, as part of the Culture and Sport Evidence (CASE) programme, researched the social impact of culture (and sport) on communities. They found evidence that the arts and culture are beneficial to both mental and physical health. The study also found that arts and culture can be used directly to improve clinical outcomes and indirectly to support re-integration into society, creating therapeutic benefits through social interactions and the development of skills. Both outcomes have the potential to improve confidence and self-esteem.

When considering the effectiveness of arts and health, many initiatives combine more than one discipline. For example, dance combines music and physical activity. If we are to consider the effectiveness of joining a dance class as an activity that improves patient well-being, it is difficult to know whether the benefit is because of the increased rates of physical activity, or the 'harder to define' effects of music. In addition, joining a dance class involves meeting new people and developing new relationships, which can also improve health and well-being by addressing loneliness and isolation.

The available literature does not show whether an arts activity is thought to be beneficial for treating ill-health or maintaining good health. This is important for reporting purposes because respondents are much more likely to report positively about participation in arts activities if they have been unwell or have had limited engagement with the arts previously. On the other hand, for someone who feels well and engages with arts by regularly listening to music, going to the theatre or as a member of a local crafts group, it is difficult to assess the extent to which their engagement with the arts contributes to their good health.

Finally, most of the literature focuses on the effectiveness of the arts after diagnosis and as part of a patient's treatment plan, rather than on the preventative effects of art on a person's health and well-being. For example, a GP advises a patient diagnosed with depression and anxiety to join a painting class and the effectiveness of this activity is measured by how well the patient's wellbeing improves after attending the classes. However, the research in this example does not consider the extent to which joining a painting class reduces the likelihood of developing a mental health condition in the first place (the preventative effect). This highlights a key challenge in the existing literature around arts and health.

# Different types of engagement and their effectiveness

The great diversity of approaches to incorporating the arts into a person's life for health benefits means there is stronger evidence for some interventions than others.

Even among arts of a similar nature, such as exercise that incorporates music, the quality and robustness of the evidence varies. What Works Well-being, which works in partnership with a range of UK universities as part of the UK Government's CASE programme and considers the indicators that contribute to a person's well-being, found that while the evidence for aerobic hip-hop dancing is described as 'promising', the effectiveness of yoga in reducing feelings of depression is described as 'strong'.

Evidence also suggests that the effectiveness of art therapy on a person's health and well-being depends on external factors relevant to patient and care setting. What Works Well-being found that there was strong evidence for the effectiveness of music in reducing feelings of anxiety and loneliness among palliative care patients but found much less robust evidence for the effectiveness of music therapy for care home residents.

Similarly, there is evidence that in clinical settings, music, visual arts and dance/ expressive movement support the emotional aspects of health and well-being rather than the physical aspects. In schools, story-telling combined with visual art is used most often with children who have experienced trauma, while music is more likely to be the art of choice for students diagnosed with autism or mental health conditions.

### Arts and well-being

Considering the effectiveness of the arts on a person's health is just one component of a much wider research area that looks at how non-health indicators, particularly socioeconomic factors, impact on a person's well-being.

What Works Well-being is an example of an organisation that works towards this broader policy objective. They use their networks with researchers, government departments, think tanks, businesses and not-for-profit organisations to explore the impact of a number of factors on a person's well-being, including housing, infrastructure, unemployment, workplace culture and the arts. In assessing the evidence for arts and health, we need to distinguish between studies that focus explicitly on the effectiveness of the arts on a person's health, and those that consider arts along with other factors.

# The All-Party Parliamentary Group on Arts, Health and Well-being (APPGAHW)

The APPGAHW was formed in 2014 and aims to improve awareness of the benefits that the arts can bring to health and well-being. During 2015–17, the APPGAHW conducted an inquiry into practice and research in the arts in health and social care, with a view to making recommendations to improve policy and practice. Their partners include the National Alliance for Arts, Health and Well-being; King's College London; the Royal Society for Public Health; and Guy's and St Thomas' Charity.

In their report 'Creative Health: The Arts for Health and Well-being' ('Creative Health') published in July 2017, the group presents two years' worth of research and discussions with patients, health and social care professionals, artists, academics, local government officials, ministers and parliamentarians from both Houses of Parliament.

The report makes 10 recommendations on realising the potential of arts in health. These recommendations include:

- That leaders within the arts, health and social care sectors establish a strategic centre, on a national level, to support the advance of good practice, promote collaboration, co-ordinate and disseminate research and inform policy;
- health specialists and other health and care professionals includes accredited modules on the evidence base and practical use of the arts for health and well-being outcomes; and
- That the National Institute for Health and Care Excellence (NICE) regularly examines evidence as to the efficacy of the arts in benefiting health, and, where the evidence justifies it, includes in its guidance the use of the arts in healthcare.

According to the report:

- £1 spent on early care and education amounts to a saving of up to £13 in future costs;
- 79% of people in deprived areas of London live more healthily after engaging with the arts, 77% engage in more physical activity, and 82% enjoy greater well-being;
- An arts-on-prescription project shows a 37% drop in GP consultation rates and a 27% reduction in hospital admissions, representing a saving of £216 per patient. This amounts to a social return on investment of between £4 and £11 for every £1 invested in arts on prescription;
- Music therapy reduces agitation and the need for medication in 67% of people with dementia; and
- Every £1 spent on maintaining parks generates £34 in community benefits.

Creative Health calls for a change in thinking round arts and health: "The arts can make an invaluable contribution to a healthy and health creating society. They offer a potential resource that should be embraced in health and social care systems which are under great pressure and in need of fresh thinking and cost-effective methods. Policy should work towards creative activity being part of all our lives".

In addition to the Creative Health report, the APPGAHW has also worked with partner organisations to produce a range of high-level briefings. These organisations include the Association of Directors of Public Health; the Social Care Institute for Excellence; the National Council for Voluntary Organisations; the Local Government Association; and What Works Well-being. These links showcase the cross-sector and cross-organisational approach that is needed to establish the robust evidence base we need for arts and health in Wales.

# Measuring the effectiveness of the arts on health and well-being

The lack of robust evaluation around the effectiveness of the arts on a person's well-being is partly because it is extremely difficult to record the positive benefits of the intervention in any meaningful or useable way. For example, What Works Well-being's research shows it is very difficult to determine whether a person's employment status or their place of residency has the greatest impact on their well-being.

The same is often true of arts interventions which can combine health benefits, such as increased physical activity levels, with social benefits such as meeting new people and feeling valued by the community. This means we are comparing the effectiveness of arts and health interventions to the impact of a person's employment status and considering which is the most significant to their well-being.

For these reasons, most research on arts and health is based on qualitative data from semi-structured interviews or self-reporting questionnaires. The benefit of this form of data is that it provides a detailed overview of the impact the intervention has had by allowing the respondent to elaborate and justify their comments without being restricted by an existing 'tick the box' style question. The disadvantage is that such data is difficult to translate into measurable, representative conclusions which would be required to inform policy development on a national level.

Another challenge can be that the length of interventions tend to vary, often considerably, which makes it difficult to draw like-for-like comparisons between studies. The time between the start of the intervention and the time the researcher records data is very rarely stated in the literature. This makes it very difficult to know whether the positive effect of an intervention is immediate or realised over time. Many studies discuss the effectiveness of a weekly intervention without making it clear how long it took for the effects to be realised. This is particularly true in cases of substance abuse, where the process of rehabilitation may take considerable time.

Also, there is little consensus around the degree of expertise required to evaluate projects of this kind. Existing material suggests that most North American studies employ specialist art therapists, while in the UK and Australia, professional companies and semi-professional individual artists are more often used. In the Far East and Africa. volunteers tend to undertake this sort of research and are often given a short period of training. There are no evaluations of the effectiveness of different levels of expertise on research outcomes, nor are there accounts of initiatives to train teachers. volunteers or others to continue arts interventions once the external support has been withdrawn.

However, while these challenges exist, arts and health is able to record many of the benefits. For example, while it is difficult to record behavioral and social changes in a person who joins a dance group, such as a greater sense of happiness from meeting new people, changes in their body mass, blood pressure and resting heart rate can be recorded and are useful indicators of effectiveness.

There is a need for longitudinal research and monitoring to evaluate the sustainability of arts and health interventions and the relationship between intermediate and strategic outcomes.

### Supporting and developing the research environment around arts and health

As well as emerging research, it is positive to see that there is greater engagement in supporting organisations and individuals who are working in arts in health. A good example of this is the Artists Handbook, produced by Artworks Cymru, which provides a useful overview of some of the kev issues involved in exploring the value of arts in health and well-being in Wales. These issues include consent, confidentiality and consulting with healthcare staff. The handbook also raises a number of ethical considerations when recording and storing personal and patient data.

What Works Well-being provides a useful list of indicators that contribute to a person's well-being. These include feeling inspired and recognised by an institution; having a sense of belonging; having positive social connections; and feeling part of a local community. Arts and health initiatives address all of these factors

In September 2017, the Arts Council of Wales and the Welsh NHS Confederation signed a three-year Memorandum of Understanding (MOU). The MOU is an opportunity to develop joint areas of work that contribute to our shared goal of improving the awareness of the benefits that the arts can bring to health and well-being. The agreed areas of work will include advancing good practice; promoting collaboration, co-ordinating and disseminating research; and working together to identify how arts can contribute to people's health and well-being.

### Conclusion

There is an expanding body of evidence to support the contention that the arts have an important contribution to make to health and well-being. Currently the evidence is unevenly distributed across the field, is of variable quality and is sometimes inaccessible.

Greater focus needs to be placed on high-quality evaluation of existing projects and initiatives. which would allow for robust comparative analysis. Equally, there is a need for appropriate longitudinal research into the relationship between arts engagement and health and well-being.

The MOU between the Arts Council of Wales and the Welsh NHS Confederation is an opportunity to further consider the impact that being creatively active can have on people's health and well-being.

## How can the Welsh NHS Confederation help you?

Please get in touch if you want further details on any of the issues raised in this briefing. Please contact Nesta Lloyd-Jones, Policy and Public Affairs Manager at Nesta.Lloyd-Jones@welshconfed.org

The Welsh NHS Confederation is the only national membership body which represents all the organisations that make up the NHS in Wales; the seven Local Health Boards and three NHS Trusts.

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