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Culture and Health Time to Act

OPEN METHOD OF COORDINATION

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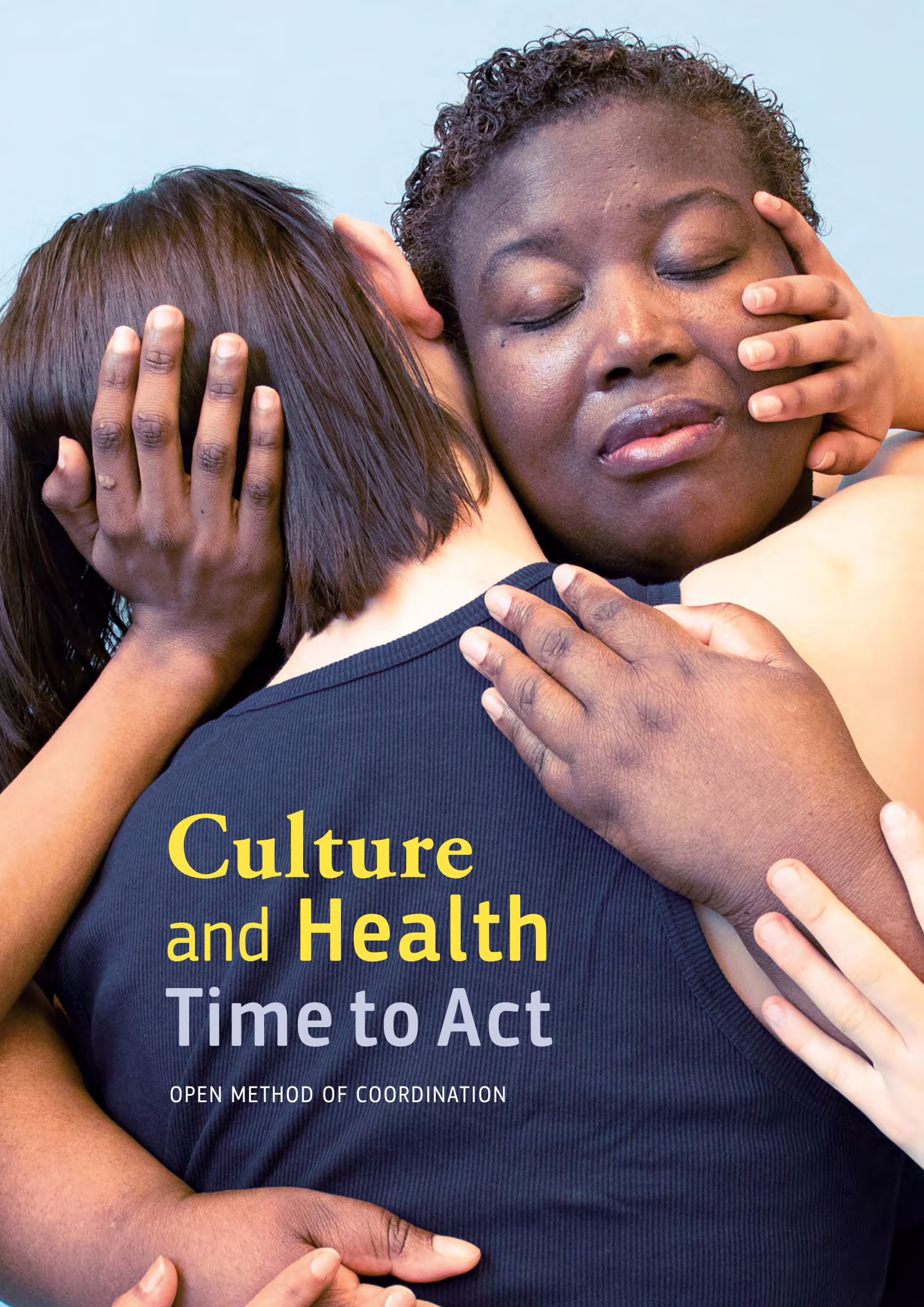

Culture and Health
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CONTENTS

PREAMBLE: SETTING THE SCENE

THE TRANSFORMATIVE POWER OF CULTURE AND HEALTH FOR WELL-BEING THROUGH THE LIFE COURSE

The European Union (EU) Work Plan for Culture 2023-2026 starts by acknowledging that '*culture is an infinite source of inspiration and innovation, a reflection of humanity and aesthetics, our shared language and heritage, and a fundamental part of our identities and communities*'[1].

Mandated[2] by the Work Plan, the Open Method for Coordination Group for Culture and Health began its work in February 2024. Its remit was to recommend how the EU should respond to the international evidence that participation in cultural and creative activities and culture-based interventions supports better health outcomes and improved well-being. There is a growing body of research showing that participation (both receptive and active) in activities such as the visual arts, music, singing, dancing, writing, drama, heritage, craftwork, etc. across the life course is a positive health behaviour[3]. Culture and Health activities have been demonstrated to be beneficial for health promotion, disease prevention, management and treatment of health conditions (including physical and mental health), and social inclusion and cohesion. We remain mindful that, while culture is instrumental, it must never be instrumentalised.

Therefore, the task of this OMC has been to recommend strategic actions that can unlock the potential of Culture and Health across the EU.

As the Group was preparing this report, it has become clear just how timely its work is and the huge opportunity there is in acting now. Against a rapidly evolving policy landscape, the intersectoral field of Culture and Health is poised to make a transformative contribution to key EU policy priorities:

- in health, the drive to develop holistic, biopsychosocial models of healthcare[4], with increased focus on health promotion and disease prevention;
- the safeguarding of the fundamental human right to access culture, as enshrined in Article 27 of the UN Declaration of Human Rights[5], has never been more important in our lifetime in the face of war, displacement and economic upheaval.

These are the drivers behind the recommendations of this report and its vision that:

People living in Europe have access to cultural and creative participation as part of an integral and holistic health journey throughout their lifespan, supporting better health and well-being outcomes and better quality of life for all.

1 Council Resolution, *COUNCIL RESOLUTION ON THE EU WORK PLAN FOR CULTURE 2023–2026*.
2 Council of the European Union, *Open Method of Coordination (OMC) Group of Member States' Experts on Culture and Health Set up under the EU Work Plan for Culture 2023-2026*.
3 Fancourt and Finn, *What Is the Evidence on the Role of the Arts in Improving Health and Well-Being?*; Warran et al., 'What Are the Active Ingredients of 'Arts in Health'Activities?'; Zbranca, R. et al., *CultureForHealth Report: Culture's Contribution to Health and Well-Being. A Report on Evidence and Policy Recommendations for Europe.*; Fancourt et al., *The Impact of Arts and Cultural Engagement on Population Health: Findings from Major Cohort Studies in the UK and USA 2017 – 2022*.
4 Engel, 'The Clinical Application of the Biopsychosocial Model'; Wade and Halligan, 'The Biopsychosocial Model of Illness'.
5 United Nations General Assembly, *Universal Declaration of Human Rights*, vol. 3381.

In the recently published Special Eurobarometer, 87 % of Europeans agree that participating in cultural activities or attending artistic events improves their emotional or physical well-being[6].

And, as the OMC group was finalising its report, the European Commission outlined its forthcoming priorities[7], namely competitiveness, democracy and security. A competitive EU relies on innovation, which in turn needs a culturally rich environment to drive creativity. On the other hand, a competitive EU must also be a resilient one, both economically and socially. This has placed a spotlight on the need for the human dimension to inform policy making and to tackle the mental health crisis in the EU, which is not only costing the EU € 600 million (4% of GDP) annually[8], but also losing the enormous human ability these individuals have to reach their own potential, participate in their own communities and in the wider EU society and economy.

The power of cultural participation to promote civic engagement, social cohesion and collective well-being has been well established and is therefore identified as a key element in sustaining EU democracy. Moreover, a rights-based approach to cultural participation is fundamental to dealing with disinformation and hybrid threats.

In essence, mental health is fundamental to a competitive, inclusive and secure EU. Participation in a vibrant, accessible and inclusive cultural sector has a key role to play in supporting the mental health of the EU population. Engagement in the arts and cultural activities also has a positive impact on digital behaviours and other mental and physical health outcomes for young people and their wider community.

It is in this context that the "**Culture Compass**" has emerged. It is responding to the imperative of developing ***'an overarching strategic framework to guide and harness the multiple dimensions of culture'***[9], placing shared EU culture, heritage and values at the heart of an interconnected policy strategy to ensure the EU has the preparedness, resilience and long-term capacity to cope with an environment characterised by heightened risk and volatility.

Developed over decades, Culture and Health (as one) is a field of practice that has huge potential to support this integrated approach to EU policy priorities. It is rooted in supporting access to culture for everyone (no matter what their health status), helping tackle health inequalities and supporting social cohesion and active citizenship. Crucially, Culture and Health connect these lofty objectives to the local level, where its success is ultimately defined by how it meets the needs – and taps into the lived experiences and values – of individuals and their communities.

6 European Commission DG -EAC, *Special Eurobarometer 562 : Europeans' Attitudes towards Culture*.
7 European Commission, 'Priorities 2024-2029 - European Commission'.
8 OECD / European Union, *Health at a Glance: Europe 2018*.
9 Alina-Alexandra Georgescu, 'A New Culture Compass for Europe'.

Focus

#1 CULTURE AND HEALTH IN PRACTICE

When exploring best practices at the intersection of culture and health in Europe, one is struck by the similarities found across the EU. Regardless of how Culture and Health policy is structured in different EU countries, parallel initiatives are emerging – providing evidence of dynamic thinking and shared, concrete challenges. Projects of two thematic groups are presented here for their capacity to inspire and take root across Europe: one focused on ageing well, and the other on the role of art centres within healthcare settings.

Ageing well: a European convergence

In recent years there has been increased emphasis on the beneficial effects of participation in cultural activities for older people. Given that older people are one of the groups most vulnerable to social isolation, which has detrimental effects on health outcomes and contributes to cognitive decline, it is of uttermost importance to harness the potential of participation in cultural activities when promoting healthy ageing.

Social prescribing for the elderly

LITHUANIA

The Ministry of Culture of the Republic of Lithuania has adopted the measure “social prescribing” to help mitigate the loneliness and social exclusion experienced by older people (65+) living in Lithuania. In cooperation with the Ministry of Health, the social prescribing programme was piloted in State and national museums, libraries and some art institutions on a voluntary basis in 2023. In 2024 the initiative was extended to nine municipalities of Lithuania and was implemented by an open call for proposals. The goal of this programme is to establish an effective mechanism which would direct and assist the target group (older people) in a structured manner towards the cultural services (free of charge). These cultural services include cultural cognition when visiting cultural institutions, participation in thematic clubs, discussions with creators, cultural education, art workshops, etc. All these activities aim to enrich the lives of the participants with diverse cultural experiences and in doing so to promote mental health and social connection. The participants are facilitated by social prescribing coordinators who work in the municipal public health bureaus, which alongside cultural events also organise other types of activities (e.g. physical activities) for participants of the social prescribing programme.

60+ Club: welcome on stage!

MALTA

In 2021, Teatru Malta, in collaboration with the Ministry for Active Ageing, launched a groundbreaking pilot project aimed at engaging older adults across the country. With life expectancy for those over 65 steadily rising supporting well-being in later life has become increasingly important. Culture and the arts, in particular, can play a vital role throughout the ageing process - stimulating the senses, uplifting individuals mentally and emotionally, and promoting both physical and cognitive health.

As part of this initiative, Teatru Malta provided a welcoming space where individuals aged 60 and above could meet twice a month over the course of a year to take part in theatre sessions. Led by experienced theatre practitioner, Charlotte Stafrace (Grech), *Każin* 60+ brought together a diverse group of older adults united by creativity and curiosity. Participants explored improvisation, experimented with theatre games, honed their vocal techniques, wrote poems and monologues, read and discussed texts, moved freely to rediscover a sense of lightness, and shared life stories – all in spirit of joy and connection.

The Ministry for Active Ageing and Community Care continues to expand on this pioneering concept, working with key partners including regional councils and Arts Council Malta. Together, they champion culture and the arts as a powerful tool to help older adults manage pain, reduce stress, and cope with memory loss – proving that creativity truly knows no age.

Make way for the artists!

LUXEMBOURG

In many retirement homes, contemporary artists are bringing their work directly to residents – breaking down the barriers that often prevent older adults from attending traditional performance venues. Adaptable shows are being created to suit both major international stages and unconventional spaces, reaching audiences where they are.

One notable example is in Luxembourg, where the Elisabeth Shilling Company presents contemporary dance performances in senior living facilities through its *Mat Iech* ("With You") programme and the production *Ita Finita*. These performances are complemented by cultural and artistic workshops and outreach sessions, offering residents a deeper and more personal engagement with contemporary dance.

Health+60

TRANSNATIONAL

The *Health+60* project brings together partners from across Europe to explore new ways of supporting healthy ageing and helping adults maintain their well-being for longer. Designed as a think tank, the initiative unites four organisations from Portugal, Spain, Greece, and Cyprus to share best practices and effective tools.

Drawing on the experiences of various adult education institutions, *Health+60* aims to develop resources – such as awareness guides or lifestyle programmes – that promote health and encourage active living beyond retirement.

Art Centres in Health Structures: longstanding examples

For several decades in Europe, projects for art centres in psychiatric health establishments have emerged and are aimed at forging links between the world of contemporary creation and the hospital world.

La Maison Gertrude: an art centre in a nursing home in Brussels

BELGIUM

The innovative project of the Maison Gertrude Art Centre seeks to transform the lives of residents of the Sainte-Gertrude nursing home, located in the heart of the Marolles in Brussels, through art. In this home, artists, residents and caregivers work to bring out the poetry of everyday life. What if nursing homes were infinitely rich places to live, living museums in which beauty and the unusual would have a special place?

This project, led by the artist and director Mohamed El Khatib and supported by the Théâtre National Wallonie-Bruxelles, aims to integrate art into the daily lives of seniors by involving them in collaborative creative workshops with artists. The centre hosts a permanent collection of works resulting from this co-creation: photographs, installations, drawings, performances, etc. The goal is to rehabilitate retirement homes as dynamic spaces and to redefine the role of art in society.

Culture and art become a source of well-being and dignity for residents. It helps to recreate social ties that are too often weakened by isolation. By offering workshops, exhibitions open to the public and artist residencies, the Art Centre Maison Gertrude intends to reintegrate retirement homes into cultural life by offering workshops and exhibitions open to the public and artist residencies.

Since September 2023, eleven artists have been working directly with residents and staff at the Résidence Sainte-Gertrude. Artists in residence enrich the permanent collection and further transform the retirement home into a creative space for cultural practitioners and an attractive place to live for the community.

The project developed in Brussels also exists in France, at *Les Blés d'Or* nursing home in Chambéry (Savoie). A similar initiative is also being considered in Bourges (Cher) as part of its bid for the European Capital of Culture in 2028.

"The challenge is aesthetic, social and political. Art must not be limited to a cultural outing but become part of every day life. We must also put retirement homes, which are often neglected, back into the circuit of normal life."

Mohamed El Khatib,
associate artist at the Théâtre National Wallonie-Bruxelles and exhibition curator

"Allowing our residents to discover visual and performing arts through the presence and support of artists – imagining that they will express themselves differently, that they will create, connect with others, and share moments and emotions. Perhaps new passions will emerge, or some will explore their capacity for introspection and expand their imagination. Perhaps from these artistic workshops, an art collection will take shape – one that will give life to our walls and spaces. What could be more beautiful than art on the eve of departure?"

Géraldine Maes,
Coordinator of the Sainte-Gertrude Residence

▲ Maison Gertrude

Manicómio

PORTUGAL

The first raw and contemporary art studio and gallery in Portugal – was born from over twenty years of experience in psychiatric hospitals and the art and culture sector, with the ambition to be fully creative and transformative. Based in Lisbon, Manicómio creates a truly inclusive environment where contemporary artists and creative people with mental illness—often excluded due to societal stigma surrounding mental health—work side by side. Tackling stigma and transforming mental health culture within companies and public institutions is one of the project's central missions.

Through various initiatives at the intersection of art, creativity, social transformation, and mental health, Manicómio encompasses:

- An artistic and creative raw and contemporary art studio and gallery, with 14 resident artists who enjoy full freedom, artistic representation, and agency in sales, exhibitions, and collaborations;
- The Creative Agency, a design and communication agency run by creatives with lived experience of mental illness;

Manicómio ▶

- Open Therapy, launched in 2019 to improve accessibility to mental health support. This initiative operates in welcoming, non-stigmatising spaces—such as museums, libraries, parks, and even a football stadium. Sessions are held as part of a regular therapeutic process, integrated seamlessly into these public settings. Open Therapy caters to children, adolescents, adults, and older people, with specialised teams addressing the unique needs of each group and therapeutic approach;
- Programmes, events, and training focused on mental health, human rights, work culture, and innovation, designed for both public and private organisations.

Manicómio has built a decentralised and expanding network across Portugal and beyond, offering tailored, context-sensitive solutions for each community it serves.

Manicómio ▼

3bisF: Where Art Meets Mental Health Care

FRANCE

For 40 years, 3bisF has explored the intersection of contemporary art and mental health care. Based within Montperrin Psychiatric Hospital in Aix-en-Provence (France), it offers a rare and innovative model: an arts centre embedded in a healthcare setting. This unique alliance has generated interdisciplinary projects that promote care through artistic creation, encouraging new practices and collective spaces where art supports well-being and recovery.

Firmly rooted in Montperrin and connected to a wider network of health and social service partners, the centre facilitates projects that bring together artists and individuals experiencing psychological vulnerability. These encounters have proven transformative, opening new spaces for expression, collaboration, and mutual recognition.

Recognising the need for greater coordination and visibility, 3bisF now works to connect and support initiatives at the crossroads of culture and care. The aim is to build a collective network that values creativity, reduces stigma, and fosters inclusive approaches to recovery and social re-integration. This person-centred approach challenges traditional care models by emphasising social context, neurodiversity, and the therapeutic potential of culture and the arts. Cultural engagement becomes a vehicle for healing, empowerment, and civic participation.

1

INTRODUCTION: THE PATH SO FAR

What is Culture and Health?

The fundamental principle of Culture and Health is that participation in cultural and creative activity, (whether receptive or active), is a positive health behaviour[10] and that everyone, regardless of their health status, should have access to, be able to participate in and enjoy culture and creativity.

Culture and Health is founded on the principle of an equal partnership between the culture and health sectors.

Culture and Health spans a very broad range of activities and it is not limited to any one art form, taking in activities as diverse as visual arts, storytelling, music, singing, dance, theatre, circus, architecture, film, heritage, craft and multi-disciplinary art forms[11]. Culture and Health can engage people of all ages and abilities, families, carers and healthcare staff.

Figure 1 —

Fields of Culture

10 Sonke et al., 'Defining "Arts Participation" for Public Health Research', 17 July 2023; Rodriguez et al., 'Arts Engagement as a Health Behavior'.

11 Sonke et al., 'Defining "Arts Participation" for Public Health Research', 17 July 2023.

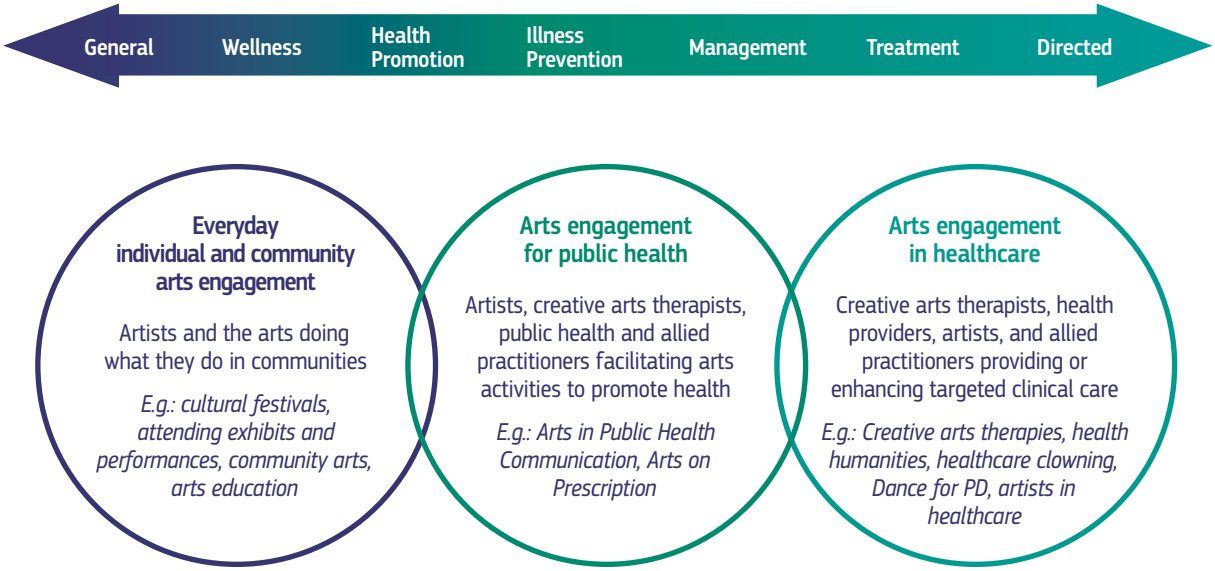
Culture and arts activities in the context of health and well-being are taking place at various levels, from the community to public health and to healthcare settings. Projects include different ways of interacting with culture and the arts (formally, informally, live, virtually, individually, in groups, as active practice, or as receptive appreciation) as well as different art forms and cultural activities. They can be aimed at a general population, as well as for specific target groups and issues.

Today, we can find cultural practices being used in the context of medicine, nursing, social work, rehabilitation and occupational therapies as well as other health professions[12].

The figure below presents this field across a "continuum of care" from health promotion and illness prevention to the treatment and management of health conditions.

Figure 2 —

The arts across a continuum of care



Adapted from © *Nisha Sajnani et al.* (under review), "The arts as a global health resource"

12 Warran et al., 'What Are the Active Ingredients of 'Arts in Health'Activities?'; Fancourt and Finn, *What Is the Evidence on the Role of the Arts in Improving Health and Well-Being?*; Sonke et al., 'Defining "Arts Participation" for Public Health Research', 17 July 2023; Davies and Clift, 'Arts and Health Glossary - A Summary of Definitions for Use in Research, Policy and Practice'.

Some of the specific fields where such practices can be found include but are not limited to: applied neuroaesthetics, culture in healthcare, culture in public health, creative art therapies, medical/health humanities, and social prescribing, within which arts and culture on prescription has emerged as a distinct and effective approach[13].

Concrete examples of projects include: conducting group theatre or musical workshops in communities to support mental health and social cohesion[14], organising dance classes for patients with Parkinson's Disease[15], singing for lung health[16], painting to process trauma in displaced populations[17], playing music in hospital intensive care units for patient well-being [18], craftwork to support social connection, safeguarding living heritage for minority and displaced populations, adapted architecture in care settings, and using heritage in reminiscence therapy for patients with dementia.

The importance of access to cultural and creative activity for health and well-being became abundantly clear during the COVID-19 pandemic[19], where a wide range of culture-based projects were developed across EU Member States in response to the urgent need to promote mental health and well-being, social cohesion, and resilience. As highlighted in the *CultureForHealth* report[20], people engaged in creative activities were able to develop innovative and constructive strategies to deal with the associated challenges and uncertainties that arose in lockdown.

A note on terminology

The health and well-being benefits are increasingly recognised as intrinsic values of culture and the arts. Within this broad field, culture-based, creative art therapies occupy a distinct and separate role to that of Culture and Health.

The key difference between Culture and Health as a field of practice and the field of art therapy, is that with art therapies the creative process is used to support the achievement of a specific clinical outcome. For example, Austrian Music Therapy legislation describes music therapy as:

"The conscious and planned treatment of individuals, particularly those with emotional, somatic, intellectual, or socially related behavioural disorders and conditions of distress, using musical means within a therapeutic relationship between therapist(s) and patient(s)." [21]

In the field of practice that is Culture and Health, cultural activities are predominantly artist-led and '*the artist is not a therapist, the participants are not clients and the artistic processes are not a mechanism to achieve specific health, behavioural or rehabilitative outcomes*'[22].

13 Magsamen and Ross, *Your Brain on Art*; Chatterjee, 'Neuroaesthetics'; Warran et al., 'What Are the Active Ingredients of 'Arts in Health'Activities?'; Mughal et al., 'How Arts, Heritage and Culture Can Support Health and Wellbeing through Social Prescribing'; Fancourt and Finn, *What Is the Evidence on the Role of the Arts in Improving Health and Well-Being?*

14 Rodriguez et al., 'Arts Engagement as a Health Behavior'; WHO, *Arts and Health*.

15 McRae et al., 'Long-Term Effects of Dance for PD® on Self-Efficacy among Persons with Parkinson's Disease'; Carapellotti et al., 'The Efficacy of Dance for Improving Motor Impairments, Non-Motor Symptoms, and Quality of Life in Parkinson's Disease'.

16 Lewis et al., 'Singing for Lung Health—a Systematic Review of the Literature and Consensus Statement'.

17 WHO, *Arts and Health*.

18 Erbay Dalli et al., 'The Effectiveness of Music Interventions on Stress Response in Intensive Care Patients'; Richard-Lalonde et al., 'The Effect of Music on Pain in the Adult Intensive Care Unit'; Ferro et al., 'The Effect of a Live Music Therapy Intervention on Critically Ill Paediatric Patients in the Intensive Care Unit'.

19 Tubadji, 'Culture and Mental Health Resilience in Times of COVID-19'.

20 Zbranca, R. et al., *CultureForHealth Report: Culture's Contribution to Health and Well-Being. A Report on Evidence and Policy Recommendations for Europe*.

21 Music therapy law: Consolidated federal legislation.

22 Arts + Health, 'What Is Arts and Health?'

Various terms are used interchangeably to refer to this multidisciplinary area, e.g. Arts and Health, Arts in Health, Creative Health are terms mainly found in academia and Anglo-Saxon countries.

This report refers to "Culture and Health" to be more inclusive of the diversity of creative and cultural activities that are not explicitly fine art forms and therefore complementary to the term "Arts and Health"[23].

Figure 3 —

Landscape of the Culture and Health field

How Culture and Health has developed as a field of practice

Culture has been intrinsically linked to health and well-being throughout the history of humankind, though awareness of this connection has fluctuated over time[24]. Over the last decades, the "re-discovery" of the importance of culture for health and well-being has been fuelled by the community arts movement which began to gain traction in the 1960s. Initially, community artists positioned themselves as political advocates, championing the democratisation of culture under the banner of Article 27 of the Universal Declaration of Human Rights:

"Everyone has the right freely to participate in the cultural life of the community, to enjoy the arts and to share in scientific advancement and its benefits.[25]"

23 Arts + Health, 'What Is Arts and Health?'; Sonke et al., 'Defining "Arts Participation" for Public Health Research', 17 July 2023; Davies and Clift, 'Arts and Health Glossary - A Summary of Definitions for Use in Research, Policy and Practice'.

24 Wolf Perez, *Arts and Health–Österreich Im Internationalen Kontext*, vol. 3.

25 United Nations General Assembly, *Universal Declaration of Human Rights*, vol. 3381.

At the core of Community Arts is participatory practice, uniting professionals and amateurs in creative endeavours. While artists believe in the power of community arts to drive social change, they are not aiming to be social workers, therapists, or educators. The observed positive effects on participants sparked interest across disciplines, including sociology, medicine, psychology, and neuroscience. This led to a growing body of qualitative and quantitative research, reaffirming the value of arts, culture and creativity for individual and societal health and well-being.

Therefore, the last four decades have seen the growth of a very substantial community of practice around Culture and Health, involving both creative and health practitioners. However, funding for Culture and Health has typically focused on individual, often time limited, projects and pilots led by highly motivated individuals working at the local level. This approach has been very effective in building the intuitive case for the benefits of Culture and Health, demonstrating a huge diversity of creative activity and creating a wealth of lived experience and expertise. Although, there also seems to be a significant level of expectation that more could be achieved. Ultimately, this ad hoc approach imposes limitations for the continuity, sustainability and scalability of Culture and Health interventions, even where their effectiveness is demonstrated.

The growing body of evidence

There is now a significant body of research on the positive impacts for health and well-being of cultural and creative participation, to the extent that the case can now be made for such activity to be seen as a positive health behaviour[26].

Momentum has been growing very quickly in recent years, with several noteworthy developments at the levels of research and practice, dedicated institutions, national and global policy and advocacy, and a growing international community of practice. The emerging field of Culture and Health is part of a broader shift in public health. This approach is intersectoral and transdisciplinary, seeing health as connected to different ecosystems. It prioritises well-being, focuses on preventing disease (salutogenesis[27]) and promotes conditions for good health rather than just treating illness (pathogenesis).

Major recent steps include a number of seminal academic reviews, the opening of dedicated centres in public health institutions, local and regional communities of practice and hubs that are affiliated to multilateral agencies, high-profile campaigns and activities at municipal, regional and national level, as well as policy communications and actions. Some of these are presented below:

26 Warran et al., 'What Are the Active Ingredients of 'Arts in Health'Activities?'; Fancourt and Finn, *What Is the Evidence on the Role of the Arts in Improving Health and Well-Being?*; Zbranca, R. et al., *CultureForHealth Report: Culture's Contribution to Health and Well-Being. A Report on Evidence and Policy Recommendations for Europe*.

27 Hewis, 'A Salutogenic Approach'; Mittelmark, Bauer, et al., The Handbook of Salutogenesis.

2019

The WHO published the *67th Health Evidence Network Synthesis Report*. "What is the role of the arts on improving health and wellbeing. A Scoping Review"[28]. At the time, this was the most comprehensive scoping review of the evidence behind the role that the arts can play in the prevention of illness, the promotion of health, as well as the management and treatment of diseases across the lifespan.

2019

Members of European Parliament voted for the EU Preparatory Action titled "*Bottom-Up Policy Development for Culture & Well-being in the EU*[29]" with a corresponding financial envelope. The implementing project, *CultureForHealth*[30], started in 2021 and facilitated the exchange of knowledge, experience and success stories in the EU, mapped the most relevant existing practises, carried out small-scale pilots and provided policy recommendations.

2020

As part of the Council Work Plan for Culture 2019-2022, the Directorate-General for Education, Youth, Sport and Culture organised an online workshop for EU Member States on culture and active ageing, as well as on the topic of culture, health and well-being[31].

2021

The WHO set up a Collaborating Centre on Arts and Health, in partnership with the University College London (UCL) Socio-Biobehavioural research group[32]. To date, this group has 115 publications linking arts and cultural engagement to better health and well-being outcomes.

2022

During the negotiations of the Council Work Plan for Culture 2023-2026, Member States decided to include the topic of Culture and Health as one of the areas EU Member States shall be working together on in the context of the "Open Method of Coordination (OMC)[33]

2022

The WHO EURO Office for the Prevention and Control of Non-communicable Diseases (NCDs) organised a conference exploring the role that the arts and health field can make in the prevention and control of NCDs. The subsequent report launched in November 2023 recognieses NCD prevention as a key public health focus area for the arts and health field[34].

28 Fancourt and Finn, *What Is the Evidence on the Role of the Arts in Improving Health and Well-Being?*
29 European Commission DG -EAC, 'CALL FOR PROPOSALS EAC/S18/2020 Preparatory Action - Bottom-up Policy Development for Culture & Well-Being in the EU'.
30 Zbranca, R. et al., *CultureForHealth Report: Culture's Contribution to Health and Well-Being. A Report on Evidence and Policy Recommendations for Europe.*
31 Kedziorek et al., 'Workshop for the Experts of the Eu Member States on Culture for Social Cohesion: Outcomes and Lessons Learned 26-27 November 2020'.
32 https://sbbresearch.org/projects/who-collaborating-centre-for-arts-and-health/.
33 Council Resolution, *COUNCIL RESOLUTION ON THE EU WORK PLAN FOR CULTURE 2023–2026.*
34 WHO, *WHO Expert Meeting on Prevention and Control of Noncommunicable Diseases.*

2022

In the context of the EU preparatory action – Bottom-Up Policy Development for Culture & Well-being in the EU a consortium led by Culture Action Europe, published the *CultureForHealth Report: Culture's contribution to health and well-being, A report on evidence and policy recommendations for Europe*[35]. This report provided an updated analysis of the evidence base on cultural activities for health and well-being, widened the scope of enquiry, looked at culture's contribution to community well-being, as well as providing policy recommendations for the field. Furthermore, it highlighted 8 major challenges for policy makers and suggested how culture could contribute to the solutions. The project also developed a mapping and a database[36] of 800+ projects around culture, health and well-being which has EU funding to catalogue new projects until the end of 2028.

2023

The Jameel Arts and Health Lab (JAHL) was launched[37]. It is a collaboration between the Steinhard School at New York University (NYU), the WHO Regional Office for Europe, Community Jameel, and CULTURUNNERS. The lab is an international hub for the arts and health sector, helping coordinate and amplify research and initiatives.

2023

The Directorate-General for Research and Innovation of the European Commission published the policy document "*The societal value of the arts and culture – Its role in people's well-being, mental health and inclusion*"[38] This policy brief also presents several Research & innovation policy recommendations and best practices from the several EU funded the Arts and Culture based projects under by the Horizon 2020 and the Horizon Europe R&I framework programmes.

2023

The European Commission's Communication *On A Comprehensive Approach to Mental Health* (COM (2023) 298 final)[39], published in June 2023, recognised the importance of cultural engagement for well-being. The **EU Council Conclusions on the Comprehensive Approach to Mental Health** (published in November 2023)[40], recognise "*that strengthening protective factors, such as regular sports and physical exercise as well as participation in cultural activities, can boost the overall mental health and well-being of people and reduce the risk of mental health conditions*". The Conclusions highlighted the importance of access to culture and invited the Member States to "*promote mental health and well-being in different contexts in the life course with a focus on strengthening protective factors for good mental health and mental health resilience such as participating in sports and culture.*"

35 Zbranca, R. et al., *CultureForHealth Report: Culture's Contribution to Health and Well-Being. A Report on Evidence and Policy Recommendations for Europe.*
36 Culture Action Europe, 'Mapping of Initiatives on Culture, Health and Well-Being'.
37 Grundey, 'Jameel Arts & Health Lab Launched in New York to Examine Role of Arts in Health and Wellbeing'.
38 European Commission. Directorate General for Research and Innovation, *The Societal Value of the Arts and Culture.*
39 COM, *Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions on a Comprehensive Approach to Mental Health.*
40 Council of the European Union, Council Conclusions on Mental Health.

2024

Frontier Economics published a report commissioned by the UK Department of Culture, Media, and Sport focusing on valuating the health and well-being benefits of cultural and heritage engagement[41]. The report found a wide range of impacts across its different models, from individual impacts that ranged from approximately £100-1000 GBP to annual society-wide benefits ranging from £18.5 million to £8 billion GBP.

2024

The European Research and Innovation Days of the European Commission highlighted the contribution of the arts and culture to health and well-being[42].

2024

The European Commission's Directorate-General for Enlargement and the Eastern Neighbourhood (DG ENEST) provided a grant entitled "Supporting Resilience to Health Emergencies in the Eastern Partnership". This is a WHO-led project taking place from October 2024 – April 2026 in Ukraine, Azerbaijan, Armenia, Georgia and Moldova. The project includes a Culture and Health component "Building Arts Capacity in Health" (BACH) and is the first joint EU- WHO capacity-building initiative at regional level.

2024

In December, the Council Conclusions on improving and fostering access to culture invited Member States to consider incorporating cultural activities and cultural heritage in the delivery and implementation of other policy agendas for example (...) *by harnessing the potential of culture in relation to mental health, and promoting, for instance, cultural prescribing projects*[43].

2025

The new Lancet Global Series on Arts and Health[44] will consist of papers by a consortium of researchers and practitioners, as well as a photo-essay. The series represents an important step towards gaining recognition in mainstream public health research circles, addressing not only the world of research and public health, but also the wider global public.

2025

The European Commission published a call 'Impacts of culture and the arts on health and well-being' under the Work Programme 2025 'Culture, Creativity and Inclusive Society in Horizon Europe[45]. The objective of this topic is to reinforce and mainstream the cross-sectorial cooperation among cultural, health, social, youth, education and humanitarian/ relief sectors as well as researchers and academia of Member States and Associated countries.

41 Frontier Economics, 'Culture and Heritage Capital'
42 European Commission. Directorate General for Research and Innovation, *The Societal Value of the Arts and Culture*.
43 European Union, *Council Conclusions on Improving and Fostering Access to Culture*.
44 Sajnani and Fietje, 'The Jameel Arts & Health Lab in Collaboration with the WHO–Lancet Global Series on the Health Benefits of the Arts'.
45 European Commission, 'Impacts of Culture and the Arts on Health and Well-Being | Programme | HORIZON'.

▲
Dubine (Depths)

2025

In May, the World Health Organisation's World Health's Assembly approved a first-ever resolution on "**Fostering social connection for global health: the essential role of social connection in combating loneliness, social isolation and inequities in health**"[46], which aims to put the issue of social connection more squarely on the global health agenda – not as an afterthought or adjunct to mental health policy but as a standalone priority. The document in point (8) urges [WHO] member states *"to strengthen collaboration between culture and health sectors to promote social inclusion and cohesion*".

2025

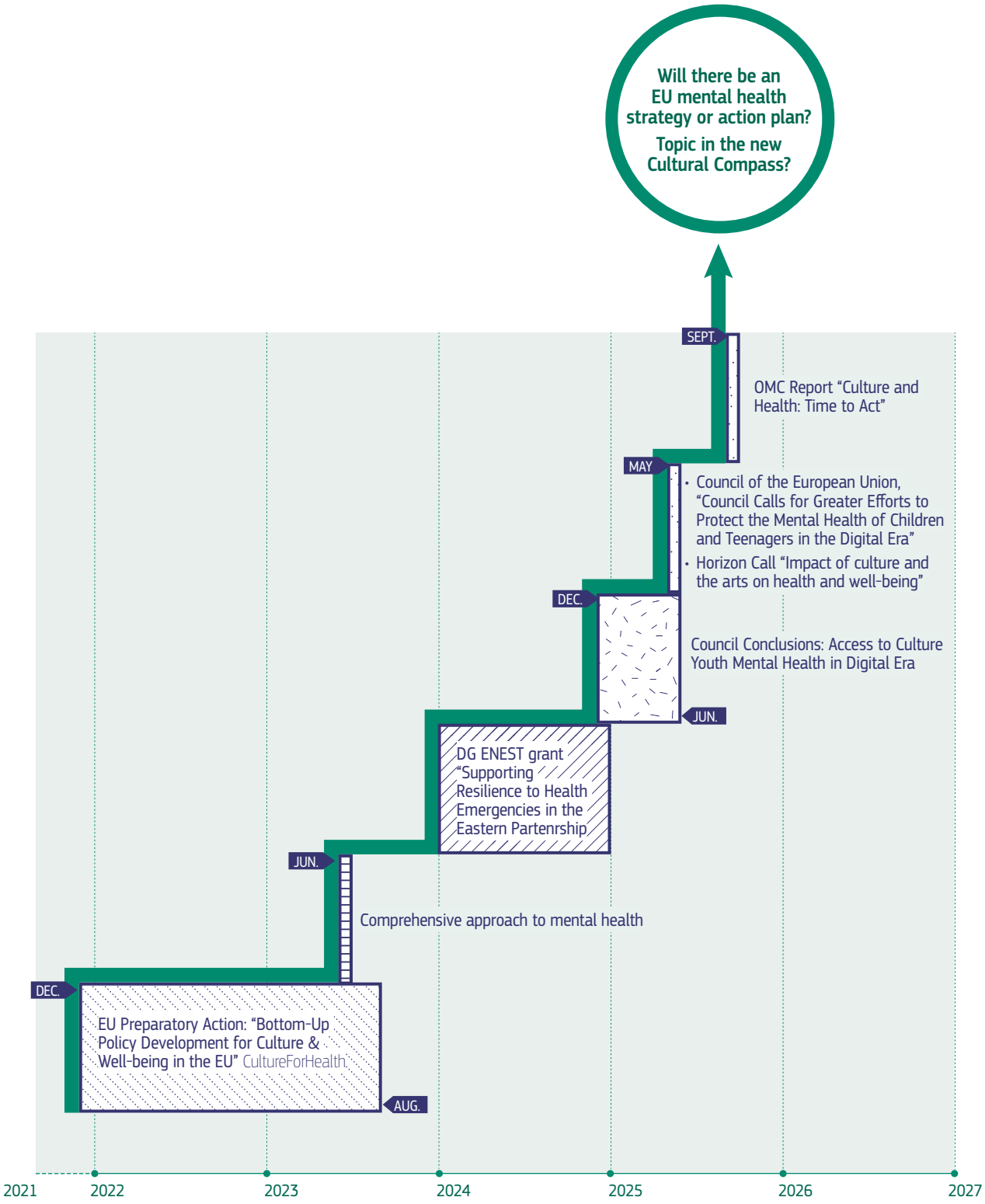
In June, the Council Conclusions on promoting and protecting the mental health of children and adolescents in the digital era[47] call for fostering safer and healthier use of digital tools by children and adolescents, protecting their mental health. The document also states that "*socialising with peers, cultural participation, creative activities, (...) have a positive impact on (...) adolescents' mental health by building up their self-esteem, self-acceptance, self-confidence and self-worth"* and invites Member States to *"offer offline methods to creative expression through engaging, non-digital alternatives (...) developing green spaces and recreational areas, libraries, cultural hubs... and to "Promote healthy lifestyles, emphasizing a balanced approach, (...) such as participating in physical and cultural activities, reading books, spending quality time with family and friends"*.

46 WHO, *Fostering Social Connection for Global Health: The Essential Role of Social Connection in Combating Loneliness, Social Isolation and Inequities in Health. Draft Resolution Proposed by Chile, Dominican Republic, Ecuador, Japan, Kenya, Mexico, Morocco, Panama, Paraguay, Spain, Sweden and Vanuatu.*

47 Council of the European Union, 'Council Calls for Greater Efforts to Protect the Mental Health of Children and Teenagers in the Digital Era'.

Figure 4 —

EU culture and health milestones



Stabla (Trees)

While the role of culture for health and well-being has gained increasing recognition at the EU level, this is not the case in all Member States. A survey of the OMC group shows that the cross-sectoral cooperation of the culture and health ministries is very uneven in the Member States. Most countries are only initiating concrete Culture and Health projects or specific activities and focus primarily on establishing interministerial collaboration and intersectoral partnership. Moreover, only a few countries have established a national strategy with specific objectives regarding Culture and Health. Some Member States largely focus on mapping current efforts and exploring financial resources to enable, support and disseminate good practices. In addition, monitoring, data and statistics are still scarce and their collection has yet to be developed in a way that can provide consistent results and evidence.

There has nevertheless been important progress on integrating cultural and creative participation in our health systems. For example, social prescribing is now an area of strong international interest as a delivery mechanism to connect individuals and patients to non-clinical services[48], including cultural and creative activities that support their health and well-being. In 2019 the National Academy for Social Prescribing was launched in the United Kingdom, followed by the launch of the International Social Prescribing Collaborative with connections in over 32 countries[49].
One of the most effective uses of social prescribing in recent years has been for the prescribing of visits to cultural institutions, such as museums, as well as well as active participation in a range of cultural activities such as theatre, music, dance, literature, craftwork and visual arts.

Therefore, this OMC on Culture and Health has been working against a backdrop of real momentum in the Culture and Health space, driven by the growing international recognition of the global evidence base. This OMC has sought to position these findings within the context and experience of the EU Member States. By highlighting existing activities and needs, it is identifying the concrete actions required to realise the clear potential of Culture and Health.

48 WHO, A Toolkit on How to Implement Social Prescribing; Mughal et al., 'How Arts, Heritage and Culture Can Support Health and Wellbeing through Social Prescribing'; Chatterjee et al., 'Non-Clinical Community Interventions'.
49 NASP, 'International Social Prescribing - National Academy for Social Prescribing'.

Focus

#2 CULTURE AND HEALTH IN PRACTICE

Building on the policy foundations outlined in the previous chapter, this section aims to illustrate the rich diversity of Culture and Health initiatives across Europe. These projects span a wide range of cultural and artistic disciplines–from opera to film, museums to architecture–and operate at various levels and scales from local interventions to cross-border collaborations. Together, they reflect how cultural engagement can be mobilised in health and care contexts in both innovative and context-specific ways. What follows is a closer look at emblematic examples that illustrate this evolving ecosystem.

A Diverse Landscape

Opera Co-Creation for Social Transformation

TRANSNATIONAL

This initiative aimed to re-imagine opera as a tool for social inclusion and cultural transformation. Rather than trying to make opera more appealing to traditional non-audiences, TRACTION sought to redefine opera creation by involving marginalised groups such as migrants, rural communities, and young offenders in the creative process. The project emphasised co-creation, where participants worked alongside professional artists to tell their own stories through opera.

TRACTION combined participatory art practices with immersive and interactive digital technologies to innovate in three key areas: opera creation and production, digital media formats, and community development. Experimental projects were conducted in diverse contexts, including inner-city neighbourhoods in Barcelona, a youth prison in Leiria, Portugal, and rural communities in Ireland.

The project not only aimed to challenge the perception of opera as elitist but also to explore its potential to promote social cohesion and inclusive cultural expression. Short-term outcomes included improved social integration, enhanced relationships between opera institutions and communities, and advances in digital technology. Long-term goals focused on redefining how opera can contribute to building more inclusive and connected societies. This was part of a European research and innovation project funded under the Horizon 2020 Framework Programme (2020–2022). Coordinated by Vicomtech (Spain), the project brought together a consortium of partners including LICEU Opera Barcelona, Irish National Opera, the SAMP art school, François Matarasso, Virtual Reality Ireland, several research institutions, and universities from Spain, Ireland, and the Netherlands.

Healing through Cinema across Europe

TRANSNATIONAL

Film in Hospital is a pan-European initiative that brings the magic of cinema to hospitalized children and youth, helping to support emotional well-being, reduce isolation, and promote creativity. Launched in 2017, the project has grown from 3 organisations to 8 active partners across 8 EU countries, with plans to expand to 12 by 2026.

Building on a decade-long film literacy programme in Croatia (project coordinator), the initiative offers 24/7 access to high-quality European films and educational content in 12 languages through digital platforms, alongside over 400 annual live workshops. Children aged 3 to 15 can access a curated catalogue of 150+ films, study guides, and video introductions by filmmakers and critics. Strategic collaborations span film festivals across Europe, VR innovation, as well as national audiovisual centres on cinema.

Specific research was conducted by the *Università Cattolica del Sacro Cuore in Milan* (2023-24), involving over 400 young patients. It shows that shared viewing enhances emotional engagement and learning, and offline activities in hospital wards deepen the impact. The project values inclusivity, accessibility, and cultural diversity, and actively involves children as co-creators.

Looking ahead, Film in Hospital aims to expand its reach, enrich its content, and establish a formal European network to share its transformative model.

How the Museum Experience improves Anxiety, Depression and general Well-Being

ITALY

Minerva is a scientific project realised at Palazzo Maffei Casa Museo in Verona (Italy), aiming to provide evidence on the positive effects of the artistic experience and cultural activities on the mental health of individuals and the population and indicate the role that museums can play in prevention and treatment in these areas.

The WHO Centre for Mental Health of the Verona Research University, in collaboration with Palazzo Maffei Museum, organised the Minerva project. Thanks to medical specialists, cultural professionals and art historians, it created a cultural route within a museum setting. 103 participants were involved in this project during several periods in 2024. They were offered a cultural path of 3 weekly visits, each one lasting less than one hour and guided by an art historian to introduce them to the cultural enjoyment of the masterpieces on display. The participation was free, facilitating participation in all three sessions. Standardised questionnaires at the beginning of the first visit, and at the end of the last one, assessed psychological well-being, anxious-depressive symptoms and general functioning. All the collected data were analysed anonymously.

More than 90% of the participants reported the museum itinerary was satisfactory, interesting and appropriate to their personal needs. From a clinical point of view and psychological variables, the sample reported on an average significant psychological distress, before the start of the museum tour, in 67% of cases, with mild anxiety and depressive symptoms of varying degrees.
Following the completion of the three scheduled meetings, participants showed an improvement in all areas of investigation. A statistically significant reduction was found in anxious (p-value < 0.022) and depressive (p-value < 0.037) symptoms, as well as psychological distress (p-value < 0.001). An increase in psychological well-being was also observed.

"Although we are aware that the sample of participants in the pilot phase is numerically limited, the preliminary results appear particularly promising, allowing us to give continuity to the project and structure new itineraries after the summer to reach a more significant sample".

Prof. Michela Nosè,
Psychiatry Professor at
the University of Verona

Minerva Project ▼

Architecture and Design: exploring Culture and Health challenges through Space and Materiality

Karin Dom – A Gentle Architecture for Special Care and Learning

BULGARIA

Nominated for the EUmies Awards 2024, *Karin Dom* in Varna, Bulgaria, is a purpose-built centre designed to serve children with special needs and their families. Conceived through an open competition in 2019, the project was developed by Unas studio with support from the Velux Foundation, the Municipality of Varna, and community donations. Completed in 2022, the 2,810 m^2 building offers a therapeutic and educational environment, harmoniously nestled among existing trees on a compact urban site.

The architecture embraces three key principles: preserving nature as a pedagogical tool, encouraging human interaction, and creating a flexible, child-centred environment. The ground floors accommodate therapy and educational functions, while the top floor houses administrative spaces. A large atrium and central staircase flood the interior with natural light and invite spontaneous social encounters.

Material choices reflect a balance between sustainability and practicality, with thermal bricks, wooden cladding, and linoleum flooring enhancing comfort and energy efficiency. With its thoughtful design and warm, inclusive atmosphere, *Karin Dom* stands as a model for specialised care architecture in Europe.

Calming Navigation for Young Patients — H2E's Wayfinding Strategy at Riga's Emergency & Outpatient Health Centre

LATVIA

H2E's graphic-design and wayfinding intervention at the Children's Clinical University Hospital in Riga aimed to transform a potentially stressful setting into an intuitive, comforting environment for young patients and their families. The wayfinding strategy centres on a butterfly motif, chosen both for its association with mental health ("psyche") and its gentle, natural symbolism in guiding spatial flow. Each floor and department features hand-sketched graphite illustrations of native Latvian butterflies, subtly leading children through the facility – children are even invited to trace flight paths with their fingers along dotted lines. This metaphorical trail promotes engagement and orientation in a playful, reassuring way.

Beyond visuals, H2E introduced simplified signage – including small digital displays outside patient rooms – to reduce visual clutter and support a calm atmosphere. Interactive and sensory design elements enhance the environment further: wall art, touch-screen interfaces, and a "sound shower" in the waiting area deliver soft nature sounds in a directed way, offering distraction and comfort. Local press and the design community now affectionately call the centre the "Butterfly House."

▲ Graphic design and interactive solutions for the Children's Hospital Emergency

Healing Nature: Redesigning Hospital Spaces Through Creativity

TRANSNATIONAL

The Croatian Association of Fine Artists is leading the European project “Healing Nature – Animation for Health and Well-being in Children Hospital Environments”, developed by Dr. Melinda Šefčić and Dr. Lea Vidaković in collaboration with Universidade Lusófona / Cofac (Portugal) and New Bulgarian University (Bulgaria). The project transforms sterile hospital spaces into inspiring environments that support healing by combining handcrafted techniques with contemporary technologies, particularly augmented reality (AR) in a sustainable SCREENless format. Building on previous pilot projects in Zagreb, Healing Nature introduces interactive murals and digital animations into children’s hospital areas, encouraging play, communication, and relaxation. Alongside artistic interventions, it includes research on the impact of art on patients, staff, and visitors, with results to be published in a digital booklet. Activities encompass three murals and AR experiences in hospitals across Croatia, Bulgaria, and Portugal, six children’s workshops, one impact study, and press conferences, all with the goal of fostering inclusivity, sustainability, and collaboration between artists, healthcare professionals, and communities.

Tropski san
(A tropical dream)

2

THE MANDATE OF THE OMC GROUP ON CULTURE AND HEALTH

This OMC group was established in February 2023 in line with Priority B of the EU Work Plan for Culture 2023-2026 – '*Culture for the people: enhancing cultural participation and the role of culture in society*'[50].

The mandate[51] for this group is rooted in the need to find effective ways to respond to the growing mental health crisis, recognising that, '*before the COVID-19 pandemic, mental health problems affected around 84 million people in the EU (one in six people), at a cost of EUR 600 billion or more than 4% of GDP, with significant regional, social, gender and age inequalities*'. It goes on to state that, '*made even worse due to the COVID-19 pandemic, the mental health crisis is just one of the many other EU challenges related to health and well-being, to which can be added: an aging population, the association between ill health and patterns of inequality, ongoing changes to labour markets and work patterns, etc.*'[52]

It is in response to this that the mandate goes on to recognise the scientific research and empirical evidence for the benefits and cost-effectiveness of culture for supporting health policy and states that, '*While the intrinsic value of culture remains at the centre of the work in this area as one of the defining characteristics of our humanity, cultural interventions can be solutions, either in their own right - particularly in the promotion of good health or prevention of ill-health - or complementary to bio-medical interventions*'[53]. Building on the definitions of this mandate, the OMC group views culture and health initiatives as not only complementary, but as one part of a multimodal approach to health and well-being, using a biopsychosocial framework. The overall aim of the group has been, '*to identify ways to effectively bridge the gaps between the two sectors and their relevant administrative levels and ultimately to contribute to a better implementation of cross-sectorial cooperation, while paying special attention to the benefits for the culture and health sectors stemming from this collaboration.*'
Its role has also been to, *inter alia*, build on the findings of the *CultureforHealth* report particularly considering the implications and economic costs of the current EU mental health crisis in the context of the well-being economy and produce a final report compiling recommendations and good practices, which:
'*... should reflect the current challenges and opportunities of cross-sectorial collaboration in the area of culture and health; the report should also highlight good practices for Culture and Health*

50 Council Resolution, *COUNCIL RESOLUTION ON THE EU WORK PLAN FOR CULTURE 2023–2026.*
51 Council of the European Union, *Open Method of Coordination (OMC) Group of Member States' Experts on Culture and Health Set up under the EU Work Plan for Culture 2023-2026.*
52 European Commission, *On a Comprehensive Approach to Mental Health.*
53 Council of the European Union, *Open Method of Coordination (OMC) Group of Member States' Experts on Culture and Health Set up under the EU Work Plan for Culture 2023-2026.*

projects/ programmes/ strategies at European, national, regional and local levels and provide beneficial and short, medium and long-term policy recommendations, which can be shared and used in all the Member States. This document could be the basis for future exchanges and policy development promoting the cross-sectorial collaboration in this field, for example with future Presidencies of the Council.'

This has shaped how the Group has responded to its mandate over the one and a half years of its operation. The Report Culture and Health: Time to Act is the result of a collaborative process of all members of the OMC expert group who met personally in 5 meetings: twice in Brussels, once in Lisbon, in Riga and in Zagreb. There were two online meetings with the whole group and countless online meetings of the subgroups who worked on specific sections of the report. The OMC group has closely cooperated with representatives from colleagues from the Directorate-General for Education, Youth, Sport and Culture, the Directorate-General for Research and Innovation and WHO Europe.

While the *CultureforHealth* report[54] published in the context of the EU Preparatory Action "Bottom-Up Policy Development for Culture & Well-being in the EU"[55], is a foundation stone of its work, the group has been conscious that it must move beyond it and add value in order to respond to the growing importance of this field across the EU. For this reason, the Group has particularly focused on the element of the mandate that requires the Group to consider the '*replicability of identified good practices'*. In doing so, the Group has not only continued to look at best practice at project level (as evidenced by the strength of the case studies included in this report), but also to go beyond that to understand and identify the gaps in the policy- making environment. These gaps are making it very difficult for projects, even those demonstrating quality impact and cost effectiveness, to not just continue and be sustained, but also to be replicated. The recommendations of this report ultimately are seeking to help tackle the causes of these barriers, such as: unpredictable funding, lack of clear policy frameworks, strategies and senior leadership, as well as the instability that can arise from relying on committed individuals working on the ground, i.e. 'local champions', rather than sustainable funding and support structures.

Who is the audience for this report?

The purpose of this report is to make recommendations to senior policy makers, decision makers, professionals, artists, researchers and academics across the EU (including EU institutions and Member State administrations), in the fields of both culture and health. In doing so, the ambition is to bring a new, strategic focus to how we can collaborate to realise the potential of Culture and Health. While the report looks to chart a way forward for the future, it also seeks to acknowledge the sustained dedication of so many cultural and health professionals that has built this field of practice to the point where such strategic recommendations can be credibly made. It is so important that their contribution is recognised in this way. With our focus on the future, it is also intended that this report acts as a valuable resource for everyone, policy makers, health or cultural professionals, or those who are new to the field of Culture and Health and want to understand its challenges and opportunities.

54 Zbranca, R. et al., *CultureForHealth Report: Culture's Contribution to Health and Well-Being. A Report on Evidence and Policy Recommendations for Europe*.

55 European Commission DG -EAC, 'CALL FOR PROPOSALS EAC/S18/2020 Preparatory Action - Bottom-up Policy Development for Culture & Well-Being in the EU'.

Focus

#3 CULTURE AND HEALTH IN PRACTICE

Following the EU mandate for the OMC group, this section explores how recent cross-sectoral collaborations and research have shaped the Culture and Health agenda across Europe. From local projects to pan-European networks, these initiatives highlight new forms of cooperation between artists, healthcare professionals, and policymakers. At the same time, influential reports and platforms are calling for a paradigm shift recognising culture as a vital component of public health. Together, these examples reflect a growing consensus: sustainable change requires structural alliances and evidence-based action.

Cross-sectorial Dialogues: Towards richer Collaborations

To musicians' health (and much more)

PORTUGAL

Given the lack of medical care in the field of Arts Medicine, particularly Musicians' Medicine, a pioneering treatment centre was founded in Portugal in 2020, offering an innovative and integrative approach to ensure that musicians and other artists can continue to create, perform and thrill audiences without compromising their health.

The International Centre of Arts Medicine (Centro Internacional de Medicina das Artes – CIMArt) is a pioneer centre in Portugal dedicated to:

- specialised health care for creative practitioners with a clinical approach to musicians, dancers, actors and other artists, using arts to prevent illness and promote health.
- therapeutic intervention (integrated as a neuromodulator modality in a complete medical treatment plan within a multidisciplinary and multiprofessional team) to address physical and mental health.

Besides the art-based interventions for health promotion, illness prevention, and the treatment and management of conditions, this Centre also aims to contribute to the improvement of the health literacy and developing programmes involving culture and the arts, such as the use of drawing, to enhance the communication between the medical doctor and the patient.

Prof. Dr. Ana Zao, International Center for Arts Medicine (CIMart).

CARE – Culture for Mental Health: Bridging Arts and Well-being Across Europe

TRANSNATIONAL

CARE – Culture for Mental Health is a three-year European cooperation project (2024–2027) co-funded by the Creative Europe Programme, aiming to explore how culture can improve mental health and well-being. Led by Cultural Centre Cluj, Romania, with partners in Slovenia, Belgium, and Austria— with support from European cultural networks — CARE builds on the Art & Well-being initiative (2019–2021) and scales up its impact.

The project focuses on raising awareness, building capacity across sectors (arts, health, education, business) and piloting innovative cultural interventions to support mental health in diverse communities, including youth, working adults, people with mental health conditions, and people with disabilities.

CARE aims to advocate for the role of culture in mental health, foster collaboration across sectors and develop inclusive, creative solutions for well-being. It supports both artists and audiences by promoting culture-based care models and scaling up good practices across Europe.

With a €1.43 million budget, CARE positions culture as an essential actor in the public health conversation and aims to make culture-based interventions a recognised, scalable part of mental health care systems in Europe.

Culture and Health: Time for a paradigm shift?

"Dance and Well-being: review of evidence and policy perspectives" – A European Vision for Health Through Movement

TRANSNATIONAL

This report, part of the European Dance House Network's *Fit for the Future* series, explores how dance contributes to individual and collective health and well-being. Initiated during the Covid-19 pandemic through the *#DanceAndWellBeing* campaign, the report highlights dance as a practice rooted in care, expression, and the balance between physical and mental health.

Grounded in WHO research and over 900 studies, the summary identifies dance as a powerful tool in areas like mental health, reducing cognitive decline, supporting patients with neurological conditions, and enhancing health communication. At the moment, this connection remains unevenly supported across Europe, with only a few countries offering strong ecosystems that combine practice, policy, research, and funding.

The report emphasises that health benefits cannot be achieved without meaningful artistic outcomes and calls for long-term, context-sensitive approaches involving skilled artists and partnerships with health institutions. It also aligns dance with key UN Sustainable Development Goals, including mental health, social inclusion, and access to safe public spaces.

Key recommendations are offered to EU institutions, national and local authorities, and the dance sector. These include promoting cultural access in health strategies, supporting artists' well-being, integrating dance into social prescriptions, scaling successful models, and investing in cross-sector research. Ultimately, the report advocates for recognising dance not just as a tool for health but as a vital human right and a source of resilience and connection.

CultureForHealth: Unlocking the Power of Culture for Health and Well-being in Europe

TRANSNATIONAL

The *CultureForHealth* report, part of an EU Preparatory Action, highlights how arts and culture can meaningfully contribute to physical and mental health across the EU. Drawing on 310 scientific studies, the report confirms that cultural participation—whether active or receptive—supports individual well-being, strengthens communities, and promotes health equity.

The evidence shows that culture and arts-based activities can prevent illness, reduce stress, support mental health, aid in treatment, and enhance quality of life, especially among vulnerable groups such as older people, youth, refugees, and people with chronic conditions. Examples include dance therapy for Parkinson's, music for surgical recovery, and museum visits for dementia patients.

The report identifies eight key health-related challenges—ranging from the mental health crisis to ageing, inequality, and youth well-being—where culture can have a transformative impact. It recommends EU-wide action across four pillars: strategic funding, knowledge building, cross-sector training, and localised R&D.

Finally, it urges EU institutions, national governments, and cultural actors to embed culture into health strategies, promote social prescribing, and ensure equitable access to culture as a pillar of holistic, cost-effective public health policy.

Culture and Health Platform: A Turning Point for Europe's Culture & Well-being Agenda

TRANSNATIONAL

Launched in late 2024, the *Culture and Health Platform* marks a milestone in EU policy, positioning culture not as a complementary asset, but as a structural pillar of public health and social care. Coordinated by *Culture Action Europe* and co-funded by the EU's *Creative Europe* programme, this four-year initiative unites 16 partners to reimagine the role of artists in mental health, care, and community well-being.

At a time when over 85 million Europeans face mental health challenges, the platform responds with an unprecedented support scheme: over 170 emerging creative practitioners will receive grants and international mobility opportunities to work at the intersection of culture, health, education, and social services.

But beyond support for individuals, the platform is laying the foundations for a long-term cultural infrastructure in health policy. It offers more than 60 training and peer-learning sessions, hosts four major international conferences (in Finland, Austria, Romania, and Belgium), and maintains a European knowledge hub to ensure sustainability and cross-border collaboration.

By explicitly addressing long-standing gaps—such as the lack of cultural actors in health strategies or the precarity of creative practitioners working in social contexts—the platform sets a new precedent for integrated policymaking. It challenges traditional silos, fosters interdisciplinary alliances, and aims to embed culture and arts-based approaches directly into healthcare systems, including through models like social prescribing.

More than a project, *Culture and Health Platform* is a structural shift, a bold political statement that affirms culture's role not just in enriching lives, but in healing, supporting, and sustaining societies.

3

THE TIME TO ACT IS NOW

Recent global challenges, including the COVID-19 pandemic, have exposed the fragility of our health and social systems. Challenges such as war, climate crisis, digital shift and polarisation of the society[56] have intensified mental health issues across Europe[57]. Given their biopsychosocial impact, engagement with culture and the arts can support healthier active lifestyles, illness prevention, the management of chronic conditions and the treatment of diseases.

In the age of artificial intelligence (AI) and rapid technological change, cultural institutions must also evolve — by developing new skills, modernising their structures, and building strategic partnerships. This includes creating support systems that help creative practitioners and cultural professionals engage with the health of their communities and their colleagues in our health systems.

A further challenge lies in the fragmented funding mechanisms of EU health systems, which vary across and within countries. Current models often fail to deliver holistic personalised care and equitable health outcomes, thus highlighting the need for innovative, multisectoral and holistic approaches.

In the face of global crises and their increasing social and humanitarian impacts, it is crucial to reinforce the role of cultural and creative sectors as strategic drivers of economic growth and employment. The European Union is not merely an economic entity — it is, above all, a community founded on shared values and respect for fundamental rights.

In this context, culture must not be seen solely as an economic asset, but as a foundation of democratic societies and a vital expression of human dignity, freedom and identity. Cultural rights are part of human rights, enshrined in instruments such as the Universal Declaration of Human Rights and the 2005 UNESCO Convention on the Promotion and Protection of the Diversity of Cultural Expressions[58]. They include access to and participation in cultural life, support for pluralism in cultural production, the role of culture in democracy and territorial cohesion, and the inclusion of marginalised groups.

Consequently, any strategy to broaden the reach of the cultural and creative sectors must go beyond their economic impact. It is essential to recognise culture's role in fostering individual, community and societal well-being, inclusion, freedom of expression, and democratic resilience. Embracing culture as a pillar of both public health and participation in democratic life is key to building a resilient and sustainable European future.

This chapter will highlight major global challenges that the EU is facing, as well as challenges specific to the culture and health sectors and to offer an integrated vision of the opportunities for positive change in face of these challenges that the emerging cross-sector collaborations between culture and health can offer.

56 Mario G. H. Damen, *EU Policy Foresight.*
57 European Commission, *On a Comprehensive Approach to Mental Health; Council of the European Union, Council Conclusions on Mental Health.*
58 UNESCO, *Basic Texts of the 2005 Convention on the Protection and Promotion of the Diversity of Cultural Expressions, 2023 Edition.*

Global challenges – EU challenges

1. Ageing population in the EU

On 1 January 2023, the EU population was estimated at 448.8 million people and more than one-fifth (21.3 %) of it was aged 65 years and over[59]. The potential number of people across the European Union in need of long-term care is expected to rise from about 30.8 million in 2019 to 38.1 million in 2050 with an overall increase of 23.5 per cent[60].

2. Loneliness and social isolation

Loneliness and social isolation have repeatedly been shown to be linked to health problems. A recent WHO report finds that, based on several systematic reviews, "loneliness and social isolation increase the risk of all-cause mortality by 9–22% and 32–33%, respectively"[61]. It also emphasises the robust correlations that loneliness and isolation have with cognitive decline and dementia as well as with mental health conditions including depression, anxiety, psychosis, suicidal ideation and self-harm. The trends in cognitive decline are troubling, with the number of people with dementia set to triple by 2050[62]. While cognitive decline can result in the need for earlier long-term care[63], it is noteworthy that social activity can decrease this risk[64]. It also recalls that social isolation and loneliness are not merely problems for the individual: they are a serious public health and societal issue, and loneliness is also an economic problem[65].

3. Digital Shift

Technology and innovation in health care, such as AI, big data and precision medicine, offer great promises to address some of the biggest healthcare challenges, namely optimise resource allocation, improve care delivery, and enhance the overall efficiency of health systems. However, the rise of these solutions results in less face-to-face human contact. Extended screen times, harmful and polarising content and physical inactivity have a negative effect on people's mental, physical and social health, especially on children and young people[66].

4. The global "poly-crisis": conflicts, war, polarisation, rising inequalities

The recent wars and conflicts (inter alia Russia's full-scale invasion of Ukraine, the Gaza conflict), the impact of climate and ecological crisis, as well as the rising polarisation and social inequalities – forming a "poly-crisis"[67] – have a serious effect on the mental health of people living in Europe, with a particularly negative impact on forcibly displaced people. This means that a vast number of people are experiencing significant loss, physical hardships, and other stressors that often result in psychological distress and trauma.

The challenges mentioned above will need to be balanced with proactive actions to humanise healthcare through innovative, holistic and cross-sectoral solutions that consider the physical together with the mental and social health.

In addition to these overall challenges, there are further difficulties on the sector level.

59 European Commission, *Demography of Europe*.
60 European Commission, 'The … Ageing Report. 2021'.
61 WHO, *From Loneliness to Social Connection - Charting a Path to Healthier Societies: Report of the WHO Commission on Social Connection*.
62 Nichols et al., 'Estimation of the Global Prevalence of Dementia in 2019 and Forecasted Prevalence in 2050'.
63 Arora et al., 'Identifying Predictors of Cognitive Decline in Long-Term Care'.
64 Miller et al., 'Social Activity Decreases Risk of Placement in a Long-Term Care Facility for a Prospective Sample of Community-Dwelling Older Adults'.
65 Engel et al., 'An Updated Systematic Literature Review of the Economic Costs of Loneliness and Social Isolation and the Cost Effectiveness of Interventions'.
66 Tang et al., 'The Relationship between Screen Time and Mental Health in Young People'; Domingues-Montanari, 'Clinical and Psychological Effects of Excessive Screen Time on Children'; Lissak, 'Adverse Physiological and Psychological Effects of Screen Time on Children and Adolescents'.
67 McNamara and Bambra, 'The Global Polycrisis and Health Inequalities'; Lawrence et al., 'Global Polycrisis'.

Challenges for the health sector

1. Financial challenges, shortage and burnout of healthcare workforce

In a 2024 report[68], it was estimated that approximately 1.2 million healthcare and social professionals were missing from European health systems, a gap which the WHO expects to rise to 4.1 million in 2030[69]. This shortage is already impacting access to care and placing a financial burden on health systems, particularly those without a strong primary health care (PHC) foundation. But it is also placing a significant burden on our health and social care professionals, highlighting the urgency of action to support the mental health of these highly committed and essential people.

2. Detrimental state of mental health in the EU, especially for young people

In 2022, more than 1 in 2 people were considered at risk of depression across the EU[70]. Mental distress also comes at a high financial cost, representing no less than 4% of GDP[71].

Around the world, suicide is the 3rd leading cause of death for young people aged 15-29, and it is the 2nd leading cause of death for young women in this age group[72].

3. Expected rise in the number of Non-Communicable Diseases (NCDs)

In 2022, about two thirds of all deaths in the European region resulted from diabetes, cardiovascular diseases, chronic respiratory diseases and mental disorders. NCDs do not only affect life expectancy, they are also responsible for 77% of the disease burden in the European region[73]. The high societal costs associated with this will continue to grow as the EU population ages. NCDs account for the largest part of countries' healthcare expenditures, costing EU economies EUR 115 billion, or 0.8% of GDP annually[74]. On a human level, a diagnosis of having a non-communicable disease is not just affecting the patient, but also the well-being of the carers around them, thus having a ripple effect.

Challenges for the culture sector

1. Precarious funding and working conditions

The cultural sector suffers from structural underfunding of cultural institutions and creative professionals, especially for freelancers and small cultural organisations with limited access to social protection, occupational health and safety, and fair remuneration for creative practitioners and cultural professionals.

2. Instrumentalisation of culture

There are legitimate concerns around the arts and culture being used as a tool to serve other public policies rather than for their intrinsic strength and value. While the cultural sector is ready to counteract social challenges, cultural funding alone is unable to finance these challenges. Co-funding from other sectors for Culture and Health would enable the scaling up of activities.

68 OECD and European Commission, *Health at a Glance*.
69 Zapata et al., *From Great Attrition to Great Attraction*.
70 European Commission, 'Statement by Commissioner Kyriakides'.
71 European Commission, 'Statement by Commissioner Kyriakides'.
72 WHO, *Suicide Worldwide* in 2021.
73 European Commission, *EU Non-Communicable Diseases (NCDs) Initiative: Frequently Asked*
74 European Parliament, *REPORT on Non-Communicable Diseases (NCDs)*.

3. Digital disruption

Unequal access to digital platforms and infrastructure is posing risks to cultural diversity and fair remuneration for creators in the digital space.

4. Threats to artistic and curatorial freedom

Growing risks of censorship (self- and external) due to economic hardship or political conditions in many countries is resulting in cultural homogenisation and narrowing definitions of identity.

5. Equity, Diversity, and Inclusion

Cultural rights and participation are not widely acknowledged as part of human rights, leading to underrepresentation of minority and marginalised communities in leadership roles and cultural programming. This also creates barriers to access, participation and funding, along with gaps in inclusive cultural education and workforce development.

Challenges for intersectoral collaboration between culture and health

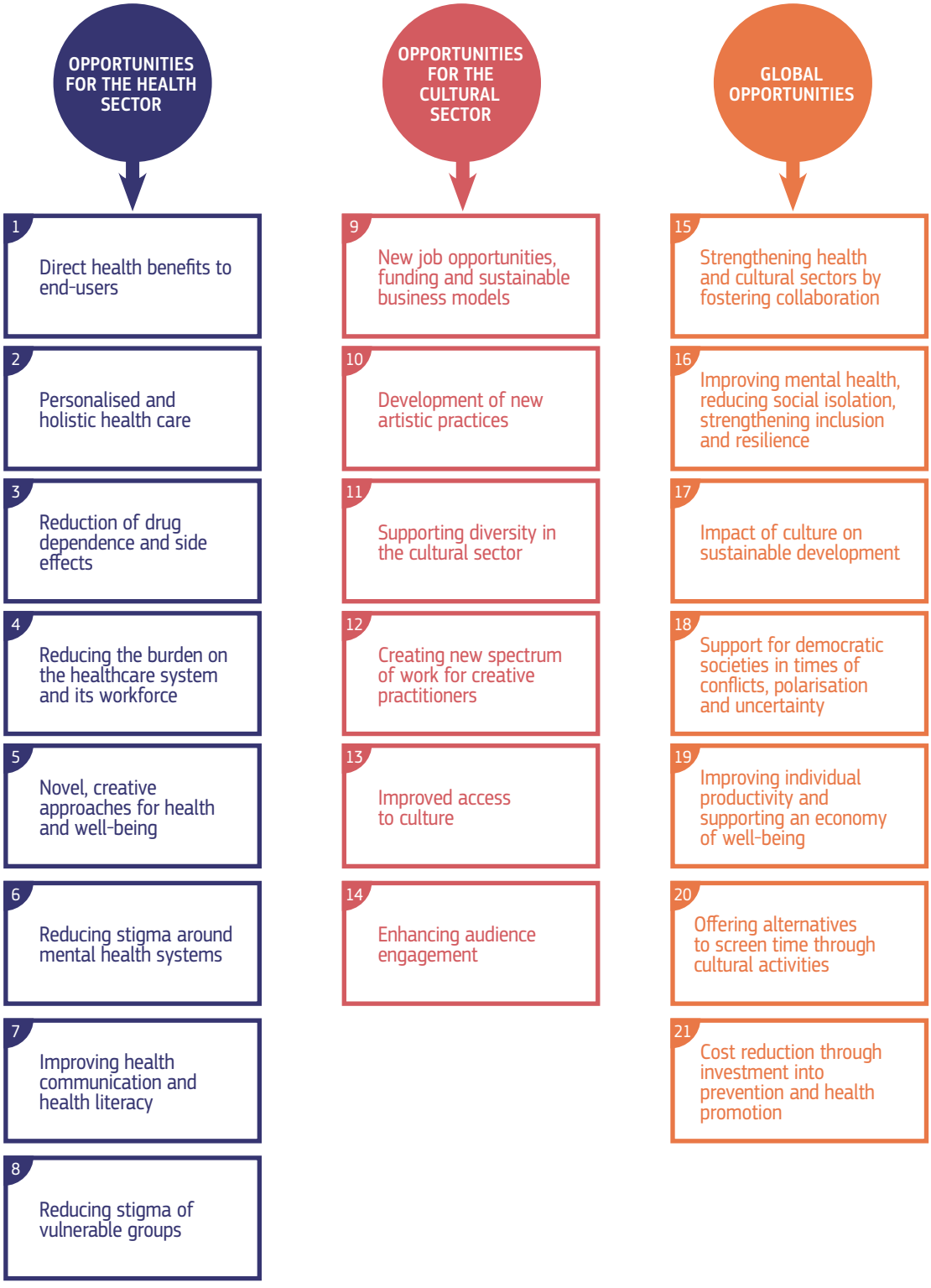
- Insufficient practical support and leadership of inter-sectoral collaboration present a risk that neither sector takes clear leadership, relegating cultural interventions to a 'non-essential' status in health budgets, despite evidence of their cost-effectiveness.
- Fragmented governance structures, bureaucratic silos, absence of well-defined responsibilities and a lack of balance in cooperation between health and culture sectors.
- Lack of supporting organisations for Culture and Health practitioners regarding ethical questions, capacity building possibilities, training and peer support.
- Competing national priorities and systemic resistance to change hinder the development of scalable solutions.

Graphic design and interactive solutions for the Children's Hospital Emergency ▶

Opportunities

Following the mapping of current global and sector-specific challenges, this chapter will focus on opportunities for solutions to these challenges that emerging Culture and Health intersectoral collaboration can offer. It is important to note that the impact of Culture and Health goes far beyond direct positive health outcomes for beneficiaries.

The matrix presented below offers an integrated view of the opportunities Culture and Health offer to both the health and cultural sectors, as well as to the wider society. These opportunities are categorised according to the area of their impact.



The following section outlines the benefits of Culture and Health interventions in more detail.

1. Direct health benefits to end-users

As outlined in this report's introduction, arts and culture-based activities can have multiple benefits for both mental and physical health, individually and collectively, from health promotion and disease prevention, to disease management and treatment.

2. Personalised and holistic healthcare

The integration of Culture and Health, as demonstrated by research, can help to redesign health services and policies. Creative practitioners, as both external observers and co-creators, offer new ways of understanding the experience of care, contributing to the creation of more flexible, adaptive and person-centred structures. In an increasingly digital and efficiency-driven environment, arts and culture can play a critical role in humanising healthcare. Rather than treating the individual solely as a 'patient', a holistic approach sees them as a multifaceted being with emotions, needs and potential. Through this approach, dignity and humanity are brought back to the centre of the therapeutic process. Artistic and cultural activities can enhance the active participation of people living with chronic or serious illnesses, transforming them from passive recipients of care to active participants in their health journey.

3. Reduction of drug dependence and side effects

A systematic integration of culture into health care can lead to a reduced need for medication - such as painkillers or antidepressants - which means fewer side effects offering a more natural and sustainable path to health.

4. Reducing the burden on the healthcare system and its workforce

The burden on the healthcare system and workforce means that health and social care workers face high levels of stress and the danger of burnout on a daily basis. It is recognised by WHO that the social determinants of health have a significant influence on health; the cultural sector can, by offering meaningful and positive culture-based social interactions, contribute to a better health and healing process. This support for health and social care workers can be a catalyst for reducing fatigue and enhancing their well-being, leading to less absenteeism, greater job satisfaction and increased interest in this professional area. Additionally, the involvement of healthcare staff in cultural activities acts as a source of motivation and renewal. It contributes positively to their quality of life in the workplace, reduces stress and enhances their overall well-being. Like patients, healthcare professionals benefit from the physical and psychological benefits of cultural participation. Integrating Culture and Health into the healthcare setting creates a more supportive, positive and humane environment which strengthens relationships and reduces alienation. Through creative practitioners the working environments of healthcare workers can be radically transformed.

5. Novel, creative approaches for health and well-being

Culture and Health interventions offer innovative tools to reshape the relationships between health professionals, and specific or general target populations in which information related to the mental and emotional state of the patients can be collected and thus contributing to a better understanding of their needs. This transformative approach enriches care, empowering interpersonal dynamics with emotional and psychological depth. Cultural activities can enhance patient engagement and foster a climate of trust and empathy between patients and healthcare professionals which can increase the health literacy of the individual and of populations. Interactions become more personal and human, which helps to improve communication, increases satisfaction for both patients and staff and leads to more positive health outcomes.

6. Reducing stigma around mental health systems

Not all people are open to engaging with health systems for their mental health. Participation in cultural activities gives health professionals the opportunity to share their work and experience in a less clinical, and more creative context. This helps to make professionals more approachable, breaking down stereotypes associated with psychiatry and projecting them as empathetic individuals committed to holistic human care.

The joint participation of creative practitioners, patients and healthcare staff strengthens understanding and interaction outside the traditional therapeutic framework helping to shift the public perception of mental health and psychiatry from stigma to support and person-centeredness.

7. Improving health communication and health literacy

Cultural activities can make a considerable contribution in the communication of health issues and raise the health literacy of individuals, communities and society at large. In group settings cultural provisions can engage in creative dialogues addressing topics such as mental health, sexual and reproductive health or stigmatisation and self-stigmatisation. In the case of outbreaks of infectious diseases cultural actions should be included in health communication.

8. Reducing stigma of vulnerable groups

Culture and Health initiatives can play a vital role in combating the stigma that marginalised groups are facing. They offer an opportunity for self-expression, challenging stereotypes and fostering greater understanding of lived experiences of different members of society. For example, in healthcare contexts these activities help to shift societal perspectives from a focus on factors of illness ("pathogenesis") to a more holistic one that looks at health-creation, or "salutogenesis"[75]. Such an approach can also empower patients to redefine their identity beyond their diagnosis. By promoting empathy and breaking down barriers, these collaborations inspire more inclusive and supportive communities contributing to a broader cultural shift toward acceptance and understanding.

9. New job opportunities, funding and sustainable business models

Culture and Health actions open new fields of work for artists and cultural professionals contributing to their economic empowerment. By integrating these practices into policies and programmes, new support mechanisms and sustainable business models can be developed. This reinforces the stability of a sector traditionally characterised by precariousness.

10. Development of new artistic practices

Creativity supported by Culture and Health as a field of practice differs substantially from traditional artistic and cultural production aimed at the free art market. The interdisciplinary approach of Culture and Health creates the basis for the development of socially oriented and responsible creative expression. It lays new foundations for shaping the role of the creative practitioner as an active agent of social change and participation in the public sphere.

11. Supporting diversity in the cultural sector

Actions linking culture and health enhance diversity both in terms of the participants and the creators themselves. Opportunities to participate in cultural activity are provided, for example, for people with disabilities or mental disorders, supporting a more inclusive cultural sector. Such initiatives are in line with European actions such as Europe Beyond Access[76], promoting the acceptance of diversity through artistic and cultural expression and creating a richer, more representative cultural ecosystem, reducing stigma and promoting social cohesion.

12. Creating new spectrum of work for creative practitioners

The participation of creative practitioners in Culture and Health programmes offers new social value to their role. It gives stronger recognition of the role of creative practitioners within society. In a space where artists often face precariousness and uncertainty, these initiatives highlight the contribution of creative and cultural activity to individual and collective well-being. Engaging creative practitioners in practices with social impact acts as a catalyst for the recognition of their work, enhancing their social status and strengthening their creative identity. It is important to note that this does not suggest that creative practitioners or cultural professionals *should* be engaging in these spaces nor that they need to be engaged in any work that explicitly goes beyond their creative practices.

75 Benz et al., 'Culture in Salutogenesis'.
76 Europe Beyond Access, 'Europe Beyond Access'.

13. Improved access to culture

Although participation in culture is recognised as a basic human right (Article 27 of the Universal Declaration of Human Rights[77]), significant barriers continue to limit universal access. Factors such as educational level, economic opportunities, social integration, geographical location and health play a decisive role in the degree of cultural participation. Culture and Health initiatives aim to overcome these barriers focusing on vulnerable groups at risk of social exclusion. Through the design of comprehensive interventions, the aim is to improve physical, emotional and social access to, and participation in, cultural activities and services.

14. Enhancing audience engagement

Culture and Health interventions create opportunities for historically marginalized social groups to participate in cultural life, fostering inclusion and empowerment. For the cultural sector, this translates into broader audience engagement, deeper community connections and expanded social impact. Culture and Health initiatives not only highlight relevance of the cultural sector across diverse social contexts but also strengthen its role as a driver of social cohesion and equity. This recognition is essential for building long-term support, investment, and policy backing, ultimately contributing to a more resilient and thriving cultural sector.

15. Strengthening health and cultural sectors by fostering collaboration

Both the cultural and health sectors often face chronic underfunding, though in different ways and for different reasons. Even in high-income countries, healthcare systems are under pressure due to ageing populations, chronic disease burdens and insufficient staffing. Culture, on the other hand, is frequently seen as non-essential or secondary to sectors like economics or defense. We now see a growing body of evidence demonstrating the mutual benefits that collaboration between the culture and health sectors can bring to both fields as well as to wider society (as highlighted in our matrix). The Culture and Health intersectoral collaboration is gaining momentum marking a pivotal moment for strategic decision-making. We have reached a critical phase where clear policy commitments and structured investments are essential to fully realise the potential and long-term impact of this emerging field.

16. Improving mental health, reducing social isolation, strengthening inclusion and resilience

Active participation in cultural practices enhances mental health and resilience at both individual and community level. Through forms of expression such as music, dance, visual art or storytelling, individuals cultivate inner strength, find meaning and coherence in their experiences and regain a sense of control. At the same time, communities engaged in collective cultural activities strengthen cohesion, cooperation and collective identity, creating a protective framework of support against crises. These practices encourage intercultural dialogue, reduce stereotypes and social stigma and enhance understanding of diversity, contributing to the formation of inclusive societies. This is particularly important in times of social fragmentation, uncertainty and growing inequalities.

17. Impact of culture on sustainable development

Although the United Nations 2030 Agenda[78] does not include a separate target for culture, culture is recognised as a fundamental element of sustainable development. This importance is also reflected in the “UN Pact for the Future” adopted in September 2024[79]. Programmes linking culture and health provide a solid framework for documenting the multi-level impact of culture on many of the Sustainable Development Goals (SDGs), particularly: SDG 3 (Good health and well-being), SDG 10 (Reduced inequalities), SDG 11 (Sustainable cities and communities), SDG 8 (Decent work and economic growth). The evidence gathered from such interventions can be instrumental in enhancing the role of culture in the global development context.

77 United Nations General Assembly, *Universal Declaration of Human Rights, vol. 3381*.
78 UN, *Transforming Our World: The 2030 Agenda for Sustainable Development | Department of Economic and Social Affairs.*

18. Support for democratic societies in times of conflicts, polarisation and uncertainty

Cultural participation is a lever for strengthening democracy. According to research evidence, involvement in cultural activities is associated with an increase in volunteering, democratic participation and social trust. At the same time, skills such as empathy, tolerance and the ability to understand different perspectives are enhanced. Culture shapes active citizens, contributing to a more inclusive, just and cohesive society.

19. Improving individual productivity and supporting an economy of well-being

Cultural participation is positively correlated with enhanced quality of life which translates into measurable economic outcomes including improved professional performance and reduced healthcare costs. Depending on the type of engagement and demographic factors, a recent study in the UK estimated annual productivity gains can range from £68 to £1,310 per person (approximately € 78 to 1.515) and society-wide gains ranging from £18.5 million to £8 billion per year[80]. Cultivating emotional stability and a sense of meaning through cultural activities contributes to higher mood, improved concentration and greater life satisfaction—factors closely tied to workforce efficiency and reduced absenteeism. By promoting inclusion, mental well-being and active citizenship, cultural participation directly supports the EU's objectives for a "Economy of Wellbeing"[81].

20. Offering alternatives to screen time

Extended screen time, harmful content and physical inactivity have serious mental, physical and social effects on the general, and especially on the young population. Urgent steps are needed to counteract this challenge on a global level. Cultural activities can not only be alternatives to screen time but can have actual health benefits.

21. Cost reduction through investment into prevention and health promotion

Investing in culture for prevention, health promotion and well-being yields substantial and measurable benefits. In the UK, Culture and Health interventions are estimated to deliver a return of up to £8 for every £1 (€ 9 to every € 1,2) invested confirming the strategic value of this approach[82]. Studies show that engagement in cultural activities helps lower the prescription and use of medication, sick days and hospitalisation[83], thus reducing pressure on the health care system, and offering cost-effective solutions.

◀ Wayfinding and interactive solutions for the Outpatient Health Center

79 UN, *Resolution A/RES/79/1).*
80 Frontier Economics, 'Culture and Heritage Capital'.
81 Laurent et al., *The Wellbeing Economy*.
82 Frontier Economics, 'Culture and Heritage Capital'.
83 Sonke et al., 'The Effects of Arts-in-Medicine Programming on the Medical-Surgical Work Environment'.

Focus

#4 CULTURE AND HEALTH IN PRACTICE

In the face of pressing societal and health challenges, artists and cultural practitioners across Europe are offering powerful, context-specific responses. This section showcases intersectoral initiatives addressing concrete health issues – ranging from maternal well-being to neurodegenerative conditions – alongside long-standing practices rooted in Art Brut and outsider art. Whether through dance, music or visual creation, these projects reflect a shared belief: Participation in culture and artistic activities can offer care, connection and healing where traditional systems reach their limits. Together, they illustrate how Culture and Health is not just a policy field – but a living ecosystem of practice.

Dealing with specific health issues through culture and art projects

Culture and the arts have a transformative potential in promoting well-being. Two European projects demonstrate that collaboration between health institutions and creative practitioners can make a difference.

When dance cares for body and mind: "Dance Well"

TRANSNATIONAL

Dancing in a 18th century villa, in a historic theatre or surrounded by Caravaggio paintings. In Italy, Germany, Lithuania, France, Czechia, Denmark, for thousands of people with Parkinsons disease, the *Dance Well* project offers the opportunity to be dancers amongst artworks rather than patients undergoing their physical therapy.

Initiated in Italy in 2013 and quickly spread throughout Europe, *Dance Well* is a Creative Europe project explicitly aimed at people living with Parkinson's disease, their families, care givers and friends. *Dance Well* practice is artistic but includes various rehabilitation strategies: the collaboration with the health care workers, doctors and researchers has been, and is, essential for its development.

Howto. A score – Bassano di Mia Habib, for the Dance Well Dancers from Bassano del Grappa

◀

Well-being is intrinsic to dance

Dance Well dancers, as they are specifically called, share their own fragilities and they contribute to developing well-being and social cohesion through the programme. Through the continuous practice of *Dance Well*, it is possible to achieve a better quality of life, feel empowered, improve sense of rhythm, balance and movement, develop interpersonal relationships to fight the isolation that often accompanies the disease, increase creativity and explore new forms of expression.

Art is not only the context

The activity takes place in cultural settings like theatres, museums and galleries, thus maximising the beneficial creative immersion for participants. Moreover, the *Dance Well* project supports the professional development of dance artists and dance organisations that engage people living with Parkinson's, or other movement disorders, with dance. The project expands their skills, competences and knowledge, to widen the possibilities of their creative practice becoming meaningful for the societies they live in, contributing with their innovative approaches to well-being and social cohesion.

"Dance Well is about connectivity, interactivity, stepping into the unknown... and it's a slow revolution!"

Monica Gillette,
dance dramaturg, choreographer and facilitator

Howto. A score – Bassano di Mia Habib, for the Dance Well Dancers from Bassano del Grappa

Focus

Don't worry, sing happy: Music for motherhood

TRANSNATIONAL

Music for motherhood, initiated by the WHO Regional office for Europe, is a testament to the power of cross-sectoral collaboration, the importance of evidence-based interventions and, above all, the transformative potential of the arts in promoting well-being.

Up to 15% of women, after giving birth to their baby, suffer from Postpartum Depression (PPD).

Apart from medical treatments, are there any other instruments to deal with this pathology? Can group singing support the emotional well-being of new mothers by counteracting the symptoms of PPD? The study "Music and Motherhood", promoted by the Regional Office for Europe of the World Health Organisation with the participation of three countries (Denmark, Romania and Italy) between 2021 and 2023 prove that the collaboration between health institutions and cultural professionals can make the difference.

A professional singing teacher guides mothers in singing together promoting peer support and sharing of their emotional state through a non-medicalised approach. In Italy, the project took place in public family counselling centres, coordinated by the Istituto Superiore di Sanità. The involvement of healthcare professionals builds trust among participants, many of whom may feel hesitant about engaging in a non-clinical intervention. Both the mothers participating and the professionals who implemented the "Music and Motherhood" project reported that it responded to the population's needs to which it was addressed.

"I feel like I've found my voice again, both literally and figuratively. Singing with other mothers who understand what I'm going through made me feel less alone."

Danish mother
participating in the project

"Singing helped new mothers to express their feelings, find strategies to improve their mood and interaction with the child"

Ilaria Lega,
Istituto Superiore di Sanità

The Italian study, supported by similar results obtained in Denmark and Romania, provides evidence that a cultural intervention that has proven effective in improving health outcomes can be successfully adapted across countries and communities.

Music and Motherhood Romania

▶

Sansusī Well-being Residency Programme

LATVIA

Since 2018, the Sansusī Well-being Residency Programme has created a collaboration platform for artists from the Baltic-Nordic region and the Psychoneurological hospital, as well as the Social Care Centre in Aknīste parish (Latvia). During their 1-month residencies artists are invited to work with these institutions and dedicate at least 8 h per week to organising participative artistic activities. The programme has proven to increase well-being and quality of life among residents of care units and local citizens from vulnerable groups. It also provides the medical personnel and social workers with new working methods and fosters new artistic and entrepreneurial practices among artists.

Best practices spread throughout Europe: from Denmark to Czechia

Based on an international cooperation with the *Danish National Centre for Art and Mental Health* where art activities are proven to be effective in promoting psychological resilience and in preventing mental illness, the Czech Ministry of Labour and Social Affairs is implementing the incubation phase of the "*Prevention through Culture project*", in collaboration with the creative association "*Just Monkeys*".

▲
First movie

Art Brut

Art Brut (also called Outsider Art) is art in its raw state. The term is used to describe autodidactic artworks created by amateurs, children, people with mental illness or learning disabilities and social outsiders, such as prisoners and offenders. The term was coined by the French painter Jean Dubuffet, who was deeply involved with a naïve and anti-academic aesthetic. Galleries and creative studios for artists who for various reasons are not part of the mainstream art scene have been active throughout Europe.

Art Brut Prague Gallery and Joyful Creation Studio

CZECHIA

In Prague, Czechia, Joyful Creation Studio and Art Brut Prague Gallery create a space for artists who are unclassifiable and non-standard, sometimes misunderstood or underestimated by mainstream society. Joyful Creation Studio does not offer art therapy or leisure activities; it provides good quality art materials and professional facilities. The most important thing will arise from the inner need of the artists themselves and no other way.

The selection of artists is based on the absence of any conscious calculation aimed at achieving success in the world of contemporary art. The Art Brut Gallery also supports its artists by making their works available for sale.

Art from Gugging

AUSTRIA

In Austria, Art from Gugging encompasses around seven decades of artistic creation of multiple generations of Gugging Artists. The discovery and, ultimately, the supportive development of artistic talent began in the mid-twentieth century at what was then the "Mental Health and Care Facility at Gugging". In the 1980s it became the "Centre for Art and Psychotherapy" and recently changed its name to "House of artists" where the artists live and work. Their work is represented at the adjoining museum, and a gallery takes care of the sales. Some have achieved international claim. Their work can be found in museums of contemporary art in Austria, Japan and the USA, e.g. at the Moma – Museum of Modern Arts in New York.

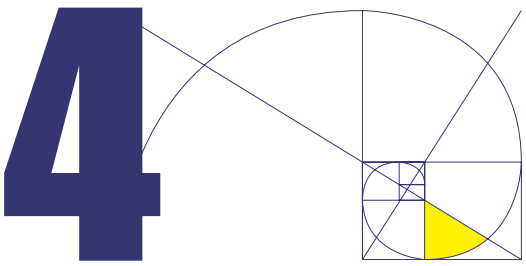
▲
Johann Garber bemalt das Haus der Künstler in Gugging

▲
Walla-Zimmer im Haus der Künstler

Créahm

BELGIUM

In Liège, Belgium, the association Créahm promotes and develops art forms produced by mentally handicapped people. Créahm has set up creative workshops led by practitioners in the plastic and performing arts thus placing its project within a fully artistic rather than therapeutic or occupational, framework. The structures that emerged are the Liège Day Centre (1994) and the Madmusée (2003) which became the Trinkhallmuseum in 2020. Together with the workshops they are part of the overall project, the “Grand Créahm”.



ACTIONS TO TAKE: DELIVERY AND IMPLEMENTATION

Overview

The key objective of this OMC report on Culture and Health is to contribute to the development of a sustainable, evidence-based and equitable Culture and Health ecosystem. The recommendations in this report emphasise key priorities such as fostering collaboration, advancing evidence-based practices, promoting inclusivity and systematically linking culture and health systems. These conclusions are drawn from an analysis of existing good practices and their potential to address current challenges in the health and culture sectors. Building on the strategic recommendations of this report, this section sets out a range of actions that can be taken to make them a reality.

The actions are strongly interdependent. They are not intended to be prescriptive or sequential. For example, building and implementing National Culture and Health Strategies could take place in parallel with the collaboration of Member States to develop an EU Strategy for Culture and Health. This could act as a catalyst for the step change that is needed to realise the potential of Culture and Health. Taken together, it is the ambition of this OMC group that these actions can form the basis for an effective and sustainable delivery model for Culture and Health within the EU.

As the first EU-level expert group dedicated to this innovative topic, our fundamental recommendations to both Member States and EU institutions are to:

1) Recognise cultural engagement as a health enhancing behaviour that contributes to mental, physical and social health and well-being.
2) Develop national and EU-wide cross-sectoral strategies, policies and programmes, in order to consolidate the many grassroots culture and health activities that are already taking place within the EU.
3) Increase investment in health promotion and illness prevention, as well as equitable access and social inclusion.

The following seven interconnected priority actions are intended to provide more granular guidance on how to achieve the above recommendations:

1. **Build and implement an EU Strategy for Culture and Health**
2. **Establish corresponding National Culture and Health Strategies in each Member State**
3. **Enable intersectional collaboration and pooling of resources**
4. **Design and implement Culture and Health Programmes**
5. **Build Capacity**
6. **Advocate for Culture and Health**
7. **Strengthen the evidence base**

1

Build and implement an EU Strategy for Culture and Health

Developing a common EU Strategy for Culture and Health is a key component for mainstreaming cultural participation as a positive health behaviour. Such a Strategy should set out common principles and ambitions at the EU level, while also enabling Member States to design their own national and regional Culture and Health strategies. Given the urgency of acting upon global and EU-wide challenges, Culture and Health strategies should be developed in parallel at the EU and Member States Levels, cross-fertilising and learning from each other.

The negotiation and design of the new EU Multiannual Financial Framework 2028-2034[84], provides an opportunity to embed Culture and Health awareness and action in a number of EU strategic framework policies (notably the Culture Compass[85], Health-in All Policies [86] and One Health[87]), as well as in the in the definition of several programmes (for example within AgoraEU[88], EU4Health[89], the European Competitiveness Fund[90], and the European Social Fund[91]).

In particular, the OMC group recommends that an EU Strategy for Culture and Health should include the following elements:

Step 1. Preparing the ground

- Include Culture and Health in the next EU Work Plan for Culture 2027-2030 to further enable coherence between National Culture and Health strategies.
- Establish further OMC groups around key topics to continue the work on how culture and health can help address critical societal issues such as social cohesion and connection, youth mental health, ageing populations, conflict response and democratic participation.
- To inform the development process of the strategy, build on the existing EU funded CultureForHealth mapping database[92], which maps good practice and case examples in the field.
- Ensure that the development process is undertaken jointly between EU culture and health policy makers.

Step 2. Developing an EU Strategy for Culture and Health

- Set up a strategic framework within which the recommendations of this report can be implemented in a sustainable way over the long-term, supporting:
  - Policy cooperation between the culture and health sectors
  - Programme development
  - Intersectoral collaboration on the ground
  - Advocacy and awareness-raising
  - Capacity building
  - Strengthening of the evidence base

84 European Commission, 'The 2028-2034 EU Budget for a Stronger Europe'.
85 Alina-Alexandra Georgescu, 'A New Culture Compass for Europe'.
86 Ollila et al., 'Health in All Policies in the European Union and Its Member States'.
87 'One Health - European Commission'.
88 European Commission, *REGULATION OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL Establishing the 'AgoraEU' Programme for the Period 2028-2034, and Repealing Regulations (EU) 2021/692 and (EU) 2021/818.*
89 European Commission, 'EU4Health Programme 2021-2027 – a Vision for a Healthier European Union - European Commission'.
90 European Commission, *Proposal for a REGULATION OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL on Establishing the European Competitiveness Fund ('ECF'), Including the Specific Programme for Defence Research and Innovation Activities, Repealing Regulations (EU) 2021/522, (EU) 2021/694, (EU) 2021/697, (EU) 2021/783, Repealing Provisions of Regulations (EU) 2021/696, (EU) 2023/588, and Amending Regulation (EU) [EDIP].*
91 European Commission, 'European Social Fund Plus'.
92 Culture Action Europe, 'Mapping of Initiatives on Culture, Health and Well-Being'.

- Acknowledge that cultural participation is a positive health behaviour, which can contribute to mental, physical and social health and well-being, and therefore has a critical role to play in a healthy and resilient EU.
- Emphasise that everyone has the right to cultural participation regardless of their health status.
- Introduce the term 'social health', in line with a recent WHO resolution[93] which emphasises the importance of social connection to population health and highlights the role culture plays in promoting social inclusion and cohesion.
- Support collaborative, large scale, multi-country, interdisciplinary research projects contributing to the evidence base on Culture and Health, spanning a range of fields from health (physical, mental and social) and neuroscience (such as neuroaesthetics), to the humanities, social sciences and cultural studies. Areas of research can focus on cost-effectiveness, long-term outcomes, and comparative studies.
- Embed Culture and Health opportunities within the next generation of EU programmes, such as: AgoraEU - Creative Europe (in the European Capitals of Culture, EU Prizes for Culture, as well as cultural cooperation projects, networks and platforms); in the EU4Health programme; Horizon Europe programme; and other relevant initiatives.
- Adopt Culture and Health as a priority topic in upcoming EU Presidencies and bring forward Council Conclusions and Council recommendations on Culture and Health that are prepared jointly by the Culture as well as the Health Council formations.
- Establish a **Culture and Health Centre/ Observatory** within an existing EU institution to:
  - promote successful models for replication /transferability
  - create and develop databases to share evidence
  - develop common evaluation and monitoring tools
  - collect and compare statistics, in collaboration with Eurostat

93 WHO, *Fostering Social Connection for Global Health: The Essential Role of Social Connection in Combating Loneliness, Social Isolation and Inequities in Health. Draft Resolution Proposed by Chile, Dominican Republic, Ecuador, Japan, Kenya, Mexico, Morocco, Panama, Paraguay, Spain, Sweden and Vanuatu.*

Focus

#5 CULTURE AND HEALTH IN PRACTICE

As a strategic approach to CULTURE AND HEALTH, cultural prescribing is emerging as a tangible, scalable intervention. Across Europe, programmes are being tested and adopted to integrate arts and cultural participation into preventive care and recovery pathways. From Greece to the Netherlands and the Baltic Sea region, these initiatives position culture as a non-clinical tool to address loneliness, anxiety and chronic conditions, often in collaboration with local health systems. This cluster highlights how referral-based cultural engagement is reshaping how care is delivered – and how well-being is understood.

Cultural Prescription: a new Frontier for Health and Well-being

'Arts on prescription', also called 'culture on referral' or 'culture on prescription', as part of the social prescribing model is gaining momentum all over the world. Developed in the UK in the early 1990s, widely tested and researched and promoted by the World Health Organization, it has proven to be one of the most efficient approaches in Culture and Health.

Culture as a building block of recovery and resilience

GREECE

In 2024-2025, the Hellenic Ministry of Culture and Sports in collaboration with the Ministry of Health has launched the Cultural Prescription programme to support mental health and well-being of citizens.

The initiative creates a collaboration framework between public cultural organisations and mental health institutions. Its goal is to establish Cultural Prescription as a regular supplementary treatment for people facing mental health problems caused by factors such as burn-out, involuntary loneliness or chronic illnesses. Mental health institutions are involved in the project as referrers; cultural organisations (museums, theatres, cinemas, etc.) are providing prescribed cultural and arts activities to the referred participants. The cultural organisations must hire at least one person as Senior Mental Health Professional and a Senior Culture Professional to oversee the programme.

"I was looking forward to participating in the workshop and attending the concert once per week. It took my mind off what was torturing me, and I felt creative and productive."

Beneficiary,
mild depression, attended Music workshop at the Athens Concert Hall

"I felt like an artist... not as a patient"

Beneficiary, attended an art workshop in the Museum of Contemporary Art

During the pilot project, a study on health outcomes among the participants is being carried out by EPIPSY – the Research University Institute for Mental Health Neuroscience and Medical Accuracy "Kostas Stefanis". Results of the study will serve to evaluate the programme as well as support its further development.

In the longer term, it is planned to integrate Cultural Prescription into the electronic platform of digital medical prescription of IDIKA S.A. Legislation provision has been put in place, which sets up a permanent mechanism and provides for the regulation of parameters for the integration of prescription into the platform.

"There were people who had depressive episodes, some who had been diagnosed with bipolar disorder, and the main goal was for them not to come to EMST with their illness, but with the pretext that they were coming to a space of culture. And they are people among people ..."

Elisavet Ioannidi, Education Curator at the National Museum of Contemporary Art (EMST)

Arts on Prescription: The Baltic Model

TRANSNATIONAL

In 2023-2025 seven countries of the Baltic Sea Region - Denmark, Finland, Germany, Latvia, Lithuania, Poland and Sweden – joined in the project "Arts on Prescription" to adapt and test an AoP concept programme based on experiences from similar AoP programmes from the UK, Scandinavia and the World Health Organization guidelines on social prescribing.

The project partners, supported by the EU Development Fund, created an adapted version of Arts on Prescription and called it – the AoP Baltic Model. Described in the Generic Programme Concept, it foresees a clear collaboration structure between culture and health sectors on municipal or regional level involving the following actors: Steering Group, Working Group, Referral Channels, culture and art facilitators and the core figure – the link worker – whose task it is to coordinate the AoP programme and to accompany the participants throughout each of its steps.

Next to the Programme Concept, a comprehensive Arts on Prescription online Guide has been created by the partnership, providing full insight into establishment of the AoP organisational framework, the funding of AoP programmes, development and implementation of the activities and monitoring and evaluation of results. The Guide has been tested by 7 project partners who carried out 3 cycles of AoP programmes in 5 countries. The final version of the Guide will be made available on the NDPHS website before end of 2025.

◀ Arts on Prescription -Cēsis project activities

According to the Generic Programme Concept, each of the piloting cycles consisted of 8-12 weeks / 1-2 culture and arts activities per week. At least 3 art genres were included in each programme, e.g. visual arts, music, dance, theatre, literature. The target audience of the programme were young people from the age of 16 and adults dealing with mild to moderate mental health challenges. Both quantitative and qualitative research on results of the pilots was conducted by the University of Southern Denmark and Turku University of Applied sciences. Preliminary research results show convincing positive mental health outcomes in all the pilot programmes. A full study will be published in early 2026.

The long-term goal of the project is to establish permanent AoP programmes on municipal, regional and national level in the partnership countries and beyond. To achieve this goal, series of regional transfer activities – conferences, seminars, advocacy – are being carried out by all of the project partners in 2025.

"Here I felt that seniors are not excluded from society. I felt that I belonged and that seniors were not like the last piece of ice floating lonely down the river in spring."

Programme participant from the Rehabilitation centre "Līgatne" unit "Senior house", Latvia

"I felt like I was living in darkness and by taking part in these activities I was able to get out of the greyness, the darkness and finally come into the light. All the project activities were great."

Programme participant from Cēsis, Latvia

Culture Vitamins!

DENMARK

Culture Vitamins – Arts on Prescription is a Danish initiative aimed at improving mental health and well-being among adults experiencing mild to moderate stress, anxiety, depression or social isolation. Inspired by the UK's "Arts on Prescription" model, the programme was launched in 2016 and offers a structured 10-week series of cultural activities. These include group singing, museum visits and creative workshops, all designed to foster social connection, self-expression and emotional relief.

Participants are referred by social workers, healthcare professionals or job centres. The programme targets adults between the ages of 18 and 65 and has been implemented across several municipalities in Denmark such as Aalborg, Silkeborg and Odense. It operates at the intersection of culture and health, drawing from fields such as visual arts, music, literature, and performing arts to support mental and social well-being.

The initiative is organised by a range of public and academic partners, including Aalborg and Silkeborg Municipalities, the Culture Region Funen, and the University of Southern Denmark. It is partially funded by the Danish Health Authority and local municipalities, with additional support from the Obel Family Foundation.

Evaluations of the programme have shown significant positive outcomes. Participants have reported improved mental health, increased social engagement, higher self-esteem and a renewed sense of belonging. A 2023 study by the University of Southern Denmark revealed that 90% of participants experienced better well-being during and after the programme, confirming its effectiveness as a non-clinical intervention for mental health support.

Let art strengthen you! Kracht uit kunst – an Art-on-Referral programme in Leuven (since 2024)

BELGIUM

„Kracht uit Kunst" is an Art-on-Referral programme in Leuven, Belgium, integrating culture into primary care. Organised by the Leuven Art-on-Referral Collective and supported by the private funder King Baudouin Foundation, it is a non-medical culture and arts programme that local health professionals and social workers can prescribe to adults with mild to moderate mental health symptoms and/or loneliness. The programme consists of eight weeks of interactive group sessions of visual arts, storytelling, music and creative activities. The March 2024 pilot study confirmed its positive impact on health and well-being of the participants and concluded that culture by referral is a workable intervention in the Flemish primary care system.

Art on prescription Leiden

THE NETHERLANDS

In the Netherlands, Art on Prescription (AoP) Leiden offers a series of group lessons for residents aged 13 and over who are experiencing psychosocial challenges. The project was conceived and is run by Culture Coaches (Cultuurcoaches), a programme based at the BplusC cultural centre in Leiden funded by the municipality to help residents of the city access arts and culture. Participation is by referral from healthcare professionals such as general practitioners, practice nurses, psychologists, or physiotherapists.

Participants take part in five free lessons of an hour and a half in an artistic discipline of their choice taught by a professional artist/teacher. Approximately 125 people benefit from Arts on Prescription in Leiden each year. While not a form of therapy, the programme is designed to boost mental resilience and self-confidence, while providing enjoyment, relaxation and creative inspiration. The culture coaches carry out evaluations with the participants after each series of lessons using questionnaires or a telephone evaluation.

"Participating in AoP gave me self-confidence. I was able to participate again and feel human. During the lessons I was without sadness and without worries. It gave me hope again. I could see again that the sun also shines"

Art on Prescription participant

Arts on Prescription -Cēsis project activities ▼

2

Establish corresponding National Culture and Health Strategies in each Member State

In parallel to the EU Strategy for Culture and Health, Member States should establish National Culture and Health strategies. This strategy should also focus initially on health promotion and illness prevention, as well as equitable access and social inclusion. A key component of the strategy should be to integrate culture into existing public and social health strategies, particularly into mental health strategies and in management and treatment of illnesses where the evidence is the strongest. Health should also be integrated into existing national cultural strategies in areas such as improving access to, and participation in cultural activities.

Step 1. Preparing the ground

- Build on Member States' **unique strengths, needs and experiences** of Culture and Health.
- Create a cross-sectoral **competence network** of 'National Culture and Health Focal Points'[94], that would include at least one representative from the Ministry of Culture and one from the Ministry of Health to bring forward actions on the topic on a national level as well as keep connection with other Member States on EU level. Ideally, other ministries, such as Ministry of Social Affairs and Ministry of Education should also be included.
- Create an **inclusive process bringing together all** stakeholders, including creative practitioners, sectoral experts, policy makers, civil society, and people with lived experience.
- Focus on **national cultural and health priorities** (e.g. equitable access to culture, employment in the culture sector, healthy ageing, mental health, NCDs, etc.), consider their intersection with other policies (e.g. loneliness, social equality) and **specific groups/ beneficiaries** (children, youth, adult population, older people, forcibly displaced people, etc.).
- Conduct a mapping of existing culture and health resources and activities relevant to the development of a National Strategy for Culture and Health

Step 2. Considerations for a National Strategy for Culture and Health

- Although it is important that national strategies are developed with national priorities and needs in mind, the OMC group collectively agreed that the EU strategy and all national strategies should be united by the common vision that:
  - participation in cultural activity is a positive health behaviour and
  - everyone has the right to a cultural participation regardless of their health status.
- Enable structural ways of connecting culture and health, for instance through:
  - culture-based social prescribing / arts on prescription / cultural prescribing;
  - pairing cultural institutions (such as museums, libraries, community centres) and health institutions (such as hospitals, palliative care centres, nursing homes).
- Provide for capacity building opportunities, including training and increased professionalisation of culture and health practitioners, particularly where culture and health interventions are being used to support vulnerable populations.
- Create an ecosystem that encourages more sustainability within the Culture and Health space, by creating a specific Culture and Health budget which enables more long-term investment in effective and cost-efficient Culture and Health interventions.
- Create opportunities for embedding Culture and Health thinking in existing national policies for health and well-being and for culture. For example:
  - supporting health strategies that tackle, for example, healthy ageing, youth mental health, sexual and reproductive health, addressing non-communicable diseases (NCDs), etc.;
  - developing Culture and Health interventions in the field of humanitarian action;
  - complementing the United Cities and Local Government's Culture 21 initiative which advocates for placing culture at the core of sustainable development;
  - supporting the mental health of creative practitioners and cultural professionals in the broader context of their status and working conditions.

94 Culture Action Europe, 'Position Paper on Culture, Health and Well-Being'.

Focus

#6 CULTURE AND HEALTH IN PRACTICE

As the call grows for each EU Member State to develop a dedicated Culture and Health strategy, several countries are already laying the groundwork through policy-driven programmes. This cluster explores how France, Ireland and Spain are embedding culture into public health agendas – whether through national conventions, municipal frameworks, or local authority programmes. These examples demonstrate how political commitment, cross-sectoral coordination and long-term vision can turn cultural access into a structural component of well-being. They offer models for others to adapt, scale, and integrate into national strategies.

National Culture and Health Strategy Models

National Culture and Health Conventions – A long-term Commitment and a strategic Framework

FRANCE

Since 1999, France has developed a series of national conventions between the Ministries of Culture and Health to promote cultural access and engagement within healthcare, disability, and eldercare settings. These conventions are grounded in major national laws that recognise culture as a fundamental right, particularly for vulnerable populations—such as the 1998 law on social exclusion, the 2005 law on disability rights, and the 2009 hospital reform mandating social and cultural dimensions in care facilities.

The most recent CULTURE AND HEALTH Convention, signed in July 2025, sets a renewed framework for four years (extendable up to 12). It defines three core objectives:

- Strengthening mutual understanding between cultural, health and social sectors;
- Improving access to culture for patients, residents and healthcare professionals alike;
- Mobilising culture in health promotion and prevention—not as therapy, but as a means to foster well-being and inclusion.

This strategic partnership supports a wide range of artistic and cultural activities—from live performances to heritage, digital media, and design—across health facilities, cultural institutions and public spaces. It also explores new tools, such as cultural prescriptions, and promotes health democracy, by involving artists in consultative bodies shaping care strategies.

Governance is organised on both national and regional levels with joint monitoring, evaluation and co-funding mechanisms. Regional "CULTURE AND HEALTH Hubs" help structure partnerships between care facilities and local cultural actors, ensuring sustainability and impact. With this ambitious, interministerial framework, France positions culture not only as a right, but as a lever for health, prevention, and social transformation.

Health and Wellbeing in the Community

IRELAND

The Creative Health and Wellbeing in the Community Scheme 2024–2025 is a € 2 million initiative by Creative Ireland developed in partnership with Ireland's national health promotion programme, Healthy Ireland, and delivered by 15 Local Authorities. By supporting collaboration between the Creative Ireland and Healthy Ireland teams in these Local Authorities, the scheme funds Culture and Health projects across both community and healthcare settings, including cross-border collaborations between communities in Ireland and Northern Ireland.

The 15 projects aim to enhance health and well-being across all age groups, facilitating participation in creative arts and health activity through social prescribing and projects for groups such as children with chronic health conditions, migrants and cardio-vascular patients, as well as initiatives to support end-of-life care and bereavement, and positive ageing.

Through a wide range of creative activities – spanning the performing and visual arts, crafts, and heritage – these projects demonstrate how creativity can support well-being. By engaging in creative activities, individuals are empowered to connect socially, build self-esteem, foster resilience, support recovery, and take an active role in managing their own health throughout life – while also building the long-term capacity for cooperation between the culture and health sectors. This is essential for the effective and sustainable delivery of Culture and Health programmes in communities across Ireland.

◀ Care and Creativity in Context project

Madrid Salud - Culture, Art and Health

SPAIN

In 2011 Madrid Salud, the public body of the Madrid City Council that is responsible for the health promotion in the city, signed an agreement with the Complutense University of Madrid to capture the benefits of Culture and Health for health promotion and disease prevention. Madrid Salud has a network of 16 community health centres at its disposal and 5 dedicated specialist centres (Youth or Prevention of Cognitive Impairment Centres) distributed over the city. Around 400 professionals work in interdisciplinary teams (including nurses, doctors, specialists in gynaecology, psychiatry, paediatrics and psychology, social workers, health auxiliaries and administrative staff).

Culture of Emergency. Hospital Clinico San Carlos ▼

After several years of collaboration and very positive evidence, both institutions are convinced that this partnership offers great opportunities and potential, and this cross- sectoral Culture and Health collaboration is an effective strategy to realise the objectives of the disease prevention and health promotion programmes of Madrid. Since 2011, students and Early Career Researchers in Arts and Health, have joined in Madrid Salud's teams and creative professionals have been recruited for specific programmes about isolation or grief. Madrid Salud is building the sustainability of this approach by supporting Early Career Researchers in Arts and Health and providing scholarships for researchers in Arts and Health every year since 2017.

▲ Goya in Hospital Miguel Servet

The programme includes photography, performance, drawing, sculpture, textile art, painting, water colours, calligraphy, visual poetry, haiku, sculpture, vertical gardens, urban allotments, graffiti and other techniques and artistic workshops, which have been developed in collaboration with students, researchers and health professionals in different community health centres. This arts and health approach has been incorporated in programmes such as healthy diet, physical activity, sexual and reproductive health, active ageing, or mental health.

The evidence of the benefits of this cross-sectoral collaboration has been collected and shared in conferences, research papers and doctoral theses, co-creating valuable knowledge about the role of culture and the arts in health promotion and disease prevention.

"Young people – particularly early career researchers – have been critical to its success as they bring the drive, initiative, creativity, energy and networks that are essential to create and manage the intersectional space."

[WHO (World Health Organization) (2023), WHO Expert Meeting on Prevention and Control of Noncommunicable Diseases: Learning from the Arts, Opera House Budapest, Hungary, 15–16 December 2022, WHO Regional Office for Europe.]

Enable Intersectoral collaboration and pooling of resources

Culture and Health is, by definition, an interdisciplinary field, contributing to more inclusive and integrated health and social care systems. While the field is growing, it is often still based on short-term, ad hoc collaborations, rather than activities that are part of a larger, coordinated system of intersectoral cooperation. In many cases, projects are funded through philanthropy or other private sources; at the same time, organisational processes and administrative arrangements are hindering the area's development and the flow of funds across budgets, despite the strategic decision to allocate those funds to Culture and Health.

Actions that can be taken to support this vital shift include:

- Create contact points and assign responsibility for Culture and Health within the governance structures of health, culture and social care government organisations. Where relevant (e.g. youth), include colleagues from the education sector as well.
- Remove legislative and administrative barriers where they exist.
- Remove barriers to optimal allocation of resources.
- Examine the possibilities for pooling of resources between health, social and culture sectors for specific purposes and calls. Purpose based budgeting, also known as performance-based budgeting (PBB) where financial decisions are aligned with the strategic goals and objectives, could enable this. This can be done, for example, by defining objectives such as "tackling loneliness of older people" or "enhancing youth mental health" and enabling solutions to come from various sectors or departments within the ministries.
- Allow for exchange between team members across sectors – both formally and informally. Different approaches can spark innovative ideas. Dedicate time for this process, as working cross-sectorally takes longer than working within one discipline- but can lead to more robust and holistic results.

While a national Culture and Health strategy is developed on the policy level, ***Culture and Health practitioners and institutions,*** in cooperation with policy makers, should make all possible efforts to pay attention to the following recommendations:

- Proactively **involve vulnerable and marginalised groups**.
- Prioritise the **support of youth mental health** and provide cultural activities as alternatives to screen time to foster behaviour change.
- **Launch tailored programmes** at local cultural centres and Galleries, Libraries Archives, Museums (GLAM).
- **Include evidence-based culture and health activities** in hospitals and other healthcare facilities and care settings.
- Develop **training programmes**.
- Implement **joint health and cultural actions**.
- Ensure appropriate **monitoring and evaluation** and create databases/ observatories to share evidence.
- Leverage good practices to develop **models for replication /transferability**.

Focus

#7 CULTURE AND HEALTH IN PRACTICE

Beyond their aesthetic value, artistic and cultural projects can generate new ways of thinking, feeling, and acting within health and care systems. This cluster highlights how diverse initiatives – from performing arts to digital heritage – are being used to support education, prevention, accessibility, and inclusion. In doing so, they illustrate how the cultural sector offers not only content, but also creative tools, formats, and narratives that enrich health strategies. These examples show the potential of culture and the arts to function as a reservoir of ideas and practices for intersectoral collaboration.

Towards Intersectoral Collaboration

PERFARE – When Performing Arts Become a Resource for Public Health

TRANSNATIONAL

Can the performing arts become part of Europe's care systems? That's the bold question at the heart of PERFARE, a Creative Europe-funded project led by Consorzio Marche Spettacolo. Active in five countries – Italy, Portugal, Romania, Sweden, and Hungary – PERFARE builds structural bridges between the cultural and welfare sectors, positioning artists as active contributors to health and social well-being.

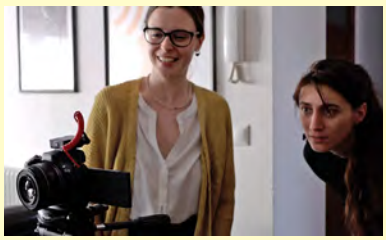
PERFARE sees culture as a resource–both human and creative–that can support prevention, mental health and quality of life. The project supports performing arts organisations and professionals in rethinking their role, offering them tools to work alongside hospitals, care homes and social services.

The first phase focused on capacity building and cross-sector learning, including the mapping of good practices and international workshops. Each partner then formalised collaborations with local welfare institutions through Memoranda of Understanding, creating frameworks for shared action.

In late 2023, PERFARE launched five national Calls for Action to fund cultural and artistic interventions addressing physical and mental health–such as residencies in oncology wards, workshops with elders and creative programmes for people with mental illness.

Now underway, these pilot actions are being evaluated for both artistic and social impact. PERFARE not only highlights the transformative potential of art in care contexts, but also advocates for lasting funding, political recognition and infrastructure to sustain such intersectoral cooperation. It marks a key step toward a culture of care that values both healing and creativity.

Behind the cameras ▼



"This is about creating sustainable, meaningful roles for artists in society—not just as entertainers, but as essential partners in care."

Barna Petrányi, founder and managing director of the Hungarian Pro Progressione creative hub, a Budapest-based artistic hub that connects people, professions and ambitions by designing international collaborations in the field of culture

▲
Interview

Facilitating the development of reading skills in a paediatric setting

CROATIA

This innovative programme in paediatric care highlights the strong connection between early reading, cognitive development and long-term well-being. “Born to Read” demonstrates how cultural and health sectors can collaborate using literature as a tool to build mental resilience from a very young age.

The initiative encourages early reading through the active involvement of paediatricians, who educate parents about the importance of reading aloud. During four routine health check-ups—from six months to the start of primary school—paediatricians introduce age-appropriate illustrated books and guide parents in continuing the reading experience at home.

Throughout the programme, the Ministry of Culture and Media will distribute books to 249 paediatric practices. The effort is supported by 21 county teams, nearly 2000 kindergartens, 232 libraries, 33 maternity wards and a network of patronage services and volunteers.

Launched during Croatia’s National Year of Reading in 2021, the initiative is part of the National Strategy of Reading Promotion adopted in 2017. Its ultimate aim is to make reading promotion a recognised component of preventive public health policy.

Similar intersectoral efforts can be found elsewhere in Europe. In Finland the “Book Bag to Every Baby” initiative provides families with a reading starter kit through maternity clinics encouraging early reading habits from birth. In France, the “Premières Pages” programme offers free book packs to families with young children distributed via healthcare and early childhood networks with a strong focus on reducing inequalities in access to culture.

In Italy, the "Nati per Leggere" (Born to Read) initiative—developed by paediatricians and librarians—has for over two decades promoted shared reading between parents and children during health check-ups, reinforcing the integration of reading promotion into healthcare routines. These programmes share a common belief: Early exposure to books supports not only literacy, but also emotional development and long-term well-being, especially when anchored within public health systems.

Health education through heritage

LATVIA

The Pauls Stradiņš Medicine History Museum in Riga, Latvia, is set to open a Children's Museum – a health literacy centre for school-age children in 2027.

The Children's Museum will host a permanent exhibition entitled "One Health". Bringing together the historical collections of the Museum, as well as contemporary science and technology, the exhibition will examine health as an element uniting humans and ecosystems. Based on the exhibition, series of educational classes and workshops for school groups will be developed. They will be made available free of charge to all Latvian pupils through the Latvian School Bag Programme. This programme provides state funding for arts and culture events to all Latvian public schools and encourages their inclusion into formal education.

The development of the Children's Museum and its educational programme is possible thanks to inter-ministerial collaboration between the Latvian Ministries of Health, Culture and Education and Science.

"I am pleased that every semester of the school year more than 200 000 schoolchildren across Latvia have the opportunity to get to know the cultural values of Latvia on a regular basis with the support of the cultural education programme "Latvian School Bag". Since its inception, the Latvian School Bag Programme has been designed as an interdisciplinary tool to explore a wide range of issues, including health, through art and culture."

Agnese Lāce,
Minister for Culture of the Republic of Latvia

"With the generation who will inhabit a world transformed by climate change in mind, the museum is seeking to create a space where children, their parents and schoolteachers can have a conversation about care as the foundation of a sustainable society, foster health literacy and internalise the principles of inclusivity."

Kaspars Vanags
Director of the Medicine History Museum

SHIFT: MetamorphoSis of cultural Heritage Into augmented hypermedia assets for enhanced accessibility and inclusion Technology

TRANSNATIONAL

SHIFT is a Horizon Europe-funded research and innovation project (2022–2025) and aims to make cultural heritage more accessible, inclusive and engaging by using cutting-edge digital technologies. The project focuses on developing a suite of 12 digital tools across five main technology areas: computer vision, audio, text-to-speech, haptics, and semantics/linguistics. These tools are designed to enhance the digital transformation of cultural content, enabling museums and libraries to present their collections in more inclusive and interactive ways particularly benefiting people with disabilities.

This initiative emphasises “inclusion by design”, ensuring that accessibility is integrated from the start. Tools will be developed in collaboration with cultural professionals, heritage institutions and vulnerable groups, who will provide real-world feedback based on their specific needs and experiences. The project also includes open consultations within two Cultural Heritage networks to gather input from a wider range of stakeholders. Each participating museum and library will demonstrate how these tools transform their own cultural assets. Through artificial intelligence, machine learning, natural language processing, semantic data modelling, and haptic interfaces, SHIFT aims to redefine how cultural heritage can be experienced, understood, and preserved.

Led by Software Imagination & Vision SRL in Romania, SHIFT brings together a consortium of cultural heritage institutions, museums, libraries, academic bodies, SMEs, and associations for people with disabilities from across Europe.

4

Design and implement Culture and Health Programmes

While there are a rich and growing evidence base and community of practice in the Culture and Health space, projects are often short-term, not easily replicable, and show considerable variability in terms of project design, evaluation methods, measurements and metrics. Therefore, Culture and Health programmes should be designed and implemented with the following considerations in mind:

Programme design–from idea to building the foundations

- Design a clear structure and/or set up sustainable regional and local government structures to ensure programmes are relevant to the needs and interests of local populations and communities;
- Build on what is existing. Consider pairing of institutions (for example an art school with a care home). Foster links between cultural bodies and communities, for example through outreach programmes with schools, residential care facilities etc.
- Allow sufficient time for programme design and enable re-design if needed.
- Consider a two-step approach when launching a call for project proposals in the area of Culture and Health – first only ask for a project idea that can be developed when it fits the objective. When working cross-sectorally, detailed programme designs take longer time, and this time needs to be funded.
- Proactively **involve vulnerable and marginalised groups** in co-creation from the programme design phase to the implementation.
- Design a programme which ensures safety, abides by the "do no harm" principle, and anticipates and manages risks.
- Work towards a long-term legacy of the programme and ensure research findings are captured and disseminated.

Implementation and learning from good practices

- Offer quality cultural and creative initiatives that empower participants to manage their own health journey.
- Provide inclusive access to cultural and creative activity for all, particularly vulnerable and marginalised groups and those at greater risk of deprivation, in ways that are culturally sensitive, to support better health outcomes through the life course.
- **Launch tailored programmes** at local cultural centres and Galleries, Libraries Archives, Museums (GLAM).
- **Include evidence-based culture and health activities** in hospitals and other healthcare facilities.
- Ensure fair remuneration of all actors involved.
- Capture and share best practices in the design and evaluation to ensure the ongoing evolution of a sustainable delivery model that can support the replication and scaling of successful actions.
- Ensure that guidance and good governance are progressively developed and disseminated through a virtuous cycle of design and evaluation.

Focus

#8 CULTURE AND HEALTH IN PRACTICE

As our public health systems face growing demands, Culture and Health programmes offer powerful, complementary pathways to address prevention, inclusion, and psychosocial resilience. This cluster presents a variety of initiatives–from dance and media literacy to inclusive festivals and heritage-based support for displaced communities–that show how cultural participation can strengthen mental health, reduce isolation and foster belonging. Whether responding to structural inequalities or crisis situations, these projects illustrate how culture can actively support public health goals while empowering individuals and communities. Together, they highlight culture's vital role in shaping health strategies that are more humane, inclusive and resilient.

Culture and Health for Disease Prevention

Across Europe, the intersection of culture and health is playing an increasingly strategic role in the field of disease prevention. Whether through movement, storytelling or media literacy, culture and arts-based interventions are being mobilised to promote mental well-being, social cohesion, and emotional resilience. The following examples from Austria and Poland highlight how creative approaches are being integrated into public health strategies.

Tanz die Toleranz: Dancing for a Well-being Community in Vienna

AUSTRIA

Since 2007, *Tanz die Toleranz (Dance the Tolerance)*, a community dance initiative organised by the social NGO Caritas Wien, has been breaking barriers and fostering social cohesion through the universal language of dance. The programme brings together individuals of all ages, backgrounds and abilities, offering a platform for creativity, connection and self-expression.

With a mission to promote inclusivity, *Tanz die Toleranz* provides a wide range of dance projects and ongoing classes tailored to diverse communities. Participants include children, youth, adults, seniors, and individuals with varying abilities. Each term culminates in public performances or sharings showcasing the progress and artistry of the dancers.

▲
Afro-Colombian Dance

▲
Adult Dance

The programme goes beyond general inclusivity offering specialised projects for mixed-ability groups, women-only groups, minority communities and older people. Dance sessions are held in a variety of settings including retirement homes, youth centres, community spaces and schools, ensuring accessibility for all.

Collaboration is at the heart of *Tanz die Toleranz*. The initiative partners with prominent cultural and social institutions such as the Vienna State Opera/Ballet, UNHCR, Wiener Festwochen, ARTS for HEALTH AUSTRIA, and the Festspielhaus St. Pölten. These partnerships amplify the programme's reach and impact bridging the worlds of culture, social welfare, education and health.

Each year, over 400 participants — ranging from seasoned dancers to first timers —take part in the programme. Since its inception, *Tanz die Toleranz* has touched the lives of more than 20,000 people creating a vibrant tapestry of shared experiences and artistic expression.

All activities are led by professional dancers and choreographers. *Tanz die Toleranz* provides further training and coaching to work in the community context.

The programme's performances, held at the end of each term, are open to the public offering a glimpse into the transformative power of dance. Through movement *Tanz die Toleranz* continues to build bridges, challenge stereotypes and celebrate diversity in Vienna and beyond. It is an organisation that truly cares for the well-being of their participants.

Empowering Media Professionals: Strengthening the Skills of Journalists, Editors, and Producers through the National Health Programme's 2021-2025 Mental Health Initiative

POLAND

In Poland, cultural professionals and online content creators addressing the topic of suicide, including for people experiencing a suicidal crisis and their loved ones, can play a very positive role in preventing suicidal behaviours.

Promoting Responsible Reporting on Suicide through Media Collaboration highlights an initiative by the Office for Suicide Prevention at the Institute of Psychiatry and Neurology in Warsaw which aims to improve suicide prevention efforts by training cultural creators, online creators and journalists on responsible media coverage. Cultural creators, such as writers, directors, and musicians, as well as online creators, can play a role in preventing suicidal behaviours. They shape the cultural narrative around suicide. Films, TV series, books, plays, articles, podcasts, interviews, and content prepared according to the recommendations for reporting suicidal behaviours help avoid the risk of increasing the number of suicidal behaviours.

Key elements of the initiative include:

- Guidelines for Reporting Suicidal Behaviours: Based on international research, these guidelines help content creators avoid harmful portrayals of suicide and promote the Papageno effect, which reduces suicidal behaviour;

- Educational Outreach: The initiative offers webinars, consultations, podcasts, and meetings to raise awareness among creators and journalists about the sensitivity of suicide topics and the importance of responsible reporting in preventing suicides;
- Collaboration with Journalists: The Office formed two teams — a consultation team offering expert advice and an intervention team monitoring and addressing media reports that don't follow the guidelines;
- Training Programmes: The initiative provides training sessions and webinars for journalists, boosting their competency in suicide reporting, as shown by survey results.

This collaborative approach not only promotes responsible media reporting but also positions creators as key players in reducing the risks associated with suicide and ultimately contributing to a safer and more supportive media environment.

Culture and Health: Pathways to Inclusion

Across Europe, arts and culture are powerful tools for inclusion – offering people with disabilities or neurodivergent conditions meaningful ways to participate, express themselves, and be seen and heard. From film and dance to opera and theatre, these initiatives illustrate how Culture and Health intersect to promote dignity, accessibility, and social connection. The following examples from Czechia, France and Estonia show how inclusive artistic practices can transform both institutions and lives.

Mental Power Prague Film Festival – Empowering Voices through Cinema and Inclusion

CZECHIA

The *Mental Power Prague Film Festival*, held annually in the Czech Republic since 2007, is a pioneering cultural event that spotlights films created by people with mental, intellectual or combined disabilities. Positioned at the intersection of culture, health and social inclusion, the festival provides a unique platform for self-expression, creativity, and empowerment, often featuring works produced in therapeutic or supported settings.

More than just a film showcase, the festival fosters dialogue around mental health, challenges stigma and highlights the transformative role of cultural and artistic engagement in care and rehabilitation. Through screenings, workshops and inclusive programming, it demonstrates how access to culture can become a meaningful component of well-being and dignity.

As one of the few festivals in Europe dedicated to this cause, *Mental Power* stands as a model of how the arts can bridge gaps between healthcare, social services and cultural life – offering both visibility and opportunity to marginalised voices.

Harmony and joy ▼

IMAGO Festival – Rethinking Art and Disability through Inclusive Creation

FRANCE

Every two years, the IMAGO Festival lights up the Île-de-France region with a bold and inventive programme where disability becomes a driving force for contemporary creation. With over fifty cultural venues involved, the festival is anchored in a strong network of partners who share a core belief: artists and audiences with disabilities belong fully in the cultural landscape.

Far more than a festival, IMAGO is a platform for inclusive innovation, offering all audiences a rich and accessible programme spanning theatre, dance, concerts, exhibitions, and cinema. It embraces difference, shifts artistic boundaries, and challenges societal perceptions—inviting us to see disability not as a limitation but as a creative lens.

Rooted in the Culture and Health field, IMAGO fosters dialogue between cultural institutions and medico-social structures, amplifying the role of art in care, inclusion, and public health. It stands as a model of how culture can be both radically accessible and artistically ambitious creating spaces where diversity becomes a source of beauty, meaning, and shared experience.

Ballet for All – Estonia's Opera House Welcomes Neurodiverse Audiences

ESTONIA

In March 2024, the Estonian National Opera premiered *Ballet Story – A Sensory Friendly Relaxed Performance*, the country's first theatre production designed specifically for children with autism or intellectual disabilities.

Developed with autism organisations, the performance features soft lighting, gentle music, trained staff, and a flexible environment where children can move, make sounds, and engage freely with the show.

With costumes to try on, calming spaces and interactive moments, the initiative blends art, education and well-being, offering a safe and joyful introduction to ballet.

Funded through private sponsorship and in-house resources, the project reflects Estonia's growing commitment to inclusive cultural participation as part of broader health and social care strategies.

We stand with you, Ukraine

Culture cannot stop the war, but it can help heal and create visions for the future.

To get together – Enhancement of the capacities of displaced communities from Ukraine living in Slovakia through living heritage

TRANSNATIONAL

This project of the UNESCO ICH (INTANGIBLE CULTURAL HERITAGE) Fund focuses on the role of living heritage for communities displaced from Ukraine due to the war and its protection. The project concentrates on 'using' the living heritage of the displaced populations to strengthen their resilience, improve their health and well-being, providing possibilities for networking among Ukrainian communities and promoting social cohesion between them and the wider community.

The activities involve intangible cultural heritage-related workshops and events for displaced Ukrainian community, participatory mapping of the ICH safeguarding needs and organisation of the capacity building workshops and seminars. Activities and research were made by Institute of Ethnology and Social Anthropology Slovak Academy of Sciences, civic association Sme Spolu the Milan Šimečka Foundation.

"...This is the spice that will sustain and support you when you are not well... If all of us who left forgot, then there would be no Ukraine left to piece together..."

Vasilisa,
48 years old.

Ivan Kupala celebration

Art Therapy for Ukraine

CZECHIA

The main objective of the project is to ensure art therapy assistance for Ukrainian citizens affected by war traumas. These services will be provided by Ukrainian artists who will be trained by Ukrainian psychotherapists, thus creating new work opportunities for performers or cultural sector workers who may have lost their employment or been otherwise affected by disabilities because of the war.

Since the beginning of the Russian aggression, the Czech National Institute of Mental Health conducts joint research projects with Ukrainian colleagues. As part of these activities, it also provides psychotherapeutic and psychiatric assistance to the Ukrainian population in the Czech Republic.

Culture Helps / Культура допомагає

TRANSNATIONAL

Culture Helps is an EU co-funded project aimed at assisting people who have been forced to move to safer regions of Ukraine or abroad because of the Russia's war in Ukraine. The project provides grant support to cultural managers and organisations that help displaced people integrate into new communities through culture. This opportunity helps people to express themselves culturally and to integrate into new communities through cultural participation.

The project aims to improve the skills of cultural professionals and organisations focusing on integration through culture and working with people affected by war trauma. It also promotes networking and cohesion among displaced cultural professionals in Ukraine and abroad. The project, operating 2023-25, offered a multi-level programme of grants, mental health support, online community calls and webinars and offline meetings for displaced cultural professionals.

Build capacity

Culture and Health is a highly inter-disciplinary space with great variability in terms of art forms, health issues, project designs, and cultural contexts. Added to this is the fact that different countries are at varying levels of development in the field, and that it is still novel in many contexts. Adequate capacity building is an essential element of any Culture and Health Strategy, whether at EU or Member State level. There are a number of university programmes (in the UK, US, FI, I, LV, IE etc.) as well as existing resources and initiatives led by global experts that include guidelines, frameworks and educational material on which to build. EU funded initiatives like Culture Action Europe's Culture and Health Platform can provide valuable resources, training and networking opportunities for artists and cultural workers to support the design, delivery, evaluation and communication of Culture and Health interventions.

Based on successful examples around the EU and beyond, the following actions are recommended by the OMC group:

- Assessing existing materials and courses at EU and international level and building a network of trainers and experts that can be involved in capacity-building. This could be a topic for future OMCs to focus on compiling and consolidating capacity-building resources and adapting them to EU and Member State level.

A) For healthcare professionals:

- Development of Culture and Health modules
  - at undergraduate level with the aim of ensuring all healthcare professionals are introduced to the concept of Culture and Health;
  - at post-graduate level to support levels of specialisation and provide recognition of Culture and Health as a field of practice within healthcare.
- Provide opportunities for continuous professional development.

For creative professionals:

- Development of modules
  - at undergraduate level with the aim of ensuring they are introduced to the concept of Culture and Health, particularly as part of their education on socially engaged artistic and creative practice;
  - at post-graduate level to support levels of specialisation and provide recognition of Culture and Health as a field of creative practice.
- Provide opportunities for continuous professional development , including training on working with specific groups such as older people, children, people with disabilities, people at end of life, people who have been bereaved, those at risk of deprivation and marginalisation.
- Provide training in the underlying safeguarding and ethical principles –"Do no Harm" – of Culture and Health initiatives.
- Provide guidance for creative practitioners for their mental hygiene.
- Provide training and guidance for cultural workers e.g. in museums, cultural institutions etc to support effective outreach programmes.

B) Capacity building, peer-learning and support in the inter-professional space:

- Develop specific post-graduate programmes where participants are "mixed" i.e. coming from both the health and the culture sectors (or wearing both 'hats') creating an "inter-professional space" of Culture and Health.
- Build a network of Culture and Health collaboration between higher education institutions to embed Culture and Health training and drive innovation.
- Establish a service of support and mentoring for creative practitioners working in the field of Culture and Health, recognising that this work can be challenging emotionally and involve creative practitioners working with vulnerable people and delicate social situations.

Focus

#9 CULTURE AND HEALTH IN PRACTICE

Building a sustainable Culture and Health ecosystem requires more than good intentions – it demands targeted training and interdisciplinary learning. This cluster showcases innovative educational initiatives in Portugal, Austria and Finland that equip future professionals from the arts, health, and social sectors with the skills to work across boundaries. From simulated patient encounters to master's programmes bridging creativity and care, these examples demonstrate how capacity-building is key to scaling impact. They reflect a growing recognition that collaboration starts with shared knowledge, language and values.

Acquiring cross-sectoral skills

Medicine, Music and Mind-Reflections for an interdisciplinary approach

PORTUGAL

Medicine, Music and Mind is a new course in Master's in Medicine at the School of Medicine and Biomedical Sciences - University of Porto. The curricular unit has already been running for 3 years and there are currently around 100 students involved in the project (enrollment of 35 students per year).

The project aims to enhance the knowledge about Music Medicine and raises awareness of the power of culture and the arts for health promotion, prevention and treatment. Besides the knowledge and clinical practice on specialised healthcare for creative practitioners, this course highlights the positive impact of the participation in culture and cultural heritage, creativity and the arts on people of all ages, backgrounds and health status (for example: for older people with dementia, for young people with disabilities and development disorders, for pregnant women, for patients with chronic pain disorders). Likewise, it aims to raise awareness of the power of the arts, particularly music, enhancing the clinical practice and improving clinicians' competencies: the capacity to communicate, to listen and to perform interventions.

Within the scope of this course, concerts are promoted and performed in the university for the academic community, involving the medical students and teachers of the course (who perform some musical instruments or portray the composers and the played repertoire). This course also stimulates the development of research studies on this topic, some of them as Medicine Master thesis projects.

"In the case of future doctors, the MMM curricular unit is important because it stimulates listening and attention, develops expression and communication skills and values creativity. One needs to emphasise the potential of transferring students' musical, performance and communication skills to clinical practice (doctor-patient communication), medical communication (peer-to-peer) and scientific dissemination (doctor-society)",

Fátima Vieira,
Vice-Dean for Culture and Museums

Simulated Psychiatric Patients: a groundbreaking Approach to Mental Health Training

AUSTRIA

In an innovative initiative aimed at improving mental health education, the actors Hagnot Elischka and Katrin Kröncke have pioneered a unique training method of simulated psychiatric patients. Since 1995, specially trained actors have been portraying individuals with mental illnesses, based on real-life models, to help medical students navigate the complexities of psychiatric care.

These actors undergo intensive, long-term training to accurately embody specific mental health conditions with the full consent and involvement of the patients they represent. During initial consultations, the actors interact with medical students, allowing trainees to practice their skills in a controlled environment. This approach not only protects real patients from potentially distressing or awkward questions but also ensures that students receive constructive feedback on their communication techniques from the perspective of those they aim to treat.

The project has evolved beyond its educational roots. Over the years, the team of four actors has transformed their experiences into documentary art performances, which have been staged for general audiences. These performances, consistently sold out for over 11 years, have played a significant role in breaking down societal taboos surrounding mental illness. Audience feedback indicates that the productions have reduced fear and stigma, fostering greater understanding and empathy toward those living with mental health conditions.

For the patients involved, the project has been a source of empowerment. Engaging with the actors and seeing their experiences represented outside the clinical setting has been described as liberating and beneficial. Meanwhile, medical students have found the use of “doppelgangers” to be an invaluable tool in their training, enriching their understanding of psychiatric care.

This ongoing initiative, now in its third decade, continues to bridge the gap between medical education and real-world mental health challenges proving that innovative approaches can transform both professional training and public perception.

Master's Programmes Pioneering the Culture and Health Interface

Finland

In Finland, two groundbreaking master's programmes are reshaping how professionals use creativity and the arts to drive well-being, inclusion and social impact. At a time when the intersection of health and culture is gaining global attention, Turku and Metropolia Universities of Applied Sciences are leading the way in formalising this emerging field through higher education.

Turku's MA in Creative Well-being brings together professionals from both the health and cultural sectors in a joint programme between the Arts Academy and the Faculty of Health and Wellbeing. Participants —half from each field—study collaboratively over 1.5 to 2 years, building multi-professional networks and learning to develop cross-sector projects that integrate creativity into care practices.

Meanwhile, Metropolia's CRASH programme (Creativity and Arts in Social and Health Fields) takes a transdisciplinary approach, training students to become innovators and leaders who can apply arts-based methods in healthcare, social work and community development. Courses focus on real-world application, international collaboration and rethinking care systems through creativity.

Both programmes reflect Finland's commitment to building capacities at the crossroads of health, social care, and culture, offering a structured path for professionals to combine their skills and reshape working life. In doing so, they contribute to a broader shift: recognising culture not only as therapy or enrichment, but as a strategic driver of well-being in 21st-century societies.

Advocate for Culture and Health

Advocating for Culture and Health needs to include consultation and awareness raising actions within the cultural and health systems: from ministries, through regional and health authorities, to practitioners. Such activities have been increasing in recent years, as seen in efforts like the Jameel Healing Arts campaign[95], the CultureAndHealth Platform and CARE events that grow communities of practice, raise public awareness and catalyse policy changes.

The OMC group has identified actions to support advocacy and awareness that include:

- Establishing an awareness campaign to raise awareness among the population that engaging in cultural activities is a positive health behaviour. Make the campaign context-specific and test its messages in local language through research and involve media initiatives. This could include:
  - A European Day of Culture and Health;
  - Adding a Culture and Health dimension to World Days for Mental Health, Parkinson Disease, AIDS etc.;
  - Mainstreaming a culture, health and well-being priority for European Capitals of culture;
  - Supporting cultural organisations and NGOs to raise awareness of, and advocate for Culture and Health across the EU and in Member States;
  - Awarding excellence in Culture and Health;
  - Recognition and certification of good practice;
  - Publicising of successful Culture and Health actions at national, regional and local levels to make people aware of what is available for them.

95 Jameel Arts & Health Lab, 'Events'.

Focus

#10 CULTURE AND HEALTH IN PRACTICE

Advancing the Culture and Health agenda depends not only on practice, but also on advocacy, public engagement, and sectoral recognition. This cluster highlights efforts across Europe that raise awareness, share knowledge, and legitimise cultural work in health contexts – from Ireland's national resource platform to France's new labelling system for committed healthcare institutions. Programmes like AWAKE and Finland's Mental Health Art Week show how creative initiatives can inspire policy change and strengthen professional identities. Together, these examples underline the importance of visibility and collective voice in shaping long-term impact.

Awareness Raising and Advocacy

AWAKE: Advocating for a Future where Arts and Well-being Shape Sustainable Livelihoods

TRANSNATIONAL

Launched under the Northern Dimension Partnership on Culture (NDPC), the AWAKE project is setting out to reframe the role of culture in society—not only as a source of creativity, but as a force for health, inclusion and economic resilience. Spanning six countries and led by a consortium of cultural incubators, universities, and public institutions, AWAKE is at the forefront of a growing European movement that links artistic work to well-being and insists that this connection deserves both recognition and structural support.

More than a skills-building initiative, AWAKE is a call to action. Through its international roundtables, training programmes and flagship publication (the AWAKE Casebook), the project actively raises awareness about the untapped potential of arts and well-being (A&W) as a professional field. It advocates for better entry points for artists into the health and care sectors and calls on policymakers to recognise creative work in this space as both socially valuable and economically viable.

At the heart of the project is a push to mainstream A&W into public discourse. The AWAKE Casebook, for instance, highlights five successful European case studies—complete with business model breakdowns and access strategies—designed not only to inform but to influence decision-makers and funders. By making this knowledge openly available, the project champions evidence-based advocacy for long-overlooked artistic contributions to well-being.

With a 24-month timeline and a €250,000 budget, AWAKE seeks to build a transnational platform where entrepreneurship, care and culture intersect—and where artists are seen not just as healers or facilitators but as professionals deserving visibility, support and sustainable livelihoods. In doing so, AWAKE is helping shift the narrative: from art as a "nice extra" to art as essential infrastructure for healthier, more connected societies.

Arts and Health: a dedicated national website

IRELAND

artsandhealth.ie is Ireland's national website dedicated to arts and health. It serves as a central hub of information and support for artists, arts professionals, healthcare providers, and researchers working in – or interested in – the field. The site highlights the vital role of the arts in healthcare, offering inspiration through leading examples of practice in Ireland and internationally.

Managed by Réalta, the national resource organisation for arts and health in Ireland, artsandhealth.ie is supported by an Editorial Panel and funded by the Arts Council of Ireland and the HSE (Health Service Executive), Ireland's public health service.

The site features over 160 case studies that showcase the breadth of arts and health projects across the country. Each project is led by professional creative practitioners and is defined by a clear artistic vision, specific goals and meaningful outcomes. The variety of artforms, contexts and collaborative models offers a rich perspective on the scope and impact of arts and health practice.

A "CULTURE AND HEALTH Label" for Health structures involved

FRANCE

The CULTURE AND HEALTH Label in the Île-de-France region recognises healthcare and medico-social institutions that are actively committed to implementing a structured artistic and cultural policy. Awarded by the Regional Health Agency (ARS) and the Regional Directorate of Cultural Affairs (DRAC) of Île-de-France, the label highlights the quality of cultural initiatives undertaken, although it does not come with dedicated funding. It is valid for a period of three years.

This initiative aims to enhance the visibility of participating institutions both locally and among the public, cultural organisations, and institutional partners. It underscores the importance of culture as a driver of well-being, social connection, and improved care.

To qualify for the label, institutions must integrate a cultural component into their overall strategy, establish a representative cultural committee, appoint a cultural coordinator, and allocate financial resources to cultural and artistic activities. The cultural offer must be diverse, encompassing various disciplines (performing arts, visual arts, literature, heritage, etc.), reach all groups within the institution and involve professional artists and recognised cultural partners.

Clear and accessible communication about cultural activities is essential to encourage participation and ensure the impact of the programme. Institutions must also comply with current regulations concerning artistic employment and the legal framework for partnerships and artistic contributions.

The CULTURE AND HEALTH Label thus reflects a qualitative, cross-sectoral and inclusive approach, placing culture at the heart of healthcare and community life.

Mental Health Art Week: When Creativity Becomes a Catalyst for Well-being

FINLAND

In Finland, mental health has long been a public priority and at the heart of this commitment is MIELI Mental Health Finland, the world's oldest NGO dedicated to mental well-being. With over 120 years of experience, a national network of 54 member associations and the support of more than 3,000 volunteers, MIELI provides vital services: from 24/7 crisis helplines and suicide prevention centres to mental health education and support for every age group.

MIELI's mission extends beyond clinical support. Since 2014, it has led a unique initiative blending health and culture: the Mental Health Art Week (MHAW). Held every May across more than 30 Finnish cities, the week offers concerts, performances, exhibitions, hands-on workshops, forest walks, artist talks, and open studios—all designed to make art accessible and to spotlight its impact on mental well-being.

More than a festival, MHAW is a nationwide campaign challenging stigma around mental health through creativity. Backed by clinical studies showing the positive effects of arts engagement—from reduced anxiety and depression to increased self-esteem—MHAW sends a clear message: mental health and access to culture go hand in hand.

While most activities are in Finnish, the universal language of art welcomes all. From Helsinki to remote towns, MHAW invites everyone to take "one step at a time" because every step toward mental health matters.

7

Strengthen the evidence base

As a trans- and interdisciplinary field of study, medicine, psychology, neuroscience, neuroaesthetics, social sciences and cultural studies provide an important perspective to the evidence base in this new cross-sectoral context. To get an overview of the existing evidence and its quality, the European Commission, in line with its 2023 policy brief "The Societal Value of Arts and Culture" has issued a Horizon 'Coordination and Support Action' call on the "*Impacts of culture and the arts on health and well-being*" in 2025. The call aims to create a dedicated platform to enable policy, research and evaluation discussions and exchange of knowledge on culture and well-being. The call asks to provide policy guidelines for implementation as well as to create a map of Arts and Health research and innovation within health promotion, illness prevention, trauma recovery, disease management, and/or disease treatment, that identifies where the gaps on the evidence are. With the probable start in mid 2026, the implementation of this action will especially inform policy makers on the status quo of the evidence in the area of Culture and Health.

Based on our current knowledge, the OMC group for Culture and Health has identified the following topics for further research:

- Provide EU funding for collaborative, large scale, multi-country, interdisciplinary research projects contributing to the evidence base on Culture and Health projects. Areas for further research can include, but are not limited to, research around:
  - The impact of cultural social prescribing for people at risk of mental illness, especially children, older adults, and people who make frequent use of health services;
  - Epidemiology: understanding the link between cultural engagement and the prevention and management of mental illness and Non-Communicable Diseases;
  - Scoping the development of tracking dashboards showing patterns and predictors of cultural engagement to inform evaluation of Culture and Health policy initiatives to see if they help increase cultural engagement equitably;
  - Exploring the biomolecular effects of cultural participation, including inflammatory immune response, metabolomic markers, patterns of epigenetic ageing, drawing on existing longitudinal studies and identifying way to build on this work;
  - Collating and presenting evidence for the impact of cultural engagement through neurosciences (neuroaesthetics);
  - Systematic scoping reviews and large-scale randomised control trials in the area of Culture and Health for specific target populations (e.g. youth);
  - Determining the 'optimal dose' of cultural engagement for various age groups of the population;
  - Impact studies looking at the effects of Arts and Health activities at group/community level : social interactions, changes in group dynamics (e.g. in a school class over a series of arts workshops), or community-level impacts (modelling of collective sentiment or perception).
  - Understand, from the perspective of neuroscience, how we can reduce addiction, including screen addiction, through cultural activities;
  - Undertake comparative analyses on how health and cultural systems could work together in different Member States to aid implementation of Culture and Health programmes;

  - Use the methodologies of health economics to measure the cost-effectiveness of Culture and Health interventions in promoting health, preventing and supporting early management of ill health;
  - Research on the transferability / scaling up of Culture and Health interventions.
- Develop robust evaluation frameworks and benchmark systems to support quality standards and case making for scaling of successful actions across populations;
- Develop evaluation toolkits and facilitate digital platforms for sharing results and good practice to
  - understand the perception of the general population of cultural engagement as an active element for one's well-being and health and how policies and campaigns can impact this perception (similar to health campaigns on physical activities);
  - evaluate and validate models of including cultural experiences in micro-doses (e.g. 5 minutes of dance, reading or singing in school classes as a way to support students' well-being);
- Provide EU funding for Member State collaborative research projects, particularly supporting interdisciplinary research teams.
- Undertake Eurobarometer surveys to evaluate the link between cultural participation and well-being, in particular a reduction in loneliness.

Focus

#11 CULTURE AND HEALTH IN PRACTICE

Robust data and research are essential to demonstrating the impact of culture on health and well-being and to informing effective policy. This cluster highlights studies and monitoring frameworks at national or European levels. These examples show how evidence-based approaches help translate practice into strategy and make the case for investing in Culture and Health. Together, they signal a shift toward more systematic, interdisciplinary knowledge production across Europe.

Getting the Data

Systematically incorporating arts and cultural programmes into healthcare can yield measurable cost savings and broader socio-economic advantages across European welfare systems. By reducing hospitalisation rates and facilitating patient adherence to treatment, these initiatives help governments contain rising healthcare expenditures, alleviate pressure on social services and potentially free up public funds for reinvestment in other sectors.

In this way, arts-based strategies can serve as both a preventive measure for non-communicable diseases and an effective tool for mitigating the long-term costs associated with chronic conditions. Additionally, community-level engagement in cultural programs fosters social cohesion creating environments where individuals are more likely to seek preventative care and maintain healthier lifestyles and further reducing the financial strain on welfare programmes.

Looking specifically at the aging population, participation in arts interventions can play a pivotal role in extending independent living and minimising the need for long-term care. As older adults acquire better coping mechanisms and enhanced mental resilience through cultural engagement, reliance on social and healthcare services tends to decrease. This reduction of service utilisation not only translates into direct budgetary relief but also contributes to a more productive and active older demographic diminishing the economic strain typically associated with an aging society. Ultimately, the integration of arts and cultural initiatives into public policy emerges as a strategic lever for driving down healthcare costs while fostering improved social capital and long-term economic vitality. (Prof. Pierluigi Sacco)

Using Health and Well-being Performance Metrics as Incentives for Municipalities to boost resident Engagement in Culture

FINLAND

This initiative highlights the intersection of cultural participation and public health showing how municipalities are incentivised to create inclusive, supportive environments for cultural engagement as a means of improving overall community health.

The Finnish Government incentivises municipalities to promote health and well-being including cultural participation. The additional part of the central government transfer for the promotion of health and wellbeing is an incentive, which means that the amount of central government transfers to local government for the promotion of health and wellbeing is partly determined in accordance with their work to promote health and wellbeing. The aim is to ensure that municipalities are active in promoting residents' health and wellbeing. The municipalities' actions that promote access to culture is an indicator part of the economic incentive.

One model to promote access to culture is to use art and culture companions, trained volunteers who assist residents, especially those facing barriers, in accessing cultural activities.

Launched in Jyväskylä in 2006, the programme has expanded to over twenty municipalities. It is underpinned by the Finnish Act on Cultural Activities in Local Government (166/2019), which encourages municipalities to integrate culture into health and well-being efforts.

Municipalities, to promote the health and well-being of their residents, promote art and culture, a sense of inclusion and community engagement as well as local and regional vitality. Art and culture companions help lower barriers to cultural participation, fostering inclusion and improving public health.

The Irish Longitudinal Study on Ageing (TILDA)

IRELAND

The Irish Longitudinal Study on Ageing (TILDA), based at a WHO collaborating centre based in Trinity College Dublin, is a large-scale, nationally representative, longitudinal study on ageing in Ireland, the overarching aim of which is to make Ireland the best place in the world to grow old.

The results of the report published in 2023 provided a comprehensive analysis of the participation of older adults in arts, creative and cultural activities. The report examined the associations between participation in these activities and physical, mental and behavioural health outcomes, as well as the long-term benefits of participation. It was found that those who participate in these activities experience higher quality of life and lower depression, stress, worry and loneliness compared to older adults who do not. It also provided insights into the frequency and location of participation as well as the reasons for participation. The data contained in this report may be useful in designing policies and programmes to support greater participation amongst older adults with different levels of education attainment, and those living in more rural areas.

The report also highlighted the need for continued support and investment in programmes and initiatives that promote engagement in these activities among older adults.

TILDA's research on the benefits of participation in creative and cultural activity is continuing in 2025 and 2026, funded by Creative Ireland, a government programme based in the Department of Communications, Culture & Sport. This iteration will focus on the impact of arts and creative activities engagement against the Flourishing Scale, which measures how well people are functioning in relation to their goals, activities, strivings and interactions with the world. This approach, and the questions that underpin it, have been developed by TILDA in collaboration with Professor Daisy Fancourt, Director of the WHO Collaborating Centre for Arts & Health at University College London. TILDA will include two measures of flourishing to enable comparison with other longitudinal studies of ageing worldwide and the undertaking of more complex analysis to examine associations across health outcomes.

Health and well-being promotion, statistical data collection and evaluation practices

FINLAND

Data collection and evaluation on health and well-being aims to examine measures, resources and operating cultural practices that promote health and well-being in the municipalities of Finland.

Results of the data collection from 2023 show that cultural activities promoting health and well-being play an increasingly important role in the municipalities in Finland.

The Finnish Institute for Health and Welfare collects statistical data on the promotion of health and well-being in different municipal sectors every two years. It supports municipalities and regions in decision-making, planning and managing their health promotion efforts. Based on a systematically compiled knowledge base, cultural activities and the promotion of well-being through arts and culture can be planned, managed and evaluated across the municipalities. The analysed data is published on an open benchmarking data system which is free of charge. Collected data provides the municipalities the possibility to compare their situation in relation to the whole country or comparable municipalities. It is also used as a management tool at the national and regional level.

The practices in promoting health and well-being are evaluated in an open, evidence-based management database/platform by the Finish Institute for Health and Welfare. The service provides peer-reviewed information on evidence-based practices, which are published in the publication series on Practices in Health and Well-Being Promotion. The evaluation of the practices in promoting health and well-being supports decision-makers and helps to allocate resources in an optimal way. Systematically reviewed practices are collected in the database/platform, which provides guidance on what practices are effective, and why. The openness of the peer review method makes the evaluation process more transparent. So far, two practices in promoting health and well-being have been evaluated in the field of cultural well-being: healthcare clowning for paediatric patients and participatory dance films.

ARTIS: Art and Research on Transformations of Individuals and Societies

TRANSNATIONAL

ARTIS aims to explore how art can transform individuals and societies by combining empirical research (from psychology, neuroscience, and phenomenology) with theoretical approaches (from philosophy, political science, and art criticism). This interdisciplinary project is pioneering new ways of assessing the impact of participation in culture and the arts at both individual and societal levels. This initiative is an EU-funded project (2020–2025) coordinated by the University of Vienna's Faculty of Psychology. The project brings together a diverse consortium of universities and art institutions from across Europe including Aarhus University, Humboldt University of Berlin, the University of Oxford, and others.

The project has four key objectives:

- Empirical investigation of the types of experiences people have with art and how these relate to personal changes (in cognition, emotion or health) and societal shifts (in empathy, social attitudes or political views). These studies take place in museums, urban spaces and even people's homes and workplaces.
- Theoretical reflection, challenging and contextualising empirical findings using philosophical and socio-political frameworks.
- Art-based interventions, including workshops and experimental practices developed with artists, art schools and cultural institutions to foster engagement and address social issues.
- Policy translation, turning the project's insights into practical guidelines to inform cultural policies and enhance the societal role of the arts.

ARTIS also focuses on inclusivity by considering both mainstream and marginalised populations. By bridging science, art and policy, it aims to provide new methodologies for evaluating the transformative power of culture and the arts and influencing cultural policy from the ground up.

THE WAY FORWARD

The intersection of culture and health represents a transformative opportunity for the European Union to address pressing societal challenges while fostering holistic well-being, social cohesion, and economic resilience. This report underscores the compelling evidence that cultural participation enhances mental and physical health, reduces healthcare costs, and strengthens communities. The time to act is now—by integrating culture into health systems and policies, the Member States of the EU can unlock the full potential of this synergy to build a healthier, more inclusive, and resilient future.

The recommendations outlined in this report call for bold, coordinated action across sectors and governance levels. From establishing cross-sectoral strategies and securing sustainable funding to advancing research and ensuring equitable access, the path forward requires commitment from policymakers, practitioners and communities alike. By prioritising culture as a cornerstone of (mental) health, the EU can lead globally in innovative, human-centred solutions that empower individuals and societies to thrive.

Let this report serve as a catalyst for change. Together, we can create a Europe where culture is not only a right but a vital resource for health and well-being for all. The vision is clear; the evidence is robust. Now is the moment to turn this vision into reality.

Posjet (Visit)
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GLOSSARY

In the emerging field of Culture and Health concepts and definitions are developing and changing. For instance, while EU documents talk about Culture and Health, most academic and research papers talk about Arts and Health. In most cases both terms are interchangeable.

Applied neuroaesthetics

Applied neuroaesthetics[96] is the study of how the brain correlates and processes cultural and aesthetic experiences with a goal of innovating and improving therapeutic outcomes for individuals and populations. It focuses on understanding the neural mechanisms that underlie responses to art, beauty and creativity. It applies neuroscientific methods to explore how engagement with culture and the arts influences cognition, emotion and behaviour, with potential therapeutic applications.

Arts

The arts encompass diverse forms — including music, dance, theatre, visual arts, literature, film, digital media, cultural and ceremonial practices— and modes of engagement such as creating, performing, curating, attending, observing and learning in or through the arts. This includes both "active" creation and "receptive" participation as well as recognising how people engage with culture and the arts for personal expression, shared meaning and collective experience across a range of social and cultural settings[97].

Biopsychosocial model of health

The biopsychosocial model is a general model positing that biological, psychological (which includes thoughts, emotions, and behaviours), and social (e.g., socioeconomical, socioenvironmental, and cultural) factors, all play a significant role in health and disease. It follows, that health and disease are best understood in terms of a combination of biological, psychological, and social factors rather than purely in biological terms. This is in contrast to the biomedical model of medicine that suggests every disease process can be solely explained in terms of a *"deviation from normal function such as a physiological process, infections, genes, developmental abnormalities, or injuries."*[98] The model is based on work by George Engel, initially proposed in 1977[99].

Creative arts therapies

Creative Arts Therapies (CATs)[100] is an umbrella term for health professions that share an intentional use of the creative arts within a professional client-creative arts therapist relationship to achieve therapeutic goals. This includes art therapy, dance movement therapy, drama therapy, psychodrama, music therapy and poetry therapy. The CATs are used with individuals, groups and families of all ages and abilities. Creative arts therapists complete extensive education and clinical training.

96 Chatterjee and Vartanian, 'Neuroaesthetics'.
97 Sonke et al., 'Relationships between Arts Participation, Social Cohesion, and Wellbeing'; Sonke et al., 'Defining "Arts Participation" for Public Health Research', 17 July 2023; Davies et al., 'Defining Arts Engagement for Population-Based Health Research'; Davies and Clift, 'Arts and Health Glossary - A Summary of Definitions for Use in Research, Policy and Practice'.
98 ScienceDirect, 'Biopsychosocial Model - an Overview | ScienceDirect Topics'.
99 Engel, 'The Clinical Application of the Biopsychosocial Model'.
100 De Witte et al., 'From Therapeutic Factors to Mechanisms of Change in the Creative Arts Therapies'.

Community Arts

Community art, also known as social art, community-engaged art, community-based art and, rarely, dialogical art, is the practice of art based in—and generated in—a community setting. It is closely related to social practice and social change. Works in this form can be of any media and are characterised by interaction or dialogue with the community. Professional artists may collaborate with communities which may not normally engage in the arts. The term was defined in the late 1960s as a community-oriented, grassroots approach, often useful in economically depressed areas.

Community Art is based on Article 27 of the Universal Declaration of Human Rights[101]. Its practices are often collaborative, reflecting the community's identity, values and concerns, and aim to strengthen social ties, foster empowerment, promote social change, or address health and wellbeing outcomes or issues. Community arts are typically participatory, inclusive and address both individual and collective needs. Community Arts paved the way for Culture and Health, i.e. cultural activities in the context of health and well-being.

Culture

The Treaty of Lisbon[102] places great importance on culture: the preamble to the Treaty (TEU) explicitly refers to 'drawing inspiration from the cultural, religious and humanist inheritance of Europe'. One of the EU's key aims, as specified in the Treaty, is to 'respect its rich cultural and linguistic diversity, and [...] ensure that Europe's cultural heritage is safeguarded and enhanced' (Article 3 TEU). Article 6 of the Treaty on the Functioning of the European Union (TFEU) states that the EU's competences in the field of culture are to 'carry out actions to support, coordinate or supplement the actions of the Member States'.

Article 167 TFEU provides further details on EU action in the field of culture[103]: The EU must contribute to the flowering of the cultures of the Member States while respecting their national and regional diversity and bringing the common cultural heritage to the fore. The EU's actions should encourage cooperation between the Member States and support and supplement their action in improving the knowledge and dissemination of the culture and history of European peoples.

The 1982 Mexico Declaration on Cultural Policies[104] by UNESCO defines culture as the distinct spiritual, material, intellectual and emotional features characterising a society. It encompasses arts, lifestyle, human rights, value systems, traditions and beliefs. Culture shapes individuals and societies fostering unity through shared values and traditions.

Culture is understood as combining[105]:

A) the cultural and creative sectors as defined by the European Commission in the regulations of Creative Europe;

B) the cultural practices of non-cultural professionals that support goals such as inter-cultural dialogue and heritage protection, as understood in the EU Strategy for International Cultural Relations;

C) and other cultural practices led by amateurs.

101 United Nations General Assembly, *Universal Declaration of Human Rights*, vol. 3381.
102 European Union, *Treaty of Lisbon Amending the Treaty on European Union and the Treaty Establishing the European Community*.
103 European Union, *Treaty of Lisbon Amending the Treaty on European Union and the Treaty Establishing the European Community*.
104 UNESCO, 'Mexico City Declaration on Cultural Policies'.
105 Zbranca, R. et al., *CultureForHealth Report: Culture's Contribution to Health and Well-Being. A Report on Evidence and Policy Recommendations for Europe*.

Culture / Arts and Health

As Culture and Health is understood as an emerging interdisciplinary field supporting the well-being of individuals and communities through the inclusion of cultural practices in health promotion, prevention as well as in treatment and management of diseases, built upon:

1) the evidence accumulated by bottom-up actors and researchers of the multidimensional contribution of culture towards health and well-being;
2) and the recognition by policymakers of the sector's potential long-term contribution to the transition towards a well-being economy.[106]

Healing Arts or *Creative Health* are alternative terms for the Culture and Health practice.

The connection between culture and health policies has received increased recognition at the international and EU level in recent years: illustrated by the 2022 Commission's "Report on the cultural dimension of sustainable development in EU actions[107]" and in the MONDIACULT declaration committed to advocate for a systemic anchoring of culture in public policies, including in health and emotional well-being. The Declaration was adopted at the UNESCO World Conference on Cultural Policies and Sustainable Development – MONDIACULT 2022 on 28-30 September 2022, in Mexico[108].

Culture / Arts activities with stated therapeutic intent

Culture and arts activities with therapeutic intent include artistic activities that are designed with the intention of promoting health[109].
They are intentionally created to target particular therapeutic outcomes, such as alleviating symptoms, reducing stress, enhancing emotional regulation, facilitating coping, or improving cognitive function —typically conducted outside a formal therapeutic framework.

Culture / Arts engagement

Cultural and arts engagement is a complex and ubiquitous human behaviour involving dimensions related to "modes of engagement" (including informal, formal, live, virtual, individual, and group, active and receptive participation), forms (art forms or disciplines with which people engage such as music, dance, drama, visual art, craft etc.) and people (makers/creators, collaborators, audiences, observers, and others)[110].

Culture / Arts in healthcare

Culture and the arts in healthcare refer to creative and artistic practices by artists or cultural workers in healthcare settings and who, upon referral from a care team, explore different cultural and art forms to enhance the patient experience, improve the healthcare environment and support caregivers through passive or active involvement in creative processes.

106 Culture Action Europe, 'Position Paper on Culture, Health and Well-Being'.
107 European Commission, *REPORT FROM THE COMMISSION TO THE EUROPEAN PARLIAMENT, THE COUNCIL, THE EUROPEAN ECONOMIC AND SOCIAL COMMITTEE AND THE COMMITTEE OF THE REGIONS on the Cultural Dimension of Sustainable Development in EU Actions.*
108 UNESCO and Mondiacult 2022, *UNESCO World Conference on Cultural Policies and Sustainable Development – MONDIACULT 2022 (28-30 September 2022, Mexico City).*
109 Sajnani et al., 'The Arts as a Global Health Resource'.
110 Davies et al., 'Defining Arts Engagement for Population-Based Health Research'; Davies and Clift, 'Arts and Health Glossary - A Summary of Definitions for Use in Research, Policy and Practice'; Sonke et al., 'Defining "Arts Participation" for Public Health Research', 17 July 2023; Rodriguez et al., 'Arts Engagement as a Health Behavior'; Sonke et al., 'Relationships between Arts Participation, Social Cohesion, and Wellbeing'.

Culture / Arts in public health

Arts in Public Health combines arts and culture with efforts to promote community and population health and well-being[111].

Health

Health, as identified in the preamble to WHO's Constitution, is defined as "a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity"[112], thereby going beyond a purely bio-medical approach.

The WHO Constitution does not mention culture. However, as noted in the WHO systematic review on arts and health: "In the decades since 1948 when this definition of health was published, the concept of health has expanded further … Complete health and well-being may not be everyone's goal. For example, the presence of a chronic mental or physical illness is not necessarily a sign of being ill but may be something that can be managed … Management is shaped in part by resilience and whether individuals can adapt with their health: whether they can restore their physiological homeostasis (balance) and feel they have the capacity to cope and fulfil their potential with a degree of independence and opportunity to participate socially … Health is, therefore, a dynamic process that, at its core, is about having the capacity to self-manage."[113]

Health Literacy

The WHO defines health literacy as "representing the personal knowledge and competencies that accumulate through daily activities, social interactions and across generations. Personal knowledge and competencies are mediated by the organisational structures and availability of resources that enable people to access, understand, appraise, and use information and services in ways that promote and maintain good health and well-being for themselves and those around them."[114]

Health promotion

As per the WHO, health promotion is the process of enabling people to increase control over the determinants of health and thereby improve their health. It moves beyond a focus on individual behaviour towards a wide range of social and environmental interventions. It not only embraces actions directed at strengthening the skills and capabilities of individuals, but also actions directed towards changing societal, environmental, and economic conditions to alleviate their impact on public and individual health[115].

111 Sajnani et al., 'The Arts as a Global Health Resource'.
112 Organization, 'Constitution the World Health Organization'.
113 Fancourt and Finn, *What Is the Evidence on the Role of the Arts in Improving Health and Well-Being?*
114 WHO, *Health Promotion Glossary of Terms 2021*.
115 WHO, *Health Promotion Glossary of Terms 2021*.

Medical/Health humanities

Medical or Health Humanities[116], constitute an interdisciplinary field that incorporates the arts, humanities and social sciences into medical education and practice. It aims to provide healthcare professionals with a broader understanding of the human experience of illness, health and care by exploring phenomenological, ethical, cultural and social dimensions. The field fosters empathy, critical thinking, and reflective practices, enhancing the ability of clinicians to address the complex emotional, psychological and social factors that influence patient care.

Pathogenesis

Pathogenesis can be defined as referring to the sequence of events, mechanisms and factors that lead to disease, including how harmful agents such as bacteria, viruses, toxins, or genetic mutations interact with the body.

Prevention of Diseases

Disease prevention, understood as specific, population-based and individual-based interventions for primary and secondary (early detection) prevention, aiming to minimise the burden of diseases and associated risk factors. Primary prevention refers to actions aimed at avoiding the manifestation of a disease (WHO).

When implementing preventive measures, it is important not only to focus on primary prevention but also to address other levels of prevention[117] (secondary, tertiary and even quaternary):

- Primary prevention: action taken to avoid or remove the cause of a health problem in an individual or a population before it arises
- Secondary prevention: action taken to detect a health problem at an early stage in an individual or a population, thereby facilitating a cure or reducing or preventing it spreading or resulting in long-term effects
- Tertiary prevention: action taken to reduce the chronic effects of a health problem in an individual or a population by minimising the functional impairment consequent to the acute or chronic health problem
- Quaternary prevention: action taken to protect individuals (persons/patients) from medical interventions that are likely to cause more harm than good.[118]

116 Sajnani et al., 'The Arts as a Global Health Resource'.
117 WHO, *Health Promotion Glossary of Terms 2021*.
118 Martins et al., 'Quaternary Prevention'.

Salutogenesis

"Salutogenesis", as defined by Antonovsky and expanded by scholars like Mittelmark, Lindström, and Eriksson[119], is the study of *health-promoting or health generating* processes that focus on how people and communities stay healthy and resilient in the face of challenges.

Rather than looking at "pathogenesis" – the factors that cause disease – salutogenesis asks: *"What makes people thrive?"* This concept explores the resources—such as social support, self-efficacy, hardiness, and sense of coherence—that contribute to resilience and flourishing, integrating various positive health dimensions, including quality of life and well-being, highlighting the importance of engaging these resources to foster individual and collective health.

A "salutogenic" approach to public health can also be seen in contrast to a "pathogenic" one (see definition for *Pathogenesis).*

Social prescribing/ Arts on prescription / Cultural prescribing

Social prescribing is "a means for trusted individuals in clinical and community settings to identify that a person has non-medical, health-related social needs and to subsequently connect them to non-clinical supports and services within the community by co-producing a social prescription—a non-medical prescription - aimed at improving health and well-being and strengthening community connections."[120]

In social prescribing, local agencies such as charities, social care and health services refer people to a social prescribing link worker. Social prescribing link workers give people time to focus on 'what matters to me?' to co-produce a simple, personalised, care and support plan that helps people to take control of their own health and well-being. One of those elements can be culture-based social prescribing.

Arts on prescription or cultural prescribing programmes are a subset of social prescribing that involve referring oneself or others to culture and arts programs.

Well-being

Well-being is the subject of lively debates and, hence, a term on which there is no international consensus. For the purposes of this report, it is understood as a positive state allowing citizens to participate fully in society. This follows WHO's 1986 Ottawa Charter for Health Promotion which sees health as 'a resource for everyday life, not the object of living' and as 'a means to an end which can be expressed in functional terms as a resource which permits people to lead an individually, socially and economically productive life'[121].

119 Antonovsky, 'The Salutogenic Model as a Theory to Guide Health Promotion'; Mittelmark, Sagy, et al., *The Handbook of Salutogenesis*; Lindström and Eriksson, 'Salutogenesis'.
120 Muhl et al., 'Establishing Internationally Accepted Conceptual and Operational Definitions of Social Prescribing through Expert Consensus'.
121 WHO, *Ottawa Charter for Health Promotion.*

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