

RATIONALE AND EVIDENCE FOR HEALTH AND THE ARTS

NSW Health is committed to a patient-centred, integrated model of health which incorporates all of a person's health needs, and in which health is promoted and improved both in health care facilities and in the community. The Arts form an important part of this model for individual and community health.

While the use of The Arts for health improvement at individual and population levels, and in health facility design, has been intuitively adopted in NSW and by countries around the world for many decades (or even centuries), in recent years more effort has been spent generating empirical evidence about the health outcomes which arise from the integration of health and The Arts.

There is now a growing body of peer-reviewed evidence in the form of reports, evaluations and a number of systematic reviews, establishing a wide range of measurable benefits from the use of the arts in improvement of physical and mental health, and in engaging individuals and priority populations with health messages, programs and services¹.

At the same time as evidence is being generated, there has also been an increase in the number of health and The Arts initiatives supporting health issues such as mental health^{2,3,4} Aboriginal health, sexual health, aged care⁵, dementia care and end of life care⁶, and chronic disease prevention⁷, and an increasing range of collaborations between the health and arts sectors in both health care and community settings. A broader suite of art forms including craft, writing, music, theatre, dance, visual arts, film and digital media are being used⁸. This practice also provides valuable guidance as to the benefits of health and the arts and opportunities for innovative practice to contribute to evidence generation.

Utilising The Arts in health settings can lead to greater effectiveness and efficiency in health care delivery⁹, with reductions noted in the need for pain and other medications^{10,11,12} length of stay in hospitals^{13,14} stress and anxiety related to health conditions and treatment^{15,16} and visits to primary care¹⁷. The Arts have also been demonstrated to improve patient tolerance of symptoms

and treatment, self-efficacy and social inclusion^{18,19,20,21} perceptions of care quality, and communication between patients and health professionals^{22,23} (especially where health professionals are themselves engaged in the arts in medical training and practice). Benefits are also shown in health professional observation and communication skills, and work-related stress^{24,25}. These benefits accrue to health services in the form of greater efficiency, better health outcomes, reduced need for care, and workforce retention^{26,27}.

More broadly, it is also well established in the evidence that cultural life is a contributor to health²⁸. Experiencing, making and performing art brings people together in a way which fosters social inclusion and community participation, and facilitates intergenerational and cultural exchange²⁹. These outcomes are particularly important for priority populations including Aboriginal people, culturally and linguistically diverse communities, older people and people with disability.

Together with the more recently measurable and reported impacts on health outcomes and health service efficiency through the use of The Arts, the enrichment of community engagement by health services also provides an important element of the rationale for focusing on partnerships between health services and arts organisations as part of a patient-centred approach to health.

A further note from the evidence about health and The Arts is that, in designing and implementing such programs, a focus should be on forming sustainable, innovative and agile partnerships between health services and arts organisations and artists³⁰. It is through the joint creation of health and The Arts programs that the highest gains are to be made for patients, carers, staff and health services.

- 1 For example, see Putland, C. (2012) *Arts and Health – A guide to the evidence, Background document prepared for the Institute for Creative Health Australia*, and, Fenner, P., Rumbold, B., Rumbold, J., Robinson, P., Harpur, S. (2012) *Is there compelling evidence for using the arts in healthcare?* Health policy evidence brief, Deeble Institute, Australian Healthcare and Hospitals' Association, and the National Arts and Health Framework (2014), Commonwealth Government, available at coaghealthcouncil.gov.au.
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