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CULTUREFORHEALTH AND WELL-BEING. ON CULTURE'S POTENTIAL CONTRIBUTION TO THE ECONOMY OF WELL-BEING

by MAFALDA DÂMASO* and RARITA ZBRANCA**

Summary

The potential health benefits of culture receive increasing academic and policy attention. However, although new researches on the links between culture and health and well-being are published regularly, it remains difficult to identify existing patterns of evidence and gaps. The CultureForHealth consortium was tasked by the European Commission with the role of providing a summary of such patterns, and to make policy recommendations as to how the European Union can build on existing knowledge, advance it, and support cultural and other relevant actors to guarantee that the health benefits of culture are recognised and unleashed. Doing so can support broader efforts to build what the OECD describes as an economy of well-being (2019).

Keywords: cultural policy, health, well-being, European Union, well-being economy

JEL code: I18, I31, Z1

1. Introduction

The preamble of the Constitution of the World Health Organization proposes to understand health as «a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity» (WHO, 1947). One would expect, then, that a substantial part of health policy and resources in the European Union (EU) would focus on well-being and prevention rather than on the treatment of ill health. However, that is not the case. In 2018, in the EU, public and private expenditure on preventive care accounted for only 2.8 per cent of total

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health expenditure on average, with the highest figure being achieved in Italy (4.4 per cent) (Eurostat, 2021). There is a substantial gap, then, between WHO's definition of health and the current paradigm of healthcare that is used to support it. The CultureForHealth consortium believes that culture can be part of a more holistic and consistent approach to health policy in the EU and, with it, to a more ambitious understanding of welfare and policymaking.

This article summarises the findings of CultureForHealth's Report (Zbranca *et al.*, 2022), one of the outcomes of the CultureForHealth project (2021-2023). The latter is implemented by a consortium consisting of Culture Action Europe, Trans Europe Halles, Central Denmark Region, The Northern Dimension Partnership on Culture, Cluj Cultural Centre, and Društvo Asociacija, in response to the Preparatory Action Bottom-Up Policy Development for Culture & Well-being in the EU, launched by the European Union (European Union, 2020). CultureForHealth aims to provide better understanding, disseminate, and support the role of culture in well-being and health. Specifically, the project aims to facilitate the exchange of knowledge, experience and success stories in the EU, to provide evidence and policy recommendations, to map the most relevant existing practices in this regard in the EU, to develop experimental pilot projects testing the feasibility of new actions and including local communities and local players, and to foster policy dialogues. These goals explain the multiple elements of the project, which are presented on its website¹.

2. Methodology

Specifically regarding the CultureForHealth Report, it provides a summary of existing literature, key concepts, and the most frequent types of interventions in the domain of culture for health and well-being. Additionally, it identifies persistent knowledge gaps, and uses these findings as the basis to make recommendations for EU policymakers.

For the purposes of this article, several important points should be made. Firstly, the report answers the questions that were defined in the guidelines of the Preparatory Action: What evidence is there that participation in cultural activities improves the health and well-being of citizens?

Which specific forms of cultural participation appear to have a more positive impact? Which policies in the field of culture might contribute, directly or indirectly, to maximising the benefits?

What synergies are necessary with other policy fields?

The first part of the report (its scoping review) addresses the first two research questions, and the second part of the report (its policy recommendations) addresses the last two.

Secondly, the scoping review follows the Joanna Briggs Institute methodology (Aromataris and Munn, 2020) and is inspired by a recent

WHO scoping review on the role of the arts in improving health and well-being (Fancourt and Finn, 2019). The latter's search terms were expanded to also take into consideration the contribution of culture to subjective and community well-being, studies published since 2019, and research focused on the COVID-19 pandemic. The search strategy was applied to two databases (PubMed and Scopus), uncovering articles published in English between 2005 and November 2021. This resulted in the inclusion of 310 records. This being said, the analysis of the literature doesn't have the aim of providing a systematic review; rather, it should be understood as a scoping review that maps the types of evidence produced in this particular field of research.

Thirdly, combining the review's findings with existing policy discussions across the EU, the Policy Recommendations make both broad and targeted policy proposals to maximise the benefits of cultural activities in improving the health and well-being of individuals and communities, following a process aligned with the policy cycle approach and the key elements of policy analysis (Knoepfel *et al.*, 2007). Finally, the report concludes with a set of suggestions as to how culture can potentially support a number of important challenges faced by Europe identified by the CultureForHealth partners: namely, a mental health crisis exacerbated by the pandemic, growing inequalities, the forceful displacement of people due to war and political conflict, and dynamic changes to work and the economy.

3. Trends and Recommendations

All findings and recommendations made in the report are connected, be it directly or indirectly, to the idea of cultural welfare. However, some of them can be highlighted as being particularly relevant in the context of this discussion.

Before doing so, it is important to stress the general finding of the scoping review: there is a strong and growing body of evidence demonstrating that arts and cultural activities can play an important role in promoting the health and well-being of populations, both individually and collectively. Specifically, the research team found 138 studies establishing links between culture and health, 118 studies on the connection between culture and subjective well-being, 131 studies on culture and community well-being and, finally, 12 studies revealing a linkage between culture and positive COVID-19 outcomes.² These references cover a broad spectrum of health and well-being-related issues, and refer to activities that are both receptive (such as listening to music or watching visual artworks) and active (where participants are involved in the creative process) (Figure 1).



FIG. 1 – Culture-related Health and Well-being Outcomes

To give some examples, research suggests that music and singing can alleviate stress and anxiety, drama and storytelling can aid social interaction, photography and film can support self-expression, and the visual arts can promote the finding of meaning in one’s life. Moreover, regarding the specific issue of the potential contribution of arts and culture activities to community well-being, such activities can positively impact social relations, and citizens’ active engagement, among other issues. In particular, the scoping review also uncovers a link between people’s active participation in cultural activities and increased social inclusion and bonding. For example, research suggests that culture has the potential to support the health and well-being of vulnerable groups and

people at risk of exclusion, such as people with disabilities, minority groups, people living in poverty, and people in rehabilitation.

Looking at these findings more broadly, it becomes clear that culture can support the prevention of ill health, its management and treatment, and the promotion of health. This echoes the theoretical model proposed by the WHO Report (Fancourt and Finn, 2019), according to which arts activities are multimodal interventions involving different types of engagement mechanisms that can support health and well-being. For example, such mechanisms can involve imagination stimulation, cognitive stimulation, social interaction, and physical activity, thus stimulating responses at the psychological, physiological, social and behavioural levels. Therefore, the scoping review suggests that arts and cultural activities have an important role to play in health and social care policy, facilitating a shift away from the current focus on the treatment of illness towards a broader understanding of health that is congruent with the definition with which this article started.

That is, there is a multitude of untapped overlaps between culture and health policies – the former can be embedded into the latter namely as part of routine medical care, as an auxiliary treatment, and incorporated in care scenarios. This would not only support health prevention, promotion and treatment but also potentially contribute to giving the cultural sector new opportunities for experimentation and capacity-building as well as sources of income. However, the report also highlights the significant gap between existing evidence regarding the health and well-being benefits of culture and the generalised lack of structured policies recognising this potential. Exceptions include Finland, the Skåne and Nordic regions of Sweden, and promising early evidence regarding culture-based social prescribing in pilot projects and policies namely in Belgium, England and Ireland.

4. Culture and the Economy of Well-Being

Finally, the report proposes that the linkages between culture and health and well-being can be organised according to five overlapping impact pathways: two at the individual level (focused on the ways how cultural engagement can support physical and mental health, as well as subjective well-being), two at the community level (highlighting benefits surrounding social connectedness or belonging, and active, resilient communities), and one at the economic level (supporting a well-being economy). This typology combines the outcomes identified in the scoping review with an adapted and expanded reading of the pathways identified by Pier Luigi Sacco (European Commission, 2020). While the causal relation in the first four pathways goes from cultural intervention to individual or social health or well-being, the fifth pathway of impact is circular: cultural interventions support health and well-being, which reinforce social stability and economic

prosperity, and support continued investments in culture for health and well-being (Figure 2).

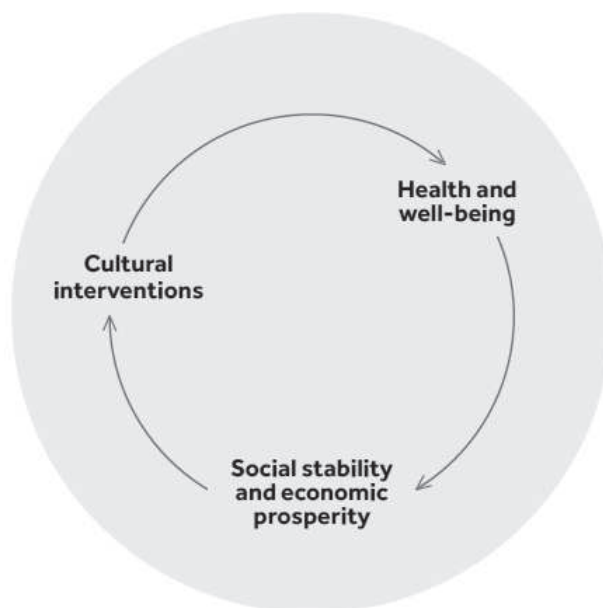


FIG. 2 – The circular relation between culture and the well-being economy

That is, from an economic point of view, the report’s findings suggest that cultural interventions can be preventive of disease, and thus to be likely to contribute to long-term health budget savings, opposing the current focus of health policy on disease treatment. Indeed, in 2019, while some EU members dedicated more than 10 per cent of GDP to health-care expenditure (Eurostat, 2019), «preventive health care in the EU accounted for [only] around 0.3 per cent of GDP in 2019» (Eurostat, 2022).

This being said, the report’s proposed connection between culture, welfare and the economy is even more ambitious. The idea of culture’s contribution to an economy of well-being suggests that, rather than merely comparing costs of health prevention programmes against those of health treatment, the former could also be seen as a long-term investment in individual and community prosperity. This logic is inspired by what the OECD names as the Economy of Well-being; that is, the «capacity to create a virtuous circle in which citizen well-being drives economic prosperity, stability and resilience, and vice-versa, that those good macro-

economic outcomes allow to sustain well-being investments over time» (OECD, 2019). Our report suggests that cultural interventions could be included in this approach, which sees public and private investments in the social determinants of health as supporting a healthy and sustainable workforce, and hence economic resilience (EuroHealthNet, 2022).

5. Conclusion

Unleashing the potential health and well-being benefits of culture across the EU requires concerted action across four main areas. The report makes detailed recommendations in this regard. Namely, and firstly, there is a need for dedicated strategic and financial support, reflected in the inclusion of culture as an integral part of a holistic strategy focused on long-term health promotion and disease prevention and on addressing health inequalities. Secondly, in terms of knowledge and awareness building, the EU should, namely, recognise cultural activities as complementary to traditional medical responses. Thirdly, in terms of training and peer learning, EU policymakers should develop curricula and encourage joint training between culture, health, and other actors. Fourthly, culture, health and well-being R&D and policy discussions should be localised through the creation of a dedicated platform.

This being said, it is important to stress the fact that, as the scoping review highlights, the health and well-being benefits of culture are intimately connected to the cultural logic of such interventions. In other words, the recognition of the health benefits of culture reiterates the latter's importance as a policy field that, in its own particular ways, supports individual and community flourishing and can promote just, equal and sustainable societies, thus foregrounding the important role that culture can play in Europe's future.

Notes

¹ <https://www.cultureforhealth.eu/>

² The scoping review summarised 310 studies which are, in some cases, relevant across more than one theme.

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