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Predictions for the Evolution of Arts in Healthcare Practices

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ABSTRACT

The integration of arts into healthcare practices has deep historical roots, spanning disciplines like music, visual arts, and performance. These modalities have evolved from informal practices to structured therapeutic interventions, contributing to patient well-being and supporting healthcare professionals in addressing burnout and empathy. Recent advancements in technology, such as virtual reality (VR) and augmented reality (AR), are revolutionizing access to the arts in healthcare, while community-led initiatives and policy changes are fostering broader implementation. This paper examines the historical context, current practices, benefits, and challenges associated with arts in healthcare. It also explores technological innovations, emerging trends, and potential future directions for embedding arts into clinical and community health settings. By addressing social determinants of health, promoting holistic care, and enhancing therapeutic environments, the arts hold transformative potential for reshaping healthcare landscapes worldwide.

Keywords: Arts in healthcare, Therapeutic arts, Expressive arts therapy, Social determinants of health, Arts and technology, Patient-centered care.

INTRODUCTION

Arts and healthcare practices have had a relationship for centuries. Throughout history, art has played a variety of roles in healthcare settings. The sonatas of one of the earliest citations in healthcare settings were used in medical institutions across Europe to help stabilize mental and psychological processes associated with debilitating mental and emotional trauma. The evocative traits that are common to traditional music and music beyond geography and time have been used globally, setting the stage for the myriad ways art can have a salutogenic effect on the human body and mind. Through the first half of the 20th century, hospitals would incorporate medical illustration in their patient care teams as a teaching opportunity as well as a means to thoroughly, experientially, and effectively clarify the etiology, physiology, and prognosis of an illness. In both cases, the assertion was that art would touch patients' emotions and psyches in ways other forms of information dissemination could not: as a result, it would "work better" to promote demeanor-based training outcomes or physical regulation [1, 2]. As cultural approaches to patient-centered care expanded and as research language caught up with and began parsing the age-old notion of "art as therapy," a variety of ancillary arts modalities entered clinical practices under the rubric "expressive arts therapies." While appropriate for deeply clinical work, the term has had some regrettable consequences in healthcare settings, not the least of which has been to obscure the broader implications of art practices in therapeutic settings. Taken together, research on and into the arts within healthcare practice is now coalescing into a set of straightforward findings and directives that are being used to galvanize practitioners and advocates, shape policy, and build or reform clinical programs [3, 4].

Background and Significance

Arts in healthcare have a long history of positively affecting patient care. For nearly as long as people have made art, they have used the arts as a healing intervention. Over centuries, disciplines including writing, movement, theater, music, visual art, and dance have been used in therapeutic ways spanning cultures and time. In the last two decades, there has been a surge of scholarly attention directed at the

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ways arts can enhance health outcomes. Many publications endorse the integration of the arts and humanities into health curricula to increase empathy, reduce burnout, and enhance communication among practitioners. Arts in healthcare is a way of working within an interdisciplinary context, integrating art modalities, medical sciences, and humanities disciplines in care for the whole person. In the growing movement to make healthcare more interdisciplinary, the arts can play a significant role in addressing social determinants of health, healing, resiliency, and 'caring for the carers.' Emphasizing the historical precedent has a role to play in advocacy efforts to bring the arts back into healthcare curricula and health environments [5, 6]. Both quantitative and qualitative research suggest the use of the arts in a clinical setting has an impact on the patient experience. Systematic reviews of the arts in healthcare demonstrate the weight of the literature and the strength of evidence when arts are employed in therapeutic ways. However, when academic medicine fully adopted evidence-based practice, skepticism began to be voiced about the value of the arts and humanities in healthcare. A particular concern was that these practices have therapeutic effects that rely only on placebo, rather than working through a specific pharmacological mechanism. More recently, medicine has come to understand that healing is a complex process that is deeply influenced by context and the individual patient. In this way, the arts can once again be viewed as having the potential to influence our ability to heal by exploring the complexity of the human being. The arts are a way to explore narrative medicine and ethics as well as social determinants of health, engaging an increased understanding of the social role of medicine in delivering healthcare, shaping the conditions for health, and assuming responsibility for the health of the public [7, 8].

Current State of Arts in Healthcare

Access to arts programming is available in various medical settings. In every corner of the United States, there are adult and pediatric hospitals, senior facilities, and rehabilitation clinics that have artist residencies, bedside workshops, and other creative arts opportunities for patients. Multidisciplinary and diverse practitioners in the United Kingdom have piloted arts and health practices with more than 7.8 million participants through regional arts in health agencies. This good work continues through the participatory arts and wellbeing network whose member organizations enable 2 million people to engage in the arts annually. As a whole, in the United States and abroad, people understand and value music and art's contributions to health and admire how healthcare providers offer them to make patients comfortable [9, 10]. Patients who use these types of interventions in the United States are on the rise. A report on the Arts, Health, and Emotional Well-being states that 91% of Americans believe that the arts are important in their healthcare. Aware of the reasons why they miss access to the arts in medical settings, 46% of Americans report that healthcare providers are ideally positioned to consider healthier living through the arts. There is a growth in the number of practicing music therapists and significant services in federal health facilities being part of the Veterans Health Administration. This variety of arts programming in clinics includes visual arts, artists that bring music therapy to audience members, musicians performing at the bedside, choir performances, youth patient "dance day," Zumba for aerobics, yoga, and journal workshops. Further evidence suggests the correlation of healthcare access to immigrants by the government with the prevalence of artists practicing as healthcare providers. We also see a precedent at the University of the State of New York, which received notable attention for its programs and integrative practices addressing art and medicine. Central to the study, the Cities of Wellness initiative reveals a paradigm where arts in medicine are used as primary or secondary therapies [11, 12].

Benefits and Challenges

The advancement of art in healthcare that we expect in the future is discussed. Art in healthcare might contribute to patient satisfaction, an enhanced healing environment, and reduction of stress and pain. However, barriers are the result of challenges in attempting to replicate these effects everywhere. To become mainstream, more research is needed [13, 14]. A study surveyed participants aged 65 years and older living in care homes. The installation of art in care homes improved the health and well-being of residents living with dementia. The Ease of Efforts study focused on a new art installation at two hospital sites and tested the impact of investment in the arts on staff. The 35% Club focused on a 12-month artist-led arts residency at a hospital and looked for reductions in specific cohorts of admissions and an increase in the proportion of patients admitted for planned rather than unplanned admissions. A project was developed and demonstrates that by isolating elements within one project, the elements could be tailored specifically to this project and ensure that specific change objectives for the project are achieved. A project would likely suit small projects that are more contained and have simple aims and outcomes [15, 16].

One of the major barriers to the adoption of arts programs in healthcare is how many people perceive the care environment. Changing perceptions of large population groups is a significant undertaking. The call for art to be valued and funded reflects the lack of importance that is placed on other aspects and potentially reflects how the view is held by a wider population of individuals. Awareness of the benefits that art can generate is advocated so that these advantages can be understood and mirrored on a wider scale. A project is developing strategic approaches and tools for enabling the deployment of art to improve the health of vulnerable groups in society. Such strategic tools might encompass training, agencies to employ artists and the professional training of these individuals, governmental funding bodies to ensure that resources are accessible for all, and research funding for academic institutions, if the national or regional population served, could stand to benefit. The project has emphasized the need to unite stakeholders from healthcare, research, human resources and planning, investment experts, and the arts so that all feel a part of the approach taken to deliver art and genuinely utilize this in the production process [17, 18].

Technological Advancements Impacting Arts in Healthcare

The establishment of a pioneering Arts Track at Aalborg University, a specifically demarcated research space designed to facilitate interdisciplinary creativity in the co-creation of art, technology, health, and illness, provides an exemplar of innovative practices. Rather than being confined to providing access to portable micro-labs, Arts Track initiatives had the central aim of transforming how patients experience art through the use of a highly socio-technical innovation: virtual reality. VR was used to build and extend upon an existing app developed in collaboration with partners that utilizes AI to provide an immersively personalized soundtrack to accompany visual art tours. Additionally, Arts Track partners have, in the wake of the COVID-19 pandemic, been collaborating on the AR Circadia mobile app, which is envisioned as becoming an application of exponentially greater reach for patients. AR Circadia facilitates the co-creation of new musical compositions, with a particular focus on developing content targeted at elderly, neurodiverse, and low-literacy patient populations whose access to touch-screen technology has been limited by digital illiteracy. Importantly, co-active learning and frequent patient consultations have been pivotal for developing and refining app designs to ensure that they will become non-taxing resources for an audience in need of relief and stimulation. In its current stage of development, AR Circadia also hopes to exhibit new potential and promote human flourishing by offering musicians opportunities for remote artistic collaboration and skill building. Importance is placed on the development of future living lab testing environments for research purposes, with the app offering a means of collecting valuable data on the experiences and contexts of app users and enabling us to answer a range of arts and health research questions [19, 20].

Emerging Trends in Integrating Arts into Healthcare Settings

There are many forward-thinking ways that the arts are supporting positive experiences in health settings. Here are some examples from around Minnesota of the diverse and unique ways these approaches are taking shape. Local Artist Partnerships: In 2017, a grant was received to identify the arts and access needs of healthcare organizations. They profiled three existing models: a creation program, Make Room for Art, and a Gallery at a hospital. These hospitals have dedicated art spaces within their walls. Staff members primarily drive the utilization of these spaces with the help of community volunteers who curate installations. One program is an artist-led qualitative research intervention designed to help staff, family, and residents build relationships and normalize the space. Community Workshops: For several years, a series of arts-related workshops specifically for people in healthcare settings has been run. Workshops have been held for people involved in wellness promotion, arts administrators, designers, community foundations, artists, and healthcare professionals. Examples of topics they have covered or are planning to cover include how to use the arts to engage community partners, work with patients in an employer-based clinic, in memory care, holistic healing, improving the work life of a facility's personnel, and self-care for people working in health care. Creating Art Spaces: A study showed how a new, integrated art space to care for patients undergoing chemotherapy was designed in consultation with an interior designer and the hospital's art curator. There are also art residency programs in several Minnesota hospitals. One program is working with local artists to promote the well-being of patients hospitalized with spinal cord and traumatic brain injuries and geriatric-psychiatric conditions by providing world-class art programs for emotional resiliency. Solutions for Wellbeing through the Arts is an arts and healing initiative developing artist-led creative workshops and wellness services for people with dementia, their care partners, and caregivers. This year, they are training teaching artists to work

with individuals with early- to middle-stage memory loss. In a roundtable discussion, a Program Officer for Elder Services shared that the need for more research and best practices to determine the most effective and/or transformative healthcare spaces for different communities is very high. Many hospitals and care facilities still have fundraising and arts-aesthetic-driven environmental design in the main mix. “We hear it’s about shifting the type of care facility and who’s on the other side, the patient, in terms of general wellness,” she says [21, 22].

Future Directions and Predictions

This paper outlined several important factors that bear upon and intersect with arts in healthcare practices. These include paradigms and healthcare cultures, methods and research in arts-based interventions, disciplines and positions that intersect on this topic, society’s engagement with the arts, and public health issues such as mental ill-health, physical activity, and social cohesion. The arts are located and understood differently in various types of healthcare practices across Europe and further geographic regions. This has further argued that some degree of policy coherence can be ascertained from the discourse surrounding this context. However, the uptake of the arts for healthcare has only been realized since 1989, and recently, in some nations, it has increased. Therefore, the health focus on individual lifestyle choices, which culminates in a human rights issue, appears superficially to pose no barrier to understanding a potential future health-as-well-being cultural context [23, 24]. In response to our question, we suggest that this effectively leads us to consider three potential future trajectories: (1) the possibility of integrating a focus on health-cultural change into healthcare policy and practice; (2) the nature of any health cultural change; (3) the practicalities of achieving this. In the first instance, aspiring health cultural change needs clinical evidence of benefits to shift healthcare processes, professionals, and organizations. The paper outlines possibilities for arts in healthcare practice by developing the groundwork identified in the literature review. This might include possibilities for compelling the value of change in theoretical and cultural contexts and physician training; enabling the healthcare community to learn from the kinds of interactions arts practitioners have in therapeutic contexts; and the benefits of networking and healthy inter-professional curiosity [25, 26].

CONCLUSION

The role of arts in healthcare is expanding beyond its historical applications to address complex modern health challenges. As healthcare systems increasingly prioritize holistic, patient-centered approaches, the arts are recognized for their unique capacity to support mental, emotional, and physical well-being. Current initiatives, such as artist residencies and arts-based workshops, exemplify the growing integration of creative practices into therapeutic environments. Additionally, technological advancements like VR and AR are democratizing access to arts-based interventions, making them more inclusive and scalable. Despite challenges like funding and widespread implementation, interdisciplinary collaboration and policy advocacy can overcome barriers and enhance the visibility and impact of arts in healthcare. The future holds immense potential for arts to contribute to cultural shifts in healthcare, enabling a more compassionate and effective system that prioritizes the well-being of both patients and providers.

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