



Creating Wellbeing:

Attitudes and engagement with arts, culture and health

Acknowledgement

Creative Australia proudly acknowledges all First Nations peoples and their rich culture of the country we now call Australia. We pay respect to Elders past and present. We acknowledge First Nations peoples as Australia's First Peoples and as the Traditional Custodians of the lands and waters on which we live.

We recognise and value the ongoing contribution of First Nations peoples and communities to Australian life, and how this continuation of 75,000 years of unbroken storytelling enriches us. We embrace the spirit of reconciliation, working towards ensuring an equal voice and the equality of outcomes in all aspects of our society.

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Foreword

Creative experiences have the unique power to facilitate human connection, exploration, inspiration and reflection – making us happier and healthier.

The mental health and wellbeing benefits of arts engagement are widely recognised. Results from Creative Australia's landmark research series, the National Arts Participation Survey, show that acknowledgement of the arts' wellbeing benefits is strong, and there has been solid growth in Australians attending arts and cultural events to improve their wellbeing.

However, we need to ensure that Australians of all backgrounds are able to access the health and wellbeing benefits of arts and cultural participation. There is also a need to add new approaches to our healthcare system, both to alleviate pressures associated with mental health, and to complement the system with non-clinical approaches that address the social determinants of health.

In this context, Creative Australia is working strategically to inform public policy in the area of arts approaches to mental health and wellbeing.

Revive: A place for every story, a story for every place, the Australian Government's new National Cultural Policy, sets a precedent for Creative Australia to amplify this work. In line with the spirit of Revive, Creative Australia is cultivating cross-portfolio connections at local, state and national levels to extend the creative sector's reach in health and wellbeing.

This research, titled *Creating Wellbeing:*Attitudes and engagement with arts, culture and health, is situated within Creative Australia's strategic arts and wellbeing policy work aimed to better understand the challenges and opportunities of arts approaches to wellbeing. It builds on Creative Australia's growing evidence base on public sentiment towards, and engagement with the arts, and advances discussion on the value of arts engagement and contribution of the arts to other sectors.

This piece aligns with Creative Australia's strategic priority to realise the enormous

potential of our creative nation by ensuring all Australians have access to arts, culture and creativity. Recognising the urgency of this work, the Australian Government's national cultural policy for the next five years, *Revive*, is underpinned by a commitment to drive connection and access to creative work.

This research provides critical intelligence on Australians' attitudes towards arts on prescription, part of an innovative health sector model, 'social prescribing', in use in international contexts. These insights are instrumental in informing the implementation of a social prescribing model in Australia. This was a key recommendation in Connected Lives: Creative solutions to the mental health crisis, a report consolidating findings and policy recommendations from Creative Australia's cross-sectoral Arts, Creativity and Mental Wellbeing Policy Development Program in early 2022.

Creating Wellbeing: Attitudes and engagement with arts, culture and health, is published alongside Creative Solutions: Training and sustaining the arts and wellbeing workforce which reports on Creative Australia research aimed to better understand the challenges, opportunities and professional development needs of artists working in mental wellbeing settings.

This report, together with the wider body of research it sits within, contribute critical insights to a live discussion on how we may support the growth of this innovative area of practice. It also provides us with new areas of inquiry to deepen our understanding of Australians' engagement with and attitudes towards arts, culture and health.

Adrian Collette AM

CEO Creative Australia

Executive summary

Arts, culture and creativity play an important role in everyday life and are integral to wellbeing, both individually and collectively.

Engaging with arts and creativity is proven to promote positive mental health and wellbeing outcomes across the life span, including addressing loneliness, decreasing anxiety and depression and increasing mental wellbeing and social inclusion. Arts participation also has the potential to improve physical health, promote healthy living, and reduce risky health behaviours.¹

The pandemic emphasised the importance of culture to people's wellbeing, with nearly half of Australians saying creative activities and experiences helped with their mental health or wellbeing during this time.² However, at the same time, isolation associated with the COVID-19 restrictions, cost of living pressures and unrest from global events, including extreme weather events and social turbulence, have negatively impacted the mental health of many Australians.³

It has become increasingly apparent in recent years that Australia's mental wellbeing is suffering and there is a critical need for action. Over two in five Australians aged 16–85 will experience a mental illness at some point in their life,⁴ and in 2020–21 mental health services cost the Australian Government \$11.6 billion.⁵

Given an increasing awareness of poor health and wellbeing amongst Australians, and the rise in associated pressures on the healthcare system, there is growing interest in the potential physical and psychological benefits of participating in the arts.

Creating Wellbeing: Attitudes and engagement with arts, culture and health provides insight into Australians' views on the value of arts participation for health and wellbeing. Analysing data from the Australian Consortium for Social and Political Research Incorporated's (ACSPRI) 2021 Australian Survey of Social Attitudes (AuSSA), it identifies the ways in which demographic factors and subjective health and happiness intersect with arts participation, as well as views on wellbeing benefits of arts participation. It also examines Australians' openness to arts on prescription, which is the formal prescribing of creative participation as part of a traditional healthcare plan.

Creating Wellbeing was prepared by Creative Australia and the News and Media Research Centre at the University of Canberra. This report sits within a wider body of work conducted by Creative Australia which explores the relationship between arts and health from the perspective of policy, audiences, and the requirements of artists working in the arts and wellbeing field.

¹ Fancourt D, Finn S 2019, What is the evidence on the role of the arts in improving health and well-being? A scoping review, World Health Organisation.

² Creative Australia 2023, Creating Value: Results of the National Arts Participations Survey.

³ Australian Institute of Health & Welfare 2022, Mental health impact of COVID-19. https://www.aihw.gov.au/mental-health/monitoring/mental-health-impact-of-covid

⁴ Australian Institute of Health and Welfare 2023, Prevalence and Impact of Mental Illness. https://www.aihw.gov.au/mental-health/topic-areas/mental-illness

Australian Institute of Health and Welfare 2023, Expenditure on Mental Health-related Services. https://www.aihw.gov.au/mental-health/topic-areas/expenditure

Main findings

Arts participation, subjective happiness and health

- Almost every respondent 98% identified that they are engaging with the arts, either by reading for pleasure, listening to music, attending arts and cultural events and venues, or by making art themselves. This insight aligns with the findings from Creative Australia's 2022 National Arts Participation Survey which indicates 97% of Australians engage with the arts.
- People who participate in the arts are more likely to be at the high ('very happy') or low ('unhappy') end of the subjective happiness scale. In other words, the relationship between arts participation and happiness is not uniform, but rather, rates of arts participation increase at the more extreme ends of the happiness spectrum.
- Those with better subjective health are more likely to attend arts and cultural events. People who rate their health as 'excellent or very good' and 'good' are significantly more likely to attend arts events compared to those who rate their health as 'fair or poor' (66% and 65% compared to 45%).

Motivations and barriers

- One in five Australians attend the arts for reasons related to health and wellbeing. The most common motivation for engaging with the arts is enjoyment (53%), followed by social reasons (26%) and then health and wellbeing (19%).
- People who report lower levels of happiness are more likely to participate in arts activities to connect socially with others. Individuals who report higher levels of happiness are more likely to view arts participation as a way to relax.
- People living with a chronic illness and/or disability are more likely to seek health and wellbeing benefits from engaging in art activities (20% compared to 17% of people without chronic illness/disability).

The most commonly identified barrier to arts participation is reasons related to COVID-19. Those who report lower levels of happiness ('neutral/unhappy') and 'good' subjective health (neither 'excellent or very good' or 'fair or poor') are more likely to cite COVID-19 as a barrier. It is likely that this finding was affected by the timing of the survey in 2021, when COVID-19 lockdowns were still having a significant impact on the lives of Australians.

Views on the impact of arts and creative engagement on health and wellbeing

- Most people agree that engaging in the arts can have a positive impact on their health and wellbeing, including mental health (89%), social health (84%), physical health (70%), family life (72%), community life (75%), and knowledge and skills (82%).
- Overall, women, younger people, those not in formal employment, those with a bachelor's degree or higher, and those with higher income are more likely to agree that engaging with arts, cultural and creative activities can have a positive impact on their health and wellbeing.
- People who live in major cities are more likely to agree that engaging with arts, cultural and creative activities can have a positive impact on their social health, including their connection to community, sense of belonging, and feelings of loneliness (87% compared to 79% of people living outside major cities).
- Those born overseas are more likely to recognise the positive impact of arts engagement on their family's quality of life (80% compared to 73% of second-generation Australians and 69% of Australian-born people with Australian-born parents).

⁶ Creative Australia 2023, Creating Value: Results of the National Arts Participations Survey.

Arts on prescription

Arts on prescription is an innovative practice that seeks to improve overall wellbeing by including arts engagement as part of mental health treatment plans.

- Most respondents are open to arts on prescription. Almost nine in ten respondents are either 'very open' (42%) or 'somewhat open' (43%) to arts on prescription for mental health conditions.
- Those who are 'very open' to arts on prescription tend to be women, aged 25–64, on middle incomes, hold a bachelor's degree or higher and in paid employment.
- Those who are 'not very open' or 'not open at all' to arts on prescription are more likely to be men, aged 45 and over, low-income earners, and those who do not hold a post-school qualification.
- Support for arts on prescription increases at the more extreme ends of the happiness spectrum. Those who are 'very open' to arts on prescription are more likely to be either 'very happy' or 'unhappy'.
- Those who report better subjective health are more likely to be 'very open' to arts prescribing than those who report poorer subjective health (47% of those with 'excellent or very good' health, compared to 40% of those with 'good' health and '37% of those with 'fair or poor' health). Although those with poorer health are least likely to be open to arts prescribing, most are 'very open' or 'somewhat open' (76%).

Arts participation and attitudes towards the healthcare system

- People who participate in the arts tend to have higher confidence in, and more favourable attitudes towards, the healthcare system. People who participate in the arts (including reading books, listening to music, creating art and attending arts and cultural events) are more likely to say they have confidence in the healthcare system, be willing to pay for higher taxes for improved healthcare, and to agree publicly funded healthcare should be available to all residents of Australia. They are also more likely to say the healthcare system is efficient.
- Those who attend arts and cultural events are much more likely to have confidence in the healthcare system than those who do not attend (55% compared to 38% of those who do not attend).
- Those who read are significantly more likely to say they are willing to pay higher taxes for improved healthcare (46% compared to 23% of people who do not read).

Areas for future research

Future research on arts and health may investigate:

- The link between arts and wellbeing using more comprehensive and varied wellbeing measures
- The direction of influence and underlying factors linking arts participation and health/ wellbeing
- The impact of strategies to increase awareness of the health benefits of arts participation on openness to arts on prescription
- The link between mental health and the desire to create art
- The relationship between arts engagement and confidence in the healthcare system.

Introduction

Arts, culture and creativity enrich our lives – inspiring us and connecting us to individual and collective stories, histories and identities.

Engaging in arts and culture creates a sense of security and safety, provides connection and a sense of belonging, and plays an integral part in shaping how we feel and live our everyday lives.

There is a growing body of evidence recognising the crucial role arts and creativity can play in promoting positive mental health and wellbeing outcomes. Engagement in arts and cultural activities has been associated with improved mental and physical wellbeing,⁷ and can combat anxiety and depression,⁸ decrease loneliness and promote social inclusion.⁹ Arts and creativity can assist human flourishing in all life stages,¹⁰ help address the social determinants of health,¹¹ and are foundational for Aboriginal and Torres Strait Islander health and wellbeing.¹² Arts participation also has the potential to improve physical health, promote healthy living, and reduce risky health behaviours.¹³

The health and wellbeing benefits of engaging with arts and culture are widely recognised. More than half of Australians recognise the arts have a big, or very big, impact on our sense of wellbeing and happiness and on our ability to deal with stress, anxiety or depression. Now, Australians are increasingly acting on that belief and attending arts and cultural events to improve their wellbeing.¹⁴

The pandemic emphasised the importance of culture to people's wellbeing, with nearly half of Australians saying creative activities and experiences helped with their mental health or wellbeing during this time. However, at the same time, isolation associated with the COVID-19 restrictions, cost of living pressures and unrest from global events has impacted the mental health of many Australians.

In recent years, it has become increasingly apparent that Australia's mental wellbeing is suffering and there is a critical need for action. It is estimated that over two in five Australians aged 16–85 will experience a mental illness at some point in their life. Young people are particularly at risk, with the prevalence of mental ill health in young people increasing by more than 50% from 26% in 2007 to 39% in 2020–21. Mental health services cost the Australian Government \$11.6 billion in 2020–21, while the cost of mental illness to the broader economy has been estimated to be \$70 billion.

- Davies C, Knuiman M and Rosenberg M 2015, 'The Art of being Mentally Healthy: A study to quantify the relationship between recreational arts engagement and mental well-being in the general population', BMC Public Health, 16:15.
- 8 Sumner RC, Crone DM, Hughes S and James DVB 2021, 'Arts on Prescription: Observed changes in anxiety, depression, and well-being across referral cycles', Public Health, 192.
- 9 Perkins R, Mason-Bertrand A, Tymoszuk U et al 2021, 'Arts Engagement Supports Social Connectedness in Adulthood: Findings from the HEartS Survey', BMC Public Health, 21:1208.
- 10 Boydell KM et al 2021, 'Graffiti Walls: Arts-based mental health knowledge translation with young people in secondary schools', Creative Approaches to Health Education: New ways of thinking, making, doing, teaching and learning. Baird A, Garrido S and Tamplin J 2020, Music and Dementia: From cognition to therapy. Lee J, Davidson JW and Krause AE 2016, Older People's Motivations for Participating in Community Singing in Australia. Cohen GD et al 2006, The Impact of Professionally Conducted Cultural Programs on the Physical Health, Mental Health, and Social Functioning of Older Adults.
- 11 Parkinson C 2018, 'Weapons of Mass Happiness: Social justice and health equity in the context of the arts', Music, Health and Wellbeing. Chandler M 2018, 'Cultural Wounds Demand Cultural Medicines', Determinants of Indigenous People's Health in Canada: Beyond the social.
- 12 Salmon M, Doery K, Dance P, Chapman J, Gilbert R, Williams R and Lovett R 2019, Links Between Aboriginal and Torres Strait Islander Culture and Wellbeing: What the evidence says, Mayi Kuwayu. Commonwealth of Australia, Department of Health 2017, My Life My Lead Opportunities for strengthening approaches to the social determinants and cultural determinants of Indiaenous health: Report on the national consultations.
- 13 Fancourt D, Finn S. What is the evidence on the role of the arts in improving health and well-being? A scoping review, World Health Organisation.
- 14 Creative Australia 2023, Creating Value: Results of the National Arts Participations Survey.
- 15 Creative Australia 2023, Creating Value: Results of the National Arts Participations Survey.
- 16 Australian Institute of Health and Welfare 2023, Prevalence and Impact of Mental Illness. https://www.aihw.gov.au/mental-health/topic-areas/mental-illness.
- 17 ABS 2023, National Study of Mental Health and Wellbeing.
- 18 Australian Institute of Health and Welfare 2023, Expenditure on Mental Health-related Services. https://www.aihw.gov.au/mental-health/topic-areas/expenditure.
- 19 Productivity Commission 2020, Mental Health Inquiry Report.

It has been acknowledged that the existing healthcare system is limited in its ability to address mental health concerns, particularly in relation to social determinants of health and the integration of community, peer and social support services in care plans. ²⁰ This has led to urgent calls for new approaches to promoting good health and wellbeing in Australia. The arts may provide avenues to address complex physical and mental health issues that are not fully addressed by existing interventions. Such avenues may also, in some cases, be more cost-effective than health interventions and provide economic benefits through health promotion. ²¹

One potential new approach is 'social prescribing', also known as 'community referral'. Social prescribing involves a primary care health professional (such as a general practitioner) connecting patients with non-clinical sources of support and assistance within their local community.²² 'Arts on prescription' is one form of social prescribing, involving referrals to creative activities such as drawing, painting, crafts, theatre or music. Despite growing support among health professionals for the implementation of a national social prescribing scheme,²³ there has been limited research exploring whether Australians are open to the idea of arts on prescription.

Creative Australia recognises the potential benefits of the arts on social, cultural, and individual wellbeing, and is currently undertaking a body of research in this area.

- Our landmark series the National Arts Participation Survey tracks Australians' engagement with and attitudes towards the arts, including motivations for and barriers to engagement. The results of the 2022 survey, published in Creating Value: Results of the National Arts Participation Survey, provide critical insights on the value Australians place on arts engagement in relation to health and wellbeing and highlights that Australians are increasingly attending arts and cultural events to improve their wellbeing.
- Creative Australia has been progressing work with the sector to identify ways to better embed arts and creativity in government mental health and wellbeing programs. Our Arts, Creativity and Mental Wellbeing Policy Development Program, which ran from February to May 2022, engaged people from the arts and cultural sector, the health and wellbeing sector, community and advocacy organisations, research, policy and various portfolios of government to develop a series of policy proposals and recommendations for government and the sector to consider. Our report, Connected Lives: Creative solutions to the mental *health crisis*, consolidates these findings and outlines six key policy recommendations for government and five areas of strategic priority for the arts and cultural sector.²⁴
- To further inform our work in this area, we are continuing to build our understanding of the professional development needs of artists and creatives to better work in mental health and wellbeing contexts. These findings are published in our Creative Solutions: Training and sustaining the arts for mental health report.

 $^{20 \}quad \text{Productivity Commission 2020,} \textit{Mental Health-Inquiry Report.}$

²¹ Fancourt D, Finn S 2019, What is the evidence on the role of the arts in improving health and well-being? A scoping review, World Health Organisation.

²² Royal Australasian College of General Practitioners 2019, Social Prescribing Roundtable, November 2019: Report.

²³ Australia Council 2022, Connected Lives: Creative solutions to the mental health crisis.

²⁴ Australia Council 2022, Connected Lives: Creative solutions to the mental health crisis.

About this report

Creating Wellbeing: Attitudes and engagement with arts, culture and health sits within this wider body of work exploring connections between the arts and creativity, and health and wellbeing. In particular, it addresses a need identified by Creative Australia for data on who is using the arts to address their wellbeing and why, along with connections between arts participation and attitudes towards the healthcare system. This data is particularly relevant for current discussions about arts on prescription. The report aims to understand:

- What are the potential health and wellbeing benefits of arts and creativity?
- Are the health and wellbeing benefits of arts and creativity evenly felt? Or are there factors that enable or inhibit access to the potential health and wellbeing benefits of arts and creativity?
- How are ideas such as 'arts on prescription' understood and perceived by the Australian public?

This report analyses data on arts engagement from the Australian Consortium for Social and Political Research Incorporated's (ACSPRI) 2021 Australian Survey of Social Attitudes (AuSSA) and situates these findings within other research on arts participation and health and wellbeing. More details on the AuSSA are given below. It is important to note that the 2021 AuSSA was conducted during the disruptions of the COVID-19 pandemic.

This report has been prepared in partnership with the News and Media Research Centre at the University of Canberra. Additional AuSSA questions, outlined below, were developed in partnership with the University of Tasmania and A New Approach (ANA) and summary findings were published in ANA's 2022 report *Lifelong:* Perceptions of Arts and Culture among Baby Boomer Middle Australians.²⁵

The AuSSA

The Australian Survey of Social Attitudes (AuSSA) is an annual national survey, which generates Australia's main source of data for the study of the social attitudes, beliefs, and opinions of Australians.²⁶ The survey is used to help researchers better understand how Australians think and feel about their lives. It produces important information about the changing views and attitudes of Australians as we move through the 21st century. AuSSA is overseen by the Australian Consortium for Social and Political Research Incorporated (ACSPRI), a consortium of universities and government agencies, established in 1976 to support and promote social science. Creative Australia is a member of ACSPRI.

Each year the survey includes questions that explore a specific topic alongside demographic questions that enable comparisons over time and internationally. ACSPRI member organisations can also fund their own questions to feature in the survey. The postal survey is sent to a random sample of adults enrolled to vote in Australia. This report uses data from the 2021 survey which achieved a sample of 1,240, and is weighted to the 2016 census for gender, age, and education.

The main theme of the 2021 AuSSA was health and healthcare, and included questions on personal physical and mental health, eHealth, attitudes towards vaccination, health equality/right to health care, trust and confidence in the health care system, and their opinion about the health systems. The 2021 AuSSA offered Creative Australia an opportunity to examine the connection between arts, culture, health and wellbeing.

²⁵ Vivian A and Fielding K 2022, 'Lifelong: Perceptions of Arts and Culture among Baby Boomer Middle Australians', A New Approach.

²⁶ ACSPRI, The Australian Survey of Social Attitudes, acspri.org.au/aussa viewed 7 September 2023.

Creative Australia (at that time known as the Australia Council for the Arts) contributed nine questions to the 2021 AuSSA, asking respondents about levels of arts participation, motivations and barriers to participation, perceived health benefits of arts participation and attitudes to social prescribing. A list of questions and responses is included in Appendix A.

Creative Australia also added questions to the 2019 AuSSA on social background and attitudes, the results of which were reported in *Widening the Lens: Social inequality and arts participation.*²⁷ Comparisons between the two reports have been noted in this report where applicable.

Terminology

Subjective happiness: Respondents to the 2021 AuSSA were to consider how happy or unhappy they might be on the whole, rating their experience as 'completely happy', 'very happy', 'fairly happy', neither happy not unhappy', 'fairly unhappy', 'very unhappy', 'completely unhappy'. These results were then grouped into the following four categories: 'very happy' (completely or very happy), 'fairly happy' (fairly happy), 'neutral' (neither happy nor unhappy), and 'unhappy' (fairly, very, or completely unhappy). In some analyses where numbers were small, 'neutral' and 'unhappy' have been merged into one category.

Subjective health: Respondents to the 2021 AuSSA were asked to rate their health as either 'excellent', 'very good', 'good', 'fair', 'poor'. The results were then grouped as three categories: 'excellent or very good', 'good', and 'fair or poor'.

Health Status Index: The Health Status Index (HSI) is based on the mean score of five items used to assess perceived mental health, physical health, and functionality, grouped as 'better health' (above scale midpoint) and 'poorer health' (below scale midpoint). The items used are as follows:

- During the past 4 weeks how often...:
 - have you had difficulties with work or household activities because of health problems?
 - 2. have you had bodily aches or pains?
 - 3. have you felt unhappy and depressed?
 - 4. have you lost confidence in yourself?
 - 5. have you felt you could not overcome your problems?

[1=never, 2=seldom, 3=sometimes, 4=often, 5=very often]

The HSI provides a more valid measure of overall health status. In some analyses, separate indices reflecting subjective mental health (3 items) and subjective physical health (2 items) have been used.

²⁷ Australia Council 2023, Widening The Lens: Social inequality and arts participation.

Overall arts participation

The 2021 AuSSA found very high levels of arts participation: **98% of people who answered the arts questions said they participated in at least one category of arts activity during the previous year.** This supports the findings from Creative Australia's 2022 National Arts Participation Survey, which found that 97% of Australians engaged in the arts.²⁸

Almost all respondents said they listened to music during the past 12 months, making it the most popular activity (98%). This was followed by reading (80%) and attending live or online arts events (61%). Approximately half of those surveyed (51%) created art, such as playing an instrument, singing, dancing, sewing or quilting, carving or model-building, painting or drawing, or creative writing.

These findings largely align with the participation rates reported in the 2022 National Arts Participation Survey, where 68% of respondents said they attended arts events, 44% creatively participated in art, and 91% listened to music. Rates of reading were lower in the 2022 National Arts Participation Survey (69%) than in the 2021 AuSSA (80%).²⁹ The AuSSA 2021 results are likely to have been impacted by the timing of the survey, during the disruptions of COVID-19.

Figure 1:

Arts participation by activity type, AuSSA surveys compared to National Arts Participation Survey

	National Arts Participation			National Arts Participation
	AuSSA 2019	Survey 2019	AuSSA 2021	Survey 2022
Attend arts events or venues	64%	68%	61%	68%
Create art	47%	45%	51%	44%
Listen to music	93%	92%	98%	91%
Read (not for study or work)	75%	72%	80%	69%

Further data on arts participation for different demographic groups is available in *Creating Value:* Results of the National Arts Participation Survey³⁰ and the Audience Outlook Monitor.³¹

²⁸ Creative Australia 2023, Creating Value: Results of the National Arts Participations Survey.

²⁹ Creative Australia 2023, Creating Value: Results of the National Arts Participations Survey.

³⁰ Creative Australia 2023, Creating Value: Results of the National Arts Participations Survey.

³¹ Patternmakers 2023, Audience Outlook Monitor: Audiences 2023+, Creative Australia.

Happiness, health and arts participation

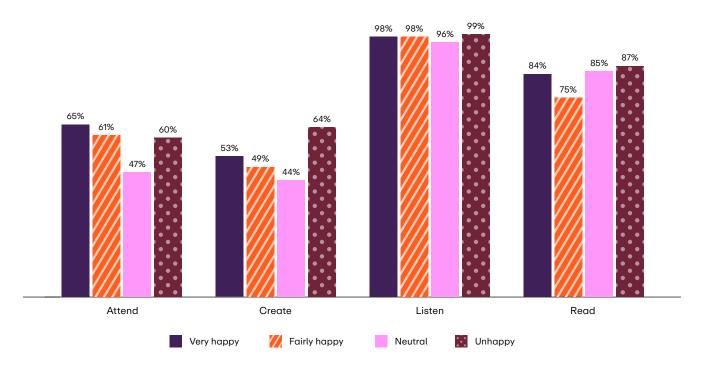
People who participate in the arts are more likely to be at the high ('very happy') or low ('unhappy') end of the subjective happiness scale.

In other words, the relationship between arts participation and happiness is not uniform; rather, rates of arts participation increase at the more extreme ends of the happiness spectrum.

This is particularly the case for attendance and creation. Those who are 'very happy' attend arts events at high rates (65%), but those who are 'unhappy', and sit at the opposite end of the subjective happiness scale, also have high attendance rates at arts events (60%). Similarly, those who are 'unhappy' have the strongest rate of creating art (64%), but those on the other end of the spectrum who are 'very happy' also have strong engagement with creating art (53%). In comparison, those who say they are 'neutral' (not 'very happy', 'fairly happy' or 'unhappy') are the least likely to attend arts events (47%) and create art (44%). A similar effect is seen in reading, where those who are 'fairly happy' are the least likely to read (75%).

Figure 2:

Arts participation and happiness



Base: Those who participate in attending (n=999), creating (n=1009), listening (n=1020), and reading (n=1019).

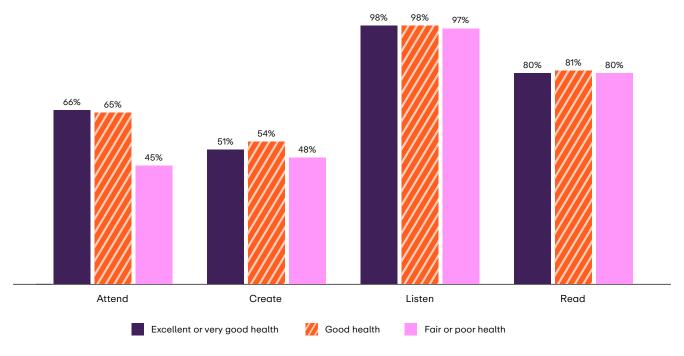
Those with better subjective health are more likely to attend arts and cultural events.

People who rate their health as 'excellent or very good' and 'good' are significantly more likely to attend arts events compared to those who rate their health as 'fair or poor' (66% and 65% compared to 45%).

There is little difference in participation rates in creating, listening, or reading based on subjective health.

While overall subjective health ratings do not appear to have a significant relationship with creation of art, people with 'poorer' subjective mental health are slightly more likely to create art than people with 'better' subjective mental health (54% compared to 50%).³² The nature of the relationship between poorer mental health and creating art is unclear. Further research is needed to better understand this relationship.

Arts participation and subjective health



Base: Those who participate in attending (n=999), creating (n=1009), listening (n=1020), and reading (n=1019).

³² Subjective mental health was calculated according to responses to mental health-related questions in the 2021 AuSSA

International research and policy developments in arts, health and wellbeing

Arts and culture are integral to our everyday life – connecting us to one another and supporting the creation of a meaningful life. The role of arts and creativity in supporting positive health and wellbeing has received increasing international attention in research and government policy development in recent years.

At a global level, the **Organisation for Economic Co-operation and Development** (OECD) has recommended that culture needs to be mainstreamed as an integral part of wider policy agendas, including in health and wellbeing. The OECD highlights that cultural participation has numerous positive benefits that remain under-exploited, from social inclusion to boosting health and wellbeing. It is recommended national and local governments should view culture as an economic and social investment. The **World Health Organisation** (WHO) is also conducting research in this area, and in 2019 released a scoping review summarising current international research on the role of the arts in improving health and wellbeing.

Arts Council England launched the *Creative Health and Wellbeing* strategy in July 2022, outlining a plan for connecting health and social care and promoting collaboration between organisations and practitioners working in the creative and healthcare industries.³⁵ The Council is a founding member of the National Academy for Social Prescribing, established in 2019, and has assembled a set of case studies showcasing the work of creative practitioners working in health and social care.³⁶

The **National Endowment for the Arts (NEA)** in the United States has provided grant support for several research projects into arts and health. This includes establishment of 'research labs'; transdisciplinary research teams set up to research various topics within arts, health and social/emotional wellbeing.³⁷ The NEA supports three other arts and health initiatives: the NEA Military Healing Arts Network, Sound Health Network, and the Arts and Human Development Task Force.

The **Korea Arts & Culture Education Service (KACES)** was established in 2005 alongside the *Support for Arts and Culture Education Act*. KACES supports and promotes access to quality arts and culture education for all Koreans and has established arts and health initiatives. These include arts and culture education for welfare centres and the Arts Healing Project, which provides therapeutic arts and culture programs for people being treated for mental health concerns.³⁸

³³ OECD 2022, The Culture Fix: Creative People, Places and Industries. Local Economic and Employment Development (LEED).

³⁴ Fancourt D, Finn S 2019, What is the evidence on the role of the arts in improving health and well-being? A scoping review, World Health Organisation.

³⁵ Arts Council England 2022, <u>Creative Health and Wellbeing: Case studies</u>.

³⁶ Arts Council England 2022, <u>Creative Health and Wellbeing: Case studies.</u>

³⁷ National Endowment for the Arts 2023, <u>NEA Research Labs: The arts, health, and social/emotional well-being</u>.

³⁸ Korea Arts & Culture Education Service 2023, 'What We Do'. http://eng.arte.or.kr/wwd.

Motivations and barriers

Participants were asked to explain one or more reasons for engaging or not engaging in arts, cultural and creative activities. This includes attending arts and cultural activities, listening to music, reading books or creating art. Content analysis was used to capture the meaning in the free-text responses to these questions, including establishing categories and identifying the frequency by which they occur. Motivations were not asked of those who did not participate in at least one arts activity.

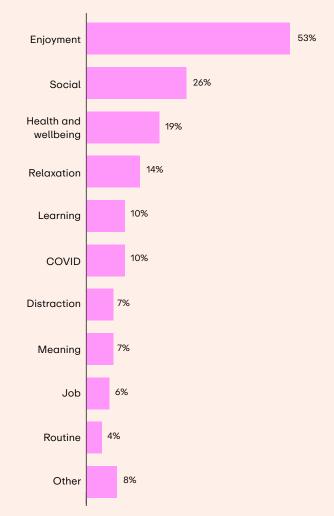
Motivations for participation

Health and wellbeing is one of the top three reasons respondents participate in arts and culture.

- One fifth of Australians report that their most common motivation for engaging with the arts was for reasons related to health and wellbeing (19%).
- The **most common motivation** for arts participation is for **enjoyment**, with over half of Australians reporting this motivation (53%).
- One quarter of Australians engage for social reasons (26%).
- One in seven people engage with the arts for relaxation (14%).
- One in ten people engage with the arts to learn new things (10%).
- One in ten people engage with the arts for reasons relating to COVID-19, including being able to participate in arts activities from home, having more time, managing negative-COVID-related emotions, and wanting to support the arts community post-lockdown (10%).

Figure 4:

Motivations for participation in the arts



Base: Participants who described at least one motivation AND said they participated in at least 1 activity in the last 12 months (n=507).

Happiness, health and motivations to participate with arts and creativity

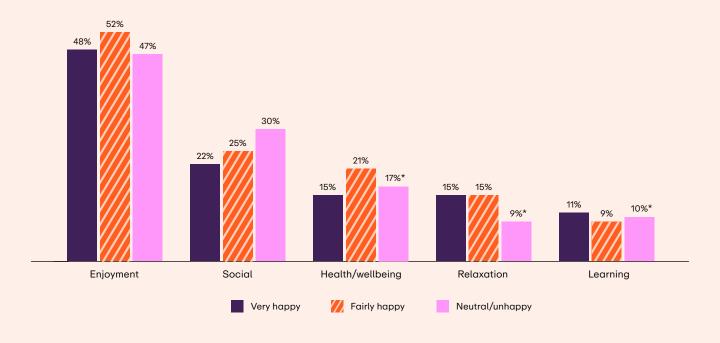
People who report lower levels of happiness are more likely to participate in arts activities to connect socially with others.

People with lower subjective happiness ('neutral/unhappy') are more inclined to participate in arts activities for social reasons (30% compared to 22% of people who are 'very happy'). However, they are less likely to participate in the arts for relaxation (9% compared to 15% of people who are 'fairly happy' or 'very happy').

People who report being 'fairly happy' (neither 'very happy' or 'neutral/unhappy'), are most likely to engage with arts and culture to improve their health and wellbeing (21% compared to 15% of those who report being 'very happy' and 17% of those who report being 'neutral' or 'unhappy').

Figure 5:

Motivators for arts participation by subjective happiness



Base: Those who rated their happiness as very happy (n=190), fairly happy (n=230) and neutral or unhappy (n=103) who described at least one motivation AND said they participated in at least 1 activity in the last 12 months. Categories marked with * had less than 20 participants.

Enjoyment is the main reason Australians participate in the arts, no matter their health rating

Motivations for participating in the arts vary between the two methods that examine respondents' health: subjective health and the Health Status Index.³⁹ However when comparing the two methods, it is clear that enjoyment is the main reason people engage with the arts no matter their subjective health or health rating as per the Health Status Index, with around 50% describing enjoyment as a motivation across the two methods.

People who are in 'poorer' health (as measured by Health Status Index) are more likely to seek enjoyment through arts activities (53% compared to 48% of people in 'better' health).

People who rate their health as 'excellent or very good' (subjective health) are less likely to participate in arts activities for reasons of health and wellbeing (15% compared to 21% of people who rate their health as 'good' and 17% of people who rate their health as 'fair or poor'). People with 'better' subjective health are also more likely to participate in arts activities for social reasons, relaxation, and learning, compared to people with 'poorer' subjective health.

Figure 6:

Motivators for participation by subjective health

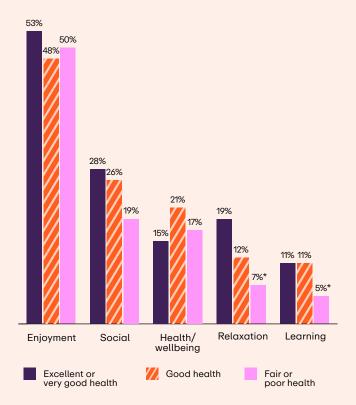
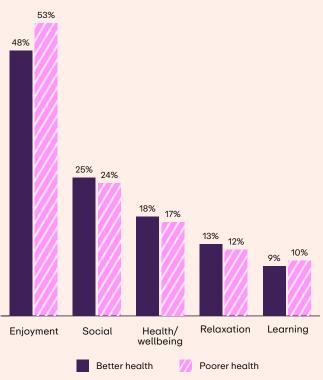


Figure 7:

Motivators for participation by Health Status Index



Base: Those who rated their health as excellent or very good (n=208), good (n=199) and fair or poor (n=121) who described at least one motivation AND said they participated in at least 1 activity in the last 12 months. Categories marked with * had less than 20 participants.

Base: Those who were categorised as in better health (n=313) and poorer health (n=211) according to Health Status Index who described at least one motivation AND said they participated in at least 1 activity in the last 12 months. Categories marked with * had less than 20 participants.

³⁹ Subjective health is based on self-reporting against a scale. The Health Status Index is based on responses to a set of health-related questions. See the terminology section for detail.

Spotlight on people living with chronic Illness/disability

It is estimated that 11.6 million Australians (47% of the population) live with one or more chronic illnesses and/or disability.⁴⁰ In the sample examined in this report, 390 respondents (38%) reported living with a chronic illness and/or disability.

Results from the 2021 AuSSA show rates of participation in all four arts categories (attend, read, listen and create) for people with chronic illness and/or disability are similar to people without chronic illness or disability. However, limited access and opportunity to participate in arts activities is a more significant barrier for individuals with chronic illness/disability (15%) compared to those without (6%). In addition, nearly half of those with chronic illness/disability (48%) say the pandemic is a barrier to arts participation, compared to two in five of those without chronic illness/disability (41%).

People living with a chronic illness and/or disability are more likely to seek health and wellbeing benefits from engaging in art activities (20% compared to 17% of people without chronic illness/disability), while social reasons are less likely to be a motivating factor (22% compared to 27% of people without chronic illness/disability).

There is no significant difference in openness to arts on prescription between people with and without chronic illness/disability. Research has shown that arts on prescription can be beneficial for health and wellbeing in people with intellectual disability,⁴¹ physical disabilities,⁴² and in some cases, for their carers.⁴³

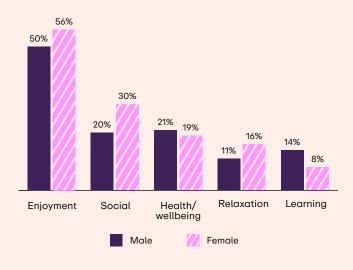
What motivates different groups to engage with arts and creativity?

Men and women are motivated to participate in the arts for their health and wellbeing at similar rates, however women are more motivated for fun and social reasons.

When it comes to health and wellbeing as a motivator for arts participation, the differences between genders are small. Both one in five men and one in five women say they are motivated to engage with the arts for their health and wellbeing (21% men and 19% women). However, women are more likely to say they participate for social reasons (30% compared to 20% of men). Men are more likely to participate for learning (14% compared to 8% of women).

Figure 8:

Key motivators for participation by gender



Base: Males (n=201) and females (293) who described at least one motivation AND said they participated in at least 1 activity in the last 12 months. The 2021 AuSSA did not include the option to select a gender other than male or female.

⁴⁰ Australian Institute of Health and Welfare 2023, Chronic conditions and multimorbidity. https://www.aihw.gov.au/reports/australias-health/chronic-conditions-and-multimorbidity.

⁴¹ Darragh JA, Ellison, CJ, Rillotta F, Bellon M and Crocker R 2016, 'Exploring the Impact of an Arts-Based, Day Options Program for Young Adults with Intellectual Disabilities' Research and Practice in Intellectual and Developmental Disabilities 3:1.

⁴² Hunt L, Nikopoulou-Smyrni P, Reynolds F 2014, "It gave me something big in my life to wonder and think about which took over the space ... and not MS": Managing well-being in multiple sclerosis through art-making', Disability and Rehabilitation 36:14.

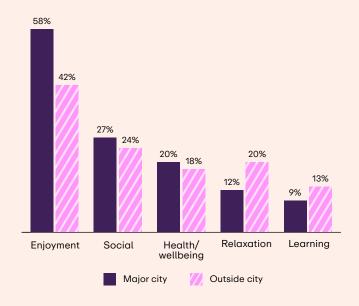
⁴³ Lee JH. Effectiveness of Group Art Therapy for Mothers of Children with Disabilities 2020, The Arts in Psychotherapy. 73:101754.

Those living in major cities engage with the arts for their health and wellbeing at similar rates to those living outside cities.

When it comes to health and wellbeing as a motivator for arts participation, geography does not appear to be a determining factor. However, people living in major cities are much more likely to report participating in the arts for enjoyment (58% compared to 42% of those living outside major cities). People living outside major cities are more likely to participate for relaxation (20% compared to 12% of those living in major cities).

Figure 9:

Key motivators for participation by geography



Base: Participants living in major cities (n=354) and outside major cities (n=153) who described at least one motivation AND said they participated in at least 1 activity in the last 12 months.

What does the National Arts Participation Survey tell us about who is motivated to attend arts events to improve their wellbeing?

Creating Value: Results of the National Arts Participation Survey, which reports on the 2022 survey of Australians attitudes towards and engagement with the arts, highlights who is more likely to attend arts events to improve their wellbeing. The results show:

- Women are more likely than men to attend arts events to improve their wellbeing (35% compared to 29%).
- First Nations respondents are more likely than non-First Nations respondents to attend arts events to improve their wellbeing (45% compared to 32%).
- CALD respondents are more likely than non-CALD respondents to attend arts events to improve their wellbeing (40% compared to 30%).
- Those living in remote areas are more likely to attend arts events to improve their wellbeing (47% compared to 33% of those living in major cities and 29% of those living in regional areas).

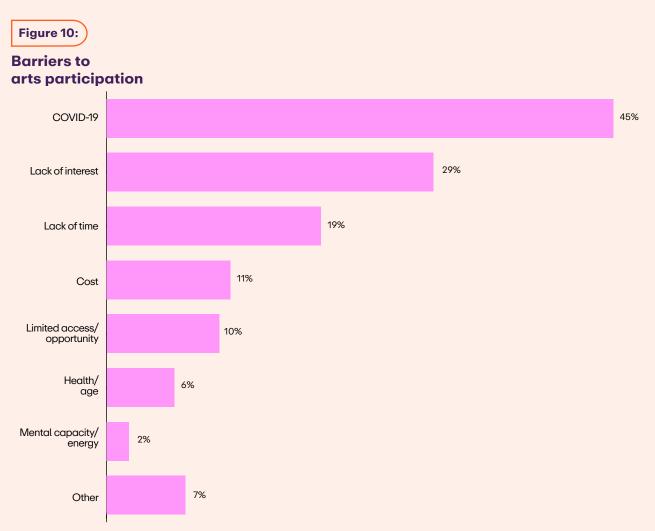
When interpreting these results alongside the 2021 AuSSA, it is important to note that the National Arts Participation Survey was conducted in 2022, when lockdowns and other restrictions of the COVID-19 pandemic had been lifted. The 2021 AuSSA was conducted during a period of heavy lockdowns and restrictions for many Australians.

Barriers to participation

The impact of the COVID-19 pandemic was the most commonly identified barrier to arts participation

Nearly half of Australians identify COVID-19 as a barrier to arts engagement (45%). This finding is contextualised by the fact that the survey was undertaken in 2021, that is, a year during which COVID-19 lockdowns closed many arts and cultural venues across the country. During this time, live arts events were cancelled, borders were closed, and many Australians were confined to their homes for multiple and varying lengths of time.

More than a quarter of people said they do not participate due to a lack of interest (29%), and one in five lack the time to participate (19%). Less common barriers include cost (11%), limited access or opportunity (10%), health and/or age (6%), and lack of mental capacity and energy (2%).



Base: Participants who described at least one barrier (n=514).

Happiness, health and barriers to participate with arts and creativity

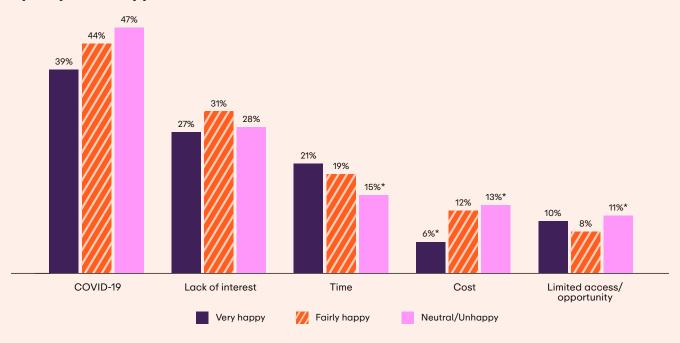
COVID-19 is more commonly described as a barrier to arts participation among those who sit lower on the happiness scale

Nearly half of respondents who are 'neutral/ unhappy' say the COVID-19 pandemic was a barrier to arts participation (47% compared to 44% of those who are 'fairly happy' and 39% who are 'very happy').

Time is a more significant factor affecting participation among respondents who are 'very happy' (21% compared to 15% of people who are 'neutral/unhappy').

Figure 11:

Key barriers to participation by subjective happiness



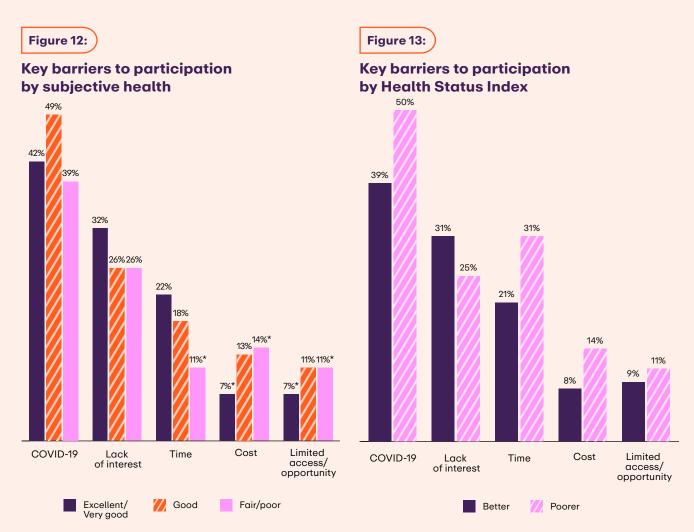
Base: Those who rated their happiness as very happy (n=199), fairly happy (n=212) and neutral or unhappy (n=108) who described at least one barrier. Categories marked with * had less than 20 participants.

Those with 'good' subjective health are more likely to identify COVID-19 as a barrier to arts participation.

COVID-19 is more commonly described as a barrier to arts participation among those with 'good' subjective health (49%), compared to those with 'excellent or very good' (42%) or 'fair or poor' subjective health (39%).

The Health Status Index provides us with a slightly different picture: those in poorer health are more likely to say COVID-19 prevented their rates of arts participation. Half of those with 'poorer' health according to the Health Status Index (50%) say the pandemic is a barrier to arts participation, compared to two in five of those in 'better' health (39%).⁴⁴

Cost and limited access/opportunity are also common among those with poorer health compared to other respondents. In contrast, lack of interest and time are more likely to explain lack of participation among those who are in better health.



Base: Those who rated their health as excellent or very good (n=219), good (n=184) and fair or poor (n=117) who described at least one barrier. Categories marked with * had less than 20 participants.

Base: Those who were categorised as in better health (n=308) and poorer health (n=207) according to Health Status Index who described at least one barrier.

⁴⁴ Subjective health is based on self-reporting against a scale. The Health Status Index is based on responses to a set of health-related questions. See the terminology section for detail.

The impact of arts participation on wellbeing during the COVID-19 lockdowns

The impact of the COVID-19 pandemic on Australians' mental health and wellbeing has been substantial, with measures to prevent the spread of the virus causing ongoing uncertainty and disruption to our everyday lives. In 2022, of Australians aged 16–85, an estimated 8.6 million had experienced a mental disorder at some time in their life (44% of the population) and 4.2 million had experienced a mental disorder in the previous 12 months.⁴⁵

While Australians were restricted from attending arts and cultural events during COVID-19 lockdowns, results from the 2022 National Arts Participation Survey show that arts and creative activities supported positive wellbeing during these periods of isolation. Nearly half of Australians, or 9.9 million Australians aged 15 and over, believe creative activities and experiences helped with their mental health or wellbeing during the pandemic (48%). Those who were most likely to agree that the arts positively contributed to their mental health and wellbeing during COVID-19 were young Australians aged 15–24 (61% compared to 48% of Australians overall) and First Nations respondents (68% compared to 48% of Australians overall).

⁴⁵ Australian Institute of Health and Welfare, Prevalence and Impact of Mental Illness, https://www.aihw.gov.au/mental-health/topic-areas/mental-illness

Views on the impact of arts participation on health and wellbeing

Most people agree that engaging in the arts can have a positive impact on their health and wellbeing

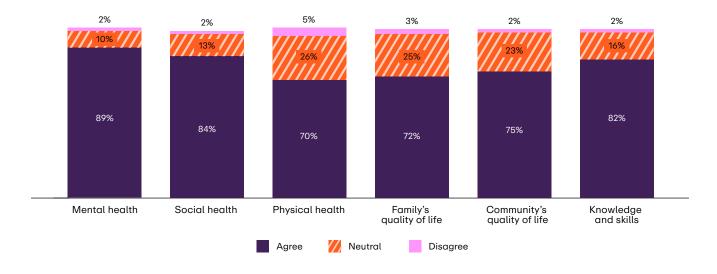
- Nine in ten Australians agree that engaging with arts, cultural and creative activities can have a positive impact on their mental health (89%)
- More than four in five people agree that engaging with arts, cultural and creative activities can have a positive impact on their social health, including their connection to community, sense of belonging, and feelings of loneliness (84%)
- More than four in five people agree that engaging with arts, cultural and creative activities can have a positive impact on the development of their knowledge and skills (82%)
- Three quarters of Australians agree that engaging with arts, cultural and creative activities can have a positive impact on their community's quality of life (75%).

- Seven in ten Australians agree that engaging with arts, cultural and creative activities can have a positive impact on their family's quality of life (72%)
- Although rates of agreement are still high, Australians are least likely to agree that engaging with arts, cultural and creative activities can have a positive impact on their physical health (70%).

Very few people (between 2% and 5%) disagree that engaging in the arts can have a positive impact on each aspect of their health and wellbeing, while between 10% and 26% are neutral.

Figure 14:

Arts participation can have positive impacts on health and wellbeing



Who recognises the positive impacts of arts engagement on health and wellbeing?

- Overall, women are more likely to agree arts participation can support positive health and wellbeing benefits, especially in relation to physical health (79% compared to 60% of men). See figure 15.
- Overall, younger people are more likely than older people to recognise the positive impacts of arts participation on their health and wellbeing. Across all aspects of health and wellbeing, those in the under 25 and 35–44 age groups are most likely to perceive benefits of arts participation, while those aged 75 and over are least likely to see benefits.
 See figure 16.
- Income, education and employment status can impact agreement on whether arts participation supports health and wellbeing.
 - People with higher household income are more likely to recognise the benefits of arts participation, especially mental health, social health, and community quality of life. See figure 17.
 - Those with a bachelors' degree or higher are more likely to recognise positive impacts of arts participation on all areas of health and wellbeing, except physical health. See figure 18.
 - People not in formal employment (eg homemakers, jobseekers, or people with permanent disability) are more

- likely to recognise positive impacts of arts participation in every area, especially compared to retirees. Retirees are less likely to see positive impacts on family quality of life (63% compared to 72% of people in paid work and 83% of people not in formal employment) and community wellbeing (65% compared to 77% of people in paid work and 87% of people not in formal employment). See figure 19.
- People who live in major cities are more likely to recognise the benefits of arts participation for their social health (87% compared to 79% of people living outside major cities). They are also slightly more likely to perceive benefits for mental health (90% compared to 86%), community quality of life (77% compared to 72%) and knowledge and skills (83% compared to 79%). See figure 20.
- Those born overseas are more likely to recognise the positive impact of arts engagement on family's quality of life (80% compared to 73% of secondgeneration Australians and 69% of Australian-born people with Australianborn parents). See figure 21.
- There are no clear links between happiness or subjective health and perceived benefits of arts engagement on health and wellbeing.

Figure 15:

Arts participation can have positive impacts on health and wellbeing, by gender

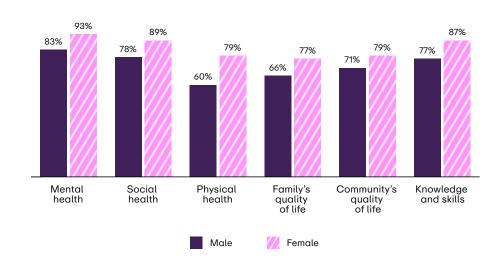


Figure 16:

Arts participation can have positive impacts on health and wellbeing, by age group

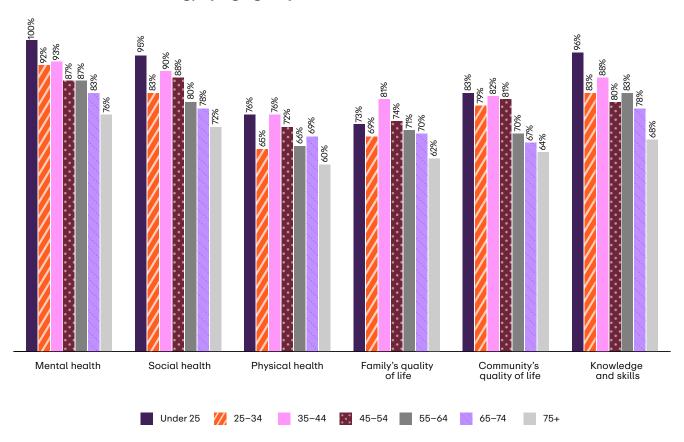


Figure 17:

Arts participation can have positive impacts on health and wellbeing, by household income

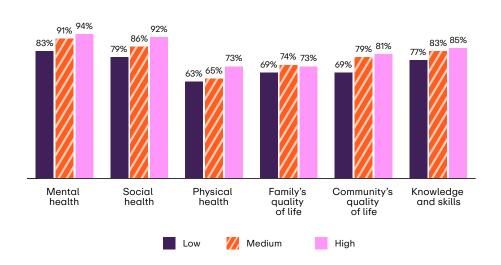


Figure 18:

Arts participation can have positive impacts on health and wellbeing, by education level

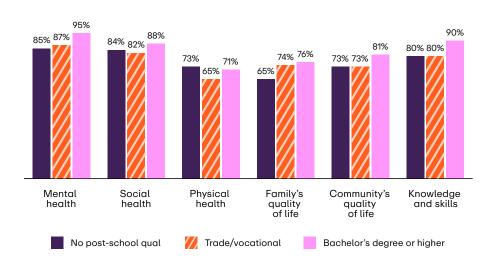


Figure 19:

Arts participation can have positive impacts on health and wellbeing, by employment status

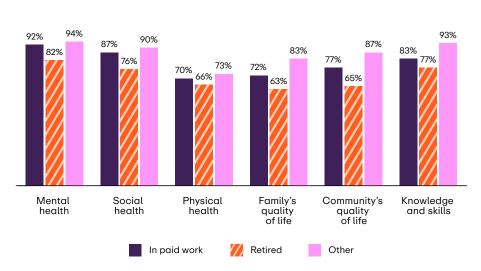


Figure 20:

Arts participation can have positive impacts on health and wellbeing, by geography

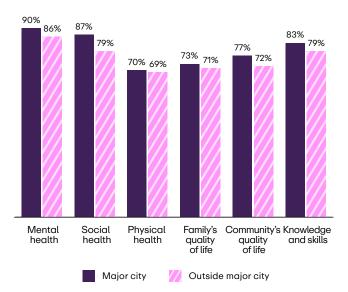
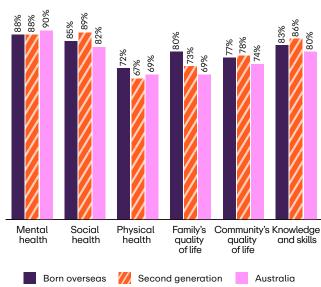


Figure 21:

Arts participation can have positive impacts on health and wellbeing, by country of birth

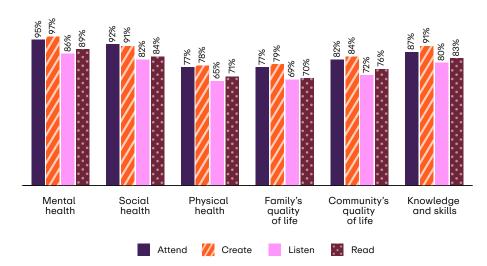


People who attend art/cultural events are more likely to experience positive effects on their social wellbeing compared to those who engaged in other creative activities. Respondents who actively participated in creative activities are more likely to observe benefits related to mental health and family and community well-being, as well as knowledge and skills development.

People who create art are much more likely to see a positive impact on physical, community quality of life, and knowledge/skills, compared to those who don't create.

Figure 22:

Arts participation can have positive impacts on health and wellbeing, by type of participation

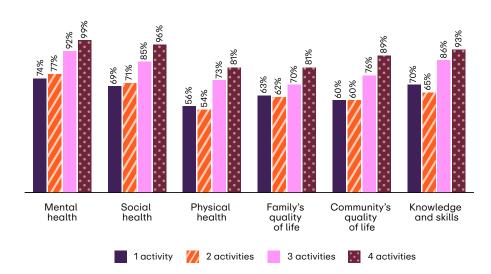


Base: Those who participate in attending (n=576), creating (n=505), listening (n=944), and reading (n=780).

There is a strong link between breadth of arts participation and views on the health and wellbeing benefits of arts participation. Over 70% of those participating in three or more types of activities believe the arts have a positive impact on all types of health and wellbeing – significantly more than those who participate in one or two activities.

Figure 23:

Arts participation can have positive impacts on health and wellbeing, by breadth of participation



Results for those who do not participate in any activities are not reported due to low numbers.

Attitudes towards arts on prescription for mental health

Arts on prescription is an innovative practice that seeks to improve overall wellbeing by including arts engagement as part of mental health treatment plans.

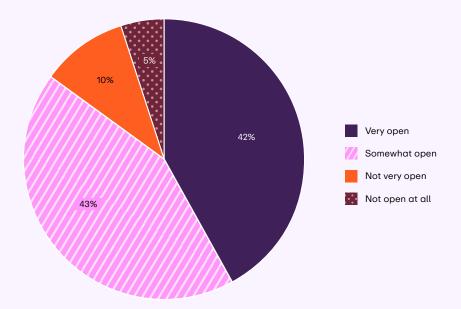
The 2021 AuSSA asked respondents to consider their interest in engaging with arts activities if they were prescribed this type of treatment for a mental health condition by their doctor.

Most respondents are open to arts on prescription

- Almost nine in ten Australians are 'very open' or 'somewhat open' to being prescribed arts engagement for a mental health condition (85%).
 - 42% Australians are **'very open'** to arts on prescription.
 - 43% Australians are 'somewhat open' to arts on prescription.
 - One in ten Australians are 'not very open' to arts on prescription (10%).
 - Very few Australians are 'not open at all' to arts on prescription (5%).

Figure 24:

Level of openness to social prescribing of the arts



Increasing support for a national social prescribing scheme

Social prescribing, which includes arts on prescription, seeks to improve overall wellbeing in non-medical ways in conjunction with healthcare workers. Social prescribing finds new ways to address mental health, and illness, at a community level.

The practice is gaining legitimacy among health consumers and practitioners, and within health and other portfolios across government. A 2019 survey conducted by the Royal Australian College of General Practitioners (RACGP) and the Consumer Health Forum (CHF) found more than 90% of general practitioners (GPs) and allied health professionals believe that referring patients to non-medical services in the community is extremely helpful for improving health outcomes. An In November 2021, SANE Australia launched a pilot program which will provide digital and telehealth referral service for those with complex mental health issues. Participants are given their own personalised programs, which could include social groups and art sessions, all via a new digital participant portal. The service was expanded in 2022 and continues to provide ongoing support for people on waiting lists for clinical psychology services.

In Australia, there has been increasing support for a national social prescribing scheme. This follows recent advancements at the United Kingdom's National Health Service (NHS) in England, which has committed to building the infrastructure for social prescribing in primary care and to embedding social prescribing and community-based approaches across the NHS. This has included introducing social prescribing link workers to ensure every person in England can access a social prescribing service through their GP.

Who is more willing to be prescribed arts engagement as part of a mental health treatment plan?

- Women are more likely than men to be open to arts on prescription. Almost half of women are 'very open' to arts on prescription, compared to more than a third of men respondents (47% compared to 36%). Men are also more likely to say they are 'not very open' or 'not open at all' (21% compared to 10%). See figure 25.
- Respondents in middle age groups (25–64 years) are more likely to be 'very open' to arts on prescription, compared to people aged under 25 and those aged 65 and over. See figure 26.
- Those on middle incomes are more likely to be 'very open' to arts on prescription (48% compared to 41% of high-income earners and 33% of low-income earners). Low-income earners are more likely to be 'not very open' or 'not open at all' (19% compared to 16% of high-income earners and 11% of medium-income earners). See figure 27.
- People who hold a bachelor's degree or higher are more likely to be 'very open' to arts on prescription (51% compared to 42% of people who hold a trade/vocational qualification and 34% who do not hold a post-school qualification). People who do not hold a post-school qualification are more likely to be 'not very open' or 'not open at all' to arts on prescription (21% compared to 13% of people who hold a trade/vocational qualification and 12% of people who hold a bachelor's degree or higher). See figure 28.

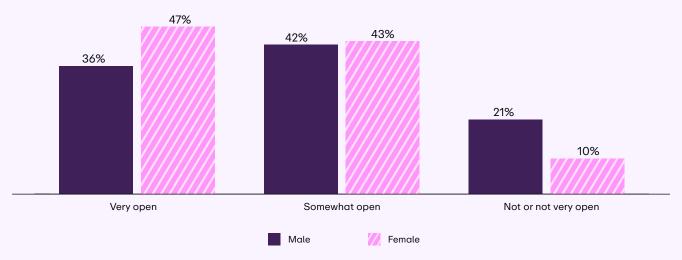
⁴⁶ Consumers Health Forum 2022, 'Tackling Ioneliness with a social prescription', Media Release 17 June.

⁴⁷ SANE Australia 2022, <u>New digital service launches to help bridge gaps in fragmented mental health system.</u>

- City dwellers are more likely than those living outside major cities to be 'very open' to arts on prescription (44% compared to 36%). See figure 29.
- People who are in paid work are more likely to be 'very open' to arts on prescription (46% compared to 41% of retirees and 33% of people not in formal employment). People who are not in formal employment are the most likely to be not or not very open (20% compared to 17% of retirees and 12% of people in paid work). See figure 30.
- Those born overseas are more likely to be 'very open' to arts prescribing (50% compared to 41% of second-generation Australians and 39% of Australian-born people with Australian-born parents). See figure 31.

Figure 25:

Attitudes to arts prescribing by gender



The 2021 AuSSA did not include the option to select a gender other than male or female.

Figure 26:

Attitudes to arts prescribing by age group

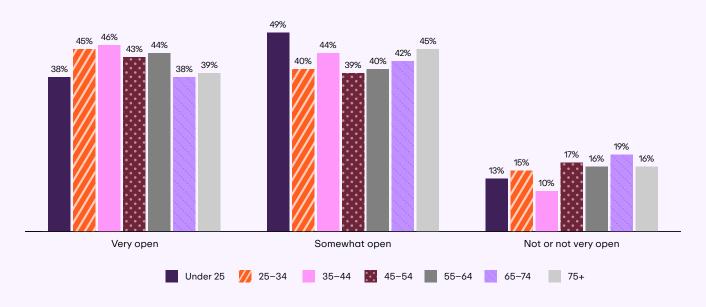
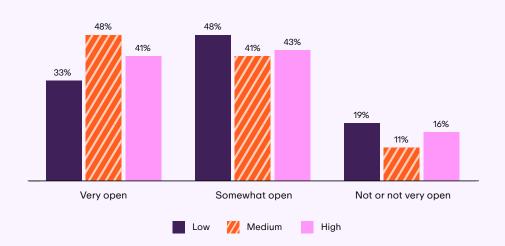


Figure 27:

Attitudes to arts prescribing by income





Attitudes to arts prescribing by education level

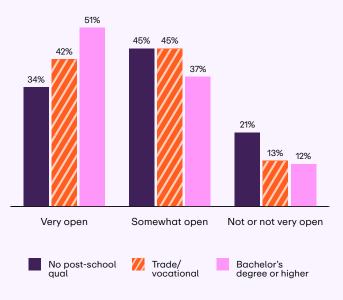


Figure 29:

Attitudes to arts prescribing by geography

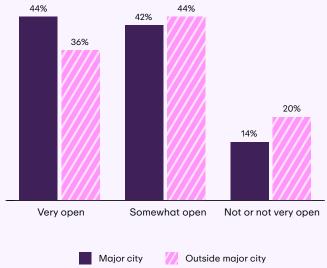


Figure 30:

Attitudes to arts prescribing by employment

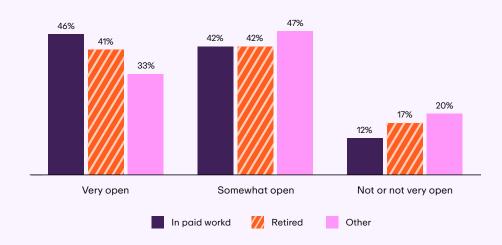
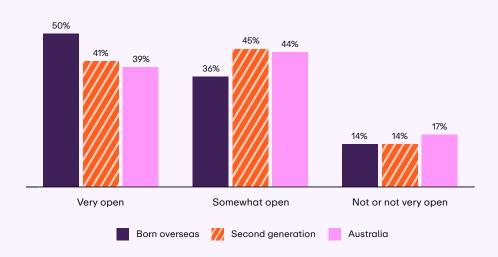


Figure 31:

Attitudes to arts prescribing by country of birth



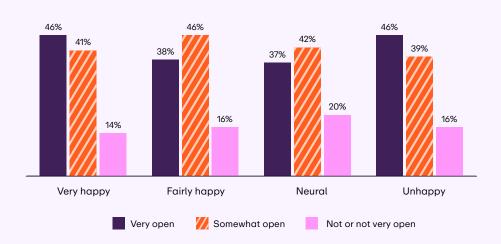
Happiness, health and arts on prescription

Support for arts on prescription increases at the more extreme ends of the happiness spectrum.

Those who are 'very open' to arts on prescription are more likely to be either 'very happy' or 'unhappy'. However, links between attitudes to arts on prescription and subjective happiness are not uniform.

Figure 32:

Attitudes to arts prescribing by subjective happiness



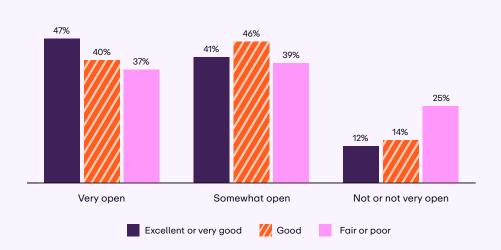
Although those with poorer health are least likely to be open to arts prescribing, most are 'very open' or 'somewhat open'

Those who report better subjective health are more likely to be 'very open' to arts prescribing than those who report poorer subjective health (47% of those with 'excellent or very good' health, compared to 40% of those with 'good' health and 37% of those with 'fair or poor' health). However, support for arts on prescription is still strong among those with poorer self-rated health: most are 'very open' or 'somewhat open' to arts on prescription, with only a quarter of these people saying that are 'not open at all' or 'not very open' (25%).

People who agree that arts participation can have a positive impact on health and wellbeing are much more likely to be open to arts on prescription.

Figure 33:

Attitudes to arts prescribing by subjective health



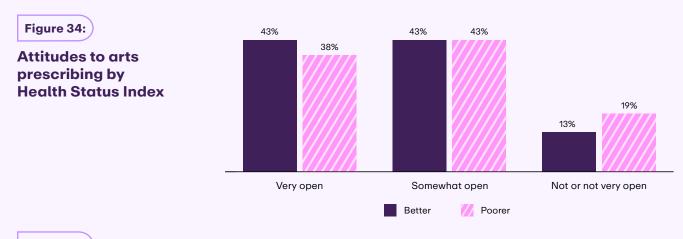
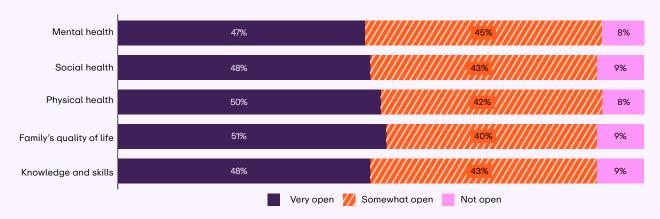


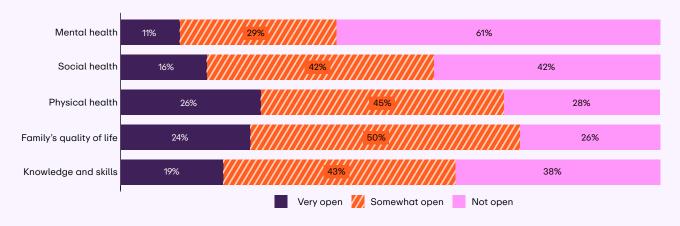
Figure 35:

Attitudes to arts prescribing by views on arts and health/wellbeing

Openness to arts on prescription amongst those who agree that arts can benefit wellbeing



Openness to arts on prescription amongst those who are neutral/disagree that arts can benefit wellbeing

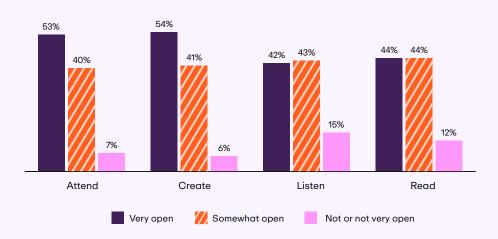


People who attend, create, and read are much more likely to be very open to arts on prescription than those who do not participate in each activity, while those who never participate are much more likely to say they are not or not very open. Those who attend arts events (53%) and create art (54%) are much more likely to be very open to arts on prescription compared to other respondents.

Attitudes are also linked to breadth of participation, with most people (>80%) who say they are very open to arts on prescription participating in at least three types of arts activities.

Figure 36:

Attitudes to arts prescribing by arts participation type



Culture Dose

Black Dog Institute

Culture Dose was developed by the Black Dog Institute in partnership with the Art Gallery of NSW. Culture Dose was designed to encourage people to take time out to engage deeply with artworks, respond creatively, and discuss their observations and insights with others.

Participants engage with a series of ten online sessions led by Danielle Gullotta from the Art Gallery of NSW and Professor Katherine Boydell from the Black Dog Institute. Using slow-looking techniques and reflective activities, participants are encouraged to consider each artwork in depth and connect to their thoughts and feelings through mindful reflection.

The program has since been adapted into Culture Dose for Kids, which has demonstrated positive impacts on mood, confidence and sense of empowerment in children with mild anxiety.⁴⁸

SANE Create

SANE is the leading Australian mental health organisation for people with complex mental health issues and their families and friends. In 2018, SANE joined forces with The Dax Centre, a public art gallery and education centre, to provide a platform for artists with lived experience of mental health issues. The exhibition is used to educate people on mental health issues and is particularly targeted at schools, universities, and community groups. It provides a space for people to engage in difficult conversations about mental health issues, encourages reduction of stigma, and promotes the role of arts and creativity in supporting health and wellbeing.

In addition to their partnership with The Dax Centre, SANE offers a range of other creative activities for students, people with complex mental health issues, and the general public.⁴⁹

⁴⁸ Macdonald D, Han J, Elder E, Boydell KM 2023, 'Parents' Perspectives of an Arts Engagement Program Supporting Children with Anxiety', *International Journal of Environmental Research and Public Health*, 20:18. Macdonald D, Gullotta D, Conte I, Boydell KM 2022, 'Culture Dose for Kids: Creating an arts engagement program for young people with mild anxiety', *Nordic Journal of Arts*, *Culture and Health*, 4:1.

⁴⁹ SANE 2023, SANE Create. https://www.sane.org/get-support/sane-create.

Attitudes towards the healthcare system

People who participate in the arts tend to have higher confidence in, and more favourable attitudes towards, the healthcare system.

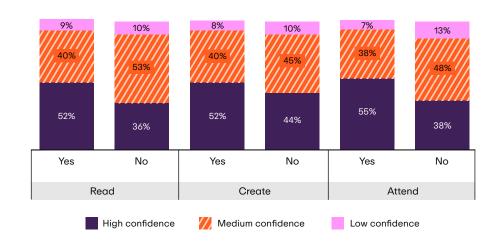
Overall, those who participate in the arts tend to hold the healthcare system in higher regard. These results resonate with findings in Widening the Lens: Social inequality and arts participation, specifically, that people who have high rates of trust in society are more active in arts participation.⁵⁰

- People who attend arts events are much more likely to have confidence in the healthcare system than those who do not attend (55% compared to 38% of those who do not attend). See figure 37.
- People who read are substantially more likely to express willingness to pay higher taxes to improve the level of health care for all people in Australia (46% compared to 23% of people who do not read). See figure 38.
- People who create art are more likely to agree that all Australian residents should have access to publicly-funded healthcare, even non-citizens (51% compared to 37% of those who do not create). This is also true for

- people who read (47% compared to 31% of people who do not read) and people who attend arts events (48% compared to 38% of people who do not attend). See figure 39. People who attend arts events are significantly more likely to disagree that the healthcare system in Australia is inefficient (51% compared to 39% of people who do not attend). See figure 40.
- Those who do not attend arts events are more likely to agree that alternative medicine has better solutions than Western medicine (17% compared to 10% for people who do attend arts events). Those who do not participate in the arts are more likely to agree than doctors' skills are not as good as they should be (37% compared to 27% of arts participants).
- There are no clear links between arts participation and accessing healthcare (based on reported visits to doctor or alternative healthcare practitioner).

Figure 37:

Confidence in the healthcare system according to arts participation type

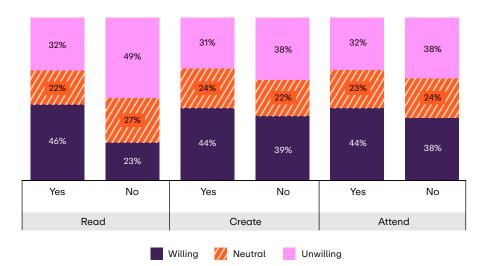


Results for listening are not shown due to the low number of participants who did not participate.

50 Australia Council 2023, Widening the Lens: Social inequality and arts participation.

Figure 38:

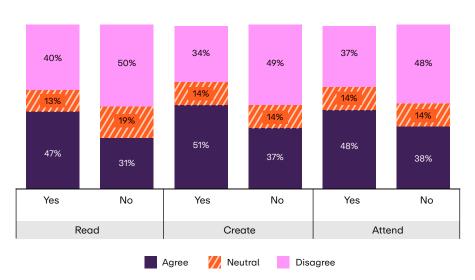
Willingness to pay higher taxes according to arts participation type



Results for listening are not shown due to the low number of participants who did not participate.

Figure 39:

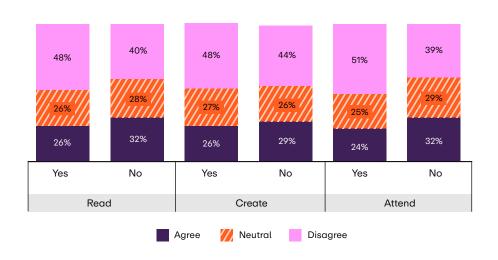
Agreement with broad access to publicly funded health care according to arts participation type



Results for listening are not shown due to the low number of participants who did not participate.

Figure 40:

Agreement that the health care system in Australia is inefficient according to arts participation type



The arts have a strong connection to social cohesion and trust

In these rapidly changing times, we are being met with pressing challenges of social inequality, marginalisation, economic disruption and a pandemic. In 2019, right before the pandemic hit, trust in government was at an all time low. A major study of the 2019 Federal Election found just one in four Australians had confidence in their political leaders and institutions.⁵¹

In addition, while social cohesion in Australia increased during the COVID-19 pandemic in 2020, Australia's levels of national pride, belonging and sense of social justice are now lower than they were before the pandemic.⁵²

To respond to these challenges, there is enormous potential in harnessing the power of arts and culture. Arts and creativity connect us,⁵³ and can play a powerful role in building social cohesion and inclusion. There is an emerging body of evidence of the tremendous potential of arts and creativity to build and strengthen social cohesion.⁵⁴

Trust in and support for our healthcare system is an interesting factor to consider when examining arts participation and health and wellbeing. The findings in this report show people who attend arts events are more likely to say they have confidence in the healthcare system (55% compared to 38% of those who do not participate). There is an opportunity to continue this line of enquiry to form a clearer picture of the link between arts participation and confidence in Australia's healthcare system.

¹¹ The Australian National University 2019, Trust in government hits all time low, https://www.anu.edu.au/news/all-news/trust-in-government-hits-all-time-low.

⁵² Scanlon Foundation Research Institute 2022, Mapping Social Cohesion Report.

 $^{53 \}quad \text{Australia Council 2023}, \textit{Widening The Lens: Social inequality and arts participation}.$

⁵⁴ Engh R et al 2021, WE-making: How arts & culture unite people to work toward community well-being, Metris Arts Consulting. A New Approach 2020, Society and Place: Transformative impacts of arts, culture and creativity, Fact sheet 1.

Areas for future research

The results presented in this report indicate some potential areas for future research into the relationship between Australians' participation in the arts and their health and wellbeing.

- 1. The wellbeing measures used in the AuSSA survey were primarily based on self-reported scales of happiness and health, which provide limited data and can be affected by bias. Future research may examine the impact of arts participation according to more comprehensive measures of wellbeing, including eudaimonic factors (that is, finding happiness through meaning, connectedness, purpose, self-fulfilment and so on).
- 2. Future research may consider the direction of influence and underlying factors linking arts participation and health/wellbeing (for example, social influences, emotions, self-esteem). This is of particular interest following the impacts of the COVID-19 pandemic.
- 3. Further research looking at factors that may impact the link between arts participation and health/wellbeing, such as cultural background and occupation, would be valuable.

- 4. Results presented in this report suggest that there may be a link between awareness of the health and wellbeing benefits of arts participation and openness to arts on prescription. Further research could evaluate the effectiveness of strategies aimed at increasing awareness of the health benefits of arts participation on people's openness to arts on prescription.
- 5. Results presented in this report suggest a potential link between poorer mental health and creating art, but the nature of this relationship is unclear. Further research is needed to better understand this relationship.
- Further research into the relationship between arts engagement and confidence in Australia's healthcare system would be valuable.

Appendix 1: AuSSA survey questions

E1. During the past 12 months how often have you attended (either in person or online including via livestream or virtual tours): live music (e.g. music or community venue, concert, club, pub, live-streamed show), an art exhibition, performance, festival or other arts venue or event?

- Never
- · Once a month or less often
- · Several times a month
- · Several times a week
- Daily
- Can't choose

E2. During the past 12 months, how often have you participated in any hands-on arts, cultural and creative activities? (may include playing an instrument; singing; dancing; sewing or quilting; carving or model-building; painting or drawing; creative writing; furniture-making; or any other art or crafts activity, either on your own or in a group)?

- Never
- · Once a month or less often
- · Several times a month
- · Several times a week
- Daily
- · Can't choose

E3. During the past 12 months, how often have you listened to music (e.g. streaming, CDs, radio/TV)?

- Never
- · Once a month or less often
- · Several times a month
- · Several times a week
- Daily
- Can't choose

E4. During the past 12 months, how often have you read a book, e-book, poetry or graphic novel (but not for study or work)?

- Never
- Once a month or less often
- · Several times a month
- · Several times a week
- Daily
- · Can't choose

E5. Thinking about your responses to questions E1 to E4 above, for arts, cultural and creative activities you did engage with, please explain one or more reasons why.

E6. Thinking about your responses to questions E1 to E4 above, for arts, cultural and creative activities you did not engage with, please explain one or more reasons why not.

E7. Think about how often you participated in hands-on arts, cultural and creative activities (either creating something or performing something) before the Covid-19 pandemic started, compared to your participation throughout 2020. During 2020, did your participation in these kinds of activities change?

- Increased a lot
- Increased a little
- · Neither increased nor decreased
- Decreased a little
- Decreased a lot
- Can't choose

E8. Think about the kinds of arts, cultural and creative activities you like to engage with. How much do you agree with the following statements? (Strongly Agree/Agree/Neither Agree nor Disagree/Disagree/Strongly Disagree/Can't choose)

Engaging with arts, cultural and creative activities can have a positive impact on...

- · Your mental health
- Your social health (your connection to community, sense of belonging, reduced feelings of loneliness)
- · Your physical health
- · Your family's quality of life
- · Your community's quality of life
- Your knowledge and skills

E9. If your GP included participation in an arts, cultural or creative activity in the prescribed treatment for a mental health condition you were experiencing, how open would you be to it?

- Very open
- · Somewhat open
- Not very open
- Not open at all
- · Can't choose

Appendix 2: Detailed methodology

Demographic grouping

Gender grouping was by male and female only as these were the only options included in the survey.

Age grouping was by age range (under 25, 25-34, 35-44, 45-54, 55-64, 65-74, 75+).

Income was based on reported annual household income and grouped as 'low' (less than \$78,000), 'medium' (\$78,000 - \$156,000), and 'high' (more than \$156,000).

Region was based on postcode. 'Major city' includes participants living in postcodes classified as a major city according to the ASGS remoteness structure published by the ABS. 'Regional area' includes inner regional, outer regional, remote and very remote areas.

Country of birth grouping was by 'Born overseas' (participant born overseas), 'second generation' (at least one parent born overseas), and 'Australia' (participant and parents born in Australia).

The **can't choose** response option in the health and wellbeing measures was treated as missing data.

Appendix 3: Sample characteristics

Variable	Categories	N	% (valid)
Gender	Male	474	47.4
	Female	526	52.6
	missing	61	
Age groups	Under 25	113	11.7
	25-34	126	13.0
	35-44	164	16.9
	45-54	151	15.6
	55-64	188	19.5
	65-74	127	13.1
	75+	99	10.3
	missing	93	
Household income	Low	299	44.0
	Medium	215	31.5
	High	166	24.5
	missing	380	
Education	No post-school qual	346	36.4
	Trade/vocational	349	36.8
	Bachelor's degree or higher	255	26.8
	missing	110	
Region	Major city	710	67.1
	Outside major city	349	32.9
	missing	1	
Employment Status	In paid work	586	60.1
	Retired	209	21.5
	Other	179	18.4
	missing	86	

Variable	Categories	N	% (valid)
Country of birth	Born overseas	205	20.6
	Second generation	226	22.7
	Australia	563	56.7
	missing	67	
Happiness	Very happy	371	36.1
	Fairly happy	451	43.8
	Neutral	114	11.1
	Unhappy	93	9.0
	missing	32	
Subjective Health	Excellent or very good	369	35.9
	Good	412	40.1
	Fair or poor	247	24.0
	missing	33	
Health Status Index	Better health	589	58.4
	Poorer health	419	41.6
	missing	52	
Chronic illness/Disability	Yes	390	37.9
	No	638	62.1
	missing	33	





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