



RESEARCH PROJECT SUMMARY

Bridging the Gap in Culture and Health:

Connecting Key Stakeholders
in the Maltese Islands

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About ARC Research & Consultancy

Founded in 2014, ARC Research & Consultancy advocates for the development and sustainability of the cultural and creative sectors by facilitating and empowering connections with local, regional, national, and European entities.

Based in Malta and Gozo, the ARC team combines extensive experience in European cultural co-operation with a profound understanding of our local context.

The ARC team specialises in facilitating dialogue, exchange, and advocacy for the cultural and creative sectors at the European level. The team's approach is anchored in collaboration, active network participation, comprehensive policy research and cultural initiatives that have clear impact.

ARC's areas of operation:

Strategic Development

Strategic development must be adaptable, evolving in response to ongoing research, evaluation, and stakeholder input.

Culture, Health & Well-Being

The relevance of the intersection between culture and well-being has become particularly evident during and after the Covid-19 pandemic, with this becoming a key policy area. The ARC team ensures that this specific policy focus is followed up through conversation, networking opportunities, initiatives, strategic consultation and stakeholder support.

Arts Festivals Policy & Co-Operation

The focus on arts festivals stems from the recognition that they can serve as key spaces for cultural exchange and dialogue.

Culture and Democracies

Advocating for the vital role of culture in strengthening democratic resilience is a central element to ARC's work.

Cultural & Creative Industries (CCIs)

Supporting policies and strategies that empower the cultural and creative industries to focus on the crucial later stages of the creative economy value chain.

Cultural Exchange & Dialogue

Sharing knowledge through cultural exchange and dialogue is central to our mission, as it fosters a more cohesive European approach.

ARC's actions in Culture, Health and Well-being

Culture & Well-being Forum (past local project)

ARC was engaged by Arts Council Malta to organise a one-day forum in 2023 focusing on the connections between artistic expression and well-being, and their potential as enablers for change on a holistic level. Panel speakers and attendees included health and social care professionals, artists and art therapists, cultural managers, researchers, educators, and policy makers.

Uniting culture and health in Malta and Europe: Culture and Health Platform (EU 4-year project)

ARC Research & Consultancy continues to champion the intersection of culture, health, and well-being at a European level via its role as partner in the EU-wide Culture And Health Platform.

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Introduction

ARC has been actively engaged in the ongoing discourse on the intersection of culture and health. As a member of Culture Action Europe, ARC has closely followed the network's initiatives in this field, and further reinforced its commitment by becoming a partner in the **CultureAndHealth platform**. This four-year transformative initiative aims to support over 200 emerging European artists working at the intersection of culture, health, care, education, and the social sector.

At a local level, in 2023, ARC, in collaboration with independent practitioners working at the intersection of culture and health, initiated discussions with **Arts Council Malta** (ACM) to explore the subject in a more structured manner. Since this aligns with ACM's strategic priorities, two public workshops were coordinated in December 2023, bringing together creative practitioners to initiate these discussions. This was followed by the **Culture and Well-Being Forum** in February 2024, which facilitated dialogue between creative and healthcare practitioners. Among the many topics explored, a fundamental question emerged: **how can the cultural and healthcare sectors effectively connect and establish lasting collaborations?**

Recognising the importance of addressing this question, ARC identified an opportunity to initiate a structured process for exploring potential solutions. In June 2024, the project secured funding through the **Artistic Research and Development Scheme**, managed by Arts Council Malta and the research process began in July.

This document provides a concise report on the project, summarising its **research framework, key concepts, insights, and recommendations** for future action. It outlines the project's scope and methodology, detailing the **workshops and high-level meetings** coordinated by ARC. Furthermore, the report presents a set of **strategic recommendations** based on an in-depth analysis of the discussions, ensuring that the momentum generated by this process leads to sustainable and impactful outcomes.

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Framework

Building upon the foundational insights of the international *CultureforHealth* report¹ and numerous supporting studies, this project is driven by the premise that culture and the arts can positively impact mental and general health, while enhancing hospital set-ups for holistic care and well-being. Achieving this vision requires strong cross-sectoral collaboration built on mutual understanding and trust. Our focus is to, proactively, build bridges between stakeholders from healthcare and the cultural and creative sectors. By fostering dialogue, we seek to create opportunities for sustainable collaborations to emerge.

¹ Zbranca, R., Dâmaso, M., Blaga, O., Kiss, K., Dascl, M. D., Yakobson, D., & Pop, O. (2022). CultureForHealth report: Culture's contribution to health and well-being. A report on evidence and policy recommendations for Europe. CultureForHealth; Culture Action Europe. https://www.cultureforhealth.eu/app/uploads/2023/02/Final_C4H_FullReport_small.pdf

The central question guiding our work is:

How can we effectively build cross-sectoral bridges between culture and health?

In line with action research methodologies, the process is structured into four main phases:

(1) **Stakeholder identification** - Identifying cross-sectoral stakeholders across three primary areas of investigation: the arts in hospital settings; the arts as contributors to the promotion of mental health and the arts as contributors to the promotion of health and disease prevention

(2) **Stakeholder engagement** - Conducting one-on-one interviews with identified stakeholders to assess interests, challenges, and opportunities. These interviews play a key role in identifying potential next steps for advancing the intersection of culture and health and implementing relevant practices and programmes.

(3) **Workshops and follow-up meetings** - Organising workshops and follow-up discussions with stakeholders, focusing on developing effective solutions and fostering collaborations between the cultural and health sectors.

(4) **Reflection and knowledge-sharings** - Analysing the results, reflecting on key findings, and disseminating insights to ensure continued progress and impact.

The aims of this research exercise are to achieve the following objectives:

Map Existing Efforts
Identify and document current initiatives that connect the arts and health sectors, with a specific focus on the three primary areas of investigation.

Identify and Engage Stakeholders
Recognise key stakeholders and encourage dialogue on the intersection of culture and well-being.

Facilitate Networking and Collaboration
Bring together diverse stakeholders to foster discussions, build networks, and explore collaborative solutions.

Bridge the Gap Between Sectors
Analyse the challenges preventing stronger connections between the culture and health sectors and identify opportunities within each area.

Assess Opportunities and Potential
Evaluate the viability and impact of each primary area based on stakeholder insights and experiences.

Develop Tangible Projects and Initiatives
Discuss practical projects, platforms, and initiatives that can be implemented to strengthen the link between culture and well-being.

Establish Impact Measurement Methods
Explore effective ways for practitioners and participants to assess the impact of these initiatives, both at the project level and within the broader culture and health intersection.

Ensure Feasibility and Alignment
Propose actions that are realistically achievable, aligned with available resources, and responsive to sector needs.

Strengthen Local and International Connections
Build effective links between local stakeholders and potential international partners to enhance the longevity, growth, and exchange potential of these initiatives.



Process

The project followed a structured, multi-phase process to systematically explore the research question.

The initial phase of the project focused on an extensive stakeholder identification process conducted through desk research and preliminary consultations. The aim was to map key stakeholders across three thematic areas:

1. the arts in hospital settings;
2. the arts as contributors to the promotion of mental health and
3. the arts as contributors to the promotion of health and disease prevention.

The selection of these focus areas for this research process was guided by both strategic considerations and emergent feedback from stakeholders. These areas were not intended to be exhaustive but rather to provide a clear and manageable scope for the study. The decision to concentrate on these specific domains was informed by insights gained during preliminary workshops and the discussions organised by Arts Council Malta. Early engagement with the Superintendence of Public Health through these platforms highlighted an interest in public health-related cultural initiatives, making it a logical starting point. Mental health, often identified as a pressing societal concern, emerged as a natural entry point due to its openness to cultural interventions. Furthermore, recurring discussions about access barriers within hospital environments underlined the relevance of exploring this context further. While the selection process was partially aleatory, it ultimately helped to sharpen the research focus and ensure relevance to both local and sectoral priorities.

The first phase culminated in the creation of a comprehensive stakeholder list, which included healthcare professionals, institutions, creative practitioners actively working at the intersection of culture and health, non-governmental organisations (NGOs), and other relevant representatives. The identification process ensured that key actors with expertise in either healthcare or cultural sectors were included in the subsequent engagement phase.

Following stakeholder identification, the next phase focused on direct engagement with key individuals and entities to introduce the project, collect insights, and assess potential areas for collaboration. An open and flexible approach was adopted to facilitate productive discussions and foster a collaborative environment.

In line with our proposed methodology, we conducted a total of 25 semi-structured interviews with key stakeholders, including representatives from healthcare institutions, policymakers and academia. The former included the Chief Medical Officer at the Ministry for Health, the Nursing Director at Mater Dei Hospital, the Manager for the Staff Well-being Department at Mater Dei Hospital, the CEO of Primary Healthcare, the Superintendent of Public Health, the CEO of Mount Carmel Hospital and Mental Healthcare Services, the Head Nurse of the Pediatrics Department at Mater Dei Hospital, representatives from SAMOC and SOS Malta (Volserv), a representative from the Medical Association of Malta, the Commissioner for Mental Health, the Malta Association for Psychologists and Occupational Therapists. Additionally we spoke to a number of creative practitioners already engaged in artistic and cultural interventions within healthcare settings. During each interview, the interviewer took note of the main points discussed. These included:

- Healthcare practitioners generally support the integration of culture within healthcare and recognise its potential to enhance their services. However, several challenges hinder its effective implementation. The public healthcare sector is marked by frequent management changes, bureaucratic hurdles, and limited resources—including staffing and budget constraints. As priorities continue to shift, healthcare professionals, who are already managing demanding workloads and complex circumstances, often lack the time and capacity to engage with initiatives beyond their core responsibilities.

- In contrast, the private healthcare sector appears to demonstrate greater openness and flexibility. Nevertheless, the challenge of prioritisation remains, along with a lack of structured connections with the cultural sector, which limits the development and continuity of collaborative projects. Generally, artistic interventions are carried out through projects. The time constraints generally imposed by projects as opposed to longer term interventions), limits opportunities for sustainable relationship-building.
- Despite these obstacles, various initiatives and projects are already in place. However, they tend to operate in isolation and lack a cohesive framework. Additionally, the COVID-19 pandemic led to a significant disruption of such initiatives, with many stakeholders indicating that its impact continues to be felt today.

These points provided valuable insights and highlighted a strong willingness within the healthcare sector to collaborate with creative practitioners. These notes were then summarised and discussed internally with the project consultants. As a result, the project's outcomes and objectives were refined to better align with the specific needs and challenges identified by stakeholders.

Building on the insights gained from these conversations, the project moved forward with the implementation of revised key actions and the coordination of follow-up activities. This phase included:

- Organising follow-up meetings with relevant entities, including Primary Healthcare, the Mental Health Services (Mount Carmel Hospital), Allied Healthcare Services, the Malta Chamber of Psychologists, and the Superintendence for Public Health.
- Designing and distributing a survey targeted at creative practitioners, followed by an analysis of the responses.
- Coordinating and delivering two dedicated workshops in January:
 - A workshop specifically addressing creative practitioners already at the intersection or interested in culture and health, which was held on the 18th of January 2025.
 - A public health-focused workshop, jointly organised with the Health Promotion and Disease Prevention Directorate within the Superintendence of Public Health, on the 28th of January 2025.

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Research Parameters: Challenges and Decisions

Both *culture* and *health* are multifaceted concepts that encompass various layers and dimensions. For this study, *engagement in culture and the arts* was considered broadly, including direct participation in cultural and artistic activities, the therapeutic application of the arts, and targeted artistic interventions addressing specific health needs. At this stage, the study aimed to remain open-ended, avoiding restrictive definitions that could limit potential avenues for engagement.

In defining the scope of the study, the decision was made to focus on *health* rather than *well-being*. This approach enabled a more precise exploration of healthcare settings, rather than the broader social determinants of health. The rationale behind this decision was to maintain alignment with discussions from previous fora, which had originally inspired this research.

Additionally, the study focused on three specific thematic areas and primarily engaged with the **public** healthcare sector. Given the highly centralised nature of the healthcare system in the Maltese islands, this approach ensured that the research was both relevant and feasible within the given context.

Challenges encountered during the research process:

Fragmentation and Lack of Documentation

The integration of culture and health remains largely undocumented, with existing initiatives being highly fragmented. This lack of cohesion made it challenging to identify and trace relevant projects. Moreover, the COVID-19 pandemic disrupted many cultural health initiatives. While interest in this area persists, particularly on a policy level, there appears to be a decline in active projects.

Difficulties in Reaching Key Stakeholders

Engaging with the right individuals within the healthcare sector proved to be a significant challenge. The hierarchical structure of public healthcare often led initial contact points to redirect inquiries to senior management, resulting in prolonged response times and delaying subsequent phases of the project. The time-intensive nature of this process required considerable effort and persistence.

Adjustments to the Research Plan

To accommodate the diverse needs and schedules of stakeholders, deviations from the original research plan became necessary. Some entities required a more tailored approach, as participation in a general focus group was not suitable for their operational context. As a result, the research methodology was adapted to ensure relevance and maximise engagement.

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Outputs

The research process culminated in three distinct outputs: two thematic workshops and a series of targeted brokerage sessions with specific stakeholders. While the original plan envisioned three workshops, each addressing the key focus areas of the study, the approach was adjusted in response to stakeholder preferences. Not all stakeholders were interested in participating in larger group workshops; in some cases, more tailored and direct engagement was deemed more appropriate and effective. This was particularly evident in two of the three thematic areas - hospital settings and mental health, where individual meetings were preferred. The workshop focusing on

public health, however, proceeded as initially planned, primarily because this area falls within the remit of a single public healthcare entity, making it relatively easier to organize. Additionally, in response to strong interest and positive feedback from the healthcare sector, a dedicated workshop with creative practitioners was organised to further explore opportunities for collaboration..

The following section presents a detailed overview of each of the three outputs.

6.1 Collaborations

The shift in approach created a valuable opportunity to foster direct collaborations between public healthcare institutions and cultural organisations, establishing essential communication channels for long-term partnerships and sustained support.

As a result, we identified multiple opportunities for **public healthcare institutions** and **public cultural organisations** to formally initiate discussions on joint work, mutual support, and the piloting of sustainable, long-term initiatives. Several public entities have expressed strong interest in embedding cultural interventions within their work, demonstrating a commitment to this interdisciplinary approach. To support the sustainability of these initiatives, we facilitated connections between these entities and Arts Council Malta. This aligns with broader recommendations for systematically integrating the arts into healthcare practices. Notably, **the Culture, Health and Well-being Position Paper²** highlights the importance of “pair[ing] institutions across sectors” as a key strategy to advance this agenda at the national level.

As part of this process, we initiated meetings with Primary Healthcare, Mental Health Services (including the administration of Mount Carmel Hospital), Allied Healthcare Services, the Malta Chamber of Psychologists, and the Superintendence for Public Health.

6.2 Workshop with creative practitioners

Background and preliminary survey

As the research progressed, concrete opportunities for cultural and health initiatives began to emerge with healthcare professionals prioritising actionable steps. This shift necessitated an intensified focus on **creative practitioners**, who play a crucial role in the success of such initiatives.

² Culture Action Europe. (2024, September). Position paper on culture, health and well-being (p. 8). Retrieved from https://cultureactioneurope.org/wp-content/uploads/2024/09/Culture-Health-and-Well-being-Position-Paper_-_Member-Consultation.pdf

To better understand the level of interest, availability, and perceived challenges among creative practitioners, a small-scale survey was conducted. The objective was to gather preliminary data to inform the subsequent workshop and discussions. The survey yielded thirty five responses with the majority of respondents being freelancers. The following were the key findings:

- The primary areas of interest were mental health, general well-being, and physical health. Additional areas included arts in hospital settings and therapeutic arts interventions.
- When asked about challenges in this field, responses predominantly highlighted funding constraints, difficulties in finding collaborators, a lack of specialised training, and limited awareness of existing projects. These challenges were identified as key focus areas for future initiatives.
- Several respondents proposed practical ideas for potential projects, which were flagged for further discussion during the workshop.

Networking and Discovery Workshop

Following the survey, a **networking and discovery workshop** was held to discuss the research outcomes, identify training and knowledge-sharing opportunities, and explore pathways for integrating culture and health. The session emphasised networking, collaboration, and strategies for advancing this interdisciplinary field. The workshop featured short reflections by different practitioners and academics, each addressing critical aspects of creative engagement in healthcare. Below is a summary of the key insights shared:

Identifying Opportunities at the Intersection of Culture and Health - Sarah Vella (Creative Therapist, President at CATS)

Sarah Vella emphasised the importance of self-awareness, honesty, and openness in this field. She described the engagement process as an ongoing journey that requires continuous learning, reflection, and the establishment of clear professional boundaries and support systems. Key takeaways included:

- The necessity of defining clear professional goals and understanding one's mission within the field;
- The importance of identifying gaps and needs within healthcare and cultural settings;
- The "Three Cs" for meaningful work: **Consistency, Continuity, and Coordination**;
- The value of creating opportunities not only for oneself but also for others.

Understanding the Spectrum of Engagement and Training Needs - Lou Ghirlando (Creative Practitioner)

Lou Ghirlando shared insights from her professional journey, outlining various forms of engagement at the intersection of culture and health. She stressed the importance

of conceptual clarity, particularly in defining "health," as it determines the practitioner's role and point of access within the healthcare system.

Collaboration and Team-Based Approaches - Pamela Abela (Curator)

Pamela Abela highlighted the transition from individual creative initiatives to the development of structured cultural programmes within healthcare. She emphasised that successful cultural interventions require diverse, multidisciplinary teams that bring together different skill sets and perspectives. Key considerations when forming a team included:

- Identifying the target audience and their specific needs;
- Establishing a clear purpose for the initiative;
- Defining the contextual framework within which the project will be implemented.

Policy and Funding Opportunities for Culture and Health - Dr Simone Inguanez (Diversity and Communities Executive, Arts Council Malta)

Dr. Inguanez provided an overview of Arts Council Malta's strategic priorities, which strongly emphasise **care and well-being**. She outlined current and upcoming funding opportunities, including the **Culture and Health Co-Fund for the Maltese Islands**, which is a new initiative jointly funded by the European Union through ARC's partnership in the CultureAndHealth platform and Arts Council Malta.

The Role of Research in Creative Practice - Prof. Valerie Visanich (Researcher and Academic)

Prof. Visanich discussed the significance of integrating research into creative practice. Key points included:

- The necessity of **measuring impact** to ensure the credibility and sustainability of projects;
- The value of **contextual awareness**, particularly regarding the social issues affecting healthcare settings;
- The importance of **investing in impact assessments**, which help practitioners refine their methodologies and enhance the effectiveness of interventions.

Evaluating Impact: A Practitioner's Perspective - Prof. Marie Briguglio (Researcher and Academic)

Prof. Briguglio presented key considerations for evaluating the impact of cultural interventions in healthcare. She addressed the **why, when, and how** of evaluation processes, emphasising that structured assessment frameworks support practitioners in demonstrating value and securing long-term engagement. She also extended an invitation for interested practitioners to collaborate with university-led research initiatives in this area.

Key Challenges and Discussion Points

The workshop concluded with a discussion on the **systemic challenges and necessary interventions** to advance the culture and health agenda. Key issues raised included:

- **Pathways to entry and funding access:** Participants highlighted the need for clearer guidance on entering the field and creating career pathways at the intersection of culture and health.. They also highlighted the challenges of securing financial support and structuring sustainable long-term projects.
- **Transitioning from projects to long-term programmes:** Current funding models often prioritize short-term initiatives, making it difficult for practitioners to establish lasting interventions.
- **Lack of awareness and communication within healthcare institutions:** Healthcare administrators and managers often lack awareness and familiarity with the role of creative practitioners in healthcare, underlining the need for stronger advocacy and clearer communication strategies.
- **Sustainability of creative engagement in healthcare:** There was broad consensus that creative practitioners and arts therapists should be formally integrated into healthcare institutions as employees, rather than relying solely on external funding. Achieving this would require systemic policy changes.

Recommendations

Moving forward, efforts need to focus on:

- **Advocating for long-term employment opportunities** for creative practitioners within healthcare institutions;
- **Developing structured training programmes** to equip practitioners with the necessary skills and knowledge;
- **Strengthening collaborations between public healthcare entities and cultural organisations** to pilot sustainable models;
- **Expanding funding opportunities** to support long-term initiatives rather than short-term projects.

6.3 Workshop with the superintendence for public health

Aim and Background

During an initial meeting with the Superintendent of Public Health, Professor Charmaine Gauci emphasised the need for an exploratory workshop, a proposal that closely aligned with the objectives of this research process.

The primary aim of the workshop was to facilitate dialogue between public health professionals and key stakeholders from the cultural and creative sectors, including creative practitioners working at the intersection of culture and health, as well as academics, and policymakers. The session aimed to explore opportunities for interdisciplinary collaboration, highlighting the potential benefits of integrating healthcare and cultural approaches. It sought to establish the theoretical framework that supports such collaborations, while also identifying key opportunities, challenges, and potential solutions. Given the focused nature of the workshop, the participants were preselected by ARC and the Superintendence based on their roles and expertise. The objective was to achieve a balance between the number of creative practitioners/policymakers in the creative field and healthcare professionals present.

Workshop Structure

The workshop was structured as a morning session divided into three key segments. The first part provided the theoretical background necessary to contextualise discussions. The second part consisted of parallel discussions, where participants examined three thematic areas:

1. The role of culture and the arts in designing health communication campaigns and developing new channels for reaching diverse populations.
2. The impact of culture and the arts in influencing and sustaining health behaviours.
3. The integration of culture and the arts to enhance healthcare service provision and address contemporary challenges in healthcare delivery.

The third and final segment of the workshop featured a panel discussion, during which the outcomes, perspectives, and recommendations emerging from the parallel discussions were synthesised and critically examined. The panel included Professor Valerie Visanich, Professor Marie Briguglio, Dr Mariella Borg Buontempo, and Dr Paul Daniel Micallef, and was moderated by Davinia Galea from ARC.

Key Insights and Recommendations

The initial discussions focused on the benefits of integrating culture and health, with contributions from both the healthcare and creative sectors offering diverse perspectives. Dr Paula Vassallo and Dr Elaine Cutajar advocated for a holistic approach that incorporates artistic elements into healthcare practices, particularly in health promotion campaigns aimed at informing the public about disease prevention and treatment. They emphasised that creative approaches allow for more tailored and emotionally resonant messaging, fostering engagement by aligning with cultural values, social norms, and intrinsic motivations.

The discussions also highlighted the direct health benefits of arts and culture at both individual and collective levels. Supported by practical case studies from SAMOC and the SPERO programme, Pamela Abela underlined the intrinsic role of the arts in fostering agency, empowerment, identity, self-expression, and personal development—contributing to holistic well-being. She also referred to the potential of a cultural and social model to complement the medical model, reinforcing a more person-centered and health-oriented system. This notion was elaborated upon by Anna Formosa, who explored social prescribing, providing concrete examples such as the *Singing for Breath* initiative, the *Tapestry Project* by CreativeShift (Bristol), and the establishment of musical instrument libraries. These initiatives illustrate how artistic interventions can be integrated into medical referral processes to support overall health and well-being.

Following this conceptual foundation, the discussion shifted from exploring *why* arts and health collaborations are valuable to examining *how* such initiatives can be effectively implemented. The following sections outline key highlights from the three **discussion groups**.

Discussion 1: The value of culture and the arts in designing health communication campaigns and creating new delivery channels to reach diverse populations

Points Discussed:

- The significance of visual media and communication in health campaigns;
- The role of art in fostering a literate society and encouraging critical thinking;
- The influence of digital access, including the role of social media in disseminating information about health;
- Experiences shared on the integration of artificial intelligence in health communication;
- The accessibility of art-effective communication does not necessarily require large budgets, though funding remains a key factor;
- The relevance of commissioning artists to address public health challenges and reach wider audiences;
- Challenges in targeting audiences, including identifying ‘competitors’ and understanding strategic delivery methods;
- The effectiveness of interactive and mixed-media approaches in engaging communities;
- The difficulty in merging artistic approaches with health communication to maximise their effectiveness.

Discussion 2: The impact of culture and the arts on changing/sustaining public health behaviour

Points Discussed:

- The role of culture and the arts in initiating and sustaining behaviour change;
- Recognition that efforts to integrate arts into public health are still in their infancy, with significant potential for development;
- The need to include perspectives shared by professionals and patients on behaviour change and healthcare interventions;
- The broader remit of public healthcare and its relationship with cultural approaches.

Recommendations:

- Simplification of medical jargon through artistic methods to enhance understanding;
- Avoiding over-saturation of health messaging to maintain engagement;
- Utilising creative tools to communicate health messages more effectively;
- Emphasising preventive measures rather than reactive healthcare approaches;
- Implementing the FEAST (Fun, Easy, Attractive, Salient, Timely) model to design behaviour change campaigns that focus on benefits such as social interaction, physical activity, and communal engagement;
- Prioritising outcome-based strategies that highlight the advantages of positive health behaviours;
- Integrating softer, more engaging methodologies into health communication rather than relying on rigid, traditional approaches;
- Changing public perceptions by embedding arts into health strategies as a core component rather than an optional extra;
- Recognising that behaviour change does not necessarily require a shift in mentality but can be achieved through strategic, softer approaches.

Discussion 3: Using culture and the arts to enhance the provision of healthy services and adapt to the new exigencies of contemporary challenges in healthcare delivery

Points Discussed:

- Identifying various areas that could benefit from arts-based healthcare interventions, including advocacy for children, mental health, and sexual health;
- Promoting human connection and healthy expression through the arts in healthcare settings;
- The involvement of diverse stakeholders, including healthcare and creative professionals, researchers, policymakers, local councils, students, and service users;
- The need to explore the types of social groups where applied arts could have a positive effect, for example, immigrants who tap into social services, children, youth's sexual health, older adults, people with special needs, survivors of violence, child abuse, persons experiencing challenging conditions – could be physical, mental, grief, life crisis, loss of life, palliative care, sexual health, autism;
- Choosing the right platform to be used for health communication;
- The need to transition from short-term projects to sustainable programmes for long-term impact;
- Barriers to implementation, including issues of access, mindset shifts, and financial constraints;
- Profiling the target audience and mitigating any potential issues are crucial during the planning phase. For example, when working with migrants and stigmatising topics such as sexual health, the team dress appropriately, split them into groups of males and females, pay attention to language and pay attention to the kind of medium chosen to deliver their message in order to mitigate potential barriers. Another example mentioned was an intervention by an artist that took place at Mount Carmel that made use of feelgood songs and feelings. A handbook with guidelines and good practice was created and made accessible to other artists in response to that project.
- Utilising existing resources such as cafes, bars, community centres, youth centres, and religious spaces to enhance accessibility and engagement.

Recommendations:

- Establishing paid roles for artists and creative professionals as integral members of healthcare teams, ensuring sustainability rather than relying on one-off projects;
- Developing intersectoral and interministerial stakeholder groups to facilitate collaboration between health and cultural sectors;
- Creating peer support networks to enhance the integration of arts within healthcare settings.

Following these presentations, the panel discussion continued to explore the role of the arts in complementing health interventions, emphasising the necessity for structured and evidence-based approaches. The discussion covered key themes including behavioural science, policy engagement, intersectoral collaboration, and the need for strategic frameworks to integrate arts within healthcare settings.

The Role of the Arts in Health and Behavioural Science

Professor Marie Briguglio emphasised that the arts should not replace other interventions but should serve as complementary approaches to encourage positive behaviours. A clear understanding of target behaviours is essential, and behavioural science provides valuable insights into designing effective interventions. Dr Mariella Borg Buontempo further elaborated on the dual role of the arts—both in preventive behavioural change and direct healthcare interventions. She highlighted that creative methods are already used in psychological practices, demonstrating the tangible benefits of artistic engagement in health.

Complementary Artistic Approaches and Evidence-Based Practice

Professor Valerie Visanich highlighted the importance of distinguishing between using arts as a tool for engagement and recognising art for its intrinsic value. Current health concerns, such as rising anxiety among children and obesity, necessitate alternative engagement strategies. Research must be grounded in real-life experiences, requiring an immersive approach to understand different demographics effectively. The evolving impact of artificial intelligence on healthcare and arts should also be incorporated into future strategies. Dr Paul Daniel Micallef introduced the concept of cultural influence, noting that policy decisions are often dictated by orthodox methodologies rooted in outdated frameworks. A more inclusive approach that integrates alternative perspectives is crucial for meaningful change. He also emphasised the necessity of influencing policymakers and decision-makers to ensure arts and health initiatives receive appropriate support and funding. Strategic collaboration across different disciplines and sectors was highlighted as an essential component to overcoming silo mentalities that hinder progress.

Challenges and institutional integration

Rosetta Debattista, an established music therapist, emphasised the lack of full-time professionals and training programmes dedicated to integrating arts into healthcare

in Malta. She highlighted that sustainable progress requires institutional commitment, with continuous employment of professionals within healthcare settings such as Mount Carmel and Mater Dei. Professor Briguglio noted that existing resources, such as scattered best practices, need to be consolidated into a structured repository for greater accessibility and coordination. While set-ups like CATS provide some resources, there is a clear need to enhance both awareness and utilisation of such platforms.

Policy development and structural support

The discussion addressed the importance of policy frameworks that support arts in healthcare. Professor Visanich stressed that fragmented and egocentric societal structures impede progress. A well-defined training programme and interministerial collaborations are necessary to foster a sustainable system. Bureaucratic challenges were identified as a significant barrier, necessitating a more streamlined approach to funding and policy implementation.

Dr Micallef proposed a **national strategy** that integrates arts into multiple levels of intervention, recognising **children as major agents of change**. Establishing a dedicated space or hub for arts-led initiatives was suggested as a means to facilitate long-term engagement. Additionally, collaboration between different professional groups was deemed essential for ensuring effective implementation.

Implementation strategies and future directions

A key aspect of the discussion was the identification of **agents of change** and the importance of **continuity in arts and health initiatives**. The school curriculum was identified as an area requiring urgent reform to better integrate arts-based methodologies. Dr Pace Buontempo highlighted the significance of interprofessional collaboration to ensure broad representation and inclusive policymaking.

Training and capacity-building were recognised as foundational elements in this integration. Professor Briguglio emphasised that training should encompass both healthcare and creative professionals, with **mental health identified as a particularly viable entry point**. Marketing and communication strategies were also discussed as essential in promoting the value of arts in healthcare to stakeholders and policymakers. Pilot studies and social impact assessments were recommended as evidence-gathering tools to strengthen the case for policy change. Anna Formosa underlined the importance of **pilot studies** in demonstrating efficacy, while Professor Visanich pointed to the need for a structured social impact assessment to guide long-term implementation strategies. The discussion concluded with reflections on the reciprocal relationship between health and the arts. While much focus is placed on how the arts influence health, it is equally important to consider how health influences the arts. Sustainable ecosystems that integrate artists into healthcare spaces require investment in infrastructure and long-term planning. Abbie Hebein representing MCAST emphasised the need for dedicated spaces and funding mechanisms to ensure sustained engagement. Ultimately, a holistic, collaborative, and well-structured strategy is essential to successfully integrate the arts within healthcare frameworks.

07

Analysis: observations, plan of action/implications

The research process has revealed significant enthusiasm and a strong willingness among stakeholders to take concrete action at the intersection of culture and health. Several key insights and recommendations emerged from the discussions, highlighting both opportunities and challenges in advancing this agenda in a structured and sustainable manner.

1. A Systemic Approach is Essential

While short-term projects and individual initiatives have played a crucial role in piloting concepts and raising awareness, there is now broad consensus that a more **systemic approach** is required. Many stakeholders acknowledged the limitations imposed by shifting institutional priorities, frequent leadership changes, financial constraints, and a general lack of structured frameworks. To ensure long-term impact, culture and health initiatives must be embedded within policy and institutional structures, rather than relying solely on fragmented or temporary efforts.

Possible implementation:

- **Integrate arts into health policies:** Collaborate with policymakers to include culture and health initiatives in national healthcare strategies and public health action plans.
- **Develop long-term funding streams:** Advocate for dedicated funding mechanisms that go beyond short-term project-based support, ensuring sustainability.
- **Embed creative practitioners in healthcare settings:** Establish structured roles within healthcare entities for creative practitioners.
- **Establish national guidelines:** Develop best-practice frameworks for the implementation of arts in healthcare settings to ensure standardisation and effectiveness. Communication of these best-practice frameworks is vital.

2. Addressing Coordination and Prioritisation Gaps

One of the main challenges identified is the **lack of a coordinated effort** to drive this agenda forward. There is a need for greater alignment among key stakeholders, including policymakers, healthcare professionals, creative practitioners, and cultural institutions. A **dedicated coordinating body or task force** could help ensure that efforts are strategically aligned, effectively monitored, and sustained over time. There also need to be dedicated efforts to pinpoint opportunities and broker direct collaborations. **Bridging the gap between stakeholders requires constant effort and direct approaches, ideally through dedicated individuals who can support this through their work.**

Possible implementation:

- **Establish a dedicated cross-sector task force:** A permanent working group or advisory board comprising representatives from healthcare, culture, academia, and public policy should be set up to drive long-term coordination. This should also be paired up with a permanent effort to identify opportunities and broker relationships between stakeholders.

- **Appoint key contact points in healthcare institutions:** Assign designated individuals within public healthcare entities to liaise with cultural organisations and oversee project implementation.
- **Appoint key contact points for cultural organisations and creative practitioners.**
- **Create a central digital hub:** Develop an online platform that serves as a repository of resources, ongoing projects, funding opportunities, and best practices to improve accessibility and coordination.
- **Strengthen collaboration between ministries:** Encourage formal partnerships between the Ministries of Health, Culture, and Education to ensure cross-sector alignment.

3. Strengthening the Creative Practitioner Network

There is a clear need to **bring creative practitioners together** and establish dedicated teams to work in this space. Structured **recruitment and professional development efforts** need to be undertaken to cultivate a specialised workforce capable of integrating arts-based interventions within healthcare settings.

Possible implementation:

- **Develop a national database of creative practitioners:** A registry of professionals interested in working at the intersection of culture and health needs to be created, categorising them by expertise, availability, and interests.
- **Facilitate networking and peer support:** Organise regular networking events, conferences, and working groups to encourage collaboration and knowledge sharing.
- **Support and develop further specialised training:** Launch discussions with education entities about training programmes and professional development courses on arts-based interventions in healthcare to equip creative practitioners with the necessary skills.
- **Support collectives or professional associations:** Support existing and new formal networks or associations that advocate for practitioners and provide guidance on career pathways in this field.

4. Expanding the Body of Work and Evidence Base

Despite growing interest in this intersection, there remains **significant untapped potential** for further research, project development, and cross-sector collaboration. Expanding the body of work in this field—through pilot programmes, case studies, and shared resources—will be crucial in building credibility and demonstrating impact.

Possible implementation:

- **Launch pilot projects with built-in evaluation components:** Partner with healthcare institutions to implement structured pilot programmes that collect data on effectiveness and impact.
- **Encourage academic research collaborations:** Strengthen partnerships between universities, arts organisations, and healthcare providers to produce high-quality research.
- **Develop case studies and toolkits:** Create and publish best-practice case studies to serve as a guide for other practitioners and organisations looking to implement similar initiatives.
- **Support creative residencies in healthcare settings:** Establish artist-in-residence programmes within hospitals, care homes, and community health centers to explore the impact of long-term engagement.
- **Support knowledge on sustainability and scaling of projects:** Build knowledge on how to sustain projects to become programmes and long-term interventions.

5. Strengthening Partnerships and Knowledge Exchange

The challenges faced in embedding arts within healthcare are not unique to one context. Many stakeholders emphasised the importance of **collaborating with both local and international partners** to share best practices, exchange knowledge, and collectively address common challenges. Establishing formal networks for cross-sector engagement can facilitate learning and innovation in this field.

Possible implementation:

Develop international partnerships: Engage with international networks and international forums to exchange knowledge.

- **Encourage cross-border collaborations:** Apply for EU-funded projects that foster

international exchange and partnerships.

- **Host knowledge-sharing events:** Organise conferences, webinars, and symposiums that bring together practitioners, policymakers, and researchers.
- **Support mobility programmes:** Enable practitioners to engage in study visits, job-shadowing experiences, and residencies abroad to gain exposure to successful models.

6. Multi-Level Advocacy Strategy

Advocacy must take place on multiple levels:

- **Policy-level advocacy:** Arts Council Malta (ACM) has already taken significant steps in this regard, but further engagement is needed to ensure that culture and health initiatives are prioritised within national and institutional policies.
- **Professionals in the cultural sectors and healthcare sectors:** Beyond policy, advocacy needs to take place with professionals in the two fields. This to ensure that there are the right actors and agents to promote and lead initiatives at the intersection.
- **General awareness-building:** There is a need for ongoing advocacy to raise awareness and build support for this interdisciplinary approach. This includes outreach to healthcare professionals, cultural organisations, and the wider public to strengthen recognition of the value of integrating arts into health and well-being.

Possible implementation:

- **Strengthen policy advocacy:** Work with Arts Council Malta and other national cultural agencies to push for legislative changes that integrate arts into health and social policies.
- **Develop public awareness campaigns:** Use media, storytelling, and digital platforms to highlight the value of culture in health and well-being.
- **Engage healthcare professionals:** Conduct training and information sessions for healthcare staff to share the benefits of creative interventions.
- **Engage cultural and creative professionals:** Conduct training and information sessions for creative practitioners to share the benefits of creative interventions.
- **Create a champions' network:** Identify key advocates within both the health and cultural sectors who can actively promote the cause in their respective fields.

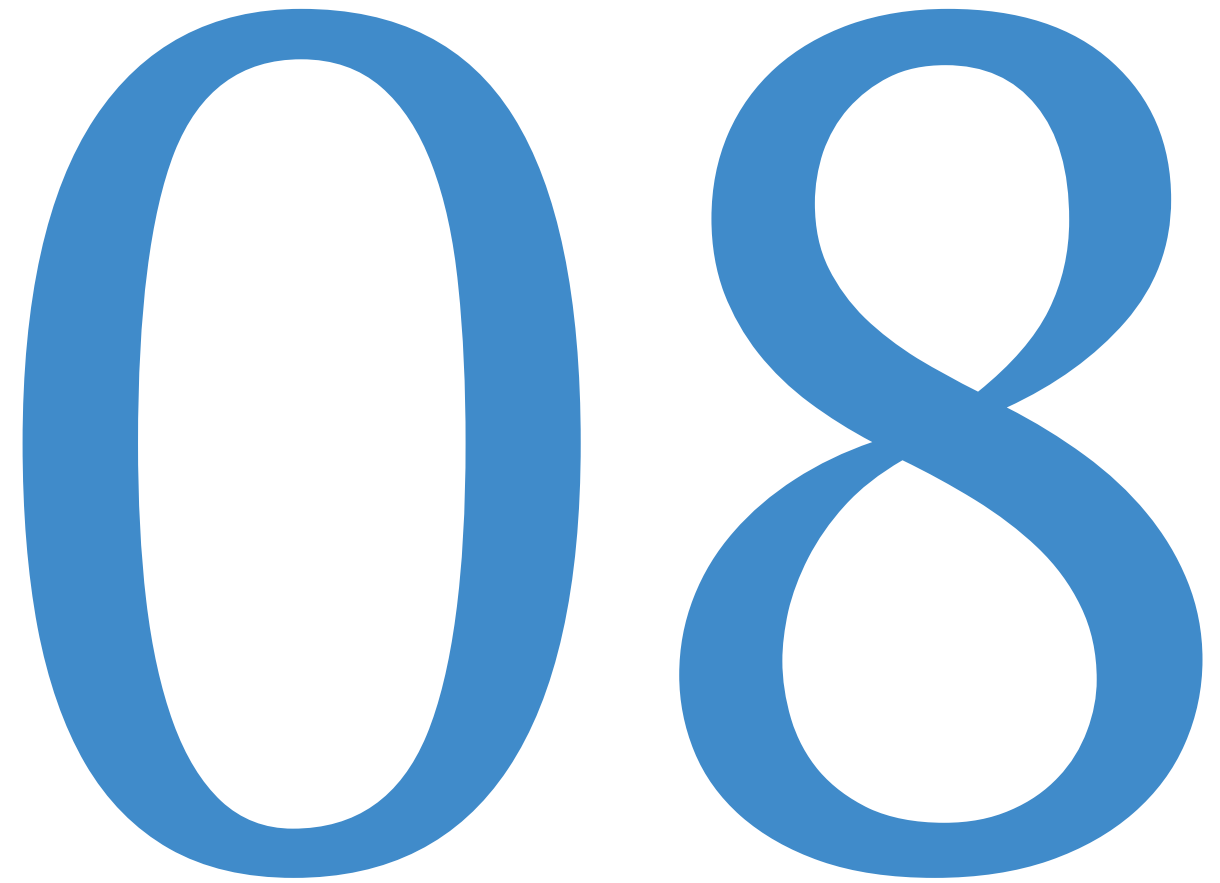
7. Research, Monitoring, and Evaluation

A robust framework for **research, monitoring, and evaluation** is critical to ensuring the effectiveness and sustainability of culture and health initiatives. There is a pressing need to:

- Establish **impact assessment mechanisms** that can provide evidence of the benefits and effectiveness of such programmes.
- Develop standardised **monitoring and evaluation processes** to track progress, measure outcomes, and inform future strategies.
- Promote **evidence-based decision-making**, ensuring that initiatives are grounded in research and best practices.

Possible implementation:

- **Standardise impact measurement frameworks:** Develop common indicators and assessment tools for evaluating arts in healthcare initiatives.
- **Incorporate research and evaluation:** Ensure that every initiative has a built-in evaluation component to measure effectiveness together with appropriate quality and safeguarding guidance. Ensure that there is research evidence supporting projects, proposals and frameworks.
- **Support longitudinal studies:** Fund long-term research projects that assess the sustained impact of arts in health interventions.
- **Develop practitioner-friendly evaluation tools:** Provide easy-to-use assessment models that creative practitioners can integrate into their work.



Conclusion

This research aimed to map existing efforts that connect the culture and health sectors, focusing on three key areas of investigation. Rather than attempting to be exhaustive, these areas were selected to provide a clear and practical framework for exploration. The decision to concentrate on arts in hospital settings, arts and mental health promotion, and the role of the arts in disease prevention and public health was informed by discussions held during initial workshops and seminars facilitated by Arts Council Malta. The research process sought to identify key stakeholders in these areas, foster dialogue, and create networking opportunities to strengthen cross-sector collaboration. A central objective was to examine the challenges preventing deeper integration while identifying opportunities for meaningful engagement. The study also assessed the level of interest and feasibility for new initiatives, emphasising the tangible development of practices, impact assessment, and sustainable implementation. Furthermore, it sought to align proposed actions with available resources and ensure long-term viability by establishing connections between stakeholders.

The key findings of this process can be summarised as follows:

- **A critical moment for action:** The intersection of culture and health must be explored further and taken seriously by both policymakers and practitioners. A structured framework is needed to support its integration and ensure long-term sustainability.
- **Awareness vs. action:** While healthcare managers, practitioners, and creative professionals recognise the benefits of integrating culture and health, there is a need for more structured and systemic approaches. Strengthening awareness through policy, education, and advocacy can encourage sustainable interventions.
- **Bridging the gap requires structure:** Ongoing efforts must prioritise networking and collaboration—not only within the cultural and healthcare sectors but also between them. Cross-sector engagement should be continuous and inclusive, ensuring meaningful, long-term partnerships.
- **Evidence-based approaches are essential:** To maximise impact and secure long-term implementation, initiatives must be supported by research. Systematic evaluation will help refine strategies, measure effectiveness, and adapt to sector-specific needs.

While this report acknowledges and celebrates existing initiatives, it also highlights the gaps that must be addressed. The current approach does not fully capitalise on the vast potential of integrating culture and health. **The recommendations outlined in this report propose concrete actions across multiple levels—policy, practice, and community engagement.** Importantly, responsibility for these actions needs to be shared among policymakers, practitioners, and beneficiaries alike. Some recommendations are directed at specific stakeholders, but a holistic, multi-actor approach is essential for meaningful progress. This includes creative and healthcare practitioners, as well as the individuals and communities who will ultimately engage with these initiatives.

This research represents an initial step into a complex and continually evolving ecosystem. Both the cultural and health sectors are multifaceted, encompassing a wide range of practices, stakeholders, and dynamics. Due to practical considerations, this study concentrated on selected areas of intersection, which necessarily meant that other relevant dimensions remained outside the immediate scope of investigation. Ultimately, this process serves as both a declaration of interest from stakeholders and an open invitation for further action. The insights gathered here provide a foundation, but real progress will require sustained commitment, collaboration, and innovation across sectors.

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Contributors

ARC Research & Consultancy Project leaders:

Davinia Galea & Elaine Falzon

Communications:

Stephanie Bonnici, Zofia Stelmaszyk

Logistics:

Zofia Stelmaszyk

Project Consultants:

Dr Rarita Zbranca
Pamela Abela

Speakers - Workshops:

Pamela Abela
Dr Mariella Borg Buontempo
Professor Marie Briguglio
Elaine Falzon
Anna Formosa
Davinia Galea
Professor Charmaine Gauci
Dr Elaine Cutajar
Lou Ghirlando
Dr Simone Inguanez
Dr Paul Daniel Micallef
Dr Pauline Vassallo
Sarah Vella
Professor Valerie Visanich

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Arts Council Malta:

Mary Ann Cauchi, Adrian Debattista, Rita Falzon, Dr Simone Inguanez, Dr Karsten Xuereb

Sarah Vella, President of CATS

Superintendence of Public Health:

Professor Charmaine Gauci

The Health Promotion and Disease Prevention Unit within the Department for Health Regulation:

Dr Pauline Vassallo, Dr Elaine Cutajar

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