culture&health

making the link

LONDON
HEALTH COMMISSION

contents

foreword

The need for a holistic approach to tackling health inequalities is now widely accepted.

Policy makers are developing a much clearer understanding of how the health agenda can be linked with economic, environmental and transport policy for example, to tackle the underlying causes of ill-heath.

To date however, there has been little attention given to understanding how cultural policy impacts on the health of communities and how it can contribute to achieving health objectives.

The positive benefits to physical and mental health of participating in more tangible and 'active' aspects of culture such as dance, sport, or music are relatively well documented, but what of the more indirect impacts of other elements of culture?

In fact, culture has a significant contribution to make to health, not least because in all its forms it helps to provide the social fabric of communities, making them 'communities' in the real sense and sustaining the individuals within them.

The scale and diversity of London's cultural resources present excellent opportunities for positively influencing the health of Londoners. This booklet is intended to help stimulate further consideration of how this potential can be realised at a time when local authorities are developing strategies that will guide the use of their own cultural resources.

introduction

- *How do aspects of culture make a difference to people's health?*
- *How can cultural policy contribute to improving the health of the population?*

This booklet provides an introduction to the links between culture and health, drawing on the available evidence and literature to highlight ways in which local cultural strategies and the activities which they guide might affect the health of the population.

It is intended primarily as a reference point for those working within and with local authorities to develop local cultural strategies in line with current government guidelines.

In preparing such strategies, local authorities have been encouraged to identify and promote the contribution of cultural activities to their communities' economic, social and environmental well-being.

A key aim is to demonstrate the ways in which culture can help to deliver the main local agendas as set out in the community strategy. Improving people's health is one of these key agendas.

This booklet has been developed from a paper, commissioned by the London Health Commission and South East London Strategic Health Authority, which provides a rapid review of the evidence to inform a health impact assessment of the Mayor of London's draft Cultural Strategy for London.[†]

The paper, and more information about the London Health Commission and health impact assessment, is available at: www.londonshealth.gov.uk

[†] Cave, B. and Coutts, A. Health evidence base for the Mayor's draft Cultural Strategy. (in press). 2002. Greater London Authority, South East London Strategic Health Authority.

linked agendas

Defining 'Culture'

'Culture' is redefined each time the term is used. In its guidance on the development of cultural strategies, the Department of Culture, Media and Sport (DCMS) states that culture has both a material and a value dimension (see box) which are inextricably entwined and constantly inform each other.

The scope of culture

Culture has a material dimension
- the performing and visual arts, craft, and fashion
- media, film, television, video, and language
- museums, artifacts, archives and design
- libraries, literature, writing and publishing
- the built heritage, architecture, landscape and archaeology
- sports events, facilities and development
- parks, open spaces, wildlife habitats, water environment and countryside recreation
- children's play, playgrounds and play activities
- tourism, festivals and attractions
- informal leisure pursuits

Culture has a value dimension
- relationships
- shared memories, experiences and identity
- diverse cultural, religious and historic backgrounds
- standards
- what we consider valuable to pass on to future generations

Creating Opportunities: Guidance for Local Authorities in England on Local Cultural Strategies. DCMS 2000.

Culture is by definition complex, multi-faceted and, particularly in its value dimension, contentious. This booklet aims to inform the development of local cultural strategies and so it focuses on the more material aspects of our cultural life. This emphasis does not diminish the importance of the value dimension of culture.

Policy context: Cultural Strategies

Local authorities are expected to prepare a local cultural strategy to promote the cultural well being of their area.

DCMS guidance places this task within the context of 'tackling social exclusion, contributing to regeneration, promoting safer communities and encouraging healthier lifestyles..', and highlights the potential links with health improvement programmes among other key policy initiatives which share similar objectives.

The cultural strategy should 'integrate, implement and monitor the major cultural goals, policies and actions of the authority and its partners'. It should link with and be informed by the community strategy, advocate the value and importance of culture to the community, and demonstrate the ways that it can deliver the main local agendas.

Defining 'Health'

This booklet employs a social definition of health in keeping with the World Health Organisation's definition of health as:

"...a resource for everyday life, not the object of living. It is a positive concept emphasising social and personal resources as well as physical capabilities."

Health has many determinants: economic status, education, employment status, the environment, housing, transport, social links and others. The diagram opposite shows why efforts to improve the health of communities need to encompass the contributions of many agencies beyond the boundaries of the National Health Service.

The main determinants of Health

Dahlgren and Whitehead [2] (Figure 3.1, p. 23 in Whitehead [3]).
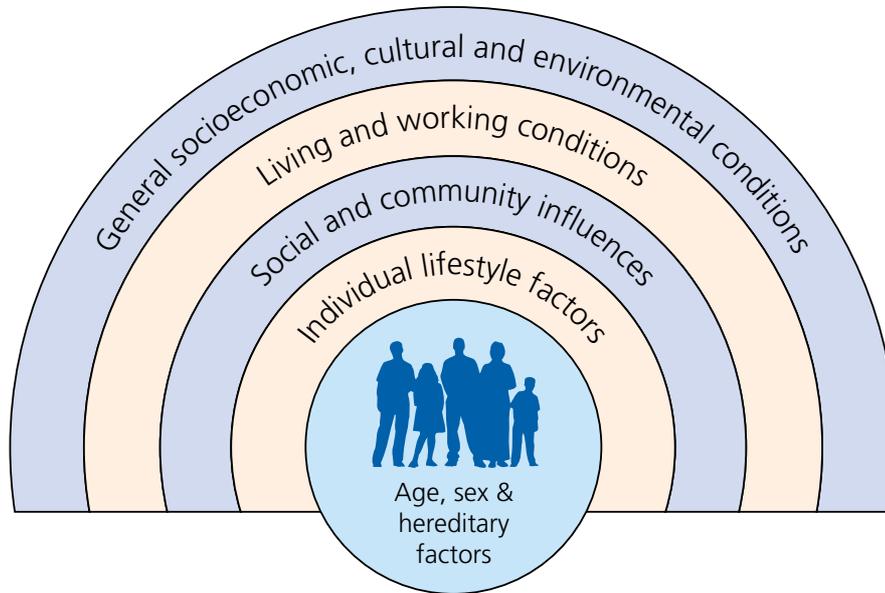
Policy context: Primary Care Trusts

NHS Primary Care Trusts (PCTs) are now in place in all London Boroughs. PCTs are responsible for linking closely with Local Strategic Partnerships to improve their population's health and deliver wider objectives for social and economic regeneration. They will be developing a strategic view of local priorities for improving health and programmes of action to tackle the root causes of ill-health, targeting in particular communities with the poorest health in efforts to reduce inequalities. Increasingly, these plans are being aligned with local authorities' community strategies.

links between culture and health

This section provides an overview of where culture or elements of cultural policy have or may have a bearing on health.

With a view to supporting those preparing local cultural strategies, it is presented to reflect elements of a typical cultural strategy as proposed by the DCMS guidance document Creating Opportunities.[4] It begins with a general assessment of how cultural activity and participation can affect health, in which its contribution to social capital is key, before identifying the potential health impacts of specific cultural services. The third and final strand highlights issues of relevance to the processes employed by organisations within the cultural sector and how these can help to foster better health.

The original evidence review[1] on which this overview is based drew on international research that includes several major evidence reviews and other published literature. Care was taken in drawing conclusions for Britain and the local level from studies conducted in other countries and on a national scale.

The general benefits of cultural activities to health
Cultural activity contributes to the overall well-being of the community, and participation is associated with better individual health and well-being.

Cultural activity contributes to social capital

Cultural activity is beneficial to the health of communities and individuals within them because of its significant contribution to the development and maintenance of social capital. Social capital is an important determinant of health.

Defining social capital

There are many ways of defining social capital, but 'community co-ordination', 'co-operation', 'reciprocity', 'trust', 'social integration' and 'supportive relationships' feature as key words in much of the literature on the subject.

Three different forms of social capital have been identified), namely bonding (close ties between members of families and ethnic groups); bridging (relations with wider networks of friends and associates); and linking (hierarchical relations between different social strata).[5] These are useful in understanding ways in which social capital can encourage or hinder social cohesion. For example, strongly bonded groups may hinder the development of wider contacts and social cohesion.

Social capital and health

There is a wealth of evidence suggesting links between social capital, or its components, and health. For example:

- Higher levels of social integration and social connectedness (the degree to which individuals form close bonds with relations, friends and acquaintances) are associated with personal well-being, higher life expectancy and lower death rates from all causes. [6,7]
- Better social support is also associated with lower levels of anxiety and depression, and may help people to cope better with illness and to have better prognoses when ill.[8]

Safer communities

Although it is not entirely clear *how* good stocks of social capital in a community has a positive effect on health, its contribution to creating safer communities is seen as important.

Studies have shown that most forms of civic engagement help to create trust, reciprocity and co-operation in local communities, which in turn helps to discourage anti-social or criminal behaviour.[5,7] Communities which are characterised by anonymity, limited acquaintances among residents and low levels of civic participation face increased violence and crime.[7]

The fear of crime, which can be seen as an indicator of social capital[9], is associated with higher blood pressure

and increased anxiety, and is significantly associated with poor self-rated health.[10]

How cultural strategies can help
'Social cohesion is not something that a community generates in isolation from government or regional policies'[11] and the cultural sector has a lot to contribute to agencies working against social exclusion.[12]

While the arts play an important role in building social capital, traditionally, they have been more successful in supporting internal group bonds than in helping to bridge the barriers between groups.[13] Activities are often segregated in ways that reflect existing social divisions because of people's desire to be with those like themselves, and because of the way the arts are funded and presented.

Policies and resources can encourage opportunities for forming supportive social networks. For example they can:

- foster established networks and include newcomers;
- provide a range of meeting places;
- distribute resources equitably, helping to reduce tension between different ages or other groups;[14]
- respond to the needs of different groups within the community, for example through greater community participation and representation.[15]

However, even highly cohesive communities with high levels of social capital can be detrimental to those people who do not participate or who appear different from the rest of the community. As art and culture often rely on this 'being different' as a source of creativity, cultural strategy may be well placed to include linking members

of the social strata, eg. rich/poor among its aims.

***Participation* in cultural activities is associated with better individual health**
A number of studies suggest an association between people's participation in the social, civic and cultural life of the community, and their health; feeling part of the community is associated with better health.[16] For example:

- One longitudinal study found that individuals who were culturally inactive or those who became less culturally active during the course of the study, reported poorer health compared to the culturally active.[17]
- It suggested that people's experiences of culture, including literature, film and music, or cultural events can have physical, mental and social effects through the reduction in

tension and the arousal of attention, alertness or excitement.

- Another study found that attending cultural events is linked to longevity. People who rarely attended such events ran a 60% higher mortality risk than those attending most often.[18]
- Community-based arts projects have reported anecdotal evidence of enhancing participants' sense of well-being.[19]

Barriers to participation
However, the benefits of participation are not felt equally across the population because of the economic, cultural, educational, environmental (eg transport), physical and other barriers faced by disadvantaged individuals and communities. An understanding of who does and does not participate and why is crucial in ensuring that cultural activity is inclusive and cultural policy is to help in tackling social exclusion.

The health impacts of specific cultural services
There are many opportunities to influence good health in the development and implementation of policy relating to specific cultural services.

i) Built heritage/urban design
The environment in which we live is an important influence on health, directly and indirectly. Evidence here holds pointers for all those concerned with the built environment whether from a practical or aesthetic perspective, across the sectors.

For example, we know that poor design of built environments creates opportunities for crime and decreases residents' willingness to use and defend local space.[20] Planning and design that stifles urban street life will undermine the sustainability of communities. Deprived neighbourhoods including signs of

incivilities (vacant property, unmaintained housing, graffiti and visible signs of criminal activity) are strongly related to the fear of crime[21,22] which is in turn associated with poor health.

Conversely, good design can encourage greater ownership and involvement of communities and can reduce vandalism and the under use of facilities.[23]

We also know that the nature of the environment is important for healthy child development. Environmental factors such as the distance between houses, access to facilities such as parks, the density of the child population, and safety all influence measures of children's behaviour.[24]

A review of mental health and the built environment found that depressed women were significantly more likely to be living in flats with raised walkways

than in brick or concrete houses, or in tower blocks.[25] However, other studies suggest that it is 'problem' estates that impact most on people's mental health, rather than the style of housing.[26]

ii) Sport, exercise, physical activity

Increasing the uptake of physical activity and exercise among the population will contribute to reducing levels of illness and death rates:

- A lack of physical activity is linked to a range of adult conditions so promoting physical activity in childhood may be important.[27]
- Studies have shown that physical exercise can be beneficial in the prevention and treatment of some of the most common causes of physical ill-health including coronary heart disease (CHD), hypertension, obesity, osteoporosis (brittle bone disease), diabetes mellitus and asthma.[28] For example:

- The incidence of CHD in middle-aged men is approximately halved in the most active compared to the most sedentary groups.[29]
- In overweight adults, aerobic exercise causes a modest weight loss even without dieting[30]. Regular physical activity combined with dieting is one of the most effective means of managing mild to moderate obesity and maintaining an ideal body weight.[31]
- Being physically active reduces the risk of later hip fracture by 50%.[32]
- Physical activity may also play an important role in the management of common mild-to-moderate mental health diseases, especially depression and anxiety.[28,33] Regular participation in an exercise programme has been found to be associated with measurable increases in self-esteem in adults and children[34], and regular exercise may also reduce memory loss in older people.[35]

- Strenuous physical activity improves perceived health and it reduces the risk of heart disease, stroke, hypertension, atherosclerosis, colon cancer, lower back pain, osteoporosis and adult onset diabetes.[36]

The provision of a variety of opportunities, acceptable to people of all ages, abilities and backgrounds, to engage in appropriate physical activity can therefore have a direct and positive impact on population health.

iii) Parks and open spaces

A recent review of the health effects of green space[37] reported both positive and negative effects on health:

Potential positive effects included:
- Improved exercise levels in a community, thereby contributing to the reduction in obesity, cardiovascular disease, diabetes and arthritis. The

impact on exercise levels is likely to be greatest in children.

- Improved social interaction and community activities. This can contribute to reducing levels of stress-related problems, and can contribute to reducing autistic spectrum disorders and attention deficit disorder in children. Other studies[24] have shown that access to parks is among the environmental factors that influence measures of children's behaviour including the number and nature of friendships and characteristics of play patterns.

Potential negative effects included:

- Criminal, social or psychological aggression often take place in green spaces, drug abuse and conduct offences may be centred in these: this may lead to a restriction of use by certain age groups or ethnic groups. Other studies have confirmed

the fear of crime as an important factor in people's willingness to use open spaces in general.

- Hayfever, which causes loss of work hours for adults and is a significant cause of missed schooling, is increasingly frequent in urban and rural populations for reasons that are not entirely clear. However, it is suspected that the effect of pollen in urban populations is exacerbated by atmospheric pollution.
- There are risks of toxic contamination from traffic pollutants to some vegetables and fruit grown in the inner city, and some allotment sites have been found to harbour rodents in winter, possibly resulting in a negative health impact on neighbouring communities.

The benefits to health of parks and open spaces outweigh the negative impacts. Policies and management

practices that encourage their use and overcome barriers to access such as poor transport links and safety fears may help to maximise these benefits, and enable them to be shared more equally.

iv) Play
Research has highlighted the reduction of children's play territory as roads and pavements become more and more dangerous[38], and that there has been a dramatic reduction in opportunities for independent play and exploration due to the fear of crime.[39]

The provision of play facilities that allow expression of independence and personal mobility may have positive behavioural and mental health benefits for children.

v) Large-scale events, festivals and tourism

Studies of large-scale events[40] have shown that their impacts can be complex, variable and create winners and losers. Where community and user involvement in resource and funding decisions are weak, the risks of negative impacts are higher.

For example, in the Sydney Olympics there were positive benefits in giving the city a sense of pride; (anecdotally) in an increased interest and active participation in sport and physical activity by its residents; and in the use of the media spotlight by indigenous people to highlight issues facing them.

But there were more negative impacts: inadequate consultation and information for affected community groups; exposure to dust and possibly toxic wastes from building work; economic and social costs fell disproportionately on lower income groups; the diversion of funding from government services like health and education; and mistrust over the financial and political benefits.

Citizen participation was minimal in the bidding for US Olympic events and although the Mayor of Atlanta stated that the its staging of the Games would lift people out of poverty, there was no strategy or funds for anti-poverty programmes.[41]

Strategies are needed to ensure that the potential benefits of large events are realised and widely enjoyed.

vi) Informal Leisure

Leisure is essential to an individual's psychological health. 'Leisure lack' has been equated with a diminished sense of well-being.[42]

Alcohol

Alcohol is an integral element in many informal leisure activities, and there is a wealth of evidence about its impact, positive and negative, on health:

Negative effects

- Heavy drinking has been associated with ill-health and deaths from coronary heart disease, accidents and chronic conditions such as liver disease.[43]
- Although alcohol can cause crime, usually it is merely associated with offending. Drunkenness as a crime appears to cross all age boundaries but is associated mainly with the young, particularly young males where the offence involves aggression.
- Alcohol-related aggression often results in facial injury, with beer glasses used as weapons. Men, particularly young men, are the

most likely victims and are more likely to be injured near licensed premises. However, there is also a strong link between domestic violence, where women are the victims, and alcohol. Men who drink heavily are more likely to physically abuse their partners. Consequently, women are more likely than men to be injured in the home.

Although the relationship between alcohol and aggression is a complex one, it has been suggested that the potential for alcohol-related violence can be reduced by measures such as ensuring that licensed premises are attractive and well maintained, avoiding discounted alcoholic drink promotions, serving food and staggered closing times, and by staff expecting good behaviour and actively discouraging anti-social behaviour.[44]

Positive effects

- Moderate alcohol consumption has been associated with a lower risk of coronary heart disease, stroke and sudden death.
- A net health benefit from alcohol use can be expected in people aged at least 40 and drinking no more than 2-3 drinks per day[45] (although this would exceed the 14 units per week which is generally accepted as a safe limit for women).
- People who are at high risk of coronary heart disease (CHD) can benefit from moderate alcohol intake; conversely, the health risk to individuals at low risk of CHD is potentially worsened. However, it is not known how long moderate alcohol consumption must continue for these benefits to occur, and there is no universal safe threshold for intake.

Drugs

Social patterns and acceptance of drug use are changing. The average age of first illegal drug use is falling[46] and there is a strong correlation between the early use of alcohol tobacco and volatile substances and the use of illegal drugs. Almost half of young people are likely to try illegal drugs at some time in their lives although only a fifth go on to develop a long-term pattern of use. Reasons given by young people for their initiation and use of illegal drugs centre around peer group influence.[47]

It has been suggested that specialist arts organisations can assist in a debate over ways to address changing patterns of drug use.

Healthy processes

Healthy Employment

Employment is a significant determinant of health. Cultural industries, as employers of hundreds of thousands of workers in London, have an important contribution to make to the health of Londoners in this respect.

One study found that workers in arts projects demonstrated high levels of skill and commitment, but described employment conditions among artists who work with people as 'lamentable'. They found many areas requiring improvement: pay, contracts, work environment, training, career development, management and professional support.[48]

Negative impacts of employment on physical and mental health are associated with:

- lack of control over work;
- lack of social support;
- imbalance between effort and reward;
- lack of job security.

Levels of health risk are related to the quality of the work. They are higher among dissatisfied workers and lower among satisfied workers.[49]

Stakeholder involvement

There is ample evidence that demonstrates the potential benefits of participation itself in processes that affect people's lives. Increased stakeholder involvement in cultural policy development and specific activities may help to maximise benefits to health – not only in contributing in itself to stocks of social capital, but also because:

- Local community involvement in the development of community facilities (the material base for social capital) can help to ensure that they are able to meet constantly changing social conditions and a range of needs.[15]
- Fair and open partnerships between cultural organisations and relatively wealthy public agencies which are increasingly interested in their potential to deliver wider objectives, will help to ensure the success of projects by building a shared understanding of the actual outcomes of cultural action and the processes by which they are achieved.[48]

Evaluation

As the economic case for participatory cultural projects rests on their contribution to social policy objectives (by facilitating empowerment and creativity), evaluation is needed to assess the benefits including whether they are cost effective.

Longitudinal evaluation is recommended by PAT10.[50] Evaluation strategies should consider health as well as other outcomes, and the 'insider knowledge' of 'stakeholders' is as important here as other sources of information and evidence.[51]

summary

- Culture has both a *material* and a *value* dimension; these are inextricably entwined and constantly inform each other.

- Whilst culture in its material forms has both positive and negative effects on health (and the research tends to highlight the negatives), the benefits outweigh the drawbacks: it is generally good for health. However, the evidence is mainly associative.

- There are direct and indirect mechanisms by which cultural activity contributes to the health and well-being of communities.

- There may be considerable potential for cultural activity in building links across social boundaries; traditionally it has been more successful at supporting bonds within groups. Cultural activity that encourages strong group ties may hinder the development of wider contacts and social cohesion.

- *Individuals* may gain direct health benefits as a result of their participation in cultural activities. However, wider benefits to the *community* will not accrue unless these are pursued as explicit goals using appropriate processes including stakeholder involvement.

- We need to identify and understand patterns of participation in cultural activities to avoid reinforcing patterns of social exclusion and to support initiatives that facilitate greater inclusion.

- The size and diversity of London's cultural sector presents a considerable challenge and opportunity to contribute to the well-being of Londoners through the adoption of healthy employment practices.

- Since health and well-being are affected by such a variety of factors, cultural strategies need to be integrated with other local strategies, such as economic and spatial development strategies, to maximise their benefits for health.

- Health outcomes should be included in the evaluation of cultural policies and activities.

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About the London Health Commission

The London Health Commission works to reduce inequalities in health within the capital and to improve the health and well being of all Londoners.

The Commission recognises that this requires co-ordinated action to improve the determinants of health across London. It promotes this action by:

- Building partnerships across sectors and organisations
- Influencing key stakeholders and policy makers
- Providing practical support for local activities.

To find out more about the work of the London Health Commission, see our website: www.londonshealth.gov.uk

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Health Impact Assessment (HIA)

HIA is an approach to ensure that decision making at all levels considers potential impacts on health and health inequalities, and identifies actions that can enhance positive effects and reduce or eliminate negative effects.

Although HIA is a new and developing approach, it is increasingly being recognised nationally and internationally.

Developing and promoting the use of HIA is one of the supporting priorities of the London Health Commission.

A number of resources are now available to support those considering or conducting health impact assessments. Please see our website at: www.londonshealth.gov.uk/hia.htm

South East London **NHS**
Strategic Health Authority

BREAKING THE CYCLE
East London and the City
Health Action Zone