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# The Role of Arts in Public Health Movements: A Historical Analysis

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## ABSTRACT

This paper examines the intersection between arts and public health, focusing on the historical and contemporary roles that art has played in shaping public health movements. From the use of commercial art during the Progressive Era to modern visual campaigns on diseases like HIV/AIDS, the study highlights how art has been both a method for producing health messages and a tool for community-based health interventions. Case studies such as the "Lips to Lungs Project" and the "London Arts in Health Forum" demonstrate the impact of arts on public engagement, health education, and therapeutic outcomes. Challenges and opportunities for integrating arts into public health strategies are examined, emphasizing the need for creative collaborations between the arts and health sectors to enhance the effectiveness of public health campaigns.

**Keywords:** Public health, Arts in health, Historical analysis, Health education, Art-based interventions.

## INTRODUCTION

This paper examines the intersection between arts and public health. We begin by looking back at a historical moment in the United States, a time when public health was being defined and promoted in conjunction with a particular kind of artistic practice. These historical cases demonstrate how art can be intimately connected to public health agendas, a fact that has been largely forgotten in many contemporary discussions. The form of art promoted by these efforts was not oriented to self-expression or to encouraging the individual to express thoughts and feelings but was rather directed at motivating the public to respond to public health messages. What might it mean for health advocates to think about producing art rather than information, to speak in the voice of art rather than health experts, and to engage the audience to make art rather than to learn? [1, 2]. The focus of our discussion will be on the roles of art in public health movements. The art employed in these cases operates on the level of both means and ends: art is both a method for producing public health messages and a desired outcome of public health campaigns. We examine these roles historically, in three cases: the use of commercial art to create public health demand during the Progressive Era in the United States, the visual images employed by many contemporary campaigns to transform public perceptions of disease and drive increased funding and research, and the use of community-based art production as a tool for health education in anti-smoking, HIV prevention, and other campaigns. We examine how the roles of art in these cases depart from the dominant ideas about art advanced by both the usual suspects and many public health professionals. We describe the production of these health campaigns as a form of participatory art, drawing not only from the resources of the art world but also from the broader set of practices of community dialogue and solidarity associated with progressive social movements [3, 4].

### The Interplay Between Arts and Public Health

Throughout history, the arts have played a role in public health. At first glance, the disciplines of art and public health seem incongruous. Public health practitioners often call on artists to create campaigns and programs that further public health goals through artistic means. On the one hand, art has the power to transmit information across language, cultural, and political boundaries. Facts alone do not make people emotionally engaged. It is storytelling, visual stimulation, and a sense of something beyond objective information that can create real impact. The arts can be a space for expressing and coping with health

issues. The performance stage can provide a point of access for public discourse on stigmatizing health issues. Early in the AIDS epidemic, live performance became an important medium for communicating the dangers of the disease. The gospel of AIDS education produced a variety of media, but live performance was the most striking. Seeing a staged narrative featuring journalistic or medical articles about the disease engages issues of community, agency, and empathy in a way a news feature cannot [5, 6]. Performance artists have also confronted health systems directly by producing autobiographical or fictional character theater. Increasingly, visual artists have addressed health issues in their own medium. The neuroscience of visual perception shows us that seeing a work of art sets off complex emotional and cognitive responses. This biological understanding of visual engagement appears to support the social force of visual communication. The work of art “speaks” to us personally. Visual engagement and the emotional experience of participation in art are partially explained by empathy. When a viewer engages with a work of art, his or her brain reflects the subject’s actions and emotions, mirroring the look and feel of the art object. The deep neural responses that engage the visual art experience are strong alternatives to the somewhat more superficial response elicited by print or the web. Poetry is another craft that allows communication of public health messages. This powerful medium requires a mere matter of moments to captivate the disciplined reader and instill knowledge about public health issues. Poetry, in itself, requires empathetic understanding about its subject in order to effectively share its message. In this regard, it can be nimbly effective as a means of communication for health promotions and interventions. The HIV/AIDS pandemic generated an outpouring of poetic expression, stimulated by community groups, governments, and ordinary people [7, 8].

### **Historical Evolution of Arts in Public Health Movements**

In this historical journey on art in public health, we provide an analysis from a socio-spatial perspective that emphasizes the role of the socio-cultural background and the historical circumstances in the evolution of this approach today. This understanding can help to build better initiatives in social marketing fields, showing how it is productive to realize art-health interfaces. In this sense, it cannot be seen independently of the social and spatial context in which it was inserted. This historical excursion has as its starting point, more specifically, in pre-industrial England, where the arts started to play a special role in health broadening, changing almost two centuries later to be considered as precursors of social change, mainly associated with the countryside culture resistance in the UK and Europe. Subsequently, with the implementation of the community classic psychiatric treatment model, a potential “art in health in territorial health promotion” proposal already emerged. Regarding this relationship, it was seen that the need to strengthen the connection between the public and social health sectors has been appearing with greater force in public health proposals developed since the end of the 1980s, associated with the reorientation of curative-preventive vertical medicine toward comprehensive community health care. However, the relationship gained more visibility in the territorial public health promotion projects as they pointed out the subjective and symbolic aspects present in the production of health and illness that require a broader and interdisciplinary proposal [9, 10].

### **Case Studies of Successful Art-Based Public Health Initiatives**

The following is a selection of art-based public health initiatives in practice today. These case studies were selected because they address critical public health issues and employ a range of art forms. Additionally, these initiatives report data on the efficacy of their drive and methods that can inform future public health campaigns [11, 12].

Case study #1 — Lips to Lungs Project: Lips to Lungs examined intersections between participatory art, public health, and civic engagement. Data were collected through participant surveys, artistic reflection, and interviews. A “lives turned around” approach was taken, also allowing the project to foreground the participant’s voice. The objective allowed for advocacy and coalition building with healthcare, municipal, and public health partners. We determined that flexibility, creativity, and active collaboration, including participatory decision-making, were all essential. Recommendations included the need to engage people and policymakers in a dialogue around their needs and values, and that we should collaborate with public health units again in the future. We also conclude that exciting, ephemeral art can have long-term and wide-ranging impacts on a broad range of communities [13, 14].

Case study #2 — London Arts in Health Forum: A Social Prescription Initiative: This case study profiles a social prescription program in London to highlight a therapeutic approach that engages vulnerable communities in vibrant public health partnerships using the arts. This initiative is an arts-based treatment for depression and social isolation and a method of referral from social service agencies to the health sector. The program is accessible, addresses mental health, and works in a non-stigmatizing

manner within a community-based setting. Goals include reducing emotional and social isolation and increasing wellness, particularly at transition points when people are rebuilding their lives. This program was evaluated using a phenomenological approach, focusing on the experiential dimensions of symptoms of depression and elements of the arts-based treatment program that have been found to promote healing. Therapeutic outcomes are highlighted. We discuss the roots and rationale for social prescription, the initiative's goals, and its delivery, and discuss ethical and practical concerns related to such programs. Programs like the one we describe seek to harness the healing power of the arts without reducing human suffering to a purely medical illness [15, 16].

### **Challenges and Opportunities in Integrating Arts into Public Health Movements**

The complexity of interweaving the arts to enrich, deepen, and extend messages about public health topics necessitates careful discussions of both the challenges and the opportunities health organizations face in their efforts to do so. The following discussion outlines the top five known challenges health organizations encounter when integrating the arts into their communication strategies, training efforts, treatment plans, or other public health initiatives. While resistance to bringing artistic elements into predominantly scientific or research-focused fields can limit the implementation of artful public health initiatives, at least five points of opportunity or possibility can foster creative collaborations that reach further into diverse communities and long-standing health disparities. Embracing such opportunities requires more than artistic collaboration; it requires a strategic shift in the ways health issues and health communication are conceived and addressed [17, 18].

#### **Challenges and Resistance**

- 1) Art is expendable and often not present in public health budgets.
- 2) The arts are not currently associated with health fields.
- 3) Resistance from traditional health sectors and partners.
- 4) Lack of awareness and acceptance of arts-based approaches.
- 5) Lack of training and education for health professionals in arts-based approaches.

#### **Opportunities and Possibilities**

- 1) Projecting forward, if such barriers were removed or changed, how would public health projects be different or more effective if funded and supported for artistic innovation?
- 2) In communities, what possibilities and opportunities are missed when health organizations cannot communicate effectively using arts-based approaches? [19, 20].

### **CONCLUSION**

The historical and ongoing integration of the arts into public health movements demonstrates the power of creative mediums in influencing health outcomes. Artistic interventions, from visual arts to performance, have proven effective in transcending cultural and linguistic barriers, engaging communities, and promoting empathy. While challenges such as budget limitations and resistance from traditional health sectors remain, the opportunities for collaborative, art-based approaches to public health are vast. By embracing the arts as a critical component of health communication, future public health initiatives can achieve greater impact, particularly in underserved and marginalized communities. Art not only facilitates public health messaging but also fosters participation and healing, making it a valuable resource in the ongoing pursuit of better public health outcomes.

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