

Structured Dialogue between the European Commission and the cultural sector

THE ROLE OF CULTURAL AND CREATIVE SECTORS IN IMPROVING MENTAL HEALTH OF THE YOUTH

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I. INTRODUCTION - PURPOSE OF THE CALL

The purpose of this Voices of Culture cycle is to generate project ideas and policy recommendations for the cultural and creative sectors² and decision-makers. The output from the series of Brainstorming sessions and Dialogue meeting with the European Commission will be a catalogue of project ideas and policy recommendations authored by the participants. The catalogue will be disseminated widely in the sector and marketed EU-wide by the end of 2022- early months of 2023.

¹ The Author wishes to thank Martina Caroleo – Ordine degli Assistenti Sociali del Lazio; Calum Smith, Consultant, Behavioural and Cultural Insights Unit, WHO Regional Office for Europe; and Nils Fietje, Technical Officer, Behavioural and Cultural Insights Unit, WHO Regional Office for Europe for their valuable contributions, comments, and suggestions. ² as defined by the European Commission in the regulations of Creative Europe: "all sectors whose activities are based on cultural values or artistic and other individual or collective creative expressions. The activities may include the development, the creation, the production, the dissemination and the preservation of goods and services which embody cultural, artistic or other creative expressions, as well as related functions such as education or management. They will have a potential to generate innovation and jobs in particular from intellectual property. The sectors include architecture, archives, libraries and museums, artistic crafts, audiovisual (including film, television, video games and multimedia), tangible and intangible cultural heritage, design (including fashion design), festivals, music, literature, performing arts, books and publishing, radio, and visual arts" (European Commission, COM(2018) 366 final 2018/0190 (COD) Proposal for a regulation of the European Parliament and of the Council establishing the Creative Europe programme (2021 to 2027) and repealing Regulation (EU) No 1295/2013 2018).

The discussion paper aims to (1) Recall the multidimensional policy framework³ of the cross-sectoral "health and culture" field, with specific reference to youth mental health; (2) Identify the evidence about cultural and creative programs and actions that can effectively address and meet the mental health needs of young people; (3) Explore the success factors of these programs and actions (including education and training of operators, management options, funding, etc.), with a view to their replication in other contexts or their upscaling; as well as understand the existing barriers; and (4) Identify project ideas grounded in cross-sectoral cooperation, in light of the current global context cultural stakeholders are operating in (post-pandemic; war, etc.).

The 2019-2022 Work Plan for Culture⁴ selects "Cohesion and well-being" among its five priorities: "Access to culture and participation in cultural life promote individual empowerment, democratic consciousness, and social cohesion through exchanges with other people and civic engagement. (...) A stronger orientation towards the interests and needs of specific groups, such as young people, older people, people with disabilities, people with a migrant background and people living in poverty or material deprivation, is necessary. (...) Cross-sectoral cooperation with other areas, such as education, social care, healthcare, science and technology, and regional and urban development, has a significant effect on cohesion and well-being."

Moreover, the Scoping review published by the WHO Regional Office for Europe⁵ confirms that one of the most promising areas of cross-sectoral cooperation for culture is that of **health and well-being**. **Mental health is an integral part of health and well-being**.

Mental health is conceptualized by the WHO "as a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community. With respect to children, an emphasis is placed on the developmental aspects, for instance, having a positive sense of identity, the ability to manage thoughts, emotions, as well as to build social relationships, and the aptitude to learn and to acquire an education, ultimately enabling their full active participation in society"⁶.

To add to the policy landscape, the **EU Youth Strategy** - the framework for EU youth policy cooperation for 2019-2027- devotes the 5th of its 11 Goals⁷ to Mental Health and Wellbeing, in these terms: Achieve better mental wellbeing and end stigmatisation of mental health issues, thus promoting social inclusion of all young people. The European Youth Forum advocates that support to **mental health and wellbeing for young people**

³ See, for instance, the <u>report of the Workshop for the Experts of the EU Member States on Culture for Social Cohesion.</u>
<u>Outcomes and Lessons Learned</u>, EC Directorate-General for Education, Youth, Sport and Culture - Unit for cultural policy.

⁴ Council conclusions on the Work Plan for Culture 2019-2022. Official Journal of the European Union (2018/C 460/10).

⁵ Fancourt D and S Finn (2019). What is the evidence on the role of the arts in improving health and well-being? A scoping review. Health Evidence Network synthesis report, No. 67 Copenhagen: WHO Regional Office for Europe.

⁶ WHO 2021, Comprehensive mental health action plan 2013-2030, Geneva: World Health Organization,

⁷ www.youthgoals.eu. The Goals are the outcome of the 6th cycle of the Structure Dialogue with young people, decisionmakers, researchers and other stakeholders that took place under the title 'Youth in Europe: What's next?'. The aim of this cycle was to collect voices of young people and contribute together to creating the EU Youth Strategy 2019-2027.

should include a nonmedical safety net and first point of access delivered through a range of settings such as schools, non-formal education providers, youth organisations, as well as the cultural and artistic activities and institutions⁸.

It is useful to remind here that to "Ensure healthy lives and promote well-being for all at all ages" is the 3rd sustainable development goal of the 17 included in the UN Agenda 2030.

In this context, research on how the arts and culture sectors have the potential to contribute to the mental health of young people is growing worldwide, particularly for young people in marginalised situations, like low-income families, young people with mental disorders, or young refugees and migrants. From theatres to museums, from music to visual arts, from videomaking to photography, from reading and writing to dancing, all the arts have proved⁹ to be able to contribute:

- to promoting mental health and wellbeing,
- to preventing mental disorders and illness,
- to the management of pathologic conditions,
- to the treatment of mental disorders and illness.

It is time to move from a fragmented approach to young people's mental health, to a system-wide approach that can tap into artistic and cultural resources to help address this complex issue. The purpose of the present call is to engage with experts on the topic of understanding the potential contribution of the cultural and creative sectors to the mental health of young people. A non –exhaustive list of aggravating factors for mental health of the youth includes: long-term "pandemic scar" due to covid-19; the invasion of Ukraine by Russia and the refugee flow associated with it; the environmental crisis.

Discussions should therefore include lessons learned, practices and projects implemented since 2020 to help supporting the mental health and wellbeing of young people.

The target output is a paper that identifies criteria for successful and reliable cultural and artistic projects for youth mental health and proposes recommendations and action point directed at decision makers in the EU and at national, regional, and local levels, as well at the cultural and creative sectors themselves. These recommendations could serve as a source of inspiration for policy makers and practitioners and help develop, in close connection and collaboration with all the relevant sectors – health, education, youth and social policies – sustainable activities with measurable impacts on youth mental health in the short and long run.

⁹ Fancourt D and S Finn (2019). What is the evidence on the role of the arts in improving health and well-being? A scoping review. Health Evidence Network synthesis report, No. 67 Copenhagen: WHO Regional Office for Europe; 2019.

⁸ Moxon, D., Bacalso, C, and Şerban, A (2021), Beyond the pandemic: The impact of COVID-19 on young people in Europe. Brussels. European Youth Forum.

II. BACKGROUND - KEY CHALLENGES

Mental Health and its social determinants in the EU

More than one in six people across EU countries had a mental health problem in 2016, well before the pandemic¹⁰. "Mental health problems cover a wide range of illnesses, including disorders such as mild or moderate anxiety and depression, drug and alcohol use disorders, and severe disorders such as severe depression, bipolar disorders, and schizophrenia" (OECD/EU 2018). Mental health problems can be caused or aggravated by behavioural and environmental factors.

The WHO stresses that "Determinants of mental health and mental disorders include not only individual attributes such as the ability to manage one's thoughts, emotions, behaviours and interactions with others, but also social, cultural, economic, political and environmental factors such as national policies, social protection, living standards, working conditions, and community social supports". The European Framework for Action on Mental Health and Wellbeing and the EU-Compass for Action on Mental Health and Wellbeing in recommended integration of mental health in all policies and multi-sectoral cooperation. WHO's Comprehensive Mental Health Action Plan 2013-2020 (WHO, 2013) emphasises integrated and coordinated prevention, promotion, care, and support including via the implementation of a multi-sectoral strategy. Mental health and well-being are not only observed at the individual level, but also community level, through social cohesion, through belonging to a community of shared values.

Mental Health and Wellbeing of young people as a strategic Goal for the EU

Young people need support to their mental health and wellbeing since the early age, and throughout all stages of education and in the transition from school to work. In 2022, the OECD called for co-ordinated and timely access to support for children and young people delivered through schools¹⁴.

The rise of acute and burning problems affecting young people, even at a very early age, such as coping with bullying and cyber-bullying, PTSD (among young refugees fleeing from war), rising concerns over the environmental crisis, the alarming increase in suicides, suicide attempts and suicidal thoughts, and self-harm (in Croatia, there was a 57.1% increase in suicides in the 15-25 age group in 2020; in Bulgaria, 70% of suicides are youth 15; in Italy, self-harm and suicide attempts by teenagers increased

¹⁰ OECD/EU (2018), Health at a Glance: Europe 2018: State of Health in the EU Cycle, OECD Publishing, Paris. https://doi.org/10.1787/health_glance_eur-2018-en

¹¹ WHO 2021. Comprehensive mental health action plan 2013–2030. Geneva: World Health Organization.

¹² European Commission (2016), EU Framework for Action on Mental Health and Well-being.

¹³ EU Compass for Action on Mental Health and Wellbeing (2018), Annual Activity Reports of Member States and Stakeholders, EU Compass.

¹⁴ OECD (2022) Recommendation of the Council on Integrated Mental Health, Skills, and Work Policy, OECD/LEGAL/0420.

¹⁵ https://www.euractiv.com/section/coronavirus/news/suicide-increasing-amongst-europes-youth-governments-underprepared/. Accessed 8 June 2022.

by 30% from October 2020 to May 2021¹⁶; in France, there was a significant increase in the number of adolescents hospitalized for suicide attempts, with a 27% increase by the end of 2020 compared to 2019¹⁷), calls for immediate coordinated and intense action.

The EU Youth Strategy 2018-2027 adopts, among its 11 Goals, one about Youth Mental Health and Wellbeing: "Achieve better mental wellbeing and end stigmatisation of mental health issues, thus promoting social inclusion of all young people".

Targets for the attainment of this Goal are:

- Encourage the development of self-awareness and less competitive mindsets by fostering appreciation for individual skills and strengths.
- Safeguard the rights to work and to study of people with mental health issues both during and after illness to ensure their ability to pursue their own ambitions.
- Develop an inclusive intersectional approach to mental health provision for all, especially marginalised groups.
- Provide all professionals working with young people as well as family and friends with quality mental health first aid training.
- Provide inclusive, respectful, and well-funded treatment by incorporating high quality mental health provision across all medical institutions.
- Focus on prevention measures that ensure young people are equipped with the knowledge and the skills required for better mental wellbeing.
- Fight stigma about mental health issues by developing awareness programmes.

The pandemic scar and the new needs

Empirical evidence gathered since 2020 highlights that the pandemic has had a detrimental impact on children's and youth's mental health¹⁸. Social isolation from peers and significant adults, fear, and uncertainty, over exposure to digital interaction and the subsequent increased pressures, etc. are key factors that have negatively impacted young people's mental health status. Research also indicates that social disparities have expanded since COVID. Children and youth with pre-existing mental health disorders, living in financially precarious situations, from racialized groups, and/or involved with child protection services experienced lower levels of resilience when faced with the COVID-19 pandemic¹⁹.

¹⁶ https://www.europarl.europa.eu/doceo/document/E-9-2021-002642_IT.html. Accessed 8 June 2022.

¹⁷https://www.lemonde.fr/en/science/article/2022/04/28/increasing-suicide-rates-among-french-young-people-worry-health-professionals_5981862_10.html. Accessed 8 June 2022.

¹⁸ "Self-reported mental health issues are also more prevalent among young people compared to other age groups across many OECD countries. The same data from Belgium, France and the United States shows that prevalence of symptoms of anxiety and depression is around 30% to 80% higher among young people than the general population as of March 2021. (...) In Italy, a survey in March to May 2020 estimated that 24% of 16-24 year-olds were experiencing symptoms of depression, almost double the share among adults aged 25 and above (13%) (Delmastro and Zamariola, 2020[9]). The higher share of young people experiencing anxiety and depression is not consistent with data from recent years, and indicates that the mental health of young people has been disproportionately affected during the COVID-19 crisis. In the European Union, the proportion of 15-24 year-olds reporting chronic depression was estimated at 3.6% in 2014, much lower than among the general population (6.9%) (Eurostat, 2014[10]) "OECD 2021 Supporting young people's mental health through the COVID-19 crisis. Paris: OECD.

¹⁹ Collin-Vézina D, Fallon B, Caldwell J. Children and youth mental health: not all equal in the face of the COVID-19 pandemic Reference Module in Neuroscience and Biobehavioral Psychology. 2022 Jan. PMCID: PMC9094644.

Youth mental health is the object of a growing, generalised concern. "A significant and increasing number of young people across Europe are expressing their concern at the prevalence of mental health issues such as high stress, anxiety, depression, and other mental illnesses amongst their peers. Young people cite the immense societal pressures they face today, and express a need for better youth mental health provision"²⁰.

New effective and sustainable models of support and response

The WHO 2013-2030 Action Plan for Mental Health observes that "Globally, (...) annual spending on mental health is less than US\$ 2 per person (...), with 67% of these financial resources allocated to stand-alone mental hospitals, despite their association with poor health outcomes and human rights violations. Redirecting this funding towards community-based services, including the integration of mental health into general health care settings, (...) would allow access to better and more cost-effective interventions for many more people" ²¹. A fortiori, as argued by the European Youth Forum Report, support to mental health and wellbeing for young people should include a nonmedical safety net and first point of access delivered through a range of settings such as schools, non-formal education providers, youth organisations, as well as the cultural and artistic activities and institutions²².

The role of the arts in improving mental health and wellbeing of young people

Worldwide and in the EU, there are numerous cultural and creative projects that address at different levels the mental health and wellbeing of young people, in terms of promotion, prevention, treatment, and management.

The recent scoping review promoted by WHO ²³ acknowledges that the aesthetic and emotional components of arts activities can provide opportunities for emotional expression, emotion regulation - intrinsic to how we manage our mental health - and stress reduction. Evidence is also abundant on the preventive benefits of arts engagement in relation to mental health. The Report shows how playing and listening to music, dancing, art and visiting cultural sites are all associated with stress management and prevention, lower levels of biological stress in daily life and lower daily anxiety. Cultural participation can also help to reduce the risk of developing mental illness such as depression in adolescence. Participating in arts activities can build self-esteem, self-acceptance, confidence, and self-worth, which are protective against mental illness.

The Report also attests how arts venues can be used as sites for supporting people with unmet health needs (e.g.: libraries used as sites for arts-in-health interventions such as reading for mental health).

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²⁰ 2018/C 456/01 Resolution of the Council of the European Union and the Representatives of the Governments of the Member States meeting within the Council on a framework for European cooperation in the youth field: The European Union Youth Strategy 2019-2027.

²¹ WHO 2021, ibid.

²² Moxon, D., Bacalso, C, and Şerban, A (2021), Beyond the pandemic: The impact of COVID-19 on young people in Europe. Brussels. European Youth Forum.

²³ Fancourt & Finn 2019, cit.

WHO's scoping review also reports evidence on how the arts (arts programmes in schools, arts festivals, drama, songwriting, etc.) have been used to reduce stigma associated with certain health conditions, to increase positive attitudes towards mental health, increase appreciation of the abilities and creativity of people with mental illness, and increase perceived collective efficacy within communities to improve mental health care.

Going beyond the WHO report, the desk research of the preparatory action "Culture for Health" confirms the importance of culture and creativity for the mental health of youth.

At the EU level, various programmes such as Creative Europe and Erasmus+ have already supported cross-border cooperation in this field.

However, cultural experiences alone cannot prevent, guarantee, or restore young people's deteriorating mental health. Moreover, cultural experiences alone cannot disrupt the inter-generational cycles of disadvantage that are often linked to young people's poor mental health. While culture helps, it cannot compensate for society. Cross-sectoral strategies, to link cultural offer and cultural policies with what education, employment, youth, health, justice, housing, welfare, and other services can offer.

Such co-ordinated, multi-strand approaches, sustained consistently over time, are difficult for policy makers and challenge the professions involved. Yet, they may offer the best approach to preventing or mitigating the impact of multiple and cumulative disadvantage on people's mental health and life chances.

The complexity of vulnerability calls for more systemic, "ecological" responses which involve interventions in families and communities alongside help for children and young people. Some EU Member States have moved some way towards such an approach, often as part of their early school leaving prevention strategies or overall lifelong learning strategies and have established multi-service collaborations where professionals with different areas of responsibility work together to support disadvantaged children and adults.

Centring such a multi-faceted response to vulnerability on and around schools, the only universal service where the well-being of children and young people can be regularly monitored, would seem a wise step. Schools have an important part to play in tackling vulnerability through early intervention and the sustained support of vulnerable children and young people. They are well placed to understand the dynamic nature of social exclusion, to recognise the continuum of need, to spot when a child becomes vulnerable and to act. Many acknowledge this broader role, but many need help making a success of it.

Cross-sectoral approaches do not necessarily demand additional resources so much as existing resources are used in a different way. They imply a shift in focus away from

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²⁴ https://www.cultureforhealth.eu/

dealing with manifest problems towards preventive work and away from slow-moving and tightly rationed crisis responses towards early intervention. Above all, they imply a move away from fragmented action by separate actors towards coordinated – and therefore more efficient – interventions. Such approaches, therefore, can either save costs or free up existing resources for dealing with a wider range of issues –they can thus contribute to smart spending at a time resources are scarce.

III. AREAS OF DISCUSSION - KEY QUESTIONS

Against this backdrop, the Brainstorming meeting is framed around three main areas of discussion:

- A. Evidence on the contribution of the cultural and creative sectors to improving the mental health and well-being of young people, at national and international level.
- **B.** Synergies with other policy fields (health, education, social welfare, etc.) to maximize results.
- C. Examples of interventions where there is robust evidence of successful outcomes, particularly for disadvantaged young people. Conditions for success of such interventions.

Each topic is introduced and followed by a selection of guestions.

A. Evidence on the successful contribution of the cultural and creative sectors to improving the mental health and well-being of young people at national and international level.

Arts and culture programs often address the issue of mental health and wellbeing and mobilise their professional capacities, not only for promotion, prevention, treatment and management of mental health and wellbeing of the young people, but also as key actors for fighting stigma and spreading positive attitudes and behaviours. New needs have emerged since the 2019 WHO scoping review, and, also due to the pandemic and the war scenarios, new responses have been set in motion, which are worth investigating, and involve all the cultural and creative sectors. This topic is about both refreshing the evidence of the role played by the arts and culture sectors for the mental health and wellbeing of young people.

Key question 1

What is the international evidence available that culture contributes to better mental health for young people? In what ways? What are the key factors in cultural projects and programmes that most effectively promote the mental health and wellbeing of young people and help in preventing, treating, and managing mental issues, disorders, and conditions?

Auxiliary questions:

- What is the evidence about the effectiveness of cultural projects/activities in promoting, preventing, treating, and managing the mental health of young people? How is the Academic and Research world contributing? How can the quality of assessment and data collection be improved?
- What are the characteristics (e.g.: discipline, method, management, duration, sectoral/intersectoral context, place, beneficiaries, etc.) of successful cultural policies and programs addressing the mental health and wellbeing of young people?
- Have the recent scenarios (the pandemic, the concerns over the environmental crisis, the war in Ukraine) brought about new mental health and wellbeing needs among young people? How have the cultural sectors responded? Have those emergencies left a legacy of lessons useful for the new normal, or for possible future crises?

B. Synergies with other policy fields (health, education, social welfare, etc.) to maximise results.

Strategies and plans aiming at promoting the mental health and wellbeing of young people insist on the need to adopt an integrated, multidimensional, cross-sectoral approach. Synergies not only help maximise results, but they also diversify the actions and increase their accessibility.

Key question 2:

What are the most significant cases of stable and successful cooperation of the cultural and creative sectors with the other relevant sectors, e.g.: Health, Education, Social Welfare, Youth policies, etc. in activities and programmes that address the mental health of young people?

Auxiliary questions:

- What are the most successful steps to take to build a solid and durable collaboration among the relevant sectors (e.g.: training and education, inter-institutional forums, funding, etc.?
- Who are the key stakeholders in this respect?
- Are there examples of successful culture-based policies/programs addressing the mental health of young people integrated with other

sectors or set in places (schools, hospitals, youth centres, leisure venues, etc.) that favour the blending of different approaches?

c. Examples of interventions where there is robust evidence of successful outcomes, particularly for disadvantaged young people. Conditions for success of such interventions.

Identification of the key factors of success and durability of programs and actions is indispensable for scaling up them and making them transferrable. It will be equally useful to identify possible weakness which could endanger their operational sustainability and duration over time, like lack of continuity and excess fragmentation.

Key question 3:

Auxiliary questions:

- What target groups (e.g.: adolescents, young adults, girls, young people with disorders or conditions, groups with special needs, etc.) are mostly in need of promotion, prevention, treatment, and management-oriented cultural and creative projects? For whom those interventions are proved to be most effective?
- What kind of local, regional, national, and EU institutional support is likely to be most effective and needed (e.g.: targeted programs and funding, technical support and assistance, communication campaigns and dissemination, research, training, etc.)?