

Section 1: the 3 shifts

Introduction to NCCH and our reason for submitting evidence

The National Centre for Creative Health is a registered charity that champions 'creative health' - the use of arts and creativity to benefit health and wellbeing, including both activities and approaches. Activities can include visual and performing arts, crafts, film, literature, cooking and creative activities in nature, such as gardening; approaches may involve creative and innovative ways to approach health and care services, co-production, education and workforce development.

Over the past decade, the evidence base for creative health has become increasingly robust: meta-analyses, longitudinal evaluations, RCTs, participatory projects, and NHS-commissioned reports have demonstrated measurable improvements in physical and mental health outcomes, reductions in service use, and positive returns on investment. Quantitative studies show statistically significant effects, positioning creative health as a credible and evidence-informed component of modern care.

We believe that arts and cultural engagement are essential to the goals of the 10 Year Plan, preventing ill health, reducing health inequalities, and bringing care closer to home.

Where we have observed new digital initiatives that improved patient care

Digital technology has an essential role to play in enabling and scaling creative health benefits. This operates on two fronts: 1) digital creative health provisions and 2) digital tools/ infrastructure.

Digital creative health describes artistic and creative practice that is delivered or mediated through digital technologies and benefits health or wellbeing – for example, through immersive virtual reality experiences, biofeedback systems, or AI-enabled participatory art. As outlined in '[Immersive Arts and Creative Health](#)', Digital Creative Health has been used to create better healing environments, support pain management, regulation and rehabilitation, play a role in health promotion and training, as well as address mental health difficulties.

Digital tools and infrastructure improve access and evidence of wider creative health provisions by facilitating online referrals, supporting data sharing between health and creative partners, and recording outcomes within patient and population health information systems.

Together, these dual pathways allow creative health to be more accessible, more measurable, and more integrated into the wider health system.

Here we provide some notable examples:

- [Create & Bloom App](#) – by South West Yorkshire Partnership NHS Foundation Trust – was developed as a ‘**Couch to 5k for creativity**,’ guiding users through daily short creative activities, **enabling the self-management of mental health and wellbeing**. It was built with NHS-compliant information security, ensuring personal data remains on-device.
- [Spiroartis](#) is the first **art-based spirometry platform** for adolescent asthma patients. In its pilot testing all participants in the cohort **preferred the artworks platform over incentive animations** currently being used.
- [Artfelt & Megaverse](#) – at Sheffield Children’s Hospital - used augmented reality, 3D sounds and projection to **transform treatment rooms** into interactive woodland and arctic worlds. This **reduced pain, stress and anxiety** in paediatric oncology patients during treatment.
- [Researchers at University of Leicester](#) - in collaboration with University Hospitals of Leicester NHS Trust - led a review which demonstrated that **biofeedback** has a significant effect on **blood pressure**. Examples of bio-feedback innovations linked to [games](#), [soundscapes](#) and other creative models, demonstrates this is an effective area for digital development.
- [Noise Solution](#) – providers of music mentoring for youth mental health and development – developed a bespoke digital platform for young people to document their music-making journeys. These can be safely shared with family and key workers, providing a **natural but continuous feedback** loop, allowing **early intervention and tailored support**.
- [Devon Recovery Learning Community \(DRLC\)](#), during COVID-19 lockdowns, launched a dynamic **online learning environment** offering over 40 recovery-focused courses via video conferencing. This **digital inclusion** initiative took on over 100 new students who were unlikely to have engaged with face-to-face courses.
- [Researchers at Sheffield Hallam](#) offer an example of one of the many applications of **Virtual Reality Environments** to support **pain management** – in this case, for burns. International evidence suggests patients report [35–50% reductions](#) in procedural pain. Other innovative uses of creative VR for pain include [cancer care](#) and during [labour](#).
- [Elemental](#) – a **cloud-based social prescribing platform** - integrates with primary care systems, secondary care systems and social care systems so

that users can **make, manage, and report on referrals** to social prescribing, care coordination and health coaching safely and securely. It offers essential infrastructure for recording creative health outcomes.

- [Zeitgeist](#) - part of the AHRC-funded p_ART_icipate programme - measures participants' **brainwave activity (EEG)** as they undertake short, facilitated creative exercises. Using **deep-learning algorithms**, trained on biomarkers for creative Flow states, it visualises participants' mental state in real time. The intervention "nudged" **emotional regulation** through real-time feedback and researchers theorise a link between flow states and **social connectedness**.
- [Healthy Lives Shropshire](#) shows how digital social prescribing referrals and data-sharing agreements across EMIS and PharmaOutcomes platforms allow patient progress to be securely tracked across sectors.
- [The Gloucestershire Integrated Care Board](#) developed a **Creative Health Data Dashboard**, linking NHS metrics with creative outcomes and demonstrating top-performing results at **a fraction of the cost of clinical alternatives**.

Future innovation can build on these foundations by aligning creative health data with the NHS Number and the Shared Care Record. Doing so would enable outcomes from creative and community provision to be systematically linked to long-term health data, allowing commissioners and clinicians to see the full preventive and therapeutic impact of creative health participation over time. This integration of digital creative health with core NHS information systems represents a crucial step toward a truly joined-up, evidence-driven model of person-centred care.

For more examples of how Digital features in creative health, visit:

<https://www.culturehealthandwellbeing.org.uk/key-themes/digital>

Where we have already seen or begun to deliver a shift from hospital-based care to community care

Creative health naturally lends itself to community care, offering non-clinical, holistic, person-centred, empathetic, and curious ways to support health and wellbeing. Creativity as a way of life can support longer life, more disability-free years, and better lifelong wellbeing. As something that can be accessed both from home and via dedicated services, it is well aligned to a future picture of health where the public are more involved in health decision-making and healthy behaviours. Creative hubs and

libraries have already proven vital places to engage those disenfranchised from pathologized systems of care or those stuck in waiting lists for clinical services.

Here is a small selection of examples of what is already taking place:

- The [Creative Health Associates Programme](#) demonstrated the importance of bridging roles to enable knowledge mobilisation around the benefits of arts and creativity for health and wellbeing. Localised presence will help this knowledge to be [spread to members of the community](#), rather than only health professionals.
- Neighbourhood centres can co-locate health professionals with foodbanks, community banking, peer support, and creative groups. This integration normalises access, reduces stigma, and builds on trusted gateways already provided by cultural organisations. An example of where this approach has already achieved success is [Liskeard Library](#), who embedded health professionals in the library to offer health checks.
- Birmingham City Council's Public Health team have funded four [Public Health Research Officers](#) to work in local Cultural Institutions, bringing measurable impacts closer to the public. One example of delivery that has come from the programme is a curated artwork series, developed with IKON Gallery and shared in local libraires to improve accessibility. This arts series traces health across the life-course and through a series of settings, to help the public to develop health literacy and to inspire the development of more empathetic health systems.
- GPs face [rising workload, burnout](#), and long waits. Creative Health offers relief by engaging patients on waiting lists (e.g. [Arts Boost](#) in Wales reduced CAMHS pressures; elsewhere [singing support for COPD](#) resulted in 21% decline in GP appointments).
- [Community Wellbeing Champions](#) show how local figures provide insight into barriers, micro-inequalities, and pathways for change. These approaches demonstrate that creative, trusted engagement is central to effective neighbourhood health.
- Mimar Collective CIC - in partnership with [Birmingham and Solihull Mental Health NHS Foundation Trust](#) - run free creative wellbeing sessions (*Our Stories, Our Voices*) at the 24/7 Neighbourhood Mental Health Centre, providing access without referral. The unique co-developed Neighbourhood Centre design demonstrates what is possible for embedding creative health in Neighbourhood Centres.
- Derbyshire is currently trialling roles of [Creatives in Place](#) – artists/ imaginative thinkers embedded within a GP practice and its local community to act as a bridge between healthcare teams and the public. Their role is to use creative and relational skills to understand local wellbeing challenges,

connect people and assets, and co-develop imaginative, community-based approaches that enhance health and prevent illness.

- [St Georges Health and Wellbeing Hub](#) in Havering are pioneering in developing creative health strategy at the local level. This demonstrates an innovative approach which places creativity at the heart of its community wellbeing work.
- [Create Gloucestershire](#) demonstrate best practice in neighbourhood community chests, where residents feed into decisions around the development of grassroots creative projects addressing local priorities. Likewise, in [North Somerset](#) – a NNHIP site and Creative People and Places recipient – health leaders have integrated a creative health community chest into their plans, providing vital leadership on how creative approaches can be embedded into mainstream healthcare ways of working.
- [Number 11 Arts](#), co-developed with Birmingham City Council, demonstrates best practice in embedding creative health at the neighbourhood level, via a model of Local Arts Forums – constituency-level groups that deliver locally designed arts provisions via a distributed funding mechanism. They are also supporting the development of specialised social prescribing link workers, to improve referrals to creative health provisions.
- Hospital Arts Managers, like [Air Arts](#) (the arts charity for University Hospitals of Derby and Burton), deliver participatory arts programmes within hospitals. These not only improve the experience of being in hospital (reducing pain and anxiety) but also enhance the speed of recovery and teach patients the value of engagement in the arts. The team have found that following engagement of arts in hospitals, patients continue to engage with arts and culture closer to home, and this has a preventative effect on their health and wellbeing.

Where we have already seen or begun to deliver preventative care services

Creative health and prevention go naturally hand in hand, supporting health across a wide range of health conditions. Here are some notable examples:

Best Start to Life

- In early childhood – especially the first 1,001 days – creative health nurtures emotional regulation, language development, social connection, and cognitive flexibility, laying foundations for lifelong [social development and healthy behaviours](#).
- Almost every UK library runs [free rhyme/story sessions](#) for babies and toddlers, providing drop-in, inclusive creative play that supports language and bonding without childcare fees. Protecting these buildings and services will be vital in maintaining quality creative health provision for early years audiences.

- [Talent25](#) is a pioneering Creative Health project studying the impact of the arts on early years children. Over 25 years (with ~400+ families), the team is mapping inhibitors and facilitators of engagement, iteratively adapting provision. The research is building the evidence-base for early years creative health provision as a protective factor and social determinant of health.
- [TrimTots](#) tackles early childhood obesity by blending nutrition guidance with creative arts, play, and movement in a 24-week family programme, targeted at children who were already overweight or rapidly gaining weight. A Randomised Control Trial demonstrated a very strong effect. Children moved about [almost one major BMI category \(0.9 SD\) closer to a healthy weight](#) (e.g. from “obese” down toward “overweight”) immediately after TrimTots, and remained 0.3SD below their original baseline 2-years later.

Cardiovascular Disease and Hypertension

- People who dance have a [46% lower risk of cardiovascular death](#)
- Longitudinal data shows those with low social and [cultural participation](#) have an increased risk of coronary heart disease
- [£157 million is saved annually](#), as a consequence of how movement and dance reduce the risk of developing Type 2 diabetes
- Dance therapy reduces the [systolic/diastolic pressure](#) of people with high blood pressure
- Viewing figurative art in a museum setting has been indicated to [decrease systolic blood pressure](#)
- British Heart Foundation encourage blood pressure checks in [unconventional spaces](#), to aid hypertension case finding. Community/ arts centres are great locations for this.
- Studies note a [40% reduction in GP appointments](#) from patients using a social prescribing service which focuses on CVD risk and mental health

COPD and Asthma

- Singing support for COPD and asthma has led to a [23% decline in A&E admissions and a 21% decline in GP appointments](#), six months after referral
- Expressive writing for adults with moderate asthma [improves lung function by 14%](#), due to reductions in physiological stress
- Music therapy lessens paediatric patients’ asthma symptoms, and [improves medication compliance, pulmonary function, and quality of life](#)

- Dance-based exercise for COPD improves [postural stability and balance scores, pulmonary function, and peripheral muscle strength](#)

Musculoskeletal + Chronic Pain Conditions

- [Community gardening](#) modifies risk factors for musculoskeletal conditions through increases in physical activity, [fruit and vegetable intake](#), and reductions in stress.
- Active and passive engagement with creative arts stimulates parts of the brain linked to [emotional processing and regulation](#)
- 80% of studies in a review of [dance interventions for chronic pain](#) note reduced chronic secondary musculoskeletal pain
- [Music therapy/ music-based interventions](#) for those with fibromyalgia alleviate pain, relieve depression, improve quality of life and self-esteem, and provide coping strategies

Creative Ageing

- [£149 million is saved annually](#), due to how movement and dance reduce the risk of developing dementia
- Fall-related fractures cost the health and social care system £4.4 billion per year. By mixing dance with physiotherapy, [falls are reduced by 58%](#)
- Longitudinal cohort data have shown that cultural engagement is associated with a [reduced risk of developing depression](#) in adults aged 50+
- When adults over fifty experiencing depression engage with cultural venues it is estimated to bring NHS and social care savings of £26 per person per year and an [annual society-wide benefit of £3.03bn](#)
- [Breathe Dance for Strength and Balance](#) has demonstrated improvements in key outcome measures (for example, 74% of patients improved Timed Up and Go scores and 80% increased gait speed).
- [RCTs of dance interventions for Parkinson's](#) show positive outcomes in motor function, gait, balance and walking ability. English National Ballet's 12-Week Dance for Parkinson's programme is a great example of how dance has been embedded in NHS clinical pathways through the [SHAPER programme](#).
- Festivals and public arts events are a great format for highly effective, arts and community-shaped health promotions. [Luminate](#), [Re-Live](#), and festivals such as [Age Against the Machine](#) Festival of Creative Ageing, are great examples of this.

- Investors can expect up to [£6.62 Social Return on Investment](#) for every £1 invested in visual arts interventions for dementia
- The [cARTrefu](#) programme places professional artists into care homes across Wales to deliver weekly creative workshops with residents, staff, and sometimes family members. This was in response to ~80% of older adults in care homes having dementia - they experienced low mood, social withdrawal, loss of identity, and reduced cognitive function, causing depression. After the sessions, residents showed a statistically significant improvement in mental wellbeing, [with average wellbeing scores rising from 2.96 to 4.07 out of 5](#).
- Longitudinal cohort data shows that cultural engagement is associated with a [reduced risk of becoming frail](#) and a slower progression of frailty over time

Health promotion and engagement

- Over a ten-year period, the Early Years and Young People Team at NHS Tayside delivered [four annual dance and drama workshops](#) about health - two of which focused on tobacco and smoking issues. Local health services see a spike in usage every time the workshops are delivered.
- In 2021 Warwickshire County Council's Public Health service appointed seven artists to deliver important vaccination information in innovative ways across the county. The project achieved broad reach to multiple audiences, through a diverse range of art forms including music and visual arts.
- Creative co-production work with people with SMI can [significantly increase uptake of annual health checks](#) from 10% to 60%

The professions, roles and skills that were critical to successful implementation for the examples we have provided

Successful implementation of creative health has been built thanks to the following contributors:

- **Bridging and boundary-spanning roles** such as [Creative Health Associates](#), [Link Workers](#), and [Creatives in Place](#) were critical in connecting health, community, and cultural systems, translating between sectors and supporting co-production.
- **Clinical champions** (e.g., [GPs](#), [nurses](#), [pharmacists](#), occupational therapists, physiotherapists, mental health practitioners) provided credibility and clinical governance, ensuring creative health interventions aligned with care pathways and patient safety.

- **Public health and prevention specialists** supported targeting, evaluation, and integration within local health priorities, ensuring creative approaches contributed to population health outcomes (see [RSPH Arts Health and Wellbeing SIG for more information](#)).
- **Digital specialists and data analysts** enabled secure and mutually beneficial platforms and helped evidence impact through robust data collection and linkage.
- **Community development and engagement workers** ensured cultural sensitivity, trust, and relevance to local populations, reducing health inequalities and enabling authentic community participation.
- **Artists and creative practitioners** brought essential skills in artistic facilitation, creative storytelling, co-design, and community trust-building, providing psychologically safe spaces for participants to explore health and wellbeing.
- **Evaluation and research partners** (e.g., universities, evaluators, and research schools) provided evidence design, data synthesis, and validation, helping secure investment and policy influence.
- **Voluntary, Community, Faith, and Social Enterprise (VCFSE) partners** played a critical role in outreach and sustainability, often acting as delivery partners or referral pathways for creative health programmes.
- **Leadership and commissioning roles** within ICBs, local authorities, and NHS trusts were vital for embedding creative health within strategy, unlocking funding, and supporting system-wide adoption. See our creative health champions for more information

Barriers to ensuring the right professions, roles and skills were involved, and how we/ the people we represent overcame these barriers

- **Fragmented commissioning structures** mean that creative health often sits outside core NHS or local authority budgets. This is overcome through proof-of-concept projects, strong individual leadership advocacy, pooled budgets, and strategic partnerships.
- **Lack of shared language between sectors** (clinical, cultural, community) causes misunderstandings about roles, outcomes, and accountability.

Bridging roles, joint training, and frameworks like the [Creative Health Quality Framework](#) are used to build mutual understanding.

- **Limited awareness among health professionals** about the evidence base and clinical relevance of creative health is an on-going barrier to progression. Where it is overcome, it is due to local champions, evidence briefings, and embedding creative health in workforce development and continuing professional education (e.g., [University of Chester's Creative Health Placement](#) within their Nursing course)
- **Inconsistent digital literacy and data interoperability** across sectors hinders data sharing. This is partially addressed by developing shared platforms (e.g., Elemental/ Creative Health Dashboards) and ensuring NHS-standard information governance, but this is an area that needs particular development to meet the ambitions of the 10 Year Plan.
- **Cultural and attitudinal barriers** where creative health is seen as non-essential or “add-on” activity. This has been countered by presenting robust ROI and clinical outcomes evidence, and through visible leadership endorsement from ICBs and NHS Trusts.
- **Short-term funding cycles** prevent workforce stability and skill retention – a significant barrier for the field. This is somewhat overcome through multi-year pilot extensions, partnership agreements, and inclusion of creative health roles in workforce plans, but the NHS and public health have yet to provide creative health providers with stability that matches clinical counterparts.