

# **BENEFITTING FROM CULTURE FOR WELL-BEING AND POSITIVE HEALTH**

A case study of working elements in cultural  
interventions in The Netherlands



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# Benefitting from culture for well-being and positive health. A case study of working elements in cultural interventions in The Netherlands

Sylvia Holla and Susanne Janssen

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[holla@eshcc.eur.nl](mailto:holla@eshcc.eur.nl), [s.janssen@eshcc.eur.nl](mailto:s.janssen@eshcc.eur.nl)

**Sylvia Holla** is a postdoctoral researcher and lecturer at the Erasmus School of History, Culture and Communication (ESHCC), at the Erasmus University Rotterdam (The Netherlands).

**Susanne Janssen** is Professor of Sociology of Media and Culture and Research Director in the Department of Media and Communication at Erasmus University Rotterdam. Her current research projects focus on the consequences of increased diversity, social inequality, digitalization, and globalization in the fields of media, culture, education, and politics.

**Abstract:** This case study focuses on the working elements of cultural interventions to increase the well-being of elderly, ill, and displaced persons (refugees with residence permits) in The Netherlands. Usually, these interventions result from collaborations in the cultural domain with social and care institutions. Most cultural interventions are initiated by cultural organizations and executed by professionals and volunteers working for these cultural organizations. The implementation usually occurs at involved care facilities, refugee shelters (“AZCs”), or social centers.

Cultural interventions have generated high hopes amongst care and well-being professionals and policymakers regarding their positive effects on health and well-being. However, the evaluative studies included in this case study show that several primary conditions are crucial for potential benefits, a very important one being a continuity of financing and practice. Continuity of an intervention requires a solid and general methodology (i.e., execution plan) that all practitioners can work with, not only the initiator or advocate of an intervention. Finance continuity is achieved mainly by convincing sponsors that they have spent their money well. The most compelling argument is often that the intervention is effective, i.e., that it reaches its goal of improving the well-being of its target group. Here lies a great challenge for interventions that revolve around culture.

Keywords: cultural interventions, positive health, well-being, evaluation research, The Netherlands

Cover illustration: Het Danspaleis, photo by Gaby Jongelen, part of the press kit.

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# Benefitting from culture for well-being and positive health. A case study of working elements in cultural interventions in The Netherlands

## Introduction

This case study is on cultural interventions geared toward advancing health and well-being in the Netherlands. We will focus on the working elements of cultural interventions implemented over the past decade in The Netherlands. Most of these interventions aim to increase the well-being of elderly, ill, and displaced persons (refugees with a residence permit) in The Netherlands. Usually, these interventions result from collaborations between the cultural domain and social and care institutions. Most cultural interventions are initiated by cultural organizations and executed by professionals and volunteers working for these organizations. The implementation usually occurs at the involved care facilities, refugee shelters ('AZCs'), or social centers. Cultural interventions have created high hopes amongst professionals and policymakers regarding their positive effects on health and well-being. Indeed, many studies have argued that culture positively affects health and subjective well-being (see, for example, Groot et al., 2021; Van Grinsven & Alderliesten, 2018). At the same time, 'hard' evidence on the positive effects of culture on well-being is still short in supply (Van Campen et al., 2017). Looking at cultural interventions designed to achieve positive health and well-being effects among their participants is a way to learn how—under which circumstances and to what extent—the high hopes and expectations regarding culture's positive impact on well-being are justified. Drawing on intervention descriptions and evaluative reports published by several research and cultural institutes,<sup>1</sup> this case study highlights the working elements and basic requirements for successful cultural interventions. The interventions discussed in these evaluative studies focus on different aspects of health and well-being and target different audiences. However, these audiences, most notably elderly persons and refugees with resident status, have relatively much 'health to gain', such as an overall increase in happiness or mental well-being, or a decrease in social exclusion and loneliness.

This case study shows that several conditions must be in place to achieve such positive effects through cultural interventions. An essential requirement is the continuity of financing and practice (i.e., the execution of the intervention). Continuity of practice calls for a solid and general methodology that all practitioners in organizations can work with, not just the initiator or advocate of an intervention. Finance continuity requires convincing sponsors that they spend their money well. Usually, the most convincing argument is the effectiveness of the intervention: predefined goals are reached through deliberate activities or mechanisms that are integral to the intervention. Here lies a great challenge for interventions that revolve around culture. Even though effectiveness is never easily measured and assessed for interventions, especially cultural interventions, a standardized path is rarely followed. The general belief prevails that artistic creativity demands a certain amount of openness and leeway. Therefore, measuring and establishing causes and effects is difficult, if not impossible, for most interventions that use culture to advance well-being.

## Structure of this text

In what follows, we first address the question of what defines a cultural intervention and discuss the working definitions of positive health and well-being prevalent in the Dutch field of cultural interventions. Second, we shed light on the policy context of cultural interventions in The Netherlands. Third, we will answer the main question regarding cultural interventions and their relation to well-

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<sup>1</sup> Most notably: Landelijk Kennisinstituut Cultuureducatie en Amateurkunst (LKCA), Hogeschool Windesheim, Kennisplatform Integratie en Samenleving (KIS), and Movisie.

being and positive health: what features and conditions are required for cultural interventions to achieve *positive health and well-being effects*? To answer these questions, it is essential to consider what 'successful' means in the realm of cultural interventions for practitioners, participants, policymakers, and researchers and how this qualification might best be established (evidence-based; experience-based). We conclude this case study with conclusions and recommendations on strengthening and capitalizing on the working elements of cultural interventions and increasing their chances of yielding positive well-being effects.

## What are cultural interventions?

Cultural interventions are organized activities or programs centered around the arts and culture. The term intervention emphasizes that a program or activity is well deliberated and carefully arranged to be meaningful or influential in some way or another to its participants. Cultural interventions aim at contributing to the positive health or well-being of their participants, and usually at a specific form of health or well-being, such as improving the quality of life and mental well-being or decreasing loneliness and social isolation (Van Ditzhuijzen et al., 2018, p. 8).

A cultural intervention can take different forms, often depending on its target group. Many interventions seek to advance active participation in art and culture, such as painting and making music when participants are capable. Cultural interventions with a less-abled target group are more likely to use receptive forms of participation, such as listening to music and looking at art (Van Campen et al., 2017, p. 14).

Cultural interventions are usually developed and implemented by professional artists. In this regard, cultural interventions differ from art therapy, executed by therapists with the primary purpose of therapeutically treating a specific (individual) problem. In contrast, cultural interventions usually target groups whose members experience similar problems or challenges. Such interventions involve a variety of artistic disciplines: music, dance, theatre, visual art, literature, film, architecture, design, and media. For this reason, the content and form of cultural interventions vary greatly. In practice, there is often flexibility in the implementation resulting in a rich palette of possibilities in the realm of cultural interventions that is adaptable and accommodating rather than standardized.

## Definitions of 'well-being' and 'positive health'

There is no common definition of well-being used in the scientific literature. Often, it is measured subjectively, using scales to measure self-reported well-being, which usually comes down to feelings of happiness or satisfaction with one's life. However, the World Health Organization (WHO) advocates for a broad view on well-being, perpetuating that health is a crucial component of well-being: 'Health is a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity' (WHO, 1948 in Simon and Baldwin, 2021). The definition of health as an element of well-being encompasses more than mere physical and mental well-being; it also concerns social well-being, i.e., a sense of being socially connected as a part of a group or society where one is valued and free to express oneself.

Going beyond a medical framework, this broad definition of health is called 'positive health' (Van Campen et al., 2017). Machteld Huber, a general practitioner and researcher who coined the concept, defines this as the ability to adapt and be in control in the context of life's social, physical, and emotional challenges (Huber et al., 2011, p. 2). Positive health can be viewed on six dimensions (see Fig. 1): quality of life, meaningfulness, mental well-being, social participation, daily functioning,

and bodily functions (Huber et al., 2016; Van Campen et al., 2017, p. 13). (See also Van Ditzhuijzen et al., 2018, p. 10).



Fig. 1 Dimensions of Positive Health according to Huber et al. (2011)

Source: <https://www.iph.nl/en/knowledge-base/what-is-positive-health/>

Cultural interventions usually focus on one or more of these dimensions when formulating goals of increasing well-being or positive health (Van Campen et al., 2017). For example, many cultural interventions involving older people aim to improve the quality of life and mental well-being or stimulate social participation (Van Ditzhuijzen et al., 2018). Cultural interventions for newcomers (refugees with resident status) often focus on participation and integration as preconditions of well-being; expanding social networks and diminishing loneliness are vital prerequisites for this (Van Dijk et al., 2019).

### The policy context of cultural interventions

From 2010 to 2020, the Dutch government economized on culture, resulting in budget cuts for cultural institutions and events on multiple levels and in various fields (Algemene Rekenkamer, 2015; Van Leden, 2021). At the same time, several Dutch care-related laws and regulations<sup>2</sup> underwent significant changes, creating more room for alternative ways to improve the well-being of patients and vulnerable citizens.

<sup>2</sup> Wet langdurige zorg (Law on longterm care), Wet maatschappelijke ondersteuning (Law on societal support), Werkgeversvereniging Zorg en Welzijn (Employers' Association Healthcare and Welfare) and Jeugdwet (Youth law), respectively.

These developments resulted in increased policy and political attention to the societal value of art and the connection of arts and culture with the social domain. In other words, arts and culture were seen as potential instruments to achieve social impact rather than being valuable for culture's sake. This 'instrumentalization' of arts and culture came to expression in several national multi-year programs, such as *Lang Leve Kunst* (Long Live the Arts) (2013–2016),<sup>3</sup> *The Art of Impact* (2015-2016),<sup>4</sup> and *Age Friendly Cultural Cities* (2016-2021),<sup>5</sup> under which various cultural interventions were initiated and executed.

Within the cultural domain, policy developments have sought to bring culture into the social realm by connecting culture and care. Interest in cultural interventions has grown in the health, care, and well-being sectors. Still, a structural approach to integrating such cultural programs in a financially sustainable way has yet to be developed (Van Campen et al., 2017, p. 22).

### Cultural interventions in practice

The collection of cultural interventions in The Netherlands is diverse in multiple ways, especially regarding art discipline and size. Over the past decade, cultural interventions have mainly been organized for vulnerable groups, such as refugees with residence status and elderly people.

In text boxes 1 and 2, we have included an overview of such interventions drawn from Van Dijk et al., 2019 and Van Ditzhuijzen et al., 2017, respectively. Even though these overviews are incomplete, they give a proper idea of the types of interventions that have been, or still are, made available by predominantly cultural organisations in The Netherlands. They do this mostly in collaboration with care institutions for the ill or elderly and, for newcomers, with refugee organisations and shelter facilities<sup>6</sup>, but also with municipalities, job placement agencies, language providers, social work, and business enterprises.

Most of these interventions aim to improve participants' quality of life and mental health of participants by stimulating social participation and decreasing loneliness and social exclusion. Cultural interventions usually target those facets of positive health that fall beyond the scope of the more traditional notion of health as 'bodily functioning' that prevails in healthcare.

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<sup>3</sup> <https://www.langlevekunst.nl/over-ons/>

<sup>4</sup> [The Art of Impact: 50 nieuwe projecten \(fondspodiumkunsten.nl\)](https://www.fondspodiumkunsten.nl/)

<sup>5</sup> <https://cultuurparticipatie.nl/subsidie-aanvragen/20/age-friendly-cultural-cities>

<sup>6</sup> Vluchtelingenwerk Nederland (VWN) and so-called 'AZCs'.

## Textbox 1. Examples of promising cultural interventions for elderly people

(source Van Ditzhuijzen et al., 2018)

### Veder Method

The Veder Method is a cultural intervention in which contact is made in an interactive and lively way with elderly people with memory problems, such as dementia patients, who reside in a care institution. According to effect research, the Veder Method makes a positive contribution to the behavior and mood of participants with dementia when offered by professional actors (van Dijk et al., 2011, 2012). For example, the participants were less confused, felt more at home and reacted more alertly to activities in their environment (van Dijk et al., 2011, 2012). In addition, the method also seems to have advantages for carers.

### Kunst Maakt de Mens, ouderen ontmoeten Van Gogh (*Art Makes People-the elderly meet Van Gogh*)

During the workshops of the program *Kunst Maakt de Mens*, the elderly are inspired by the life and work of Vincent van Gogh. The aim of this program is to enable the elderly to participate actively in art and culture, to promote social interaction between the elderly to combat loneliness, and to promote independence among the elderly who continue to live at home for longer. It is performed in six regions around the following art institutions: the Van Gogh Museum, the Kröller-Müller Museum, the Vincent in Nunen, the Van Gogh House in Zundert, the Drents Museum and the Dordrechts Museum. Partners include De Zonnebloem, Vier het Leven, and Cordaan.

### Het Danspaleis (*The Dance Palace*)

The Danspaleis is an old-fashioned fun dance party for the elderly and everyone who likes to swing. De PlatenDraaier (PD) pulls old squatters from the suitcases of the stars of yesteryear, such as Johnny Hoes, Louis Prima, Lieve Hugo and Doris Day. From sing-along to tearjerker, from merengue to English waltz and from polonaise to rock 'n' roll. The Danspaleis works from the vision that music can connect different groups of people and get the elderly moving. Research shows that the Danspaleis may reduce loneliness among the elderly, improve physical and mental health, and promote zest for life (van de Maat, 2017).

### Onvergetelijk (*Unforgettable*)

In 2013, the Stedelijk Museum and the Van Abbe Museum jointly initiated the Unforgettable programme, in which people with dementia, together with their loved ones, participate in an interactive tour and workshop in the museum. The programme was inspired by the successful *Meet me at MOMA* initiative. The museums want to contribute to the quality of life of people with dementia. Initially, the program was developed for people who still live at home, with an early form of dementia, but anyone who feels addressed to the program is welcome. At Unforgettable, the emphasis is on what everyone can do: experiencing an inspiring and pleasant museum visit together. The program aims to stimulate social contact by responding to the long-term memory and personal experiences of participants. Qualitative research into the program shows, among other things, that participants feel happier afterwards. The participants themselves are very positive about the program. In particular, the social interaction during the tour and the friendliness and involvement of the museum staff play a role in this (Heesbeen et al., 2017).

### Diva Dichtbij (*Diva Close*)

The Diva Dichtbij Foundation provides relief to the long-term sick with professional singing and personal contact. The Divas and Divos (professional singers and singers) sing for people who depend on long-term care, such as people with dementia who can no longer go to the theater themselves. The performances take place in the living room of nursing homes, or at someone's bedside. In addition to nursing homes, Diva Dichtbij also comes to Alzheimer Cafés, hospices, day care and multi-care departments of nursing homes. In addition, the singers and dancers also perform at people's homes.

### Formaat Workshop for Participatory Drama

Formaat tries to improve the position of vulnerable people in society through participatory drama. They work with the elderly, as well with other vulnerable groups such as people with psychosocial problems, residents of a problem neighbourhood, people with an intellectual disability, and people living close to the poverty line. To achieve its goal, Formaat uses various participatory (drama) methods, in which the participants can share their experiences, problems and challenges with each other.

### Embrace Nederland – Music and Dementia

The Embrace Nederland Foundation has the vision that music and musicians can have a social function, in addition to cultural entertainment. It creates new and innovative partnerships in the field of care, welfare and education. For example, the workshop series Music and Dementia has been developed to improve the well-being of people with dementia. This workshop series is based on the two-year research 'While the Music Lasts' (Smilde et al., 2014) of the Lifelong Learning in Music professorship.

**Textbox 2. Overview of cultural interventions across the Netherlands for newcomer refugees with residence status (Source: Van Dijk et al., 2019)**

<p><b>Talent on the Run (Fada Foundation Theatre)</b> Theater performance with 9 Syrian actors and 6 crew members, initiated and performed by professional Syrian actors based on stories from the asylum seekers' center in Alphen aan den Rijn</p>	<p><b>At home in Hoogeveen (Loods13)</b> Theater performance in Hoogeveen with 22 Syrian refugees and professional actors.</p>
<p><b>We ∞ match (Kunstenhuis)</b> Participation process and interactive theater training in De Bilt in which status holders learn about the Dutch work ethic and use what they have learned for integration and work.</p>	<p><b>Studio Maia (Formaat)</b> Three women's groups in Rotterdam that discuss personal situations, problems, and issues through theatre.</p>
<p><b><u>New Dutch Connections Foundation</u></b> The New Dutch Connections Foundation motivates young newcomers (15-29 years) to believe in themselves by producing theater performances and by offering workshops together with companies and linking newcomers to coaches</p>	<p><b>Ed van Hoorn, Fuck the System (Op Roet)</b> Theater performance in which 20 refugees play and in which workshops have been started through the regular integration program. The performance received the first European Amateo Award.</p>
<p><b>Catching Cultures Orchestra</b> A Utrecht orchestra for musicians who have fled to the Netherlands that offers a platform to showcase their talents and individuality, experience each other's music, and become involved in each other's environment.</p>	<p><b>Network Migrant Musicians</b> A national network that brings musicians with a refugee background into contact with Dutch musicians, who help newcomers with a music career.</p>
<p><b><u>Orchestra Partout</u></b> Orchestra of professional Dutch musicians and musicians with a refugee background who offer music lessons and joint concerts throughout the Netherlands.</p>	<p><b>Soundful Service (Stichting Culon / Vechel Ventures)</b> Initiative in Maastricht in which status holders and minimum wage earners work together towards a performance in eight workshops focused on music and visual arts.</p>
<p><b>Strange Guests (Music Generations)</b> Project in Rotterdam in which musical encounters, exchanges, and talent development are initiated between the elderly and status holders with a passion for music and stories.</p>	<p><b>Sing Dutch With Me (Paradiso Amsterdam)</b> An initiative of pop stage Paradiso where people who want to learn Dutch or simply like to sing Dutch hits under the guidance of a cantor and a pianist.</p>
<p><b><u>Intercultural design program (Makers Unite)</u></b> Amsterdam social enterprise offering a six-week program in which newcomers and local Amsterdammers design meaningful and sustainable products together.</p>	<p><b>Icons from The Hague meet the World (MRPVORM and The Hague Street Art)</b> Street Art project in which newcomers, graffiti artists, and a project leader have jointly designed two murals based on icons from the homeland of the newcomers.</p>
<p><b>Build the temple (De Reality)</b> An initiative organized by the 'Art of Integration', in which newcomers and local residents together built a temple filled with shadow theater and stories from the neighborhood.</p>	<p><b>The Buddy Film Project</b> Start desk in Amsterdam for refugee professional filmmakers, actors, and TV crew to lead them to paid work through workshops, film projects, and concrete assignments.</p>
<p><b>Participation project FryslânPhoto</b> Participation project in Leeuwarden in which residents of the neighborhood and status holders, together with a semi-professional photographer, take photos that depict their vision and story for the FrylânPhoto photo festival.</p>	<p><b>New Perspectives (Foam)</b> A series of workshops, guided tours, and masterclasses, in which status holders and Amsterdam residents work in pairs to create a three-part series of photos for a photo exhibition in Foam</p>
<p><b>Rederij Lampedusa (Stichting de Gelukszoekers)</b> An art project from Amsterdam that has grown into a shipping company that offers trips and canal tours with two 'refugee boats'. (Former) refugees accompany the tour</p>	<p><b><u>Take me to the sea (Art adventure)</u></b> Storytelling training of 9 months for status holders to learn to tell their life stories in a poetic way.</p>
<p><b>Meanwhile in the Spaarndammerbuurt (the Reality)</b> 'Art in the neighborhood' project in Amsterdam in which stories are collected and recorded about welcome and farewell, leaving and arriving, which are then processed in sculptures by three artists.</p>	<p><b>Intercultural neighborhood project (Un)breakable</b> A community art project in Eindhoven in which artists, local residents, and newcomers made personal artistic boxes about vulnerability and strength. The boxes are on display in the Van Abbemuseum.</p>
<p><b>Aleppo exhibition (Tropenmuseum)</b> Exhibition in Tropenmuseum Amsterdam about the city of Aleppo, where twelve Syrian refugees worked as guides and told their stories through poems, storytelling, music, dance, and song.</p>	<p><b>De Voorkamer</b> Community center room and creative place in Utrecht where status holders and local residents come together for design and musical workshops, among other things.</p>
<p><b>Stad en Taal (various museums in Amsterdam)</b> An educational program, consisting of a preparatory lesson, a lesson in the museum, and a return meeting, which has been specially developed for newcomers who are learning the Dutch language.</p>	<p><b>Museum buddy (Tropenmuseum, Africa Museum, Museum Volkenkunde)</b> Initiative in which volunteers, language coaches, language buddies, mentors, and refugees can visit three museums in Amsterdam, Nijmegen, and Leiden for free to share their stories, talk about cultural similarities and differences and enjoy the exhibition.</p>





Het Danspaleis, photo by Gaby Jongelen, part of press kit.  
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### Factors for success and failure in cultural interventions

When combined, the working elements of cultural interventions are the aspects or characteristics that can lead to successful implementation and outcomes. Bushby et al. (2021) have formulated several very general requirements that cultural interventions should meet to yield positive effects. First, the cultural intervention should have a clear purpose and a transparent methodology. Second, all domains that play a role in the intervention should be involved in creating and planning the intervention to meet the rules and expectations from different fields (cultural, health care, or the social domain). Third, cultural interventions must always be designed in collaboration with the target group, be it elderly people, ‘newcomers,’ or other groups that have ‘much health to gain’ by engaging with culture. Fourth, it is vital to make clear agreements with the financiers of the intervention, for example, on the duration of a subsidy and hence the length of the period in which an intervention can be offered (and evaluated). There should also be room to experiment with, innovate, and customize cultural interventions; cultural professionals should receive some artistic freedom and attention should go to the individual needs of participants. Finally, cultural interventions must be inclusive, and the threshold for participation should be low (Bushby et al., 2021, p. 18). Therefore, cultural interventions should also use popular or ‘folk’ culture and subcultural genres next to high culture.

Besides these general conditions, three recent overview studies (Van Dijk et al., 2019; Van Ditzhuijzen et al., 2018; Van Campen et al., 2017) have reported on more specific elements that increase the chances of successfully attaining goals in cultural interventions. We should note that not all of these elements are present in every cultural intervention due to the diversity of interventions in

the Netherlands (Van Dijk et al., 2019). Also, what counts as success is not the same for all groups involved: an intervention (or an element thereof) might be experienced as successful by participants because of an inspirational, meaningful, or pleasant experience but as unsuccessful by researchers, policy officers, or financiers due to a lack of ‘evidence’ of the positive effects.

Besides the working elements of the intervention itself, it is essential to consider working elements related to the three main parties involved in an intervention, notably the supervising artist, the target group, and the organizers (Van Dijk et al., 2019; Van Ditzhuijzen et al., 2018; Heesbeen et al., 2017), as well as working elements related to policy (Van Campen et al., 2018). In the following sections, we summarize key findings from the reports above.

### 1 *The intervention*

A cultural intervention is prone to ‘work’ when people, their qualities, and (life) stories are placed in the centre of the activity and are used to work towards something—for example, a work of art, performance, or exhibition—that participants can be proud of (Van Dijk et al., 2019). Another success factor is to let the intervention revolve around co-creation, exploiting the connective power of art in interactional ways rather than in an individually experienced fashion. This also means that all parties and participants involved should share ownership (some level of influence on how the intervention takes shape). As cultural interventions usually target groups that are in some way vulnerable, they should be carried out in a safe environment. Using a buddy or involving former participants in an activity can help achieve this.

### 2 *The artist*

The artist(s) guiding the intervention should possess both artistic and solid social skills; empathy is crucial to the interaction between supervisors and participants in cultural interventions. It helps when the artist is culturally sensitive and can meaningfully connect with a diverse range of people. The artist should also see and exploit the artistic qualities of participants and be able to provide space in the creative process for participants’ personal stories. In addition, the artist should be alert to participants’ prejudices, fears, and preconceptions and be able to refute them. It is crucial that the artist also impose the possibilities and boundaries of intervention and ensure that the agreements made are maintained. Finally, with a particular sensibility to the properties of participants (for example, their level of playing musical instruments), supervising artists should steer towards cultural quality to attain a result that participants can be proud of and through which they can express themselves.

### 3 *The target group*

A third group of actors involved in an intervention that matters for its success are the participants. The target group that participates in the intervention is supposed to be actively involved in the intervention for it to be successful. This implies that specific physical abilities (especially for elderly participants) are to be present. Participants should also be able to communicate with the supervising artist and amongst one another, implying (in the Dutch context) basic knowledge of the Dutch or English language.

### 4 *Organisation*

Regarding the organisation of cultural interventions, several aspects are crucial as working elements. The most important one is financial security. A constant and predictable influx of finances makes planning possible, giving cultural interventions continuity and sustainability. Unfortunately, in The Netherlands, this is not yet the case because there is often no designated budget to finance cultural

interventions within the care domain (for example, at care organisations and health insurers). In addition, care organisations are often unaware of cultural interventions and the possibilities for their financing. Consequently, most current interventions rely on subsidies from funding organisations, municipalities, provinces, and other (governmental) parties. These monetary flows are often short-term, project-based, and inconstant. However, steady financing and continuity of interventions are necessary for vulnerable target groups, for whom short-term, fleeting programs might not suffice. Financing is also essential to guarantee the primary conditions (see Bushby et al., 2021) of a clear methodology and planning and sufficient time, means, and people to ensure an intervention’s proper and effective implementation.

Another crucial aspect of organizing cultural interventions is collaborating with partner organisations, governmental bodies (municipalities, provinces), and researchers. By establishing these partnerships, initiators of cultural interventions have access to more resources, personnel, outreach, and creativity. Besides effectively recruiting and executing interventions, liaisons with police officers and researchers are also important for monitoring and evaluating the interventions. This requires a scope beyond separate domains, which in practice proves quite tricky. Policy officers and professionals are often passionately involved in their fields but are not always aware of possible collaborations with other domains. However, cultural interventions are best organized at the crossroads of domains and disciplines. Creators of interventions need to be able to invest in networks beyond their field of expertise. They especially require government bodies to identify and reach out to target groups who benefit most from participating in an intervention. They also need researchers for appropriate monitoring and evaluation of their interventions, which is beneficial to convincing financiers that the intervention ‘works’ (if this is indeed the case) and is worth long-term financing.

**Textbox 3. Working elements of cultural interventions**

Intervention	Artist/performer(s)	Target group	Organisation
<ul style="list-style-type: none"> <li>• Focus on strengths and qualities of participants (not their dependency)</li> <li>• Connective power of culture</li> <li>• Room for (life) stories of participants</li> <li>• Fits the interests and abilities of participants</li> <li>• Elements of recognisability</li> <li>• Special location</li> <li>• Customization on an artistic and physical level</li> <li>• Co-creation and ownership</li> <li>• Concrete outcome (e.g. ‘stage moment’, exhibitions)</li> <li>• Positive, safe and open environment</li> <li>• Involvement of buddies or former participants</li> </ul>	<ul style="list-style-type: none"> <li>• Strong social skills</li> <li>• Eye for sensitivities and level participants</li> <li>• Cultural sensitivity and diversity</li> <li>• Providing space for participants</li> <li>• On equal foot with participants</li> <li>• Steering towards artistic quality, i.e. outcome that participants can be proud of</li> <li>• Establishment and safeguarding of boundaries and agreements</li> </ul>	<ul style="list-style-type: none"> <li>• Active participation</li> <li>• Prior interest and intrinsic need for artistic/cultural activities at hand</li> <li>• Sufficient level of physical and mental abilities (elderly people)</li> <li>• Some understanding of the Dutch or English language (newcomers)</li> <li>• Accommodate participation (e.g. offering customized transportation)</li> </ul>	<ul style="list-style-type: none"> <li>• Sustainability and financial security</li> <li>• Clear plan and sufficient time, resources and people</li> <li>• Support and motivation in all layers of the organization</li> <li>• Give space to art and creativity and accept uncertainty of outcomes</li> <li>• Collaboration with partners and researchers (recruitment, execution, and evaluation)</li> <li>• Appointment of dedicated internal ‘enablers’</li> </ul>

\* Based on Van Dijk et al., 2019; Van Ditzhuijzen et al., 2019, Van Campen et al., 2017

5 Policy

Even though it is not strictly part of an intervention, the policy approach to cultural interventions appears to be a decisive factor in their success (Van Campen et al., 2017). In their policy analysis on

cultural interventions, Van Campen and colleagues demonstrate that the idea of culture and art being potentially beneficial to health is by no means a given for both financiers and institutions revolving around care and well-being. Instead, managers, insurers, and other decisive actors in this field often see culture as a joyful way to pass the time and are unlikely to instrumentalize art and culture to improve health and well-being. A solid support base for structurally including cultural interventions into well-being is often missing. When an intervention is included and successfully executed, it usually relies on enthusiastic initiators and promoters pushing for it to occur. However, once these key advocates go elsewhere, the intervention is often discontinued as well.

Probably the most important element of intervention policy that is decisive for success is the knowledge upon which a cultural intervention is trusted to be effective. The question of what counts as valid evidence for effectiveness is crucial in the field of interventions, as sustainable embedding in policy and durable financing by government funds, municipalities, or, in specific instances, health insurance companies depend on it. A return on investment, in the form of societal effects that are substantiated by evaluative research, is increasingly required for cultural interventions to get subsidies and structural funding. However, evaluative research on interventions that result in 'hard evidence,' i.e., measurable effects, is rare because it is complicated.

First, evaluative research focusing on evidence-based effects of interventions is a long-term, cost-intensive, and time-intensive endeavour with many insecurities. Especially in the domain of health and well-being, standardisation is considered a prerequisite for such research to be valid. However, most interventions dealing with human subjects do not follow a strictly outlined and standardized path. Second, in the case of *cultural* interventions, the lack of standardisation is already intrinsic to the intervention itself, as cultural activities require freedom and creativity. This impedes a standardisation of practices and predictable outcomes that can be measured for their causal effects.

It is precisely for this reason that stakeholders, initiators, and researchers call for other, broader definitions of 'evidence' and 'effects' in the field of cultural interventions, for example, by including qualitative methods that gather experience-based 'proof' about the effects or outcomes of an intervention. Interviewing participants about how they have experienced a cultural intervention and whether they noticed any effects in the short, mid, or long term is a way to evaluate interventions that do not have a standardized format, which seems to be the case for most cultural interventions carried out in The Netherlands (and elsewhere).

Another central problem is the lack of continuity in financing and, consequently, a discontinuity in practice. Cultural interventions lean heavily on project-based and, hence, temporary funds. Moreover, these projects often focus on innovation without structurally embedding cultural programs and interventions. Because achieving long-term financing and structurally securing interventions is difficult, many cultural interventions have a short lifespan. The field of interventions is fragmented into many diverse, often novel initiatives that fail to reach a sustainable form.

Finally, barriers between municipalities, domains, artists, and cultural organisations hinder successful and coherent policies regarding cultural interventions. First, at the municipality level, culture, care, and well-being tend to be handled by separate offices with specific policies (and finances). Cultural interventions are often left unpurchased because they do not (equally) meet the policy criteria of all sectors involved, and co-financing by different domains tends to be complicated due to these internal boundaries. It is hard for municipalities to overcome these challenges and develop a cross-sectoral approach.

Second, intervention initiators need to be able to invest time to establish partnerships with partner organisations, governmental bodies (municipalities, provinces), and researchers. This time

investment in a diverse network, in turn, provides access to resources, personnel, outreach, and creativity, while it is also important for monitoring and evaluation purposes. In practice, however, building and sustaining these types of networks is complicated. This is mainly due to a lack of financing and time but also to professionals being so passionately involved in their field that they overlook possible collaborations with other domains. However, as cultural interventions are best organized at the crossroads of professions and disciplines, investing time and attention in networks that transcend multiple domains and fields of expertise is crucial.

Third, it appears challenging for artists and cultural organisations to find a meaningful and comprehensive connection with care institutions, municipalities, and funding bodies. They operate in different worlds with distinctive rules and languages. Policy terminology is difficult to grasp by artists and cultural organisations who tend to emphasize artistic and cultural qualities in promoting their interventions. As policymakers and financiers often fail to translate into their definition of 'value', this barrier often frequently leads to a mismatch between the artistically oriented and policy-oriented parties involved in cultural interventions.

## Conclusions and recommendations

The literature on cultural interventions indicates that the broad definition of 'positive health' concerning cultural interventions can help make the value of cultural interventions transparent and plausible, which can help find funding and evaluate cultural interventions.

Both Dutch policy and practice can still gain a lot from the development of facilitating, domain-transcending policies and infrastructures that connect the various domains, regulations, and organisations that are involved in cultural interventions (Bushby et al., 2021; van Campen et al., 2017; Van Ditzhuijzen et al., 2018; Janssen et al., 2017). Policy differences, financial sources, funding criteria, objectives, and language often hamper fruitful collaborations across domains. More cooperation and decompartmentalisation are required to overcome these obstacles. Appointing internal enablers within organisations and intermediaries with knowledge of different domains, who play a facilitating, stimulating, and guiding role, is recommended to bridge the differences between domains and advance cross-sectoral collaboration (Van Campen et al., 2017).

The incidental character of cultural interventions in The Netherlands and the unfamiliarity with these kinds of projects among, for example, care institutions make initiating and implementing them in organisations difficult. It is, therefore, key to focus on creating broad support, shared knowledge, and motivation among staff members within all layers of an organisation. This also advances the sustainability of cultural interventions and helps move beyond the current practice of a 'project carousel' (Heesbeen et al., 2017; Van Campen et al., 2017).

Cultural interventions are far more likely to succeed if they involve motivated artists or staff with the right competencies and knowledge of the target group (Heesbeen et al., 2017). Hence, the artists and staff that carry out the intervention should be carefully selected, and it is important to invest in them (Van Ditzhuijzen et al., 2017). Investments in the involvement of volunteers who support and guide the activity are also vital (van de Maat, 2017). Given this crucial role of competent and motivated executioners, cultural interventions should also receive more attention in arts, care, and welfare education to equip future practitioners with the knowledge, competencies, and mindset to conduct or support cultural interventions (Van Campen et al., 2017).

Evaluations also indicate that cultural interventions require space, flexibility, and freedom and can only work when it is accepted that the outcomes of the cultural intervention cannot be predicted beforehand (Bushby et al., 2021; van Campen et al., 2017; Van Ditzhuijzen et al., 2018).

Participant involvement, co-creation, and providing sufficient means for the supervision of participants are also significant (Van Campen et al., 2017). Cultural interventions that take the strengths and qualities of participants as their starting point and are developed in close collaboration with participants better match their needs and interests and are more likely to engage and benefit them (Van Dijk et al., 2019; Van Ditzhuijzen et al., 2018). Creating a sense of shared ownership among participants and ensuring equality in the creative process is also fundamental to the success of a project (Dons & Bisschop Boele, 2014; Van Dijk et al., 2019).

Finally, investing in research methods for cultural interventions and providing insight into effective elements is essential. Existing research approaches often need to be revised to identify the positive health effects and active ingredients of cultural interventions. Smart methods of applied research are needed that match the values and results of these interventions (Van Campen et al., 2017; Groot et al., 2022).

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