

WHO EURO

Health Evidence Network – Report di sintesi 67

Quali sono le evidenze sul ruolo delle arti nel miglioramento della salute e del benessere? Una scoping review

(Parte prima)

Daisy Fancourt, Saoirse Finn



© Organizzazione Mondiale della Salute (OMS) 2019

What is the evidence on the role of the arts in improving health and well-being? A scoping review.

Fancourt D, Finn S. What is the evidence on the role of the arts in improving health and well-being? A scoping review. Copenhagen: WHO Regional Office for Europe; 2019 (Health Evidence Network (HEN) synthesis report 67)

Alcuni diritti riservati. Questo documento è disponibile sotto la licenza Creative Commons Attribution-NonCommercial-ShareAlike 3.0 IGO; <https://creativecommons.org/licenses/by-nc-sa/3.0/igo>.

Ai sensi di questa licenza, è possibile copiare, ridistribuire e adattare l'opera per scopi non commerciali, a condizione che l'opera sia adeguatamente citata, come indicato di seguito. In qualsiasi uso della presente opera, non deve essere indicato che l'OMS approvi una specifica organizzazione, prodotto o servizio. L'uso del logo dell'OMS non è consentito. Se si adatta l'opera, è necessario concederla in licenza con la stessa licenza Creative Commons o con una equivalente licenza Creative Commons. Qualora eseguite una traduzione di quest'opera, dovrete aggiungere la seguente clausola di esclusione di responsabilità insieme alla citazione suggerita: "Questa traduzione non è stata eseguita dall'Organizzazione Mondiale della Salute (OMS). L'OMS non è responsabile del contenuto o dell'accuratezza di questa traduzione. L'edizione originale in inglese è l'edizione vincolante e autentica".

Qualsiasi mediazione relativa a controversie derivanti dalla licenza deve essere condotta in conformità con le regole di mediazione dell'Organizzazione Mondiale della Proprietà Intellettuale.

Citazione bibliografica suggerita. Fancourt D, Finn S. What is the evidence on the role of the arts in improving health and well-being? A scoping review. Copenhagen: WHO Regional Office for Europe; 2019 (Health Evidence Network (HEN) synthesis report 67).

Dati CIP (Cataloguing-in-Publication). I dati CIP sono disponibili su <http://apps.who.int/iris>.

Vendite, diritti e licenze. Per acquistare le pubblicazioni dell'OMS, consultare il sito <http://apps.who.int/bookorders>. Per inoltrare richieste per uso commerciale e richieste di informazioni su diritti e licenze, consultare il sito <http://www.who.int/about/licensing>.

Materiale di terze parti. Se si desidera riutilizzare materiale di quest'opera attribuito a terzi, come tabelle, figure o immagini, è responsabilità dell'utente determinare se è necessaria un'autorizzazione per tale riutilizzo e ottenere il permesso dal titolare del copyright. Il rischio di reclami derivanti dalla violazione di qualsiasi componente di proprietà di terzi nell'opera è esclusivamente a carico dell'utente.

Disclaimer generali. Le denominazioni utilizzate e la presentazione del materiale in questa pubblicazione non implicano l'espressione di alcuna opinione da parte dell'OMS in merito allo status giuridico di qualsiasi paese, territorio, città o area o delle sue autorità, o in merito alla delimitazione dei suoi confini o delle sue frontiere. Le linee tratteggiate e punteggiate sulle mappe rappresentano linee di confine approssimative per le quali potrebbe non esserci ancora un pieno accordo.

In caso sia fatta menzione di specifiche aziende o di determinati prodotti, essa non implica che questi siano approvati o raccomandati dall'OMS rispetto ad altri di natura simile che non vengono menzionati. Salvo errori ed omissioni, i nomi dei prodotti di proprietà sono contraddistinti da lettere maiuscole iniziali.

L'OMS ha adottato ogni ragionevole precauzione per verificare le informazioni contenute in questa pubblicazione. Tuttavia, il materiale pubblicato viene distribuito senza garanzie di alcun tipo, sia espresse che implicite. La responsabilità per l'interpretazione e l'uso del materiale ricade sul lettore. In nessun caso l'OMS sarà ritenuta responsabile per danni derivanti dal suo utilizzo. Gli autori nominati sono i soli responsabili delle opinioni espresse in questa pubblicazione.

Questo documento è disponibile sotto la licenza Creative Commons Attribution-NonCommercial-ShareAlike 3.0 IGO; <https://creativecommons.org/licenses/by-nc-sa/3.0/igo>

Il Centro di Documentazione per la Promozione della Salute DoRS Regione Piemonte è responsabile della traduzione italiana avendone fatto richiesta all'Ufficio OMS Regione Europa.

Revisione scientifica e metodologica della traduzione italiana a cura di Alessandra Rossi Ghiglione, Catterina Seia e Claudio Tortone.

Prima traduzione italiana a cura di Emmanuele Bernardini per Langwich Translations.

Questa traduzione non è stata realizzata dall'Organizzazione Mondiale della Salute (OMS/EURO). OMS/EURO non è responsabile del contenuto e dell'accuratezza. L'edizione in inglese rimane l'edizione originale di riferimento.

WHO EURO

Health Evidence Network – Report di sintesi 67

**Quali sono le evidenze sul ruolo delle arti
nel miglioramento della salute e del benessere?
Una scoping review**

(Parte prima)

Daisy Fancourt, Saoirse Finn

Traduzione italiana a cura CCW-Cultural Welfare Center

*Alessandra Rossi Ghiglione (CCW), Catterina Seia (CCW),
Claudio Tortone (Dors Regione Piemonte)*

*In collaborazione con DORS Regione Piemonte, Fondazione Medicina a Misura di
Donna, SCT Centre - Social Community Theatre Centre*

Abstract

Negli ultimi due decenni, la ricerca relativa agli effetti delle arti sulla salute e sul benessere si è notevolmente intensificata. Allo stesso tempo, si sono registrati sviluppi nelle pratiche e nelle attività politiche in diversi Paesi dell'area OMS Regione Europa, ma anche oltre i confini della stessa. Questo report sintetizza le evidenze a livello globale sul ruolo delle arti nel miglioramento della salute e del benessere, con un focus specifico sulla Regione Europea dell'OMS. I risultati di oltre 3000 studi hanno messo in evidenza il ruolo determinante delle arti per quanto riguarda la prevenzione delle malattie, la promozione della salute e il trattamento e la gestione delle patologie che si manifestano nel corso della vita. Le evidenze esaminate includono disegni di studio come studi pilota non controllati, case study, indagini trasversali di piccola scala, studi di coorte longitudinali rappresentativi a livello nazionale, etnografie su scala comunitaria e trail randomizzati e controllati afferenti a diverse discipline. L'impatto benefico dell'arte può essere promosso attraverso il suo riconoscimento, l'azione, fondata sulle sempre più ampie evidenze e la promozione dell'impegno artistico a livello individuale, locale e nazionale e il sostegno alla collaborazione intersettoriale.

Parole chiave

ARTE, MEDICINA NELLE ARTI, CULTURA, ARTE NELLA SALUTE

INDICE

Introduzione alla traduzione italiana	VI
Abbreviazioni	VIII
Ringraziamenti	IX
Sommario	XI
1. Introduzione	1
1.1 Contesto	1
1.2 Metodologia	5
2. I risultati	6
2.1 Prevenzione e promozione <i>(in corso di traduzione, prossimamente disponibile in italiano)</i>	-
2.2 Gestione e trattamento <i>(in corso di traduzione, prossimamente disponibile in italiano)</i>	-
3. Il dibattito	8
3.1 Punti di forza e limiti della scoping review	8
3.2 Sintesi dei risultati	8
3.3 Considerazioni di interesse politico	11
4. Conclusioni	12
Bibliografia	13
Allegato 1. Strategia di ricerca (nota: in corso di traduzione, prossimamente disponibile in italiano)	-

INTRODUZIONE ALLA TRADUZIONE ITALIANA



La crisi globale legata a Covid19 ha messo in evidenza **il contributo centrale della Cultura e delle Arti** alla nostra salute mentale e alla nostra capacità di coesione sociale, in una parola **alla fioritura umana individuale e collettiva**. Lo scenario è quello di una società che deve affrontare una sorta di disordine post-traumatico da stress, in cui gli enormi costi sociali della crisi toccano diverse dimensioni sociali e politiche.

Il CCW-Cultural Welfare Center nasce come risposta alla crisi pandemica, da dieci professionisti di diverse aree disciplinari che, nell'ambito di altrettante istituzioni, hanno cooperato a geometria variabile dagli inizi del millennio nella ricerca-azione sul terreno pionieristico per l'Italia dell'alleanza strategica tra Cultura e Salute per un futuro sostenibile

La decisione di mettere a sistema le migliori competenze in questo momento storico, chiamando a raccolta altri esperti in una *knowledge community*, per creare un ecosistema di dialogo, deriva dalla consapevolezza che le Arti e la Cultura **sono importanti risorse per la costruzione di salute** -nella dimensione della cura, delle *medical humanities*, della promozione della salute- **e per lo sviluppo di equità e di qualità sociale**.

Questa grande crisi **mette in gioco la coesione sociale, la salute biopsicosociale delle comunità**, in un senso profondo ed è **urgente lavorare a una nuova idea di welfare in cui le Arti e la Cultura possano dare un rilevante contributo per la ripartenza del Paese**. Coinvolgendo attori e portatori di interesse pubblici e privati, **lavorando in un'ottica multidisciplinare, multilivello e intersettoriale, per garantire impatto sociale e nutrire le politiche**.

La pubblicazione in lingua italiana del rapporto OMS (2019), in collaborazione con DORS-il Centro Regionale di Documentazione per la Promozione della Salute, costituisce la prima azione del CCW che intende condividere con comunità di pratiche, organizzazioni e operatori socio-sanitari-assistenziali ed educativi, studiosi e *policy makers*, la più recente ed ampia ricerca mai effettuata sull'impatto delle Arti sul benessere e la Salute delle popolazioni sia nella dimensione della promozione e prevenzione che quella del trattamento e della cura. La pubblicazione del rapporto avviene con la pubblicazione in data di oggi della prima delle tre sezioni, a cui seguiranno entro settembre 2020 le successive.

Il rapporto nasce nel 2015 grazie al **progetto "Cultural Context of Health and Well-being"** voluto dalla stessa OMS per contribuire alla realizzazione della strategia della regione europea (rappresentata dai 53 Paesi dell'area e non solo da quelli dell'Unione Europea) delineata nel documento **Salute 2020** (OMS, 2013 <https://www.dors.it/page.php?idarticolo=338>) che è volto a orientare le politiche sanitarie nazionali secondo l'approccio della **Salute in Tutte le Politiche** (OMS 2013 <https://www.dors.it/page.php?idarticolo=470> (idem).

La scelta di approfondire **quanto la dimensione culturale e artistica possano influire sul benessere e sulla salute è stata ritenuta centrale e prioritaria da OMS affinché venga tenuta in considerazione nella definizione delle politiche sanitarie, nella costruzione di politiche intersettoriali** che includano salute, cultura, educazione e socialità, dando valore contributivo e integrativo all'immenso patrimonio della cultura europea.

La nozione di Salute che è alla base della *review* prende in considerazione la dimensione biopsicosociale, quale risultato di un insieme di risorse in possesso dell'individuo e di contesti favorevoli e in

modo particolare fa riferimento alle capacità di determinazione della propria Salute che l'individuo e le comunità possono sviluppare se adeguatamente stimolati attraverso 'opportunità' accessibili promosse dalle politiche.

È in questa azione di facilitazione dell'accesso e di capacitazione che si situano le possibilità della Cultura e delle Arti di avere un impatto sul benessere e sulla Salute personale e collettiva sia nella dimensione della promozione della Salute che della cura.

Salute 2020 ha raccolto tutte queste sfide con una strategia imperniata su un duplice obiettivo e un metodo di lavoro: **il miglioramento del benessere e della salute per tutti e la riduzione delle disuguaglianze sociali** attraverso una più efficace *leadership e governance* per la salute fondate sulla partecipazione secondo l'approccio della promozione della salute. E sul finire di questo millennio le sfide, non ancora raggiunte, sono transitate nell'Agenda 2030 degli Obiettivi di Sviluppo Sostenibile (ASviS, <https://asvis.it/l-agenda-globale-per-lo-sviluppo-una-sfida-per-tutto-il-mondo/>), che sono raggiungibili solo con una forte e determinata integrazione tra le politiche, i servizi e le pratiche.

La domanda di ricerca del rapporto OMS 2019 è se la cultura -attraverso le differenti arti individuate nel rapporto- possa contribuire a dare forma alle opinioni, agli atteggiamenti e ai comportamenti individuali e sociali nel sentire e rappresentare la propria salute, se possa sostenere la ricerca del proprio benessere attraverso la promozione della salute e la gestione delle cure e se possa favorire l'equità nell'accesso ai servizi sanitari, sociali e culturali per prendere cura di se stessi.

Il rapporto mette a disposizione i risultati di una rassegna della letteratura scientifica e umanistica con un approccio interdisciplinare che spazia in diversi ambiti: medicina, psichiatria, psicologia, filosofia, neuroscienze, antropologia, sociologia, geografia ed economia della salute, sanità pubblica... Sono state prese in esame oltre 900 pubblicazioni, da inizio 2000 fino a maggio 2019, tra le quali ci sono più di 200 *review*, *review* sistematiche, meta-analisi e meta-sintesi basate su oltre 3000 studi e 700 ulteriori singoli studi.

Il risultato è che **esiste ormai una solida base di conoscenze ed evidenze del contributo delle arti** sia nell'ambito della prevenzione delle malattie e nella promozione della salute sia nell'ambito della gestione della cura e del trattamento delle malattie.

Il rapporto OMS (2019) sul contributo delle arti al benessere e alla salute arriva alla fine di un decennio in cui le persone, le loro reti sociali, le organizzazioni, i Paesi e il mondo intero sono sconvolti dalla pandemia di COVID-19. La pandemia in corso ha reso ancora più evidente e urgente l'adozione di paradigmi, politiche e conseguenti modelli organizzativi e di *governance* capaci di contrastare le disuguaglianze -sia di salute che economico-sociali- e di promuovere una dimensione del welfare inclusiva e generativa.

Con questo robusto corpus di conoscenze, nonostante i limiti e le carenze ancora presenti al momento nella ricerca, potremo affrontare questa situazione epidemica valorizzando appieno le capacità creative, trasformative e resilienti delle arti e dare forza alle progettualità di rigenerazione sociale e di salute collettiva che si aprono negli scenari post Covid gettando le basi per un **apporto costitutivo della cultura al ridisegno di un nuovo welfare generativo**.

CCW ritiene che fare crescere e radicare stabilmente all'interno di una dimensione sociale e civile quotidiana l'arte e la cultura, sia parte dell'impegno per un radicale rinnovamento delle condizioni di vita in termini di equità e di salute di tutto il pianeta.

Alessandra Rossi Ghiglione e Catterina Seia-CCW www.culturalwelfarecenter.it

Claudio Tortone-Dors Regione Piemonte www.dors.it

15 maggio 2020

ABBREVIAZIONI

ASD

autistic spectrum disorder

CVD

cardiovascular diseases

LGBTQ

lesbian, gay, bisexual, transgender and queer

PD

Parkinson's disease

PTSD

post-traumatic stress disorder

DSA

autistic spectrum disorder

MCV

Malattie CardioVascolari

LGBTQ

Lesbiche, Gay, Bisessuali, Transgender e Queer

MP

Morbo di Parkinson

DSPT

Disturbo post-traumatico da stress

RINGRAZIAMENTI

Gli autori desiderano ringraziare il dottor Simon Chaplin del Wellcome Trust per aver fornito l'introduzione al progetto Cultural Contexts of Health, che ha portato alla stesura di questo rapporto, e lo stesso Wellcome Trust per aver finanziato Daisy Fancourt tramite una Wellcome Research Fellowship (205407/Z/16/Z). Questo report è stato realizzato con il supporto finanziario del Wellcome Trust. Le opinioni qui espresse non riflettono in alcun modo le opinioni ufficiali del Wellcome Trust.

Autori

Daisy Fancourt

Professore associato e Wellcome Research Fellow, Institute of Epidemiology and Health Care, University College London, Londra, Regno Unito

Saoirse Finn

Visiting Researcher, Institute of Epidemiology and Health Care, University College London, Londra, Regno Unito

Peer reviewer

Norma Daykin

Professore, Tampere University, Tampere, Finlandia

Liisa Laitinen

Project Planner, Taikusydän – Arts & Health Coordination Centre, Turku University of Applied Sciences, Turku, Finlandia

Kai Lehtikainen

Direttore del Research Center, Center for Educational Research and Academic Development in the Arts (CERADA) e Vice Direttore, ArtsEqual, University of the Arts, Helsinki, Finlandia

Victoria Tischler

Professor of Arts and Health, University of West London, Londra, Regno Unito

Team editoriale, Ufficio Regionale OMS per l'Europa
Division of Information, Evidence, Research and Innovation

Nils Fietje

Responsabile della ricerca, Evidence for Health and Well-being in Context

Andrea Scheel

Consulente, Evidence for Health and Well-being in Context

Shanmugapriya Umachandran

Consulente, Evidence for Health and Well-being in Context

Team editoriale del Health Evidence Network (HEN)

Kristina Mauer-Stender, *direttore ad interim*

Tanja Kuchenmüller, *caporedattore*

Ryoko Takahashi and Tarang Sharma, *editori della serie*

Tyrone Reden Sy, *direttore editoriale*

Krista Kruja, *consulente*

Jane Ward, *redattore tecnico*

Il Segretariato HEN fa parte della Division of Information, Evidence, Research and Innovation dell'Ufficio Regionale dell'OMS per l'Europa. I rapporti di sintesi di HEN sono lavori commissionati che vengono sottoposti a peer review internazionale, i cui contenuti sono di responsabilità degli autori. Essi non riflettono necessariamente le politiche ufficiali dell'Ufficio Regionale.

SOMMARIO

La questione

A partire dall'inizio del ventunesimo secolo, la ricerca relativa agli effetti delle arti sulla salute e sul benessere si è notevolmente intensificata. Allo stesso tempo, si sono registrati sviluppi nelle pratiche e nelle attività politiche in diversi Paesi membri della Regione Europea dell'OMS, ma anche oltre i suoi confini. Tuttavia, a causa della mancanza di consapevolezza sulle evidenze alla base di queste attività, lo sviluppo delle politiche nei diversi Stati membri della regione è stato poco uniforme. Il presente rapporto mira a colmare questa carenza di consapevolezza attraverso una mappatura delle evidenze attualmente a disposizione nel campo delle arti e della salute.

La domanda della sintesi

Questa scoping review risponde alla domanda: "Quali sono le evidenze sul ruolo delle arti nel miglioramento della salute e del benessere?"

Tipi di evidenze

Questo report utilizza la metodologia della scoping review per mappare la letteratura accademica globale in inglese e in russo, dal gennaio 2000 al maggio 2019. Sono state identificate oltre 900 pubblicazioni, di cui oltre 200 tra recensioni, revisioni sistematiche, meta-analisi e meta-sintesi, che riguardano oltre 3000 studi, e più di 700 ulteriori singoli studi.

Risultati

La review ha raccolto evidenze da un'ampia varietà di studi che utilizzano metodologie diverse. Nel complesso, i risultati sottolineano un potenziale impatto delle arti sia sulla salute mentale che su quella fisica. I risultati della review sono stati raggruppati in due ampie categorie tematiche: prevenzione e promozione, gestione e trattamento. Per ogni categoria tematica sono stati presi in considerazione diversi sottotemi:

- nell'ambito della **prevenzione e promozione**, i risultati hanno evidenziato come le arti possono:
 - influenzare i determinanti sociali della salute
 - sostenere lo sviluppo del bambino
 - incoraggiare comportamenti che promuovono la salute
 - aiutare a prevenire le malattie
 - supportare l'assistenza e la cura
- per quanto riguarda **gestione e trattamento**, i risultati hanno evidenziato come le arti possono:
 - aiutare le persone che soffrono di malattie mentali
 - sostenere le cure per le persone in condizioni acute
 - sostenere le persone con disturbi neuroevolutivi e neurologici
 - contribuire al trattamento di malattie croniche degenerative
 - concorrere all'assistenza nel fine vita.

Un ampio ventaglio di progetti di ricerca è stato incluso nel presente lavoro: studi pilota non controllati, singoli case study, indagini trasversali di piccola scala, studi di coorte longitudinali rappresentativi

su scala nazionale, etnografie su scala di comunità e studi controllati randomizzati. Tra i metodi di ricerca sono state previste scale psicologiche, marcatori biologici, tecniche di neuroimaging, valutazioni fisiologiche, osservazioni comportamentali, interviste ed analisi di cartelle cliniche. I disegni degli studi di ricerca si sono inoltre avvalsi di teorie provenienti da diverse discipline. Naturalmente, la qualità di queste prove è soggetta a variabilità e vi sono aree in cui i risultati devono ancora essere confermati o studiati meglio. Tuttavia, questo report mette a confronto i risultati di diversi studi, ciascuno con diversi punti di forza, consentendo così di ovviare alle debolezze o ai bias intrinseci dei singoli studi.

Considerazioni di interesse politico

Partendo dalle evidenze raccolte in questo report si possono trarre diverse considerazioni che riguardano i settori della cultura, del sociale e della sanità. È quindi possibile:

Riconoscere la base sempre più consistente di evidenze sul ruolo delle arti nel miglioramento della salute e del benessere:

- incoraggia l'implementazione di quegli interventi artistici per i quali
- esiste una solida base di evidenze, quali l'uso di musica registrata per pazienti prima di un intervento chirurgico, l'arte per pazienti affetti da demenza e programmi artistici di comunità per la salute mentale,
- condividendo conoscenze e pratiche di interventi artistici che i Paesi hanno trovato efficaci nel proprio contesto per promuovere la salute, migliorare i comportamenti salutari o incidere sulle disuguaglianze e ingiustizie che hanno un impatto sulla salute,
- sostenendo la ricerca nel campo delle arti e della salute, con attenzione particolare ad aree rilevanti sul piano politico come gli studi che esaminano gli interventi su una scala di popolazione più ampia, o gli studi che analizzano la fattibilità, accettabilità e appropriatezza di interventi artistici con nuove arti.

Riconoscere il valore aggiunto del coinvolgimento nelle arti per la salute:

- garantendo la disponibilità e accessibilità nel corso della vita di un'offerta artistica culturalmente varia a gruppi diversi, specialmente a quelli appartenenti a minoranze svantaggiate,
- incoraggiando organizzazioni artistiche e culturali a rendere la salute e il benessere parte integrante e strategica del proprio lavoro,
- promuovendo la consapevolezza nell'opinione pubblica dei potenziali benefici per la salute che derivano dal coinvolgimento delle arti,
- sviluppando interventi che incoraggino la partecipazione ad attività artistiche per promuovere stili di vita salutari.

Tenere in considerazione la natura intersettoriale degli ambiti delle arti e della salute:

- rafforzando strutture e meccanismi per la collaborazione tra i settori della cultura, del sociale e della sanità, per esempio introducendo il co-finanziamento di programmi da parte di budget differenti,
- considerando l'introduzione o il potenziamento di modalità di prescrizione ai pazienti di attività artistiche dai settori della sanità e dell'assistenza sociale, per esempio attraverso l'uso di prescrizioni per attività sociali,
- favorendo l'inclusione delle arti e degli approcci formativi umanistici nell'ambito della formazione degli operatori sanitari e della cura per migliorare le loro abilità cliniche, personali e comunicative.

1. INTRODUZIONE

1.1 Contesto

1.1.1 Definire le arti

Se da un lato le arti sono sempre state concettualmente difficili da definire, dall'altro vi sono alcune caratteristiche transculturali che vengono ritenute fondamentali per l'arte. Tra queste, l'oggetto d'arte (sia fisico che esperienziale) valutato in sé e per sé, piuttosto che come una mera utilità, come qualcosa che fornisce esperienze creative sia per il suo creatore che per il pubblico e che implica o provoca una risposta emotiva. Inoltre, la produzione artistica è caratterizzata dall'aver come propri requisiti la novità, la creatività, l'originalità e competenze specialistiche e dall'essere legata alle regole della forma, della composizione o dell'espressione (sia conformi che divergenti) **(1–3)**.

Se, da una parte, questi criteri definiscono le linee di confine entro le quali stabilire cosa sia l'arte, è pur vero che i tipi specifici di arte all'interno di questi confini sono diversi e fluidi. Per quanto riguarda la ricerca sulla salute, è stato suggerito che le arti coinvolte si articolino in cinque ampie categorie **(4)**:

- le arti performative (ad esempio teatro, danza, canto, musica, film)
- le arti visive, il design e l'artigianato (artigianato, design, pittura, fotografia, scultura e tessile)
- la letteratura (scrittura, lettura, partecipazione a festival letterari);
- la cultura (musei, gallerie, mostre d'arte, concerti, teatro, eventi comunitari, festival e fiere culturali)
- le arti online, digitali e informatiche (animazioni, film-making, computer grafica).

Queste categorie combinano sia un coinvolgimento attivo che uno ricettivo e, soprattutto, trascendono i confini culturali e racchiudono in sé la flessibilità necessaria per consentire lo sviluppo di nuove forme d'arte (come dimostrato dallo sviluppo delle arti online, digitali ed informatiche

negli ultimi anni). Ai fini di questa review, si è seguita questa definizione concettuale dell'arte (vista come qualcosa che integra le caratteristiche comuni, pur consentendo una fluidità nella categorizzazione). Sebbene ci siano altre attività che rientrano in molte delle categorie sopra elencate (ad esempio giardinaggio, cucina e volontariato), l'accordo in fase di ricerca è stato quello di considerare queste attività come creative, ma non artistiche in senso stretto, specialmente alla luce delle definizioni fornite dai consigli nazionali per le arti **(5–7)**. Di conseguenza, esse sono state escluse dalla review **(4)**. Analogamente, questa review non ha preso in considerazione l'architettura o la progettazione di edifici, sebbene siano stati fatti riferimenti secondari all'uso dell'arte visiva in contesti sanitarie di cura.

1.1.2 Definizione di salute

L'OMS definisce la salute come "uno stato di completo benessere fisico, mentale e sociale, e non la mera assenza di malattia o infermità" **(8)**, tanto da renderla radicata profondamente nella società e nella cultura. Inoltre, l'OMS pone l'accento sull'importanza della prevenzione delle malattie e, di conseguenza, sui determinanti della salute: il modo in cui la salute è plasmata dai costrutti culturali che la circondano e il modo in cui essa può essere promossa, a livello individuale e sociale **(9–11)**. La definizione si concentra anche sul benessere, sia dal punto di vista individuale **(12–14)** che da quello sociale **(15)**. Quest'ultimo può abbracciare molteplici aspetti, come l'integrazione nella società, il contributo alla società, l'accettazione e la fiducia all'interno della società, la comprensione individuale della società e la fiducia nel potenziale della società **(15)**.

Nei decenni successivi al 1948, anno in cui questa definizione di salute è stata formulata, il concetto di salute è stato ulteriormente ampliato **(16)**. La salute e il benessere totali non sono più necessariamente visti come l'obiettivo di tutti. Ad esempio, la presenza di una malattia mentale o fisica

cronica non è necessariamente un segno di malessere, ma può essere vista come gestibile (17). La gestione è in parte determinata dalla resilienza e dalla capacità dell'individuo di adattarsi alla propria salute: la capacità di ripristinare l'omeostasi fisiologica (equilibrio) e di sentirsi in grado di affrontare e realizzare il proprio potenziale con un certo grado di indipendenza e di possibilità di partecipazione sociale (18-20). La salute è, quindi, un processo dinamico che ruota intorno alla capacità di autogestione.

1.1.3 Il nesso tra arti e salute

Le attività artistiche possono essere considerate come interventi complessi o multimodali, dal momento che combinano più componenti diverse le quali sono tutte note per essere salutari (21). Le attività artistiche possono riguardare il coinvolgimento estetico, lo stimolo dell'immaginazione, l'attivazione sensoriale, l'evocazione di emozioni e la stimolazione cognitiva. A seconda della sua natura, un'attività artistica può anche includere l'interazione sociale, l'attività fisica, il coinvolgimento in tematiche legate alla salute e l'interazione con i contesti di cura (Fig. 1) (22).

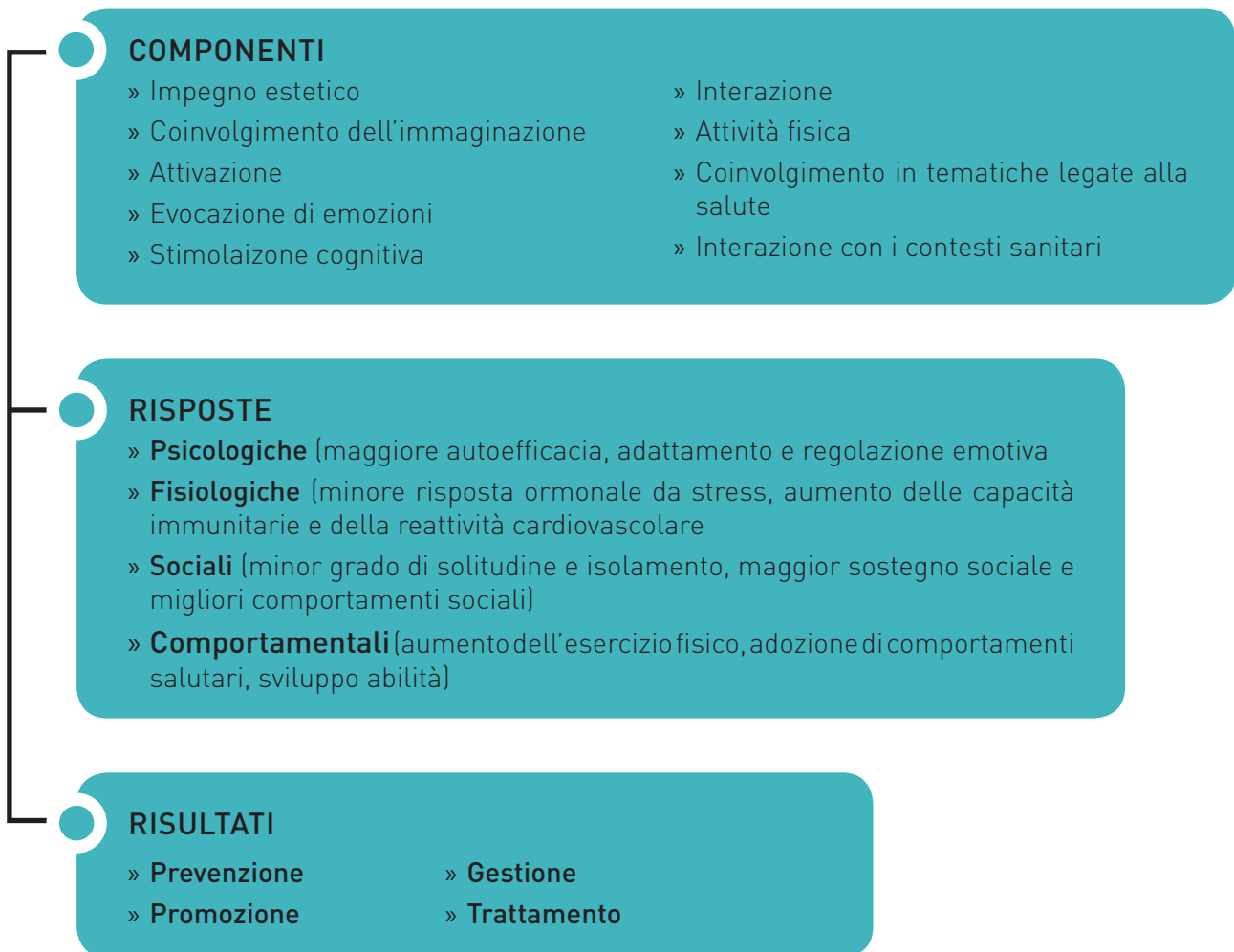


Fig. 1. Un modello logico che unisce arti e salute

Ciascuna delle componenti delle attività artistiche può innescare risposte psicologiche, fisiologiche, sociali e comportamentali che sono a loro volta causalmente legate ai risultati in termini di salute.

Ad esempio, le componenti estetiche ed emotive delle attività artistiche possono fornire opportunità di espressione emotiva, di regolazione delle emozioni e di riduzione dello stress **(23)**. La regolazione delle emozioni è intrinseca al modo in cui gestiamo la nostra salute mentale **(24,25)**, mentre lo stress è un noto fattore di rischio per l'insorgenza e/o la progressione di una serie di patologie, tra cui le malattie cardiovascolari (MCV) **(26)** e i tumori **(27)**.

Nel momento in cui ci si dedica alle arti, la stimolazione cognitiva può fornire opportunità di apprendimento e di sviluppo delle competenze. Essa è inoltre associata a un minor rischio di sviluppare demenze e malattie mentali come la depressione **(28)**. L'interazione sociale durante la partecipazione alle attività artistiche può alleviare la solitudine e la mancanza di sostegno sociale, entrambe associate a risposte fisiologiche negative, declino cognitivo, declino funzionale e motorio, malattie mentali e mortalità precoce **(29,30)**.

L'interazione sociale tra diversi gruppi di persone può migliorare il capitale sociale e ridurre la discriminazione, essendo quest'ultima legata alle malattie mentali e ad una serie di altre patologie, tra cui le malattie cardiovascolari, le patologie respiratorie e sintomi di malattia come dolore e mal di testa **(31)**. L'attività fisica svolta attraverso la partecipazione alle arti può ridurre i comportamenti sedentari, che sono associati a patologie come il dolore cronico, la depressione e la demenza **(32)**. Anche la partecipazione a discussioni sul tema della salute, o in contesti sanitari e di cura, attraverso attività artistiche può favorire comportamenti salutari come una dieta sana, la rinuncia al fumo e all'alcol eccessivi, che sono collegati a una minore mortalità per malattie cardiovascolari e cancro **(33)**.

Inoltre, tali discussioni possono aumentare la fruizione dei servizi sanitari, ad esempio attra-

verso visite mediche di controllo e screening, entrambi associati a un maggiore controllo delle condizioni di salute preesistenti e a un minore rischio di mortalità **(34)**.

Nel complesso, ciascuna delle categorie artistiche delineate nella sezione 1.1.1 prevede diverse combinazioni di queste componenti salutari, sia che le attività siano intraprese nella vita di tutti i giorni (non per ragioni di salute, ma con un beneficio secondario per la salute), sia che esse abbiano luogo all'interno di programmi artistici su misura, progettati con obiettivi mirati di salute o benessere, o di programmi artistici terapeutici forniti da terapeuti specializzati nelle arti **(22)**.

Per alcune popolazioni, o quando l'obiettivo è influenzare determinate patologie, certi tipi di attività artistiche (siano esse quotidiane, su misura o terapeutiche) e di forme d'arte possono essere più adatti di altri, nel momento in cui possono combinare specifiche componenti di rilievo (ad esempio, la danza è particolarmente rilevante per la riabilitazione, in quanto attività fisica).

Per quanto riguarda altre popolazioni o condizioni di salute, il fattore decisivo per stabilire quale tipo di programma o forma d'arte sia più appropriato può essere determinato in gran parte dal gusto personale e dall'influenza culturale. Di fatto, questo è stato indicato come un punto di forza dei progetti artistici in materia di salute: anche se altri tipi di attività possono comunque contenere diverse componenti salutari (ad esempio, attività motorie), le arti sanno combinare molti di questi fattori con una bellezza estetica interiore e una creatività espressiva, andando a creare una motivazione intrinseca che va oltre la semplice attenzione per la salute **(22)**.

Un ulteriore punto di forza è la natura multimodale degli interventi artistici, che consente di associare il coinvolgimento a una serie di effetti diversi sulla salute.

- Disponibile in lingua inglese e la traduzione italiana su www.dors.it (<https://www.dors.it/page.php?idarticolo=338>)
- Disponibile in lingua inglese e la traduzione italiana su www.dors.it (<https://www.dors.it/page.php?idarticolo=470>)

Di conseguenza, il presente lavoro indaga gli effetti ad ampio raggio di molteplici tipi di attività artistiche diverse, distinguendo tra i seguenti tipi di effetti generali:

- laddove la ricerca suggerisce che diversi tipi di attività artistiche potrebbero ottenere risultati simili, le attività saranno definite come coinvolgimento artistico o coinvolgimento nelle arti;
- laddove l'evidenza suggerisce che è la partecipazione, nello specifico, ad essere importante (distinguendola dalle visite ai luoghi culturali e dal prendere parte a eventi), le attività saranno definite come partecipazione alle arti o arte partecipata;
- laddove l'evidenza suggerisce che un particolare tipo di attività può risultare particolarmente efficace (ad esempio l'ascolto di musica o la danza), quest'ultimo sarà specificato.

1.1.4 Obiettivi del presente report

Fin dai primi anni 2000, in tutta la regione europea dell'OMS, si sono registrati numerosi sviluppi politici in materia di arte e salute. Ad esempio, in Inghilterra (Regno Unito), dal 2007 sono state realizzate pubblicazioni congiunte dall'Arts Council England e dal Servizio Sanitario Nazionale **(35,36)**; il Ministero della Cultura, dei Media e dello Sport ha incluso la salute nel nuovo Culture White Paper **(37)**; inoltre, il report Creative Health sostenuto da tutti i partiti del Gruppo Parlamentare ha formulato una serie di raccomandazioni politiche al Governo del Regno Unito e ad altri organismi **(38)**.

In Finlandia, a partire dal 2007, il governo ha adottato un programma politico per la promozione della salute mirato alla valorizzazione del contributo dell'arte e della cultura alla salute e al benessere **(39)**. In Irlanda, l'Arts Council Ireland e il Servizio Sanitario Nazionale collaborano dalla fine degli anni '90, producendo documenti politici e strategici sulle potenzialità della collaborazione tra il settore artistico e quello sanitario **(40)**. In Norvegia, il governo ha emanato una legge sulla salute pubblica e una sulla cultura ed entrambe sottolineano l'importanza delle arti nella promozione e nella cura della salute **(41)**. In Svezia, il

Parlamento ha istituito una Società per la Cultura e la Salute e una Commissione di Politica Culturale **(42)**. Ulteriori sviluppi politici sono presentati in altre pubblicazioni **(22,43)**.

Tuttavia, gli sviluppi in questo campo hanno avuto un carattere prevalentemente nazionale, con l'obiettivo di influenzare la politica e le pratiche nei singoli Paesi, con pochi esempi di influenza transnazionale **(44)**. Ciò ha comportato una scarsa coerenza nello sviluppo delle politiche o anche nella condivisione delle buone pratiche, mentre molti sforzi dei singoli Paesi sono rimasti limitati al breve termine piuttosto che protrarsi a lungo. Pertanto, il presente rapporto cerca di tracciare una mappa della crescente base di evidenze sulle arti e la salute che si è venuta a creare dall'inizio del 2000, e propone una serie di considerazioni politiche per promuovere la coesione e la longevità dello sviluppo delle politiche in questo campo.

Per l'OMS, il crescente interesse dei settori artistici per la salute giunge al momento opportuno e si accompagna a una serie di importanti sviluppi nell'ambito della politica globale in materia di salute. Partendo dall'approccio "Salute in Tutte le Politiche", sviluppato all'inizio degli anni 2000, Salute 2020 (il quadro di riferimento della politica europea per la salute) sottolinea l'importanza della collaborazione multisettoriale per catalizzare l'azione **(45)**. Questo cambiamento strategico è stato ulteriormente enfatizzato dal Tredicesimo Programma di Lavoro Generale dell'OMS 2019-2023 **(46)**, recentemente pubblicato dall'OMS, che promuove inoltre una maggiore attenzione sia al benessere che alla crescita del capitale umano durante il corso della vita. Inoltre, l'Agenda 2030 per lo Sviluppo Sostenibile **(47)** prevede il sostegno alla salute e al benessere, l'erogazione di un'istruzione di qualità, la costruzione di città e comunità sostenibili, l'incoraggiamento di un lavoro dignitoso e della crescita economica e il lavoro in partenariato.

Tutti questi obiettivi, priorità e approcci sono parte integrante del coinvolgimento nelle arti: essi aumentano il capitale culturale all'interno delle società e possono contribuire a promuovere la resilienza, l'equità, la salute e il benessere nell'arco della vita. Inoltre, operando simultaneamente a livello individuale e sociale, oltre che fisico e mentale, gli interventi mirati alla salute basati

sull'arte si collocano in una posizione privilegiata per affrontare appieno la complessità delle sfide che la salute e il benessere pongono in maniera sempre più evidente.

1.2 Metodologia

Questa scoping review si è trovata di fronte a una domanda di sintesi piuttosto ampia, ma con la priorità di acquisire un quadro articolato delle evidenze disponibili. Di conseguenza, essa si è concentrata in modo specifico sui risultati delle meta-analisi, delle meta-sintesi e delle meta-etnografie. Essa tuttavia non ha escluso anche riferimenti a risultati di singoli studi e ad alcuni testi di letteratura grigia. In particolare, il presente lavoro non mira a fare distinzioni tra diverse metodologie o metodi di ricerca, ma integra invece una serie di evidenze differenti tra loro al fine di valorizzare al meglio l'approfondimento e l'estensione della ricerca in questo campo.

L'Allegato 1 illustra nel dettaglio la metodologia, compresa la strategia di ricerca e le parole chiave utilizzate per quanto riguarda le arti e la salute.

2. I RISULTATI

I paragrafi 2.1 Prevenzione e promozione e 2.2 Gestione e trattamento sono in corso di traduzione.

Il report include oltre 900 pubblicazioni, tra le quali si annoverano oltre 200 review, review sistematiche, meta-analisi e meta-sintesi basate su più di 3000 studi e oltre 700 singoli studi.

La classificazione del contenuto dei risultati ha individuato due tematiche generali: prevenzione e promozione e gestione e trattamento (fig. 2). Per quanto concerne la prevenzione e la promozione (sezione 2.1), sono state identificati diversi ambiti in relazione a come le arti possono

1. influenzare i determinanti sociali della salute (ad esempio, sviluppo della coesione sociale e riduzione delle disuguaglianze e ingiustizie),
2. sostenere lo sviluppo del bambino (ad es. migliorare il legame madre-bambino, sostenere l'acquisizione della parola e del linguaggio e di un livello di istruzione),
3. incoraggiare comportamenti che promuovono la salute (ad es. promuovendo stili di vita salutari, incoraggiando il coinvolgimento nelle cure grazie alla loro funzione comunicativa, contrastando pregiudizi legati alla salute e coinvolgendo gruppi svantaggiati o difficili da raggiungere),
4. aiutare a prevenire le malattie (per esempio incrementando il benessere fisico e mentale, riducendo le conseguenze di traumi e il rischio di decadimento cognitivo, indebolimento e morte premature),
5. supportare l'assistenza e la cura (compreso l'aumento della nostra comprensione della salute e il miglioramento delle capacità cliniche e del benessere individuale curanti professionali e non).

Per quanto concerne la gestione e il trattamento (sezione 2.2), sono stati individuati diversi ambiti in relazione a come le arti possono:

1. aiutare le persone con storie di malattie mentali (ad es. disturbi mentali perinatali, malattie mentali da lievi e moderate a gravi, traumi e abusi),
2. sostenere le cure per le persone in condizioni acute (ad es. migliorando le cure per neonati prematuri, pazienti ospedalizzati, persone sottoposte a interventi chirurgici e procedure invasive e soggetti in terapia intensiva),
3. sostenere le persone con disturbi neuroevolutivi e neurologici (inclusi i disturbi dello spettro autistico (DSA), paralisi cerebrale, ictus, altre cerebrolesioni acquisite, disturbi neurologici degenerativi e demenze),
4. contribuire al trattamento di malattie croniche degenerative (inclusi cancro, malattie respiratorie, diabete e malattie cardiovascolari (MCV),
5. contribuire all'assistenza nel fine vita (incluse cure palliative ed elaborazione del lutto).



Fig. 2. Contenuto tematico relativi a prevenzione e promozione e gestione e trattamento

3. DISCUSSIONE

3.1 Punti di forza e limiti della review

La review possiede numerosi punti di forza. In primo luogo, ha passato in rassegna la letteratura mondiale sul tema del rapporto tra arte e salute, prendendo in considerazione in particolar modo meta-analisi, meta-sintesi e review sistematiche, oltre a fare riferimento ai risultati di un certo numero di singoli studi.

Al fine di accedere alla letteratura pertinente a disposizione, la ricerca è stata condotta in inglese e russo, due lingue chiave nella Regione Europea dell'OMS. Un secondo punto di forza è rappresentato dall'analisi del ruolo dell'arte non solo in rapporto a specifiche condizioni di salute, ma anche in relazione alla prevenzione, promozione e più ampi determinanti della salute. In ultimo, i risultati sono stati esaminati impiegando una serie di approcci metodologici, applicando la triangolazione all'analisi di risultati comuni.

Ciononostante, la review presenta anche alcuni limiti: innanzitutto non si è basata su una ricerca sistematica della letteratura, in quanto ciò avrebbe prodotto una quantità di risultati eccessiva ai fini di una sintesi efficace.

Tuttavia, ha dato priorità ai risultati di oltre 200 precedenti review sistematiche, meta-analisi quantitative e meta-sintesi qualitative, che a loro volta si erano basate su ricerche sistematiche; inoltre, ha comportato una serie di approfondite ricerche di molteplici database per identificare ulteriori studi – più di 3000 in tutto – da includere. Di conseguenza, questo report è l'indagine più completa della letteratura in materia di arte e salute fino ad oggi. Inoltre, l'uso di una scoping review piuttosto che di una review sistematica ha fatto sì che il report potesse fare riferimento a studi di diversa impostazione metodologica e teorica senza vincoli basati sul disegno dello studio o sulla misura dei risultati, il che è importante per un'area di ricerca così interdisciplinare. Va notato, tuttavia, che non sono stati identificati gli studi pubblicati in lingue diverse dall'inglese e dal russo.

Un secondo limite è rappresentato dal tradizionale formato breve e accessibile dei report del WHO EURO Health Evidence Network, che non ha reso

possibile una discussione dettagliata dei punti di forza e dei limiti dei diversi approcci metodologici o singoli studi. Le discussioni presenti all'interno di studi specifici o le review qui citate forniscono un'ulteriore riflessione su questo punto.

In terzo luogo, occorre ricordare che vi sono complesse questioni logistiche ed etiche nello sviluppo e nella realizzazione di programmi artistici legati alla salute le quali, tuttavia, vanno oltre le finalità della presente review e meriterebbero di essere approfondite in futuro in un'apposita review.

Infine, sebbene la review abbia evidenziato i vantaggi del rapporto tra arte e salute e le aree specifiche in cui sembra offrire benefici tangibili, esistono condizioni di salute e aspetti terapeutici in cui l'arte non ricopre un ruolo clinico significativo.

Nonostante esuli dallo scopo della presente review, è stato dimostrato che le arti possono avere ripercussioni negative sulla salute: per esempio, sono stati perpetuati pregiudizi sull'epilessia da alcune canzoni popolari (955), l'ascolto quotidiano di musica ad alto volume è legato alla perdita dell'udito (956) e la rappresentazione mediatica della medicina può contribuire alla diffusione di paure relative alla salute e alla formazione di aspettative irrealistiche nei pazienti (957,958). Pertanto, non si deve presumere che l'arte sia una panacea: a tal fine, uno studio attento della letteratura in materia e una progettazione accurata dei programmi pertinenti ricoprono un ruolo importante.

3.2 Sintesi dei risultati

Il report raccoglie le evidenze sul contributo delle arti per la promozione di una buona salute, il miglioramento o la prevenzione di una serie di condizioni di salute fisica e mentale, così come per il trattamento o la gestione di condizioni acute e croniche che si manifestano nel corso della vita. Gli studi hanno esaminato una serie di diverse attività artistiche e programmi offerti in vari contesti, dagli ospedali ai servizi delle cure primarie, dalla comunità alla casa.

Da tale ricerca si possono estrarre diverse conclusioni, la prima è che ormai esiste un corpus di

evidenze significativo dei benefici delle arti sulla salute. I disegni di ricerca hanno spaziato da studi pilota non controllati a studi controllati randomizzati, da indagini trasversali di piccola scala ad analisi di studi longitudinali di coorte su base nazionale e da studi di singoli casi a etnografie a livello di comunità.

Tra i metodi di ricerca adottati si annoverano scale psicologiche, marcatori biologici, tecniche di neuroimaging, osservazioni comportamentali, interviste e analisi di cartelle cliniche. Gli studi di ricerca hanno inoltre tratto spunti teorici da varie discipline, tra cui psicologia, psichiatria, epidemiologia, filosofia, ecologia, storia, economia della salute, neuroscienze, medicina, geografia della salute, sanità pubblica, antropologia e sociologia. Ovviamente la qualità delle prove a disposizione è soggetta a variabilità e permangono delle aree in cui occorrerebbe confermare o studiare meglio i risultati. Nonostante ciò, questa review ha triangolato i risultati provenienti da diversi studi, ognuno dei quali caratterizzato da differenti punti di forza, il che ha contribuito a individuare le debolezze e i bias intrinseci dei singoli studi. Nell'insieme, i risultati esaminati in questa review conferiscono credibilità all'affermazione secondo cui è sempre più robusta la base delle evidenze dell'impatto delle arti sulla salute fisica e mentale.

Un seconda conclusione della presente ricerca è stata l'attenzione a quelle condizioni per cui non vi sono ancora soluzioni definitive. Le arti offrono la possibilità di affrontare problemi difficili o complessi per i quali non vi sono ancora soluzioni adeguate. Inoltre, la review ha evidenziato come le arti forniscano un approccio olistico a quelle condizioni che spesso sono trattate principalmente come fisiche. Tale approccio si inserisce nella tendenza attuale sui temi di salute che conferisce pari importanza alla salute mentale e colloca i problemi di salute all'interno del proprio contesto sociale e comunitario **(9,959,960)**.

Una terza conclusione è rappresentata dall'efficacia degli interventi artistici anche in termini di benefici economici, come dimostrato dalle evidenze esaminate, in quanto alcuni interventi artistici hanno dimostrato di avere un rapporto costo-efficacia equivalente se non superiore rispetto ai possibili interventi sanitari. Il quadro teorico adottato da tale report si è concentrato

sugli aspetti multimodali delle attività artistiche, in quanto spesso offrono una spiegazione dei loro benefici. Gli interventi artistici possono offrire molteplici fattori di promozione della salute all'interno di una stessa attività, incoraggiando per esempio l'attività fisica includendo allo stesso tempo componenti legate alla salute mentale; di conseguenza, possono essere più efficaci per alcune condizioni di salute rispetto alla duplice prescrizione di un intervento di attività fisica e uno di salute mentale eseguiti separatamente. Inoltre, la componente estetica delle arti e la capacità da parte degli artisti di adattarle alle esigenze di individui di diversa estrazione culturale offre una strada per coinvolgere le persone e i gruppi svantaggiati o difficili da raggiungere, che hanno maggiori rischi di avere una cattiva salute e generare contemporaneamente maggiori costi di sanitari **(961)**. Sono necessari tuttavia più attenti studi valutativi di tipo economico degli interventi artistici nell'ambito della salute per quantificarne i benefici e per sostenere le sperimentazioni/ con finanziamenti ed incarichi ad hoc.

3.2.1 Carenze e sfide

A partire dalle evidenze appena descritte, la review ha anche evidenziato alcune carenze e sfide. In primo luogo vi è un numero sostanzialmente maggiore di evidenze a favore di alcuni tipi di attività artistiche per specifiche condizioni di salute: per esempio, ci sono più studi sulla musica, la danza e le arti visive che su altre attività come la partecipazione a festival, carnevali o arti online e digitali.

Ciò non implica necessariamente che tali attività abbiano un impatto maggiore. Analogamente, questo report si è concentrato su aree in cui vi è evidenza di ricerca, ma ciò non significa che l'arte possa essere considerata un palliativo universale: vi sono altre importanti aree della salute su cui non vi sono o non sono ancora stati pubblicati degli studi.

Tra queste, sebbene si sia cercato di migliorare la comunicazione per la salute relativa alle malattie infettive, non esiste praticamente un lavoro di ricerca sull'efficacia delle arti nell'aiutare persone affette da malattie infettive. Allo stesso modo, vi sono pochissimi lavori di ricerca sul rapporto tra arte e malattie autoimmuni. Nonostante esistano alcuni studi su condizioni neurologiche quali l'ictus, le evidenze sui benefici dell'arte per malat-

tie come epilessia e disturbi neurologici degenerativi sono ancora scarse. Inoltre, gran parte della ricerca sulla prevenzione si è concentrata sulla prevenzione primaria o secondaria, mentre si è occupata in maniera molto limitata della prevenzione terziaria, per esempio indagando se l'arte può contribuire a ridurre il rischio di comorbidità in individui affetti da malattie mentali o fisiche. In altre aree della ricerca di base le evidenze sono scarse perché si è appena cominciato a esplorare questi ambiti, come l'arte e l'epigenetica.

Occorre un lavoro di ricerca più approfondito, specialmente per quelle condizioni per cui le prove attualmente a disposizione sono limitate. Mentre questo report ha evidenziato alcune aree in cui ci sono risultati discordanti o nulli, vi è in letteratura un bias di pubblicazione dato dalla propensione a privilegiare i risultati positivi. Pertanto, i futuri lavori di ricerca dovranno includere anche i risultati nulli per consentire una valutazione equilibrata delle aree in cui le arti possono offrire o meno un contributo alla salute.

In secondo luogo, vi sono difficoltà nel determinare la dimensione dell'effetto, benché in un crescente numero di studi siano state incluse condizioni di controllo che hanno permesso di effettuare dei confronti a riguardo. In molti casi, esistono un numero sempre maggiore di evidenze sul significativo impatto clinico degli interventi artistici: alcuni studi hanno dimostrato che gli interventi artistici hanno effetti comparabili o maggiori dei farmaci, di interventi sociali non artistici o di altri interventi come l'esercizio fisico.

Di conseguenza, il passo successivo fondamentale sarà partire da questa promettente base di evidenze per intraprendere in futuro studi che si incentrino, in particolare, sul confronto della dimensione dell'effetto con interventi o trattamenti standard di riferimento e sul confronto della validità dei risultati quando gli interventi artistici sono effettuati da soli e quando sono realizzati insieme ad altri interventi medici. Ciò consentirà di formulare affermazioni più solide sui benefici relativi degli interventi artistici rispetto a quelli non artistici. Inoltre, fornirà dati essenziali sulle modalità ottimali di attuazione all'interno di percorsi di prevenzione o trattamento per specifiche condizioni di salute.

In terzo luogo, sussistono poche evidenze sulla scalabilità degli interventi attraverso l'introduzio-

ne diffusa di programmi specifici o l'adattamento a livello locale degli interventi. Di conseguenza, gran parte delle evidenze proviene da interventi ripetuti su piccola scala, condotti come validazione o replicazione. Non è ancora chiaro se per alcune attività i benefici riscontrati siano stati specifici per il contesto locale, regionale o nazionale in cui sono state sviluppate.

Perciò, occorre (i) intraprendere più valutazioni di processo e studi di implementazione degli interventi di successo per facilitare l'adozione di programmi per i quali esista una solida base di evidenze derivate da interventi su piccola scala; (ii) condividere protocolli approfonditi di interventi artistici di successo per sostenerne l'estensione ad altri luoghi, per esempio fornendo manuali di intervento secondo le linee guida consigliate, come lo Schema per la Descrizione e Replica degli Interventi **(962)**; (iii) indirizzare le risorse al finanziamento di studi di interventi su larga scala in cui vi siano promettenti evidenze di efficacia. Le prove qui presentate suggeriscono che le arti avrebbero un grande potenziale di sostenere la salute, ma rimane una risorsa ancora sottoutilizzata che dovrebbe essere sfruttata in modo efficace perché tale potenziale si realizzi. Ulteriori studi di implementazione potrebbero aiutare ad avvicinarsi a tale obiettivo.

Infine, non vi sono molte evidenze a sostegno dell'impatto dell'attuazione delle politiche, come ad esempio l'incremento o la contrazione dei fondi o della erogazione delle arti dei diversi Paesi siano collegati agli aumenti o diminuzioni dell'incidenza o prevalenza di alcune condizioni di salute. Pertanto, occorre assicurarsi che negli studi di coorte vengano incluse domande sul coinvolgimento artistico e culturale per facilitare più ricerche longitudinali sulla partecipazione artistica, compresi gli esperimenti naturali degli interventi politici.

Laddove vengono sperimentati interventi specifici (ad esempio una città che diventa Città Europea della Cultura) e non sono disponibili dati di coorte adatti per il monitoraggio, si dovrebbe prendere in considerazione lo sviluppo di valutazioni solide basate sulla raccolta di nuovi dati su larga scala.

3.3 Considerazioni di interesse politico

Dalle evidenze raccolte in questo report, si possono trarre diverse considerazioni che riguardano i settori della cultura, del sociale e della sanità. È quindi possibile:

Riconoscere la base sempre più consistente delle evidenze sul ruolo delle arti nel miglioramento della salute e del benessere:

- incoraggiando l'implementazione di quegli interventi artistici per i quali esiste una solida base di evidenze, quali l'uso di musica registrata per pazienti prima di un intervento chirurgico, l'arte per pazienti affetti da demenza e programmi artistici di comunità per la salute mentale,
- condividendo conoscenze e pratiche di interventi artistici che i Paesi hanno trovato efficaci nel proprio contesto per promuovere la salute, migliorare o incidere sulle disuguaglianze e ingiustizie che hanno un impatto sulla salute,
- sostenendo la ricerca nel campo delle arti e della salute, con attenzione particolare ad aree rilevanti sul piano politico, come gli studi che esaminano gli interventi su una scala di popolazione più ampia, o gli studi che analizzano la fattibilità, accettabilità e appropriatezza di interventi artistici con nuove arti.

Riconoscere il valore aggiunto del coinvolgimento nelle arti per la salute:

- garantendo la disponibilità e accessibilità nel corso della vita di un'offerta artistica culturalmente varia a gruppi diversi, specialmente a quelli appartenenti a minoranze svantaggiate,
- incoraggiando organizzazioni artistiche e culturali a rendere la salute e il benessere parte integrante e strategica del proprio lavoro,
- promuovendo la consapevolezza nell'opinione pubblica dei potenziali benefici per la salute che derivano dal coinvolgimento delle arti,
- ideando interventi che incoraggino la partecipazione ad attività artistiche per promuovere stili di vita salutari.

Tenere in considerazione la natura intersettoriale degli ambiti dell'arte e della salute:

- rafforzando strutture e meccanismi per la collaborazione tra i settori della cultura, del sociale e della sanità, per esempio introducendo il co-finanziamento di programmi da parte di budget differenti
- considerando l'introduzione o il potenziamento di modalità di prescrizione ai pazienti di attività artistiche dai settori della sanità e dell'assistenza sociale, per esempio attraverso l'uso di prescrizioni per attività sociali
- favorendo l'inclusione delle arti e degli approcci formativi umanistici nell'ambito della formazione degli operatori sanitari e della cura per migliorare le loro abilità cliniche, personali e comunicative.

4. CONCLUSIONI

Il presente report ha ricavato da un'ampia gamma di approcci disciplinari e metodologici le evidenze del potenziale contributo delle arti nell'influenzare i determinanti della salute, nel avere un ruolo rilevante nella promozione della salute, nel prevenire l'insorgenza di malattie mentali e il decadimento fisico legato all'invecchiamento; nel sostenere il trattamento o la gestione di malattie mentali, malattie croniche degenerative e disturbi neurologici e infine nel supportare l'assistenza di pazienti affetti da malattie acute o terminali. Sebbene alcuni Paesi abbiano compiuto dei progressi nell'attuare politiche che promuovono l'uso delle arti nell'ambito della salute e del benessere, molti ancora non hanno esplorato le opportunità offerte della relazione tra connubio arte e salute, mentre altri ancora hanno attuato delle politiche solo per periodi limitati di tempo.

Pertanto, alla luce della dimensione della base di evidenze raccolte, il report porta diverse considerazioni politiche all'attenzione dei membri della Regione Europea dell'OMS per favorire lo sviluppo di politiche e strategie a lungo termine che facilitino una collaborazione più organica tra il settore delle arti e quello della salute, in grado di realizzare il potenziale contributo dell'arte al miglioramento della salute globale.

Poiché molte di queste priorità sono in linea con priorità e dichiarazioni già esistenti, lo sviluppo di nuovi programmi che implementino queste politiche dovrebbe essere a mutuo vantaggio delle arti e del settore della sanità e del sociale a livello internazionale.

BIBLIOGRAFIA

NB. Tutti gli URL sono stati accessibili dal 1 all'8 ottobre 2019.

1. Adajian T. The definition of art. In: Zalta EN, editor. *Stanford Encyclopedia of Philosophy*. Stanford (CA): Stanford University, 2018 (<https://plato.stanford.edu/archives/fall2018/entries/art-definition>).
2. Art. In: *Oxford English dictionary*. Oxford: Oxford University Press; 2013:1056.
3. Art. In: *Merriam-Webster dictionary*. Springfield (MA): Merriam-Webster; 2016:960.
4. Davies CR, Rosenberg M, Knuihan M, Ferguson R, Pikora T, Slatter N. Defining arts engagement for population-based health research: art forms, activities and level of engagement. *Arts Health*. 2012;4(3):203–16. doi: <https://doi.org/10.1080/17533015.2012.656201>.
5. Australia Council Act 1975. Canberra: Commonwealth of Australia; 1975.
6. 2008 survey of public participation in the arts. Washington (DC): National Endowment for the Arts; 2009 (Research report 49; <https://www.arts.gov/publications/2008-survey-public-participation-arts>).
7. Great art and culture for everyone: 10-year strategic framework, 2nd edition. London: Arts Council England; 2013 (<https://www.artscouncil.org.uk/sites/default/files/download-file/Great%20art%20and%20culture%20for%20everyone.pdf>).
8. Constitution of the World Health Organization. New York: United Nations; 1948 (http://www.who.int/governance/eb/who_constitution_en.pdf).
9. Wilkinson RG, Marmot M. *Social determinants of health: the solid facts*, 2nd edition. Copenhagen: WHO Regional Office for Europe; 2003 (http://www.euro.who.int/__data/assets/pdf_file/0005/98438/e81384.pdf).
10. Cultural contexts of health [website]. Copenhagen: WHO Regional Office for Europe; 2019 (<http://www.euro.who.int/en/data-and-evidence/cultural-contexts-of-health>).
11. Ottawa charter for health promotion, 1986. Geneva: World Health Organization; 1986 (http://www.euro.who.int/__data/assets/pdf_file/0004/129532/Ottawa_Charter.pdf?ua=1).
12. Stone A, Mackie C, editors. *Subjective well-being: measuring happiness, suffering, and other dimensions of experience*. Washington (DC): National Academies Press; 2013 (<https://www.nap.edu/catalog/18548/subjective-well-being-measuring-happiness-suffering-and-other-dimensions-of>).
13. Keyes CLM, Shmotkin D, Ryff CD. Optimizing well-being: the empirical encounter of two traditions. *J Pers Soc Psychol*. 2002;82(6):1007–22. doi: 10.1037/0022-3514.82.6.1007.
14. Ryff CD. Happiness is everything, or is it? explorations on the meaning of psychological well-being. *J Pers Soc Psychol*. 1989;57(6):1069. doi: 10.1037/0022-3514.57.6.1069.
15. Keyes CLM. Social well-being. *Soc Psychol Q*. 1998;61(2):121–40.
16. Huber M, Knottnerus JA, Green L, van der Horst H, Jadad AR, Kromhout D et al. How should we define health? *BMJ*. 2011;343:d4163. doi: <https://doi.org/10.1136/bmj.d4163>.
17. Smith R. The end of disease and the beginning of health. *BMJopinion*. 8 July 2008 (<https://blogs.bmj.com/bmj/2008/07/08/richard-smith-the-end-of-disease-and-the-beginning-of-health/>).
18. McEwen BS. Interacting mediators of allostasis and allostatic load: towards an understanding of resilience in aging. *Metabolism*. 2003;52(10 suppl 2):10–16. doi: 10.1016/s0026-0495(03)00295-6.
19. Antonovsky A. *Health, stress, and coping*. San Francisco (CA): Jossey-Bass; 1979.
20. Antonovsky A. The sense of coherence as a determinant health. In: Matarazzo JD, editor. *Behavioral health: a handbook of health enhancement and disease prevention*. New York: John Wiley; 1984:114–29.
21. Craig P, Dieppe P, Macintyre S, Michie S, Nazareth I, Petticrew M. Developing and evaluating complex interventions: the new Medical Research Council guidance. *BMJ*. 2008;337:a1655. doi: 10.1136/bmj.a1655.
22. Fancourt D. *Arts in health: designing and researching interventions*. Oxford: Oxford University Press; 2017.
23. Juslin PN. From everyday emotions to aesthetic emotions: towards a unified theory of musical emotions. *Phys Life Rev*. 2013;10(3):235–66. doi: 10.1016/j.plrev.2013.05.008.
24. Fancourt D, Garnett C, Spiro N, West R, Müllensiefen D. How do artistic creative activities regulate our emotions? Validation of the Emotion Regulation Strategies for Artistic Creative Activities Scale (ERS-ACA). *PLOS One*. 2019;14(2):e0211362. doi: 10.1371/journal.pone.0211362.

25. Mennin D, Farach F. Emotion and evolving treatments for adult psychopathology. *Clin Psychol Sci Pract.* 2007;14(4):329–52. doi: 10.1111/j.1468-2850.2007.00102.x.
26. Steptoe A, Kivimäki M. Stress and cardiovascular disease. *Nat Rev Cardiol.* 2012;9(6):360–70. doi: 10.1038/nrcardio.2012.45.
27. Chida Y, Hamer M, Wardle J, Steptoe A. Do stress-related psychosocial factors contribute to cancer incidence and survival? *Nat Clin Pract Oncol.* 2008;5(8):466–75. doi: 10.1038/ncponc1134.
28. Kaser M, Zaman R, Sahakian BJ. Cognition as a treatment target in depression. *Psychol Med.* 2017;47(6):987–9. doi: 10.3390/ijerph121215032.
29. Boss L, Kang D-H, Branson S. Loneliness and cognitive function in the older adult: a systematic review. *Int Psychogeriatr.* 2015;27(4):541–53. doi: 10.1017/S1041610214002749.
30. Steptoe A, Shankar A, Demakakos P, Wardle J. Social isolation, loneliness, and all-cause mortality in older men and women. *Proc Natl Acad Sci U S A.* 2013;110(15):5797–801. doi: 10.1073/pnas.1219686110.
31. Pascoe EA, Richman LS. Perceived discrimination and health: a meta-analytic review. *Psychol Bull.* 2009;135(4):531–54. doi: 10.1037/a0016059.
32. Hamer M, Stamatakis E. Prospective study of sedentary behavior, risk of depression, and cognitive impairment. *Med Sci Sports Exerc.* 2014;46(4):718–23. doi: 10.1249/MSS.0000000000000156.
33. Wang X, Ouyang Y, Liu J, Zhu M, Zhao G, Bao W et al. Fruit and vegetable consumption and mortality from all causes, cardiovascular disease, and cancer: systematic review and dose-response meta-analysis of prospective cohort studies. *BMJ.* 2014;349:g4490. doi: 10.1136/bmj.g4490.
34. Simpson SH, Eurich DT, Majumdar SR, Padwal RS, Tsuyuki RT, Varney J et al. A meta-analysis of the association between adherence to drug therapy and mortality. *BMJ.* 2006;333(7557):15. doi: 10.1136/bmj.38875.675486.55.
35. Cayton H. Report of the review of arts and health working group. Leeds: Department of Health; 2007 (<http://www.artsanhealth.ie/wp-content/uploads/2011/09/Report-of-the-review-on-the-arts-and-health-working-group-DeptofHealth.pdf>).
36. Cayton H, Hewitt P. A prospectus for arts and health. London: Arts Council England; 2007 (<http://www.artsanhealth.ie/wp-content/uploads/2011/09/A-prospectus-for-Arts-Health-Arts-Council-England.pdf>).
37. The culture white paper. London: Department for Culture, Media and Sport; 2016 (<https://www.gov.uk/government/publications/culture-white-paper>).
38. Creative health: the arts for health and wellbeing. London: All-Party Parliamentary Group on Arts, Health and Wellbeing; 2017 (<http://www.artshealthandwellbeing.org.uk/appg-inquiry/>).
39. Liikanen H-L. Art and culture for well-being: proposal for an action programme 2010–2014. Helsinki: Ministry of Education and Culture; 2010 (Publications of the Ministry of Education and Culture 2010:9).
40. Arts and health policy and strategy. Dublin: Arts Council of Ireland; 2010.
41. Theorell T, Knudtsen MS, Bojner Horwitz E, Wikström BM. Culture and public health activities in Sweden and Norway. In: Clift S, Camic PM, editors. *Oxford textbook of creative arts, health, and wellbeing: international perspectives on practice, policy and research.* Oxford: Oxford University Press; 2015. doi: 10.1093/med/9780199688074.003.0021.
42. Kulturutredningen [The cultural report]. Stockholm: Commission of the Swedish Government; 2009:16 (in Swedish).
43. Camic PM, Clift S, editors. *Oxford textbook of creative arts, health, and wellbeing: international perspectives on practice, policy and research.* Oxford: Oxford University Press; 2015.
44. Impact of culture on individual well-being. In: EU Science Hub [website]. Luxembourg: European Commission; 2015 (<https://ec.europa.eu/jrc/en/event/conference/relationship-between-cultural-access-and-individual-psychological-well-being>).
45. Health 2020: a European policy framework supporting action across government and society for health and wellbeing. Copenhagen: WHO Regional Office for Europe; 2013 (EUR/RC62/9; http://www.euro.who.int/__data/assets/pdf_file/0006/199536/Health2020-Short.pdf?ua=1).
46. Resolution WHA71.1. Thirteenth general programme of work 2019–2023. In: Seventy-first World Health Assembly, Geneva, 25 May 2018. Geneva: World Health Organization; 2018 (https://apps.who.int/gb/ebwha/pdf_files/WHA71/A71_R1-en.pdf).
47. Transforming our world: the 2030 agenda for sustainable development. New York: United Nations; 2015 (General Assembly resolution 70/1; http://www.un.org/ga/search/view_doc.asp?symbol=A/RES/70/1&Lang=E).
48. Freeman WJI. A neurobiological role of music in social bonding. In: Wallin N, Merkur B, Brown S, editors. *The origins of music.* Cambridge (MA): MIT Press; 2000 (<http://escholarship.org/uc/item/9025x8rt>).

49. Huron D. Is music an evolutionary adaptation? *Ann N Y Acad Sci.* 2001;930(1):43–61. doi: 10.1111/j.1749-6632.2001.tb05724.x.
50. Tarr B, Launay J, Dunbar RIM. Music and social bonding: “self-other” merging and neurohormonal mechanisms. *Front Psychol.* 2014;5:1096. doi: 10.3389/fpsyg.2014.01096.
51. Weinstein D, Launay J, Pearce E, Dunbar RIM, Stewart L. Singing and social bonding: changes in connectivity and pain threshold as a function of group size. *Evol Hum Behav.* 2016;37(2):152–8. doi: 10.1016/j.evolhumbehav.2015.10.002.
52. Fancourt D, Williamon A, Carvalho LA, Steptoe A, Dow R, Lewis I. Singing modulates mood, stress, cortisol, cytokine and neuropeptide activity in cancer patients and carers. *Ecancermedicalscience.* 2016;10:631. doi: 10.3332/ecancer.2016.631.
53. Kreutz G. Does singing facilitate social bonding? *Music Med.* 2014;6(2):51–60.
54. Pearce E, Launay J, Dunbar RI. The ice-breaker effect: singing mediates fast social bonding. *R Soc Open Sci.* 2015;2(10):150221. doi: 10.1098/rsos.150221.
55. Poscia A, Stojanovic J, La Milia DI, Duplaga M, Grysztar M, Moscato U et al. Interventions targeting loneliness and social isolation among the older people: an update systematic review. *Exp Gerontol.* 2018;102:133–44. doi: 10.1016/j.exger.2017.11.017.
56. MacLeod A, Skinner MW, Wilkinson F, Reid H. Connecting socially isolated older rural adults with older volunteers through expressive arts. *Can J Aging.* 2016;35(1):14–27. doi: 10.1017/S071498081500063X.
57. Murrock CJ, Graor CH. Depression, social isolation, and the lived experience of dancing in disadvantaged adults. *Arch Psychiatr Nurs.* 2016;30(1):27–34. doi: 10.1016/j.apnu.2015.10.010.
58. Pearce R, Lillyman S. Reducing social isolation in a rural community through participation in creative arts projects. *Nurs Older People.* 2015;27(10):33–8. doi: 10.7748/nop.27.10.33.s22.
59. Bang AH. The restorative and transformative power of the arts in conflict resolution. *J Transform Educ.* 2016;14(4):355–76. doi: <https://doi.org/10.1177/1541344616655886>.
60. Welch GF, Himonides E, Saunders J, Papageorgi I, Sarazin M. Singing and social inclusion. *Front Psychol.* 2014;5:803. doi: 10.3389/fpsyg.2014.00803.
61. Boer D, Abubakar A. Music listening in families and peer groups: benefits for young people’s social cohesion and emotional well-being across four cultures. *Front Psychol.* 2014;5:392. doi: 10.3389/fpsyg.2014.00392.
62. Moody E, Phinney A. A community-engaged art program for older people: fostering social inclusion. *Can J Aging.* 2012;31(1):55–64. doi: 10.1017/S0714980811000596.
63. Van de Vyver J, Abrams D. The arts as a catalyst for human prosociality and cooperation. *Soc Psychol Pers Sci.* 2018;9(6):664–74. doi: 10.1177/1948550617720275.
64. Madsen W. Raising social consciousness through verbatim theatre: a realist evaluation. *Arts Health.* 2018;10(2):181–94. doi: 10.1080/17533015.2017.1354898.
65. Skinner MW, Herron RV, Bar RJ, Kontos P, Menec V. Improving social inclusion for people with dementia and carers through sharing dance: a qualitative sequential continuum of care pilot study protocol. *BMJ Open.* 2018;8(11):e026912. doi: 10.1136/bmjopen-2018-026912.
66. Smart E, Edwards B, Kingsnorth S, Sheffe S, Curran CJ, Pinto M et al. Creating an inclusive leisure space: strategies used to engage children with and without disabilities in the arts-mediated program spiral garden. *Disabil Rehabil.* 2018;40(2):199–207. doi: 10.1080/09638288.2016.1250122.
67. Spiegel JB, Breilh M-C, Campaña A, Marcuse J, Yassi A. Social circus and health equity: exploring the national social circus program in Ecuador. *Arts Health.* 2015;7(1):65–74. doi: 10.1080/17533015.2014.932292.
68. Smigelsky MA, Neimeyer RA, Murphy V, Brown D, Brown V, Berryhill A et al. Performing the peace: using playback theatre in the strengthening of police–community relations. *Prog Community Health Partnersh.* 2016;10(4):533–9. doi: 10.1353/cpr.2016.0061.
69. Anderson S, Fast J, Keating N, Eales J, Chivers S, Barnet D. Translating knowledge: promoting health through intergenerational community arts programming. *Health Promot Pract.* 2017;18(1):15–25. doi: 10.1177/1524839915625037.
70. Bourdieu P. The forms of capital. In: Szeman I, Kaposy T, editors. *Cultural theory: an anthology.* Chichester: John Wiley; 1986:81–93.
71. Putnam RD. *Bowling alone: the collapse and revival of American community.* New York: Simon and Schuster; 2001.
72. Fanian S, Young SK, Mantla M, Daniels A, Chatwood S. Evaluation of the Kòts’iìhtta (“We Light the Fire”) project: building resiliency and connections through strengths-based creative arts programming for Indigenous youth. *Int J Circumpolar Health.* 2015;74(1):27672. doi: 10.3402/ijch.v74.27672.

73. Skyllstad K. Creating a culture of peace. The performing arts in interethnic negotiations. *J Intercult Commun.* 2000;4 [http://www.immi.se/intercultural/]
74. Skyllstad K. Music in conflict management: a multicultural approach. *Int J Music Ed.* 1997;29(1):73–80. doi: 10.1177/025576149702900111.
75. Martin AC. The use of film, literature, and music in becoming culturally competent in understanding African Americans. *Child Adolesc Psychiatr Clin N Am.* 2005;14(3):589–602. doi: 10.1016/j.chc.2005.02.004.
76. Clini C, Thomson LJM, Chatterjee HJ. Assessing the impact of artistic and cultural activities on the health and well-being of forcibly displaced people using participatory action research. *BMJ Open.* 2019;9(2):e025465. doi: 10.1136/bmjopen-2018-025465.
77. Greitemeyer T, Schwab A. Employing music exposure to reduce prejudice and discrimination. *Aggress Behav.* 2014;40(6):542–51. doi: 10.1002/ab.21531.
78. Clarke E, DeNora T, Vuoskoski J. Music, empathy and cultural understanding. *Phys Life Rev.* 2015;15:61–88. doi: 10.1016/j.plrev.2015.09.001.
79. Dodell-Feder D, Tamir DI. Fiction reading has a small positive impact on social cognition: a meta-analysis. *J Exp Psychol Gen.* 2018;147(11):1713–27. doi: 10.1037/xge0000395.
80. Montgomery P, Maunders K. The effectiveness of creative bibliotherapy for internalizing, externalizing, and prosocial behaviors in children: a systematic review. *Child Youth Serv Rev.* 2015;55:37–47. doi: 10.1016/j.childyouth.2015.05.010.
81. Simmons LK. Creative expression in transformative learning: tools and techniques for educators of adults. *Teach Theol Religion.* 2011;14(4):394–395. doi: https://doi.org/10.1111/j.1467-9647.2011.00747.x.
82. Brookfield SD, Holst JD. *Radicalizing learning: adult education for a just world.* New York: John Wiley; 2010.
83. Bergh A, Sloboda J. Music and art in conflict transformation: a review. *Music Arts Action.* 2010;2(2):2–17.
84. Parkinson C, White M. Inequalities, the arts and public health: towards an international conversation. *Arts Health.* 2013;5(3):177–89. doi: 10.1080/17533015.2013.826260.
85. Cain M, Lakhani A, Istvandity L. Short and long term outcomes for culturally and linguistically diverse (cald) and at-risk communities in participatory music programs: a systematic review. *Arts Health.* 2016;8(2):105–24. doi: https://doi.org/10.1080/17533015.2015.1027934.
86. Kim J. Effects of community-based group music therapy for children exposed to ongoing child maltreatment and poverty in South Korea: a block randomized controlled trial. *Arts Psychother.* 2017;54:69–77. doi: 10.1016/j.aip.2017.01.001.
87. Alemán X, Duryea S, Guerra NG, McEwan PJ, Muñoz R, Stampini M et al. The effects of musical training on child development: a randomized trial of El Sistema in Venezuela. *Prev Sci.* 2017;18(7):865–78. doi: 10.1007/s11121-016-0727-3.
88. Spiegel JB, Parent SN. Re-approaching community development through the arts: a “critical mixed methods” study of social circus in Quebec. *Commun Dev J.* 2018;53(4):600–17. doi: 10.1093/cdj/bsx015.
89. Chung HL, Monday A, Perry A. Promoting the well-being of urban youth through drama-based peer education. *Am J Health Behav.* 2017;41(6):728–39. doi: 10.5993/AJHB.41.6.7.
90. Coggan C, Saunders C, Grenot D. Art and safe communities: the role of Big hART in the regeneration of an inner city housing estate. *Health Promot J Aust.* 2008;19(1):4–9. PMID: 18481925.
91. Bracalente B, Chirieleison C, Cossignani M, Ferrucci L, Gigliotti M, Ranalli MG. The economic impact of cultural events: the Umbria Jazz Music Festival. *Tourism Economics.* 2011;17(6):1235–55. doi: https://doi.org/10.5367/te.2011.0096.
92. Tohmo T. Economic impacts of cultural events on local economies: an input–output analysis of the Kaustinen folk music festival. *Tourism Econ.* 2005;11(3):431–51. doi: 10.5367/000000005774352980.
93. Beyers WB, Fowler C, Andreoli D. The economic impact of Seattle’s music industry: a report for the Mayor’s Office of Economic Development. Seattle (WA): City of Seattle Office of Economic Development; 2008 [https://www.seattle.gov/Documents/Departments/FilmAndMusic/Seattle_Music_EIS_2008.pdf].
94. Florida R, Mellander C, Stolarick K. Music scenes to music clusters: the economic geography of music in the US, 1970–2000. *Environment and Planning A: Economy and Space.* 2010;42(4):785–804. doi: 10.1068/a4253.
95. *The economic contribution of the core UK music industry.* London: UK Music; 2013.
96. *Sistema Europe* [website]. Vienna: Sistema Europe; 2019 [https://www.sistemaeurope.org/].
97. Heath SB. Three’s not a crowd: plans, roles, and focus in the arts. *Educ Res.* 2001;30(7):10–17. doi: 10.3102/0013189X030007010.

98. Delgado M. Music, song, dance, and theatre: Broadway meets social justice youth community practice. Oxford: Oxford University Press; 2017.
99. Fritz T, Jentschke S, Gosselin N, Sammler D, Peretz I, Turner R et al. Universal recognition of three basic emotions in music. *Curr Biol*. 2009;19(7):573–6. doi: 10.1016/j.cub.2009.02.058.
100. Gregory AH, Varney N. Cross-cultural comparisons in the affective response to music. *Psychol Music*. 1996;24(1):47–52. doi: 10.1177/0305735696241005.
101. Dissanayake E. Motherese is but one part of a ritualized, multimodal, temporally organized, affiliative interaction. *Behav Brain Sci*. 2004;27(4):512–13. doi: 10.1017/S0140525X0432011X.
102. Mahdhaoui A, Chetouani M, Zong C, Cassel RC, Saint-Georges C, Laznik MC et al. Automatic motherese detection for face-to-face interaction analysis. In: Esposito A, Hussain A, Marinaro M, Martone R, editors. *Multimodal signals: cognitive and algorithmic issues*. Lecture notes in computer science. Berlin: Springer; 2009:248–55.
103. Saint-Georges C, Chetouani M, Cassel R, Apicella F, Mahdhaoui A, Muratori F et al. Motherese in interaction: at the cross-road of emotion and cognition? (a systematic review). *PLOS One*. 2013;8(10):e78103. doi: 10.1371/journal.pone.0078103.
104. Falk D. Prelinguistic evolution in early hominins: whence motherese? *Behav Brain Sci*. 2004;27(4):491–503; discussion 503–583. PMID: 15773427.
105. Graven SN, Browne JV. Auditory development in the fetus and infant. *Newborn Infant Nurs Rev*. 2008;8(4):187–93. doi: 10.1016/j.jpeds.2016.12.072.
106. Moon CM, Fifer WP. Evidence of transnatal auditory learning. *J Perinatol*. 2000;20(8):S37–44. PMID: 11190699.
107. Ullal-Gupta S, Vanden Bosch der Nederlanden CM, Tichko P, Lahav A, Hannon EE. Linking prenatal experience to the emerging musical mind. *Front Syst Neurosci*. 2013;7:48. doi: 10.3389/fnsys.2013.00048.
108. Persico G, Antolini L, Vergani P, Costantini W, Nardi MT, Bellotti L. Maternal singing of lullabies during pregnancy and after birth: effects on mother–infant bonding and on newborns’ behaviour. *Concurrent Cohort Study. Women Birth*. 2017;30(4):e214–20. doi: 10.1016/j.wombi.2017.01.007.
109. Cevasco AM. The effects of mothers’ singing on full-term and preterm infants and maternal emotional responses. *J Music Ther*. 2008;45(3):273–306. PMID: 18959452.
110. Fancourt D, Perkins R. Associations between singing to babies and symptoms of postnatal depression, wellbeing, self-esteem and mother–infant bond. *Public Health*. 2017;145:149–52. doi: 10.1016/j.puhe.2017.01.016.
111. Fancourt D, Perkins R. The effects of mother–infant singing on emotional closeness, affect, anxiety, and stress hormones. *Music & Science*. 2018;1:2059204317745746. doi: 10.1177/2059204317745746.
112. Nakata T, Trehub SE. Infants’ responsiveness to maternal speech and singing. *Infant Behav Dev*. 2004;27(4):455–64. doi: 10.1016/j.infbeh.2004.03.002.
113. Shenfield T, Trehub SE, Nakata T. Maternal singing modulates infant arousal. *Psychol Music*. 2003;31(4):365–75. doi: 10.1177/03057356030314002.
114. Zeevi LS, Regev D, Guttmann J. The efficiency of art-based interventions in parental training. *Front Psychol*. 2018;9:1495. doi: 10.3389/fpsyg.2018.01495.
115. Xie Q-W, Chan CHY, Ji Q, Chan CLW. Psychosocial effects of parent–child book reading interventions: a meta-analysis. *Paediatrics*. 2018;141(4):e20172675. doi: 10.1542/peds.2017-2675.
116. Bouissac P. How plausible is the motherese hypothesis? *Behav Brain Sci*. 2004;27(4):506–7. doi: <https://doi.org/10.1017/S0140525X04250117>.
117. Tierney A, Kraus N. Music training for the development of reading skills. *Prog Brain Res*. 2013;207:209–41. doi: 10.1016/B978-0-444-63327-9.00008-4.
118. White EJ, Hutka SA, Williams LJ, Moreno S. Learning, neural plasticity and sensitive periods: implications for language acquisition, music training and transfer across the lifespan. *Front Syst Neurosci*. 2013;7:90. doi: 10.3389/fnsys.2013.00090.
119. Putkinen V, Saarikivi K, Tervaniemi M. Do informal musical activities shape auditory skill development in preschool-age children? *Front Psychol*. 2013;4:572. doi: 10.3389/fpsyg.2013.00572.
120. Swaminathan S, Schellenberg EG, Venkatesan K. Explaining the association between music training and reading in adults. *J Exp Psychol Learn Mem Cogn*. 2018;44(6):992–9. doi: 10.1037/xlm0000493.
121. Yang H, Ma W, Gong D, Hu J, Yao D. A longitudinal study on children’s music training experience and academic development. *Sci Rep*. 2014;4:5854. doi: 10.1038/srep05854.

122. Nan Y, Liu L, Geiser E, Shu H, Gong CC, Dong Q et al. Piano training enhances the neural processing of pitch and improves speech perception in mandarin-speaking children. *Proc Natl Acad Sci.* 2018;115(28):E6630–9. doi: 10.1073/pnas.1808412115.
123. Linnavalli T, Putkinen V, Lipsanen J, Huotilainen M, Tervaniemi M. Music playschool enhances children’s linguistic skills. *Sci Rep.* 2018;8(1):8767. doi: 10.1038/s41598-018-27126-5.
124. Treshina E. Development of the speech of the younger preschooler by means of theatrical activities. In: Annual International Scientific and Practical Conference, Kiev, 8 April 2016.
125. Brown MI, Westerveld MF, Trembath D, Gillon GT. Promoting language and social communication development in babies through an early storybook reading intervention. *Int J Speech Lang Pathol.* 2018;20(3):337–49. doi: <https://doi.org/10.1080/17549507.2017.1406988>.
126. Dowdall N, Melendez-Torres GJ, Murray L, Gardner F, Hartford L, Cooper PJ. Shared picture book reading interventions for child language development: a systematic review and meta-analysis. *Child Dev.* 2019 [Epub ahead of print]. doi: 10.1111/cdev.13225.
127. Golding A, Boes C, Nordin-Bates SM. Investigating learning through developmental dance movement as a kinaesthetic tool in the early years foundation stage. *Res Dance Educ.* 2016;17(3):235–67. doi: 10.1080/14647893.2016.1204282.
128. Rochette F, Moussard A, Bigand E. Music lessons improve auditory perceptual and cognitive performance in deaf children. *Front Hum Neurosci.* 2014;8:488. doi: 10.3389/fnhum.2014.00488.
129. Flaunacco E, Lopez L, Terribili C, Montico M, Zoia S, Schön D. Music training increases phonological awareness and reading skills in developmental dyslexia: a randomized control trial. *PLOS One.* 2015;10(9):e0138715. doi: 10.1371/journal.pone.0138715.
130. Barnes J. Drama to promote social and personal well-being in six- and seven-year-olds with communication difficulties: the speech bubbles project. *Perspect Public Health.* 2014;134(2):101–9. doi: <https://doi.org/10.1177/1757913912469486>.
131. Mendelson J, White Y, Hans L, Adebari R. A preliminary investigation of a specialized music therapy model for children with disabilities delivered in a classroom setting. *Autism Res Treat.* 2016;2016:1284790. doi: 10.1155/2016/1284790.
132. Cogo-Moreira H, Brandão de Ávila CR, Ploubidis GB, Mari Jde J. Effectiveness of music education for the improvement of reading skills and academic achievement in young poor readers: a pragmatic cluster-randomized, controlled clinical trial. *PLOS One.* 2013;8(3):e59984. doi: 10.1371/journal.pone.0059984.
133. Marchenko NV, Frokol AS. [Correction of the emotional sphere at children of preschool age with speech disorders]. *Bull Pedagog Sci.* 2018;4 (in Russian).
134. Wan CY, Rüber T, Hohmann A, Schlaug G. The therapeutic effects of singing in neurological disorders. *Music Percept.* 2010;27(4):287–95. doi: 10.1525/mp.2010.27.4.287.
135. Clements-Cortès A. Can music be used to help a person who stutters? *Can Music Educ.* 2012;53(4):45–8.
136. Good A, Gordon KA, Papsin BC, Nespoli G, Hopyan T, Peretz I et al. Benefits of music training for perception of emotional speech prosody in deaf children with cochlear implants. *Ear Hear.* 2017;38(4):455–64. doi:10.1097/AUD.0000000000000402.
137. Chou MY, Chang NW, Chen C, Lee WT, Hsin YJ, Siu KK et al. The effectiveness of music therapy for individuals with Rett syndrome and their families. *J Formos Med Assoc.* 2019;19:pii:S0929-6646(18)30427-3. doi: 10.1016/j.jfma.2019.01.001.
138. Huotilainen M, Tervaniemi M. Planning music-based amelioration and training in infancy and childhood based on neural evidence. *Ann N Y Acad Sci.* 2018;1423(1):146–54. doi: 10.1111/nyas.13655.
139. Pantev C, Herholz SC. Plasticity of the human auditory cortex related to musical training. *Neurosci Biobehav Rev.* 2011;35(10):2140–54. doi: 10.1016/j.neubiorev.2011.06.010.
140. Groussard M, Viader F, Landeau B, Desgranges B, Eustache F, Platel H. The effects of musical practice on structural plasticity: the dynamics of grey matter changes. *Brain Cogn.* 2014;90:174–80. doi: 10.1016/j.bandc.2014.06.013.
141. Habibi A, Damasio A, Ilari B, Sachs ME, Damasio H. Music training and child development: a review of recent findings from a longitudinal study. *Ann N Y Acad Sci.* 2018;1423(1):73–81. doi: 10.1111/nyas.13606.
142. Fernandez S. Music and brain development. *Pediatr Ann.* 2018;47(8):e306–8. doi: 10.3928/19382359-20180710-01.
143. Virtala P, Partanen E. Can very early music interventions promote at-risk infants’ development? *Ann N Y Acad Sci.* 2018;1423(1):92–101. doi: 10.1111/nyas.13646.
144. Moreno S, Bidelman GM. Examining neural plasticity and cognitive benefit through the unique lens of musical training. *Hear Res.* 2014;308:84–97. doi: 10.1016/j.heares.2013.09.012.
145. Sala G, Gobet F. Does far transfer exist? Negative evidence from chess, music, and working memory training. *Curr Dir Psychol Sci.* 2017;26(6):515–20. doi: 10.1177/0963721417712760.

146. Gordon RL, Fehd HM, McCandliss BD. Does music training enhance literacy skills? A meta-analysis. *Front Psychol.* 2015;6:1777. doi: 10.3389/fpsyg.2015.01777.
147. Dumont E, Syurina EV, Feron FJM, van Hooren S. Music interventions and child development: a critical review and further directions. *Front Psychol.* 2017;8:1694. doi: 10.3389/fpsyg.2017.01694.
148. Jaschke AC, Eggermont LH, Honing H, Scherder EJ. Music education and its effect on intellectual abilities in children: a systematic review. *Rev Neurosci.* 2013;24(6):665–75. doi: 10.1515/revneuro-2013-0023.
149. Chobert J, François C, Velay JL, Besson M. Twelve months of active musical training in 8- to 10-year-old children enhances the preattentive processing of syllabic duration and voice onset time. *Cereb Cortex.* 2012;24(4):956–67. doi: <https://doi.org/10.1093/cercor/bhs377>.
150. Moreno S, Marques C, Santos A, Santos M, Castro SL, Besson M. Musical training influences linguistic abilities in 8-year-old children: more evidence for brain plasticity. *Cereb Cortex.* 2008;19(3):712–23. doi: 10.1093/cercor/bhn120.
151. Trainor LJ, Marie C, Gerry D, Whiskin E, Unrau A. Becoming musically enculturated: effects of music classes for infants on brain and behavior. *Ann N Y Acad Sci.* 2012;1252(1):129–38. doi: 10.1111/j.1749-6632.2012.06462.x.
152. Yang P. The impact of music on educational attainment. *J Cultur Econ.* 2015;39(4):369–96. doi: 10.1007/s10824-015-9240-y.
153. Higuera-Fresnillo S, Martínez-Gómez D, Padilla-Moledo C, Conde-Caveda J, Esteban-Cornejo I. Dance participation and academic performance in youth girls. *Nutr Hosp.* 2016;33(3):288. doi: 10.20960/nh.288.
154. Hallam S, Rogers K. The impact of instrumental music learning on attainment at age 16: a pilot study. *Br J Music Educ.* 2016;33(3):247–61. doi: 10.1017/S0265051716000371.
155. Merh SA, Schachner A, Katz RC, Spelke ES. Two randomized trials provide no consistent evidence for nonmusical cognitive benefits of brief preschool music enrichment. *PLoS One.* 2013;8(12):e82007. doi: 10.1371/journal.pone.0082007.
156. Polinsky N, Perez J, Grehl M, McCrink K. Encouraging spatial talk: using children's museums to bolster spatial reasoning. *Mind Brain Educ.* 2017;11(3):144–52. doi: 10.1111/mbe.12145.
157. Tsethlikai M. An exploratory analysis of American Indian children's cultural engagement, fluid cognitive skills, and standardized verbal IQ scores. *Dev Psychol.* 2011;47(1):192–202. doi: 10.1037/a0020803.
158. Miendlarzewska EA, Trost WJ. How musical training affects cognitive development: rhythm, reward and other modulating variables. *Front Neurosci.* 2013;7:279. doi: 10.3389/fnins.2013.00279.
159. Trainor LJ, Cirelli L. Rhythm and interpersonal synchrony in early social development. *Ann N Y Acad Sci.* 2015;1337:45–52. doi: 10.1111/nyas.12649.
160. Kulinna PH, Stylianou M, Dyson B, Banville D, Dryden C, Colby R. The effect of an authentic acute physical education session of dance on elementary students' selective attention. *Biomed Res Int.* 2018;2018:8790283. doi: 10.1155/2018/8790283.
161. Koolidge L, Holmes RM. Piecing it together: the effect of background music on children's puzzle assembly. *Percept Mot Skills.* 2018;125(2):387–99. doi: 10.1177/0031512517752817.
162. Schiltz L. Treating the emotional and motivational inhibition of highly gifted underachievers with music psychotherapy: meta-analysis of an evaluation study based on a sequential design. *Bull Soc Sci Med Grand Duche Luxemb.* 2016;1:7–26. PMID: 29468858.
163. Schellenberg E, Corrigan KA, Dys SP, Malti T. Group music training and children's prosocial skills. *PLoS One.* 2015;10(10):e0141449. doi: 10.1371/journal.pone.0141449.
164. Williams K, Barrett M, Welch GF, Abad V. Associations between early shared music activities in the home and later child outcomes: findings from the longitudinal study of Australian children. *Early Child Res Q.* 2015;31:113–24. doi: 10.1016/j.ecresq.2015.01.004.
165. Kawase S, Ogawa J, Obata S, Hirano T. An investigation into the relationship between onset age of musical lessons and levels of sociability in childhood. *Front Psychol.* 2018;9:2244. doi: 10.3389/fpsyg.2018.02244.
166. Theorell TO, Lennartsson A-K, Mosing MA, Ullén F. Musical activity and emotional competence: a twin study. *Front Psychol.* 2014;5:774. doi: 10.3389/fpsyg.2014.00774.
167. Adushkina KV. [Development of emotional intelligence of adolescents in institutions of additional education by means of music therapy]. *Pedagog Educ Russia.* 2015;9:47–51 (in Russian).
168. Spychiger M, Patry J, Lauper G, Zimmermann E, Weber E. Does more music teaching lead to a better social climate? In: Olechowski R, Svik G, editors. *Experimental research in teaching and learning.* Bern: Peter Lang; 1993:322–6.
169. Belliveau G. An arts-based approach to teach social justice: drama as a way to address bullying in schools. *Int J Arts Educ.* 2005;3(2005):136–65.

170. Bickley-Green C. Visual arts education: teaching a peaceful response to bullying. *Art Educ.* 2007;60(2):6–12. doi: <https://doi.org/10.1080/00043125.2007.11651630>.
171. Haner D, Pepler D, Cummings J, Rubin-Vaughan A. The role of arts-based curricula in bullying prevention: Elijah's kite – a children's opera. *Can J Sch Psychol.* 2010;25(1):55–69. doi: [10.1177/0829573509349031](https://doi.org/10.1177/0829573509349031).
172. Subbotsky E, Hysted C, Jones N. Watching films with magical content facilitates creativity in children. *Percept Mot Skills.* 2010;111(1):261–77. doi: [10.2466/04.09.11](https://doi.org/10.2466/04.09.11).
173. Amado D, Sánchez-Miguel PA, Molero P. Creativity associated with the application of a motivational intervention programme for the teaching of dance at school and its effect on the both genders. *PLOS One.* 2017;12(3):e0174393. doi: [10.1371/journal.pone.0174393](https://doi.org/10.1371/journal.pone.0174393).
174. Fancourt D, Steptoe A. Effects of creativity on social and behavioral adjustment in 7- to 11-year-old children. *Ann N Y Acad Sci.* 2018;1438(1):30–9. doi: [10.1111/nyas.13944](https://doi.org/10.1111/nyas.13944).
175. Brown SJ, Rhee KE, Gahagan S. Reading at bedtime associated with longer nighttime sleep in Latino preschoolers. *Clin Pediatr (Phila).* 2015;55(6):525–31. doi: [10.1177/0009922815593907](https://doi.org/10.1177/0009922815593907).
176. Pasiali V, Clark C. Evaluation of a music therapy social skills development program for youth with limited resources. *J Music Ther.* 2018;55(3):280–308. doi: [10.1093/jmt/thy007](https://doi.org/10.1093/jmt/thy007).
177. Ho P, Tsao JCI, Bloch L, Zeltzer LK. The impact of group drumming on social-emotional behavior in low-income children. *Evid Based Complement Alternat Med.* 2011;2011:250708. doi: [10.1093/ecam/nea072](https://doi.org/10.1093/ecam/nea072).
178. Brown ED, Garnett ML, Anderson KE, Laurenceau J-P. Can the arts get under the skin? arts and cortisol for economically disadvantaged children. *Child Dev.* 2017;88(4):1368–81. doi: <https://doi.org/10.1111/cdev.12652>.
179. Cobbett S. Reaching the hard to reach: quantitative and qualitative evaluation of school-based arts therapies with young people with social, emotional and behavioural difficulties. *Emot Behav Diffic.* 2016;21(4):403–15. doi: <https://doi.org/10.1080/13632752.2016.1215119>.
180. Gold C, Voracek M, Wigram T. Effects of music therapy for children and adolescents with psychopathology: a meta-analysis. *J Child Psychol Psychiatry.* 2004;45(6):1054–63. doi: [10.1111/j.1469-7610.2004.t01-1-00298.x](https://doi.org/10.1111/j.1469-7610.2004.t01-1-00298.x).
181. Cofini V, Cianfarani A, Cicilia MR, Carbonelli A, Di Giacomo D. Impact of dance therapy on children with specific learning disability: a two arm cluster randomized control study on italian sample. *Minerva Pediatr.* 2018 [Epub ahead of print]. doi: [10.23736/S0026-4946.18.05249-0](https://doi.org/10.23736/S0026-4946.18.05249-0).
182. Hashemian P, Mashoogh N, Jarahi L. Effectiveness of music therapy on aggressive behavior of visually impaired adolescents. *J Behav Brain Sci.* 2015;5:96–100. doi: [10.4236/jbbs.2015.53009](https://doi.org/10.4236/jbbs.2015.53009).
183. Habib M, Lardy C, Desiles T, Commeiras C, Chobert J, Besson M. Music and dyslexia: a new musical training method to improve reading and related disorders. *Front Psychol.* 2016;7:26. doi: [10.3389/fpsyg.2016.00026](https://doi.org/10.3389/fpsyg.2016.00026).
184. Rolka EJ, Silverman MJ. A systematic review of music and dyslexia. *Arts Psychother.* 2015;46:24–32. doi: [10.1016/j.aip.2015.09.002](https://doi.org/10.1016/j.aip.2015.09.002).
185. Edwards BM, Smart E, King G, Curran CJ, Kingsnorth S. Performance and visual arts-based programs for children with disabilities: a scoping review focusing on psychosocial outcomes. *Disabil Rehabil.* 2018:1–12 [Epub ahead of print]. doi: [10.1080/09638288.2018.1503734](https://doi.org/10.1080/09638288.2018.1503734).
186. Zyga O, Russ SW, Meeker H, Kirk J. A preliminary investigation of a school-based musical theater intervention program for children with intellectual disabilities. *J Intellect Disabil.* 2017;22(3):262–78. doi: [10.1177/1744629517699334](https://doi.org/10.1177/1744629517699334).
187. Busnach Z. Arts education in Finland. Dutch–Scandinavian exchange on cultural education. Utrecht: Utrecht University; 2016 (<https://www.lkca.nl/~media/downloads/bijeenkomsten/dutch-scandinavian%20exchange/finland.pdf>).
188. Finnish Observatory for Arts and Cultural Education [website]. Helsinki: University of the Arts Helsinki; 2017 (<http://cerada.uniarts.fi/en/observatory>).
189. Renton A, Phillips G, Daykin N, Yu G, Taylor K, Petticrew M. Think of your art-eries: arts participation, behavioural cardiovascular risk factors and mental well-being in deprived communities in London. *Public Health.* 2012;126(suppl 1):S57–64. doi: [10.1016/j.puhe.2012.05.025](https://doi.org/10.1016/j.puhe.2012.05.025).
190. Jones M, Kimberlee R, Deave T, Evans S. The role of community centre-based arts, leisure and social activities in promoting adult well-being and healthy lifestyles. *Int J Environ Res Public Health.* 2013;10(5):1948–62. doi: [10.3390/ijer-ph10051948](https://doi.org/10.3390/ijer-ph10051948).
191. Løkken BI, Rangul V, Merom D, Ekholm O, Krokstad S, Sund ER. are playing instruments, singing or participating in theatre good for population health? Associations with self-rated health and all-cause mortality in the HUNT3 study (2006–2008), Norway. In: Bonde LO, Theorell T, editors. *Music and public health: a Nordic perspective [e-book]*. Cham: Springer; 2018:33–54. doi: https://doi.org/10.1007/978-3-319-76240-1_3.

192. Hansen E, Sund E, Skjei Knudtsen M, Krokstad S, Holmen TL. Cultural activity participation and associations with self-perceived health, life-satisfaction and mental health: the young hunt study, norway. *BMC Public Health*. 2015;15(1):544. doi: 10.1186/s12889-015-1873-4.
193. Bush R, Capra S, Box S, McCallum D, Khalil S, Ostini R. An integrated theatre production for school nutrition promotion program. *Children (Basel)*. 2018;5(3):35. doi: 10.3390/children5030035.
194. Mora M, Penelo E, Gutiérrez T, Espinoza P, González ML, Raich RM. Assessment of two school-based programs to prevent universal eating disorders: media literacy and theatre-based methodology in Spanish adolescent boys and girls. *ScientificWorldJournal*. 2015;2015:328753. doi: 10.1155/2015/328753.
195. Demir Acar M, Bayat M. The effect of diet-exercise trainings provided to overweight and obese teenagers through creative drama on their knowledge, attitude, and behaviors. *Child Obes*. 2018;15(2):93–104. doi: 10.1089/chi.2018.0046.
196. Staiano AE, Marker AM, Beyl RA, Hsia DS, Katzmarzyk PT, Newton RL. A randomized controlled trial of dance exergaming for exercise training in overweight and obese adolescent girls. *Pediatr Obes*. 2017;12(2):120–8. doi: 10.1111/ijpo.12117.
197. Murrock CJ, Higgins PA, Killion C. Dance and peer support to improve diabetes outcomes in African American women. *Diabetes Educ*. 2009;35(6):995–1003. doi: 10.1177/0145721709343322.
198. Hutchinson JC, Karageorghis CI, Black JD. The Diabeates Project: perceptual, affective and psychophysiological effects of music and music-video in a clinical exercise setting. *Can J Diabetes*. 2017;41(1):90–6. doi: 10.1016/j.jcjd.2016.07.009.
199. Cuypers K, De Ridder K, Kvaløy K, Knudtsen MS, Krokstad S, Holmen J et al. Leisure time activities in adolescence in the presence of susceptibility genes for obesity: risk or resilience against overweight in adulthood? The HUNT study. *BMC Public Health*. 2012;12:820. doi: <https://doi.org/10.1186/1471-2458-12-820>.
200. Kouvonen A, Swift JA, Stafford M, Cox T, Vahtera J, Väänänen A et al. Social participation and maintaining recommended waist circumference: prospective evidence from the English Longitudinal Study of Aging. *J Aging Health*. 2012;24(2):250–68. doi: 10.1177/0898264311421960.
201. Lajunen H-R, Keski-Rahkonen A, Pulkkinen L, Rose RJ, Rissanen A, Kaprio J. Leisure activity patterns and their associations with overweight: a prospective study among adolescents. *J Adolesc*. 2009;32(5):1089–103. doi: 10.1016/j.adolescence.2009.03.006.
202. Muller-Pinget S, Carrard I, Ybarra J, Golay A. Dance therapy improves self-body image among obese patients. *Patient Educ Couns*. 2012;89(3):525–8. doi: 10.1016/j.pec.2012.07.008.
203. Wagener TL, Fedele DA, Mignogna MR, Hester CN, Gillaspay SR. Psychological effects of dance-based group exergaming in obese adolescents. *Pediatr Obes*. 2012;7(5):e68–74. doi: 10.1111/j.2047-6310.2012.00065.x.
204. Karageorghis CI, Priest D-L. Music in the exercise domain: a review and synthesis (Part I). *Int Rev Sport Exerc Psychol*. 2012;5(1):44–66. doi: 10.1080/1750984X.2011.631026.
205. Burkard RF, Eggermont JJ, Don M. Auditory evoked potentials: basic principles and clinical application. London: Lip-pincott Williams & Wilkins; 2007.
206. Schneider S, Askew CD, Abel T, Strüder HK. Exercise, music, and the brain: is there a central pattern generator? *J Sports Sci*. 2010;28(12):1337–43. doi: 10.1080/02640414.2010.507252.
207. Giovannelli F, Innocenti I, Rossi S, Borgheresi A, Ragazzoni A, Zaccara G et al. Role of the dorsal premotor cortex in rhythmic auditory-motor entrainment: a perturbational approach by rTMS. *Cereb Cortex*. 2012;24(4):1009–16. doi: 10.1093/cercor/bhs386.
208. Gomez P, Danuser B. Affective and physiological responses to environmental noises and music. *Int J Psychophysiol*. 2004;53(2):91–103. doi: 10.1016/j.ijpsycho.2004.02.002.
209. Gerra G, Zaimovic A, Franchini D, Palladino M, Giucastro G, Reali N. Neuroendocrine responses of healthy volunteers to “techno-music”: relationships with personality traits and emotional state. *Int J Psychophysiol*. 1998;28(1):99–111. doi: 10.1016/s0167- 8760(97)00071-8.
210. Hirokawa E, Ohira H. The effects of music listening after a stressful task on immune functions, neuroendocrine responses, and emotional states in college students. *J Music Ther*. 2003;40(3):189–211. PMID: 14567734.
211. Priest DL, Karageorghis CI, Sharp NCC. The characteristics and effects of motivational music in exercise settings: the possible influence of gender, age, frequency of attendance, and time of attendance. *J Sports Med Phys Fitness*. 2004;44(1):77–86. PMID: 15181394.
212. Potteiger JA, Schroeder JM, Goff KL. Influence of music on ratings of perceived exertion during 20 minutes of moderate intensity exercise. *Percept Mot Skills*. 2000;91(3 Pt 1):848–54. doi: 10.2466/pms.2000.91.3.848.

213. Fong Yan A, Cobley S, Chan C, Pappas E, Nicholson LL, Ward RE et al. The effectiveness of dance interventions on physical health outcomes compared to other forms of physical activity: a systematic review and meta-analysis. *Sports Med*. 2018;48(4):933–51. doi: 10.1007/s40279-017-0853-5.
214. Leelarungrayub D, Saidee K, Pothongsunun P, Pratanaphon S, YanKai A, Bloomer RJ. Six weeks of aerobic dance exercise improves blood oxidative stress status and increases interleukin-2 in previously sedentary women. *J Bodyw Mov Ther*. 2011;15(3):355–62. doi: 10.1155/2017/9569513.
215. Stillman CM, Donahue PT, Williams MF, Callas M, Lwanga C, Brown C et al. Weight-loss outcomes from a pilot study of African dance in older African Americans. *Obesity (Silver Spring)*. 2018;26(12):1893–97. doi: 10.1002/oby.22331.
216. Starkey F, Orme J. Evaluation of a primary school drug drama project: methodological issues and key findings. *Health Ed Res*. 2001;16(5):609–22. doi: 10.1093/her/16.5.609.
217. Huang S-F, Zheng W-L, Liao J-Y, Huang C-M, Lin T-Y, Guo J-L. The effectiveness of a theory-based drama intervention in preventing illegal drug use among students aged 14–15 years in Taiwan. *Health Educ J*. 2018;77(4):470–81. doi: 10.1177/0017896918768647.
218. Nyamathi A, Slagle A, Thomas A, Hudson A, Khalilifard F, Avila G et al. Art messaging to engage homeless young adults. *Prog Community Health Partnersh*. 2011;5(1):9–18. doi: 10.1353/cpr.2011.0012.
219. Quek LH, White A, Low C, Brown J, Dalton N, Dow D et al. Good choices, great future: an applied theatre prevention program to reduce alcohol-related risky behaviours during Schoolies. *Drug Alcohol Rev*. 2012;31(7):897–902. doi: 10.1111/j.1465-3362.2012.00453.x.
220. Nelson A, Arthur B. Storytelling for empowerment: decreasing at-risk youth's alcohol and marijuana use. *J Prim Prev*. 2003;24(2):169–80. doi: 10.1023/A:1025944412465.
221. Silverman MJ. Effects of group-based educational songwriting on craving in patients on a detoxification unit: a cluster-randomized effectiveness study. *Psychol Music*. 2017;47(2):241–54. doi: 10.1177/0305735617743103.
222. Stephens-Hernandez AB, Livingston JN, Dacons-Brock K, Craft HL, Cameron A, Franklin SO et al. Drama-based education to motivate participation in substance abuse prevention. *Subst Abuse Treat Prev Policy*. 2007;2(1):11. doi: 10.1186/1747-597X-2-11.
223. Mitschke DB, Loebl K, Tatafu E Jr, Matsunaga DS, Cassel K. Using drama to prevent teen smoking: development, implementation, and evaluation of crossroads in Hawai'i. *Health Promot Pract*. 2008;11(2):244–8. doi: 10.1177/1524839907309869.
224. Pentz MA, Hieftje KD, Pendergrass TM, Brito SA, Liu M, Arora T et al. A videogame intervention for tobacco product use prevention in adolescents. *Addict Behav*. 2019;91:188–92. doi: 10.1016/j.addbeh.2018.11.016.
225. Bottorf JL, Sarbit G, Oliffe JL, Kelly MT, Lohan M, Stolp S et al. "If I were Nick": men's responses to an interactive video drama series to support smoking cessation. *J Med Internet Res*. 2015;17(8):e190. doi: 10.2196/jmir.4491.
226. Davies C, Knuiman M, Pikora T, Rosenberg M. Health in arts: are arts settings better than sports settings for promoting anti-smoking messages? *Perspect Public Health*. 2015;135(3):145–51. doi: 10.1177/1757913913502475.
227. Rosenberg M, Ferguson R. Maintaining relevance: an evaluation of health message sponsorship at Australian community sport and arts events. *BMC Public Health*. 2014;14(1):1242. doi: 10.1186/1471-2458-14-1242.
228. Orozco-Olvera V, Shen F, Cluver L. The effectiveness of using entertainment education narratives to promote safer sexual behaviors of youth: a meta-analysis, 1985–2017. *PLOS One*. 2019;14(2):e0209969. doi: 10.1371/journal.pone.0209969.
229. Fiellin LE, Hieftje KD, Pendergrass TM, Kyriakides TC, Duncan LR, Dziura JD. Video game intervention for sexual risk reduction in minority adolescents: randomized controlled trial. *J Med Internet Res*. 2017;19(9):e314. doi: 10.2196/jmir.8148.
230. Sonke J, Pesata V, Nakazibwe V, Ssenyonjo J, Lloyd R, Espino D et al. The arts and health communication in Uganda: a light under the table. *Health Commun*. 2018;33(4):401–8. doi: 10.1080/10410236.2016.1266743.
231. Ruthven JS. Making it personal: ideology, the arts, and shifting registers in health promotion. *AIDS Care*. 2016;28(suppl 4):72–82. doi: 10.1080/09540121.2016.1195485.
232. McConnell BB. Music and health communication in The Gambia: a social capital approach. *Soc Sci Med*. 1982;169:132–40. doi: 10.1016/j.socscimed.2016.09.028.
233. Perrier MJ, Martin Ginis KA. Changing health-promoting behaviours through narrative interventions: a systematic review. *J Health Psychol*. 2018;23(11):1499–517. doi: 10.1177/1359105316656243.
234. Shen F, Han J. Effectiveness of entertainment education in communicating health information: a systematic review. *Asian J Commun*. 2014;24(6):605–16. doi: 10.1080/01292986.2014.927895.
235. Racicot-Matta C, Wilcke M, Egeland GM. Development of radio dramas for health communication pilot intervention in Canadian Inuit communities. *Health Promot Int*. 2016;31(1):175–86. doi: 10.1093/heapro/dau024.

236. Stephens T, Braithwaite RL, Taylor SE. Model for using hip-hop music for small group HIV/AIDS prevention counseling with African American adolescents and young adults. *Patient Educ Couns.* 1998;35(2):127–37. doi: 10.1016/s0738-3991(98)00050-0.
237. Lemieux AF, Fisher JD, Pratto F. A music-based HIV prevention intervention for urban adolescents. *Health Psychol.* 2008;27(3):349–57. doi: 10.1037/0278-6133.27.3.349.
238. Ofotokun I, Binongo JN, Rosenberg ES, Kane M, Iland R, Lennox JL et al. Culturally- adapted and audio-technology assisted HIV/AIDS awareness and education program in rural Nigeria: a cohort study. *BMC Int Health Hum Rights.* 2010;10(1):2. doi: 10.1186/1472-698X-10-2.
239. Roberts M, Lobo R, Sorenson A. Evaluating the Sharing Stories youth theatre program: an interactive theatre and drama-based strategy for sexual health promotion among multicultural youth. *Health Promot J Aust.* 2017;28(1):30–6. doi: 10.1071/HE15096.
240. Jones R, Hoover DR, Lacroix LJ. A randomized controlled trial of soap opera videos streamed to smartphones to reduce risk of sexually transmitted human immunodeficiency virus (HIV) in young urban African American women. *Nurs Outlook.* 2013;61(4):205–15. e3. doi: 10.1016/j.outlook.2013.03.006.
241. Frishkopf M, Hamze H, Alhassan M, Zukpeni IA, Abu S, Zakus D. Performing arts as a social technology for community health promotion in northern Ghana. 2016;4(1):22–36. doi: 10.15212/FMCH.2016.0105.
242. Sonke J, Pesata V. The arts and health messaging: exploring the evidence and lessons from the 2014 Ebola outbreak. *BMJ Outcomes.* 2015;1:36–41.
243. Shelby A, Ernst K. Story and science: how providers and parents can utilize storytelling to combat anti-vaccine misinformation. *Hum Vaccin Immunother.* 2013;9(8):1795–801. doi: 10.4161/hv.24828.
244. Soleymani MR, Hemmati S, Ashrafi-Rizi H, Shahrzadiemani L. Comparison of the effects of storytelling and creative drama methods on children’s awareness about personal hygiene. *J Educ Health Promot.* 2017;6:82. doi: 10.4103/jehp.jehp_56_16.
245. Minc A, Butler T, Gahan G. The Jailbreak Health Project: incorporating a unique radio programme for prisoners. *Int J Drug Policy.* 2007;18(5):444–6. doi: 10.1016/j.drugpo.2007.04.003.
246. Pélicand J, Gagnayre R, Sandrin-Berthon B, Aujoulat I. A therapeutic education programme for diabetic children: recreational, creative methods, and use of puppets. *Patient Educ Couns.* 2006;60(2):152–63. doi: 10.1016/j.pec.2004.12.007.
247. Flax VL, Negerie M, Ibrahim AU, Leatherman S, Daza EJ, Bentley ME. Integrating group counseling, cell phone messaging, and participant-generated songs and dramas into a microcredit program increases Nigerian women’s adherence to international breastfeeding recommendations. *J Nutr.* 2014;144(7):1120–4. doi: 10.3945/jn.113.190124.
248. Johnson G. The youth group plays health songs: “You are the one who is responsible for your life”. *Integration.* 1990;(24):41–3. PMID: 12316431.
249. Coleman PL. Music carries a message to youths. *Dev Commun Rep.* 1986;(53):1–3. PMID: 12314302.
250. Rosas-Blum ED, Granados HM, Mills BW, Leiner M. Comics as a medium for parent health education: improving understanding of normal 9-month-old developmental milestones. *Front Pediatr.* 2018;6:203. doi: 10.3389/fped.2018.00203.
251. Baird K, Salmon D. An enquiry of “Every3days” a drama-based workshop developing professional collaboration for women experiencing domestic violence during pregnancy in the south east of England. *Midwifery.* 2012;28(6):e886–93. doi: 10.1016/j.midw.2011.10.011.
252. McKay FH, McKenzie H. Using art for health promotion: evaluating an in-school program through student perspectives. *Health Promot Pract.* 2018;19(4):522–30. doi: 10.1177/1524839917735076.
253. Gesser-Edelsburg A, Fridman T, Lev-Wiesel R. Edutainment as a strategy for parental discussion with Israeli children: the potential of a children’s play in preventing sexual abuse. *J Child Sex Abus.* 2017;26(5):553–72. doi: 10.1080/10538712.2017.1319003.
254. Cockrill K, Biggs A. Can stories reduce abortion stigma? Findings from a longitudinal cohort study. *Cult Health Sex.* 2018;20(3):335–50. doi: 10.1080/13691058.2017.1346202.
255. Williams O, Leighton-Herrmann E, DeSorbo A, Eimicke J, Abel-Bey A, Valdez L et al. Effect of two 12-minute culturally targeted films on intent to call 911 for stroke. *Neurology.* 2016;86(21):1992–5. doi: 10.1212/WNL.0000000000002703.
256. Ross, A, Reavley N, Too L, Pirkis J. Evaluation of a novel approach to preventing railway suicides: the community stations project. *J Pub Ment Health.* 2018;17(2):51–60. doi: 10.1108/JPMH-06-2017-0022.
257. Friedman DB, Adams SA, Brandt HM, Heiney SP, Hébert JR, Ureda JR et al. Rise up, get tested, and live: an arts-based colorectal cancer educational program in a faith- based setting. *J Canc Educ.* 2018;34:550–5. doi: 10.1007/s13187-018-1340-x.

258. Bastien S. Reflecting and shaping the discourse: the role of music in AIDS communication in Tanzania. *Soc Sci Med*. 2009;68(7):1357–60. doi: 10.1016/j.socscimed.2009.01.030.
259. Rice G, Ingram J, Mizan J. Enhancing a primary care environment: a case study of effects on patients and staff in a single general practice. *Br J Gen Pract*. 2008;58(552):465–70. doi: 10.3399/bjgp08X319422.
260. Ainscough SL, Windsor L, Tahmassebi JF. A review of the effect of music on dental anxiety in children. *Eur Arch Paediatr Dent*. 2019;20(1):23–6. doi: <https://doi.org/10.1007/s40368-018-0380-6>.
261. Goff LC, Pratt RR, Madrigal JR. Music listening and S IgA levels in patients undergoing a dental procedure. *Int J Arts Med*. 1997;5(2):22–6. doi: <https://openmusiclibrary.org/article/181964/>.
262. Eitner S, Sokol B, Wichmann M, Bauer J, Engels D. Clinical use of a novel audio pillow with recorded hypnotherapy instructions and music for anxiolysis during dental implant surgery: a prospective study. *Int J Clin Exp Hypn*. 2011;59(2):180–97. doi: 10.1080/00207144.2011.546196.
263. Hoffman HG, Garcia-Palacios A, Patterson DR, Jensen M, Furness T 3rd, Ammons WF Jr. The effectiveness of virtual reality for dental pain control: a case study. *Cyberpsychol Behav*. 2001;4(4):527–35. doi: 10.1089/109493101750527088.
264. Ram D, Shapira J, Holan G, Magora F, Cohen S, Davidovich E. Audiovisual video eyeglass distraction during dental treatment in children. *Quintessence Int*. 2010;41(8):673–9. PMID: 20657857.
265. Kiran SDP, Vithalani A, Sharma DJ, Patel MC, Bhatt R, Srivastava M. Evaluation of the efficacy of play therapy among children undergoing dental procedure through drawings assessed by graphological method: a clinical study. *Int J Clin Pediatr Dent*. 2018;11(5):412–16. doi: 10.5005/jp-journals-10005-1549.
266. Shetty V, Hegde AM, Varghese E, Shetty V. A novel music based tooth brushing system for blind children. *J Clin Pediatr Dent*. 2013;37(3):251–6. PMID: 23855168.
267. Fujiwara D, Lawton RN, Mourato S. The health and wellbeing benefits of public libraries. Manchester: Arts Council England; 201 [https://www.artscouncil.org.uk/sites/default/files/download-file/The%20health%20and%20wellbeing%20benefits%20of%20public%20libraries.pdf].
268. Bolitho J. Reading into wellbeing: bibliotherapy, libraries, health and social connection. *Aust Public Libraries Inform Serv*. 2011;24(2):89.
269. Whiteman ED, Dupuis R, Morgan A, D'Alonzo B, Epstein C, Klusaritz H et al. Public libraries as partners for health. *Health Prev Chronic Dis*. 2018;15:E64. doi: 10.5888/pcd15.170392.
270. Jersky M, Titmuss A, Haswell M, Freeman N, Osborne P, Callaghan L. Improving health service access and wellbeing of young Aboriginal parents in an urban setting: mixed methods evaluation of an arts-based program. *Aust N Z J Public Health*. 2016;40(suppl 1):S115–21. doi: 10.1111/1753-6405.12448.
271. Nguyen HL, Allison JJ, Ha DA, Chiriboga G, Ly HN, Tran HT et al. Culturally adaptive storytelling intervention versus didactic intervention to improve hypertension control in Vietnam: a cluster-randomized controlled feasibility trial. *Pilot Feasibility Stud*. 2017;3(1):22. doi: 10.1186/s40814-017-0136-9.
272. Rodgers-Melnick SN, Pell TJG, Lane D, Jenerette C, Fu P, Margevicius S et al. The effects of music therapy on transition outcomes in adolescents and young adults with sickle cell disease. *Int J Adolesc Med Health*. 2017;31(3):pii:/ijamh.2019.31.issue-3/ijamh-2017-0004/ijamh-2017-0004.xml. doi: 10.1515/ijamh-2017-0004.
273. Holstad MM, Ofotokun I, Higgins M, Logwood S. The LIVE network: a music-based messaging program to promote art adherence self-management. *AIDS Behav*. 2013;17(9):2954–62. doi: 10.1007/s10461-013-0581-2.
274. Holstad MM, Baumann M, Ofotokun I, Logwood SJ. Focus group evaluation of the LIVE network: an audio music program to promote ART adherence self-management. *Music Med*. 2012;4(2):74–81. doi: 10.1177/1943862111433875.
275. Cole SW, Yoo DJ, Knutson B. Interactivity and reward-related neural activation during a serious videogame. *PLoS One*. 2012;7(3):e33909. doi: 10.1371/journal.pone.0033909.
276. Campos L, Dias P, Duarte A, Veiga E, Dias CC, Palha F. Is it possible to “find space for mental health” in young people? Effectiveness of a school-based mental health literacy promotion program. *Int J Environ Res Public Health*. 2018;15(7):1426. doi: 10.3390/ijerph15071426.
277. Twardzicki M. Challenging stigma around mental illness and promoting social inclusion using the performing arts. *J R Soc Promot Health*. 2008;128(2):68–72. PMID: 18402176.
278. Quinn N, Shulman A, Knifton L, Byrne P. The impact of a national mental health arts and film festival on stigma and recovery. *Acta Psychiatr Scand*. 2011;123(1):71–81. doi: 10.1111/j.1600-0447.2010.01573.x.
279. Koh E, Shrimpton B. Art promoting mental health literacy and a positive attitude towards people with experience of mental illness. *Int J Soc Psychiatry*. 2014;60(2):169–74. doi: 10.1177/0020764013476655.

280. Chung B, Jones L, Jones A, Corbett CE, Booker T, Wells KB et al. Using community arts events to enhance collective efficacy and community engagement to address depression in an African American community. *Am J Public Health*. 2009;99(2):237–44. doi: 10.2105/AJPH.2008.141408.
281. Michalak EE, Livingston JD, Maxwell V, Hole R, Hawke LD, Parikh SV. Using theatre to address mental illness stigma: a knowledge translation study in bipolar disorder. *Int J Bipolar Disord*. 2014;2:1. doi: 10.1186/2194-7511-2-1.
282. Harris MW, Barnett T, Bridgman H. Rural Art Roadshow: a travelling art exhibition to promote mental health in rural and remote communities. *Arts Health*. 2018;10(1):57–64. doi: 10.1080/17533015.2016.1262880.
283. Silverman MJ. Effects of music therapy on self- and experienced stigma in patients on an acute care psychiatric unit: a randomized three group effectiveness study. *Arch Psychiatr Nurs*. 2013;27(5):223–30. doi: 10.1016/j.apnu.2013.06.003.
284. Atanasova D, Kotevko N, Brown B, Crawford P. Representations of mental health and arts participation in the national and local british press, 2007-2015. *Health (London)*. 1997;23(1):3–20. doi: 10.1177/1363459317708823.
285. Roberts L, Berrisford G, Heron J, Jones L, Jones I, Dolman C et al. Qualitative exploration of the effect of a television soap opera storyline on women with experience of postpartum psychosis. *BJPsych Open*. 2018;4(2):75–82. doi: 10.1192/bjo.2018.9.
286. Hankir A, Zaman R, Geers B, Rosie G, Breslin G, Barr L et al. The Wounded Healer film: a London College of Communication event to challenge mental health stigma through the power of motion picture. *Psychiatr Danub*. 2017;29(suppl 3):307–12. PMID: 28953783.
287. Kabel A, Teti M, Zhang N. The art of resilience: photo-stories of inspiration and strength among people with HIV/AIDS. *Vis Stud*. 2016;31(3):221–30. doi: 10.1080/1472586X.2016.1210991.
288. Teti M, Rolbiecki A, Zhang N, Hampton D, Binson D. Photo-stories of stigma among gay-identified men with HIV in small-town America: a qualitative exploration of voiced and visual accounts and intervention implications. *Arts Health*. 2016;8(1):50–64. doi: 10.1080/17533015.2014.971830.
289. Teti M, Schulhoff AM, Koegler E, Saffran L, Bauerband LA, Shaffer V. Exploring the use of photo-stories and fiction writing to address HIV stigma among health professions students. *Qual Health Res*. 2018;29(2):260–9. doi: 10.1177/1049732318790939.
290. Neema S, Atuyambe LM, Otolok-Tanga E, Twijukye C, Kambugu A, Thayer L et al. Using a clinic based creativity initiative to reduce HIV related stigma at the Infectious Diseases Institute, Mulago National Referral Hospital, Uganda. *Afr Health Sci*. 2012;12(2):231–9. doi: 10.4314/ahs.v12i2.24.
291. Burns NC, Watts A, Perales J, Montgomery RN, Morris JK, Mahnken JD et al. The impact of creative arts in Alzheimer's disease and dementia public health education. *J Alzheimers Dis*. 2018;63(2):457–63. doi: 10.3233/JAD-180092.
292. Harris PB, Caporella CA. Making a university community more dementia friendly through participation in an intergenerational choir. *Dementia (London)*. 2018;18(7–8):2556–75. doi: 10.1177/1471301217752209.
293. Bienvenu B, Hanna G. Arts participation: counterbalancing forces to the social stigma of a dementia diagnosis. *AMA J Ethics*. 2017;19(7):704–12. doi: 10.1001/journalofethics.2017.19.7.msoc2-1707.
294. Logie CH, Dias LV, Jenkinson J, Newman PA, MacKenzie RK, Mothopeng T et al. Exploring the potential of participatory theatre to reduce stigma and promote health equity for lesbian, gay, bisexual, and transgender (LGBT) people in Swaziland and Lesotho. *Health Educ Behav*. 2018;46(1):146–56. doi: 10.1177/1090198118760682.
295. Tarasoff LA, Epstein R, Green DC, Anderson S, Ross LE. Using interactive theatre to help fertility providers better understand sexual and gender minority patients. *Med Humanit*. 2014;40(2):135–41. doi: 10.1136/medhum-2014-010516.
296. Huebner DM, Rullo JE, Thoma BC, McGarrity L, Mackenzie J. Piloting Lead with Love: a film-based intervention to improve parents' responses to their lesbian, gay, and bisexual children. *J Prim Prev*. 2013;34(5):359–69. doi: 10.1007/s10935-013-0319-y.
297. Kelly BL, Doherty L. A historical overview of art and music-based activities in social work with groups: nondeliberative practice and engaging young people's strengths. *Soc Work Groups*. 2017;40(3):187–201. doi: 10.1080/01609513.2015.1091700.
298. Spiegel JB, Ortiz Choukroun B, Campaña A, Boydell KM, Breilh J, Yassi A. Social transformation, collective health and community-based arts: "Buen Vivir" and Ecuador's social circus programme. *Glob Public Health*. 2018;14(6–7):899–922. doi: 10.1080/17441692.2018.1504102.
299. Travis R, Rodwin AH, Allcorn A. Hip hop, empowerment, and clinical practice for homeless adults with severe mental illness. *Soc Work Groups*. 2019;42(2):83–100. doi: 10.1080/01609513.2018.1486776.
300. Mazza N. Words from the heart: poetry therapy and group work with the homeless. *J Poetry Ther*. 2007;20(4):203–9. doi: 10.1080/08893670701714647.
301. Powers JS, Heim D, Grant B, Rollins J. Music therapy to promote movement from isolation to community in homeless veterans. *Tenn Med*. 2012;105(1):38–9. PMID: 22359994.

302. Boggan CE, Grzanka PR, Bain CL. Perspectives on queer music therapy: a qualitative analysis of music therapists' reactions to radically inclusive practice. *J Music Ther.* 2018;54(4):375–404. doi: 10.1093/jmt/thx016.
303. Venkit VR, Godse AA, Godse AS. Exploring the potentials of group drumming as a group therapy for young female commercial sex workers in Mumbai, India. *Arts Health.* 2013;5(2):132–41. doi: 10.1080/17533015.2012.698629.
304. Levy CE, Spooner H, Baxley Lee J, Sonke J. Telehealth-based creative arts therapy: transforming mental health and rehabilitation care for rural veterans. *Arts Psychother.* 2018;57:20–6. doi: 10.1016/j.aip.2017.08.010.
305. Ketch RA, Rubin RT, Baker MR, Sones AC, Ames D. Art appreciation for veterans with severe mental illness in a va psychosocial rehabilitation and recovery center. *Arts Health.* 2015;7(2):172–81. doi: 10.1080/17533015.2015.1019700.
306. Liebowitz M, Tucker MS, Frontz M, Mulholland S. Participatory choral music as a means of engagement in a veterans' mental health and addiction treatment setting. *Arts Health.* 2015;7(2):137–50. doi: 10.1080/17533015.2014.999246.
307. Bowman J. "Wounded warriors": Royal Danish Ballet dancers train repatriated wounded soldiers in Pilates. *Arts Health.* 2015;7(2):161–71. doi: <https://doi.org/10.1080/17533015.2014.998245>.
308. Rollins J, King E. Promoting coping for children of hospitalized service members with combat injuries through creative arts engagement. *Arts Health.* 2015;7(2):109–22. doi: 10.1080/17533015.2015.1019707.
309. Coutinho BV, Hansen AL, Waage L, Hillecke TK, Koenig J. Music making interventions with adults in the forensic setting, a systematic review of the literature. Part I: group interventions. *Mus Med.* 2015;7(3):40–53. doi: 10.3389/fpsyg.2015.00230.
310. Coutinho BV, Hansen AL, Waage L, Hillecke TK, Koenig J. Music making interventions with adults in the forensic setting, a systematic review of the literature. Part II: case studies and good vibrations. *Mus Med.* 2015;7(4):50–71. doi: 10.1192/bjp.bp.110.083733.
311. Daykin N, de Viggiani N, Pilkington P, Moriarty Y. Music making for health, well-being and behaviour change in youth justice settings: a systematic review. *Health Promot Int.* 2012;28(2):197–210. doi: 10.1093/heapro/das005.
312. Rapp-Paglicci L, Stewart C, Rowe W. Improving outcomes for at-risk youth: findings from the Prodigy Cultural Arts Program. *J Evid Based Soc Work.* 2012;9(5):512–23. doi: 10.1080/15433714.2011.581532.
313. Bittman B, Dickson L, Coddington K. Creative musical expression as a catalyst for quality-of-life improvement in inner-city adolescents placed in a court-referred residential treatment program. *Adv Mind Body Med.* 2009;24(1):8–19. PMID: 20671333.
314. Cheliotis L, Jordanoska A. The arts of desistance: assessing the role of arts-based programmes in reducing reoffending. *Howard J Crime Justice.* 2016;55(1–2):25–41. doi: 10.1111/hojo.12154.
315. Chen X-J, Hannibal N, Gold C. Randomized trial of group music therapy with Chinese prisoners: impact on anxiety, depression, and self-esteem. *Int J Offender Ther Comp Criminol.* 2015;60(9):1064–81. doi: 10.1177/0306624X15572795.
316. Godovanets OG, Tsvetkova NA. [Correction of the habits of a criminal via art therapy]. *Psychoped Law Enforc Agencies.* 2016;2(65):52–5 (in Russian).
317. Parker A, Marturano N, Lewis G, Meek R. Marginalised youth, criminal justice and performing arts: young people's experiences of music-making. *J Youth Stud.* 2018;21(8):1061–76. doi: 10.1080/13676261.2018.1445205.
318. Coulton S, Clift S, Skingley A, Rodriguez J. Effectiveness and cost-effectiveness of community singing on mental health-related quality of life of older people: randomised controlled trial. *Br J Psychiatry.* 2015;207(3):250–5. doi: 10.1192/bjp.bp.113.129908.
319. Cohen GD, Perlstein S, Chapline J, Kelly J, Firth KM, Simmens S. The impact of professionally conducted cultural programs on the physical health, mental health, and social functioning of older adults. *Gerontologist.* 2006;46(6):726–34. doi: 10.1093/geront/46.6.726.
320. Grossi E, Tavano Blessi G, Sacco PL. Magic moments: determinants of stress relief and subjective wellbeing from visiting a cultural heritage site. *Cult Med Psychiatry.* 2019;43(1):4–24. doi: 10.1007/s11013-018-9593-8.
321. Ascenso S, Perkins R, Atkins L, Fancourt D, Williamon A. Promoting well-being through group drumming with mental health service users and their carers. *Int J Qual Stud Health Well-being.* 2018;13(1):1484219. doi: 10.1080/17482631.2018.1484219.
322. Daykin N, Mansfield L, Meads C, Julier G, Tomlinson A, Payne A et al. What works for wellbeing? a systematic review of wellbeing outcomes for music and singing in adults. *Perspect Public Health.* 2017;138(1):39–46. doi: 10.1177/1757913917740391.
323. Mansfield L, Kay T, Meads C, Grigsby-Duffy L, Lane J, John A et al. Sport and dance interventions for healthy young people (15–24 years) to promote subjective well-being: a systematic review. *BMJ Open.* 2018;8(7):e020959. doi: 10.1136/bmjopen-2017-020959.
324. Wiseman R, Watt C. Achieving the impossible: a review of magic-based interventions and their effects on wellbeing. *PeerJ.* 2018;6:e6081. doi: 10.7717/peerj.6081.

325. Kaimal G, Gonzaga AML, Schwachter V. Crafting, health and wellbeing: findings from the survey of public participation in the arts and considerations for art therapists. *Arts Health*. 2017;9(1):81–90. doi: 10.1080/17533015.2016.1185447.
326. Social prescribing [website]. Leeds: NHS England; 2019 (<https://www.england.nhs.uk/personalisedcare/social-prescribing/>).
327. Thomson LJ, Lockyer B, Camic PM, Chatterjee HJ. Effects of a museum-based social prescription intervention on quantitative measures of psychological wellbeing in older adults. *Perspect Public Health*. 2017;138(1):28–38. doi: 10.1177/1757913917737563.
328. Poulos RG, Marwood S, Harkin D, Opher S, Clift S, Cole AMD et al. Arts on prescription for community-dwelling older people with a range of health and wellness needs. *Health Soc Care Community*. 2019;27(2):483–92. doi: 10.1111/hsc.12669.
329. Drinkwater C, Wildman J, Moffatt S. Social prescribing. *BMJ*. 2019;364:l1285. doi: 10.1136/bmj.l1285.
330. Polley MJ, Pilkington K. A review of the evidence assessing impact of social prescribing on healthcare demand and cost implications. London: University of Westminster; 2017.
331. Social Prescribing Network [website]. London: University of Westminster; 2018 (<https://www.socialprescribingnetwork.com/>).
332. Hallam S, Creech A. Can active music making promote health and well-being in older citizens? Findings of the music for life project. *London J Prim Care*. 2016;8(2):43606. doi: 10.1080/17571472.2016.1152099.
333. Zarobe L, Bungay H. The role of arts activities in developing resilience and mental wellbeing in children and young people a rapid review of the literature. *Perspect Public Health*. 2017;137(6):337–47. doi: 10.1016/j.ctim.2016.03.017.
334. Papinczak ZE, Dingle GA, Stoyanov SR, Zelenko O. Young people's uses of music for well-being. *J Youth Stud*. 2015;18(9):1119–34. doi: 10.1080/13676261.2015.1020935.
335. Fancourt D, Steptoe A. Community group membership and multidimensional subjective well-being in older age. *J Epidemiol Community Health*. 2018;72(5):376–82. doi: 10.1136/jech-2017-210260.
336. Węziak-Białowolska D, Białowolski P. Cultural events: does attendance improve health? Evidence from a Polish longitudinal study. *BMC Public Health*. 2016;16(1):730. doi: 10.1186/s12889-016-3433-y.
337. Cuypers K, Krokstad S, Holmen TL, Skjei Knudtsen M, Bygren LO, Holmen J. Patterns of receptive and creative cultural activities and their association with perceived health, anxiety, depression and satisfaction with life among adults: the hunt study, Norway. *J Epidemiol Community Health*. 2011;66(8):698–703. doi: 10.1136/jech.2010.113571.
338. Muro A, Artero N. Dance practice and well-being correlates in young women. *Women Health*. 2017;57(10):1193–203. doi: 10.1080/03630242.2016.1243607.
339. Nikolaeva VV, Baikenova AE. [Application of art-therapy in development of emotional sphere of the older pre-schoolers]. *Actual Issues Modern Sci Soc*. 2015 (in Russian).
340. Tuisku K, Pulkki-Råback L, Virtanen M. Cultural events provided by employer and occupational wellbeing of employees: a cross-sectional study among hospital nurses. *Work*. 2016;55(1):93–100. doi: 10.3233/WOR-162389.
341. Martin L, Oepen R, Bauer K, Nottensteiner A, Mergheim K, Gruber H et al. Creative arts interventions for stress management and prevention – a systematic review. *Behav Sci (Basel)*. 2018;8(2):pii:E28. doi: 10.3390/bs8020028.
342. Linnemann A, Wenzel M, Grammes J, Kubiak T, Nater UM. Music listening and stress in daily life: a matter of timing. *Int J Behav Med*. 2018;25(2):223–30. doi: 10.1007/s12529-017-9697-5.
343. Linnemann A, Strahler J, Nater UM. The stress-reducing effect of music listening varies depending on the social context. *Psychoneuroendocrinology*. 2016;72:97–105. doi: 10.1016/j.psyneuen.2016.06.003.
344. Panteleeva Y, Ceschi G, Glowinski D, Courvoisier DS, Grandjean DM. Music for anxiety? Meta-analysis of anxiety reduction in non-clinical samples. *Psychol Music*. 2017;46(4):473–87. doi: 10.1177/0305735617712424.
345. Fancourt D, Tymoszuk U. Cultural engagement and incident depression in older adults: evidence from the English Longitudinal Study of Ageing. *Br J Psychiatry*. 2018;214(4):225–9. doi: 10.1192/bjp.2018.267.
346. Grogan S, Williams A, Kilgariff S, Bunce J, Heyland JS, Padilla T. Dance and body image: young people's experiences of a dance movement psychotherapy session. *Qual Res Sport Exerc Health*. 2014;6(2):261–77. doi: 10.1080/2159676X.2013.796492.
347. Franklin M. Art therapy and self-esteem. *Art Ther*. 1992;9(2):78–84. doi: 10.1080/07421656.1992.10758941.
348. Stevens K, McGrath R, Ward E. Identifying the influence of leisure-based social circus on the health and well-being of young people in Australia. *Ann Leisure Res*. 2019;22(3):305–22. doi: 10.1080/11745398.2018.1537854.
349. McGrath R, Stevens K. Forecasting the social return on investment associated with children's participation in circus-arts training on their mental health and well-being. *Int J Soc Leisure*. 2019;2(1):163–93. doi: 10.1007/s41978-019-00036-0.

350. Culph JS, Wilson NJ, Cordier R, Stancliffe RJ. Men's sheds and the experience of depression in older Australian men. *Aust Occup Ther J*. 2015;62(5):306–15. doi: 10.1111/1440-1630.12190.
351. Milligan C, Neary D, Payne S, Hanratty B. Older men and social activity: a scoping review of Men's Sheds and other gendered interventions. *Aging & Society*. 2016;36(5):895–923. doi: 10.1017/S0144686X14001524.
352. Schroeder J, Sowden J, Watt J. Social return on investment: the Westhill and District Men's Shed Scotland. Westhill: Scottish Men's Sheds Association; 2015.
353. Scottish Men's Sheds Association [website]. Westhill: Scottish Men's Sheds Association; 2019 (<https://scottishmsa.org.uk/>).
354. Strong JV, Mast BT. The cognitive functioning of older adult instrumental musicians and non-musicians. *Neuropsychol Dev Cogn B Aging Neuropsychol Cogn*. 2018;26(3):367–86. doi: 10.1080/13825585.2018.1448356.
355. Stern Y. What is cognitive reserve? Theory and research application of the reserve concept. *J Int Neuropsychol Soc*. 2002;8(3):448–60. PMID: 11939702.
356. Gooding LF, Abner EL, Jicha GA, Kryscio RJ, Schmitt FA. Musical training and late-life cognition. *Am J Alzheimers Dis Other Demen*. 2014;29(4):333–43. doi: 10.1177/1533317513517048.
357. Schneider CE, Hunter EG, Bardach SH. Potential cognitive benefits from playing music among cognitively intact older adults: a scoping review. *J Appl Gerontol*. 2018 [Epub ahead of print]. doi: 10.1177/0733464817751198.
358. Moussard A, Bermudez P, Alain C, Tays W, Moreno S. Life-long music practice and executive control in older adults: an event-related potential study. *Brain Res*. 2016;1642:146–53. doi: 10.1016/j.brainres.2016.03.028.
359. Dawson WJ. Benefits of music training are widespread and lifelong: a bibliographic review of their non-musical effects. *Med Probl Perform Art*. 2014;29(2):57–63. doi: 10.21091/mppa.2014.2014.
360. Balbag MA, Pedersen NL, Gatz M. Playing a musical instrument as a protective factor against dementia and cognitive impairment: a population-based twin study. *Int J Alzheimer's Dis*. 2014;2014:836748. doi: 10.1155/2014/836748.
361. Kim SJ, Yoo GE. Instrument playing as a cognitive intervention task for older adults: a systematic review and meta-analysis. *Front Psychol*. 2019;10:151. doi: 10.3389/fpsyg.2019.00151.
362. Degé F, Kerkovius K. The effects of drumming on working memory in older adults. *Ann N Y Acad Sci*. 2018;1423(1):242–50. doi: 10.1111/nyas.13685.
363. Moreno-Gómez FN, Véliz G, Rojas M, Martínez C, Olmedo R, Panussis F et al. Music training and education slow the deterioration of music perception produced by presbycusis in the elderly. *Front Aging Neurosci*. 2017;9:149. doi: 10.3389/fnagi.2017.00149.
364. Porat S, Goukasian N, Hwang KS, Zanto T, Do T, Pierce J et al. Dance experience and associations with cortical gray matter thickness in the aging population. *Dement Geriatr Cogn Dis Extra*. 2016;6(3):508–17. doi: 10.1159/000449130.
365. Teixeira-Machado L, Arida RM, de Jesus Mari J. Dance for neuroplasticity: a descriptive systematic review. *Neurosci Biobehav Rev*. 2019;96:232–40. doi: 10.1016/j.neubiorev.2018.12.010.
366. Noice H, Noice T. An arts intervention for older adults living in subsidized retirement homes. *Neuropsychol Dev Cogn B Aging Neuropsychol Cogn*. 2008;16(1):56–79. doi: 10.1080/13825580802233400.
367. Noice H, Noice T, Staines G. A short-term intervention to enhance cognitive and affective functioning in older adults. *J Aging Health*. 2004;16(4):562–85. doi: 10.1177/0898264304265819.
368. Alain C, Moussard A, Singer J, Lee Y, Bidelman GM, Moreno S. Music and visual art training modulate brain activity in older adults. *Front Neurosci*. 2019;13:182. doi: 10.3389/fnins.2019.00182.
369. Fancourt D, Steptoe A, Cadar D. Cultural engagement and cognitive reserve: museum attendance and dementia incidence over a 10-year period. *Br J Psychiatry*. 2018;213(5):661–3. doi: 10.1192/bjp.2018.129.
370. Fancourt D, Steptoe A, Cadar D. Cultural engagement predicts changes in cognitive function in older adults over a 10 year period: findings from the English Longitudinal Study of Ageing. *Sci Rep*. 2018;8(1):10226. doi: 10.1192/bjp.2018.129.
371. Mahendran R, Gandhi M, Moorakonda RB, Wong J, Kanchi MM, Fam J et al. Art therapy is associated with sustained improvement in cognitive function in the elderly with mild neurocognitive disorder: findings from a pilot randomized controlled trial for art therapy and music reminiscence activity versus usual care. *Trials*. 2018;19(1):615. doi: 10.1186/s13063-018-2988-6.
372. Zhao J, Li H, Lin R, Wei Y, Yang A. Effects of creative expression therapy for older adults with mild cognitive impairment at risk of Alzheimer's disease: a randomized controlled clinical trial. *Clin Interv Aging*. 2018;13:1313–20. doi: 10.2147/CIA.S161861.

373. Lazarou I, Parastatidis T, Tsolaki A, Gkioka M, Karakostas A, Douka S et al. International ballroom dancing against neurodegeneration: a randomized controlled trial in Greek community-dwelling elders with mild cognitive impairment. *Am J Alzheimers Dis Other Dement*. 2017;32(8):489–99. doi: 10.1177/1533317517725813.
374. Marquez DX, Wilson R, Aguiñaga S, Vásquez P, Fogg L, Yang Z et al. Regular Latin dancing and health education may improve cognition of late middle-aged and older Latinos. *J Aging Phys Act*. 2017;25(3):482–9. doi: 10.1123/japa.2016-0049.
375. Merom D, Grunseit A, Eramudugolla R, Jefferis B, McNeill J, Anstey KJ. Cognitive benefits of social dancing and walking in old age: the dancing mind randomized controlled trial. *Front Aging Neurosci*. 2016;8:26. doi: 10.3389/fnagi.2016.00026.
376. Kirsch LP, Diersch N, Sumanapala DK, Cross ES. Dance training shapes action perception and its neural implementation within the young and older adult brain. *Neural Plasticity*. 2018;2018:5459106. doi: 10.1155/2018/5459106.
377. Federici A, Bellagamba S, Rocchi MBL. Does dance-based training improve balance in adult and young old subjects? A pilot randomized controlled trial. *Aging Clin Exp Res*. 2005;17(5):385–9. PMID: 16392413.
378. Alpert PT, Miller SK, Wallmann H, Havey R, Cross C, Chevalia T et al. The effect of modified jazz dance on balance, cognition, and mood in older adults. *J Am Acad Nurse Pract*. 2009;21(2):108–15. doi: 10.1111/j.1745-7599.2008.00392.x.
379. Jeon MY, Bark ES, Lee EG, Im JS, Jeong BS, Choe ES. [The effects of a Korean traditional dance movement program in elderly women]. *Taehan Kanho Hakhoe Chi*. 2005;35(7):1268–76 [in Korean]. PMID: 16418553.
380. Eyigor S, Karapolat H, Durmaz B, Ibisoglu U, Cakir S. A randomized controlled trial of Turkish folklore dance on the physical performance, balance, depression and quality of life in older women. *Arch Gerontol Geriatr*. 2009;48(1):84–8. doi: 10.1016/j.archger.2007.10.008.
381. Noopud P, Suputtitada A, Khongprasert S, Kanungsukkasem V. Effects of Thai traditional dance on balance performance in daily life among older women. *Aging Clin Exp Res*. 2018;31(7):961–7. doi: 10.1007/s40520-018-1040-8.
382. Trombetti A, Hars M, Herrmann FR, Kressig RW, Ferrari S, Rizzoli R. Effect of music-based multitask training on gait, balance, and fall risk in elderly people: a randomized controlled trial. *Arch Intern Med*. 2011;171(6):525–33. doi: 10.1001/archinternmed.2010.446.
383. Filar-Mierzwa K, Długosz M, Marchewka A, Dąbrowski Z, Poznańska A. The effect of dance therapy on the balance of women over 60 years of age: the influence of dance therapy for the elderly. *J Women Aging*. 2017;29(4):348–55. doi: 10.1080/08952841.2016.1194689.
384. Hackney ME, Hall CD, Echt KV, Wolf SL. Dancing for balance: feasibility and efficacy in oldest-old adults with visual impairment. *Nurs Res*. 2013;62(2):138–43. doi: 10.1097/NNR.0b013e318283f68e.
385. Liu J-Y, Xiang J-J, Wei X-L, Hu C-F, Wu C-L, Zhang M-Y et al. Effects of square dance on bone mineral density, estrogen and balance ability of postmenopausal women. Chongqing: China Sport Science and Technology; 2014 (http://en.cnki.com.cn/Article_en/CJFDTOTAL-ZGTY201402013.htm).
386. Matthews BL, Bennell KL, McKay HA, Khan KM, Baxter-Jones AD, Mirwald RL et al. Dancing for bone health: a 3-year longitudinal study of bone mineral accrual across puberty in female non-elite dancers and controls. *Osteoporos Int*. 2006;17(7):1043–54. doi: 10.1007/s00198-006-0093-2.
387. Kudlacek S, Pietschmann F, Bernecker P, Resch H, Willvonseder R. The impact of a senior dancing program on spinal and peripheral bone mass. *Am J Phys Med Rehabil*. 1997;76(6):477–81. doi: 10.1097/00002060-199711000-00009.
388. Ghai S, Ghai I, Effenberg AO. Effect of rhythmic auditory cueing on aging gait: a systematic review and meta-analysis. *Aging Dis*. 2018;9(5):901–23. doi: 10.14336/AD.2017.1031.
389. Coste A, Salesse RN, Gueugnon M, Marin L, Bardy BG. Standing or swaying to the beat: discrete auditory rhythms entrain stance and promote postural coordination stability. *Gait Posture*. 2018;59:28–34. doi: 10.1016/j.gaitpost.2017.09.023.
390. Ferrufino L, Bril B, Dietrich G, Nonaka T, Coubard OA. Practice of contemporary dance promotes stochastic postural control in aging. *Front Hum Neurosci*. 2011;5:169. doi: 10.3389/fnhum.2011.00169.
391. Cruz-Ferreira A, Marmeleira J, Formigo A, Gomes D, Fernandes J. Creative dance improves physical fitness and life satisfaction in older women. *Res Aging*. 2015;37(8):837–55. doi: 10.1177/0164027514568103.
392. Gallo HL, Rodrigues EV, Filho JM, da Silva JB, Harris-Love MO, Gomes ARS. Effects of virtual dance exercise on skeletal muscle architecture and function of community dwelling older women. *J Musculoskelet Neuronal Interact*. 2019;19(1):50–61. PMID: 30839303.
393. Veronese N, Maggi S, Schofield P, Stubbs B. Dance movement therapy and falls prevention. *Maturitas*. 2017;102:1–5. doi: 10.1016/j.maturitas.2017.05.004.
394. Thaut MH, Rice RR, Braun Janzen T, Hurt-Thaut CP, McIntosh GC. Rhythmic auditory stimulation for reduction of falls in Parkinson's disease: a randomized controlled study. *Clin Rehabil*. 2018;33(1):34–43. doi: 10.1177/0269215518788615.

395. Fernández-Argüelles EL, Rodríguez-Mansilla J, Antunez LE, Garrido-Ardila EM, Muñoz RP. Effects of dancing on the risk of falling related factors of healthy older adults: a systematic review. *Arch Gerontol Geriatr.* 2015;60(1):1–8. doi: 10.1016/j.archger.2014.10.003.
396. Merom D, Mathieu E, Cerin E, Morton RL, Simpson JM, Rissel C et al. Social dancing and incidence of falls in older adults: a cluster randomised controlled trial. *PLOS Med.* 2016;13(8):e1002112. doi: 10.1371/journal.pmed.1002112.
397. Britten L, Addington C, Astill S. Dancing in time: feasibility and acceptability of a contemporary dance programme to modify risk factors for falling in community dwelling older adults. *BMC Geriatr.* 2017;17(1):83. doi: 10.1186/s12877-017-0476-6.
398. Chabot J, Beauchet O, Fung S, Peretz I. Decreased risk of falls in patients attending music sessions on an acute geriatric ward: results from a retrospective cohort study. *BMC Complement Altern Med.* 2019;19(1):76. doi: 10.1186/s12906-019-2484-x.
399. Rogers N, Fancourt D. Cultural engagement is a risk-reducing factor for frailty incidence and progression in non-frail adults. *J Gerontol B Psychol Sci Soc Sci.* 2019;8. doi: 10.1093/geronb/gbz004.
400. Fancourt D, Steptoe A. Physical and psychosocial factors in the prevention of chronic pain in older age. *J Pain.* 2018;19(12):1385–91. doi: 10.1016/j.jpain.2018.06.001.
401. Hyyppä MT, Mäki J, Impivaara O, Aromaa A. Individual-level measures of social capital as predictors of all-cause and cardiovascular mortality: a population-based prospective study of men and women in Finland. *Eur J Epidemiol.* 2007;22(9):589–97. doi: 10.1007/s10654-007-9153-y.
402. Hyyppä MT, Mäki J, Impivaara O, Aromaa A. Leisure participation predicts survival: a population-based study in Finland. *Health Promot Int.* 2006;21(1):5–12. doi: 10.1093/heapro/dai027.
403. Lennartsson C, Silverstein M. Does engagement with life enhance survival of elderly people in Sweden? The role of social and leisure activities. *J Gerontol B Psychol Sci Soc Sci.* 2001;56(6):S335–42. doi: 10.1093/geronb/56.6.s335.
404. Sundquist K, Lindström M, Malmström M, Johansson SE, Sundquist J. Social participation and coronary heart disease: a follow-up study of 6900 women and men in Sweden. *Soc Sci Med.* 1982;58(3):615–22. doi: 10.1016/s0277-9536(03)00229-6.
405. Väänänen A, Murray M, Koskinen A, Vahtera J, Kouvonen A, Kivimäki M. Engagement in cultural activities and cause-specific mortality: prospective cohort study. *Prev Med.* 2009;49(2–3):142–7. doi: 10.1016/j.ypmed.2009.06.026.
406. Bygren LO, Konlaan BB, Johansson S-E. Attendance at cultural events, reading books or periodicals, and making music or singing in a choir as determinants for survival: Swedish interview survey of living conditions. *BMJ.* 1996;313(7072):1577–80. doi: 10.1136/bmj.313.7072.1577.
407. Konlaan BB, Bygren LO, Johansson S-E. Visiting the cinema, concerts, museums or art exhibitions as determinant of survival: a Swedish fourteen-year cohort follow-up. *Scand J Public Health.* 2000;28(3):174–8. doi: 10.1007/s11524-006-9051-8.
408. Merom D, Ding D, Stamatakis E. Dancing participation and cardiovascular disease mortality: a pooled analysis of 11 population-based british cohorts. *Am J Prev Med.* 2016;50(6):756–60. doi: 10.1016/j.amepre.2016.01.004.
409. Dunbar RIM. The social brain: mind, language, and society in evolutionary perspective. *Annu Rev Anthropol.* 2003;32:163–81. doi: 10.1146/annurev.anthro.32.061002.093158.
410. Mithen PS. *The singing Neanderthals: the origins of music, language, mind and body.* London: Weidenfeld & Nicolson; 2006.
411. Cole TR, Carlin NS, Carson RA. *Medical humanities: an introduction.* Cambridge: Cambridge University Press; 2014.
412. Crawford P, Brown B, Baker C, Tischler V, Abrams B. *Health humanities.* Basingstoke: Palgrave Macmillan; 2015.
413. Schachter SC. Epilepsy and art: windows into complexity and comorbidities. *Epilepsy Behav.* 2016;57(Pt B):265–9. doi: 10.1016/j.yebeh.2015.12.024.
414. Kaptein AA, Meulenber F, Smyth JM. A breath of fresh air: images of respiratory illness in novels, poems, films, music, and paintings. *J Health Psychol.* 2015;20(3):246–58. doi: 10.1177/1359105314566613.
415. Broadbent E, Schoones JW, Tiemensma J, Kaptein AA. A systematic review of patients' drawing of illness: implications for research using the common sense model. *Health Psychol Rev.* 2018:1–139 [Epub ahead of print]. doi: 10.1080/17437199.2018.1558088.
416. Lesen AE, Rogan A, Blum MJ. Science communication through art: objectives, challenges, and outcomes. *Trends Ecol Evol.* 2016;31(9):657–60. doi: 10.1016/j.tree.2016.06.004.

417. Greenhalgh T. Cultural contexts of health: the use of narrative research in the health sector. Copenhagen: WHO Regional Office for Europe; 2016 [Health Evidence Network (HEN) synthesis report 49; http://www.euro.who.int/__data/assets/pdf_file/0004/317623/HEN-synthesis-report-49.pdf?ua=1].
418. Acia A, McQueen SA, McKinnon V, Sonnadara RR. Using art for the development of teamwork and communication skills among health professionals: a literature review. *Arts Health*. 2017;9(1):60–72. doi: <https://doi.org/10.1080/17533015.2016.1182565>.
419. Martellucci J. Surgery and jazz: the art of improvisation in the evidence-based medicine era. *Ann Surg*. 2015;261(3):440–2. doi: 10.1097/SLA.0000000000000782.
420. Boyd T, Jung I, Van Sickle K, Schwesigner W, Michalek J, Bingener J. Music experience influences laparoscopic skills performance. *JLS*. 2008;12(3):292. PMID: 18765055.
421. Weldon SM, Korciakangas T, Bezemer J, Kneebone R. Music and communication in the operating theatre. *J Adv Nurs*. 2015;71(12):2763–74. doi: 10.1111/jan.12744.
422. Hafner JW, Jou AC, Wang H, Bleess BB, Tham SK. Death before disco: the effectiveness of a musical metronome in layperson cardiopulmonary resuscitation training. *J Emerg Med*. 2015;48(1):43–52. doi: 10.1016/j.jemermed.2014.07.048.
423. Roehr CC, Schmolzer BM, Lluch MT, Dawson JA, Dold SK, Schmalisch G et al. How ABBA may help improve neonatal resuscitation training: auditory prompts to enable coordination of manual inflations and chest compressions. *J Paediatr Child Health*. 2014;50(6):444–8. doi: 10.1111/jpc.12507.
424. Honan L, Shealy S, Fennie K, Duffy TC, Friedlaender L, Del Vecchio M. Looking is not seeing and listening is not hearing: a replication study with accelerated BSN students. *J Prof Nurs*. 2016;32(5S):S30–6. doi: 10.1016/j.profnurs.2016.05.002.
425. Dolev JC, Friedlaender LK, Braverman IM. Use of fine art to enhance visual diagnostic skills. *JAMA*. 2001;286(9):1020–1. doi: 10.1001/jama.286.9.1020.
426. Naghshineh S, Hafner JP, Miller AR, Blanco MA, Lipsitz SR, Dubroff RP. Formal art observation training improves medical students' visual diagnostic skills. *J Gen Intern Med*. 2008;23(7):991–7. doi: 10.1007/s11606-008-0667-0.
427. Macduff C, Wood FK, Hackett C, McGhee J, Loudon D, Macdonald A et al. Visualizing the invisible: applying an arts-based methodology to explore how healthcare workers and patient representatives envisage pathogens in the context of healthcare associated infections. *Arts Health*. 2014;6(2):117–31. doi: 10.1080/17533015.2013.808255.
428. Chaudhury H, Mahmood A, Valente M. The effect of environmental design on reducing nursing errors and increasing efficiency in acute care settings: a review and analysis of the literature. *Environ Behav*. 2009;41(6):755–86. doi: 10.1177/0013916508330392.
429. Case GA, Brauner DJ. Perspective: the doctor as performer: a proposal for change based on a performance studies paradigm. *Acad Med*. 2010;85(1):159–63. doi: 10.1097/ACM.0b013e3181c427eb.
430. Pino MC, Mazza M. The use of “literary fiction” to promote mentalizing ability. *PLOS One*. 2016;11(8):e0160254. doi: 10.1371/journal.pone.0160254.
431. Elder NC, Tobias B, Lucero-Criswell A, Goldenhar L. The art of observation: impact of a family medicine and art museum partnership on student education. *Fam Med*. 2006;38(6):393. PMID: 16741837.
432. Wikström BM. Health professionals' experience of paintings as a conversation instrument: a communication strategy at a nursing home in Sweden. *Appl Nurs Res*. 2003;16(3):184–8. PMID: 12931332.
433. Kearns C. Is drawing a valuable skill in surgical practice? 100 surgeons weigh in. *J Vis Commun Med*. 2019;42(1):4–14. doi: 10.1080/17453054.2018.1558996.
434. Shochet R, King J, Levine R, Clever S, Wright S. “Thinking on my feet”: an improvisation course to enhance students' confidence and responsiveness in the medical interview. *Educ Prim Care*. 2013;24(2):119–24. PMID: 23498579.
435. Haidet P. Jazz and the “art” of medicine: improvisation in the medical encounter. *Ann Fam Med*. 2007;5(2):164–9. doi: 10.1370/afm.624.
436. Hammer RR, Rian JD, Gregory JK, Bostwick JM, Barrett Birk C, Chalfant L et al. Telling the patient's story: using theatre training to improve case presentation skills. *Med Humanit*. 2011;37(1):18–22. doi: 10.1136/jmh.2010.006429.
437. Kontos PC, Miller KL, Gilbert JE, Mitchell GJ, Colantonio A, Keightley ML et al. Improving client-centered brain injury rehabilitation through research-based theater. *Qual Health Res*. 2012;22(12):1612–32. doi: 10.1177/1049732312458370.
438. Skye EP, Wagenschutz H, Steiger JA, Kumagai AK. Use of interactive theater and role play to develop medical students' skills in breaking bad news. *J Cancer Educ*. 2014;29(4):704–8. doi: 10.1007/s13187-014-0641-y.
439. Ambady N, Laplante D, Nguyen T, Rosenthal R, Chaumeton N, Levinson W. Surgeons' tone of voice: a clue to malpractice history. *Surgery*. 2002;132(1):5–9. doi: 10.1067/msy.2002.124733.

440. Shapiro J, Rucker L, Beck J. Training the clinical eye and mind: using the arts to develop medical students' observational and pattern recognition skills. *Med Educ*. 2006;40(3):263–8. doi: 10.1111/j.1365-2929.2006.02389.x.
441. Yang KT, Lin CC, Chang LY. A program to interest medical students in Changhua, Taiwan in the incorporation of visual arts in medicine. *Educ Health*. 2011;24(3):563. PMID: 22267351.
442. de la Croix A, Rose C, Wildig E, Willson S. Arts-based learning in medical education: the students' perspective. *Med Educ*. 2011;45(11):1090–100. doi: 10.1111/j.1365-2923.2011.04060.x.
443. Shaballout N, Aloumar A, Neubert TA, Dusch M, Beissner F. Digital pain drawings can improve doctors' understanding of acute pain patients: survey and pain drawing analysis. *JMIR Mhealth Uhealth*. 2019;7(1):e11412. doi: 10.2196/11412.
444. Baruch JM. Creative writing as a medical instrument. *J Med Humanit*. 2013;34(4):459–69. doi: 10.1007/s10912-013-9243-7.
445. Barry M, Quinn C, Bradshaw C, Noonan M, Brett M, Atkinson S et al. Exploring perinatal death with midwifery students' using a collaborative art project. *Nurse Educ Today*. 2017;48:1–6. doi: 10.1016/j.nedt.2016.09.004.
446. Rieger KL, Chernomas WM, McMillan DE, Morin FL, Demczuk L. Effectiveness and experience of arts-based pedagogy among undergraduate nursing students: a mixed methods systematic review. *JBI Database System Rev Implement Rep*. 2016;14(11):139–239. doi: 10.11124/JBISRIR-2016-003188.
447. O'Donovan J, Thompson A, Onyilofor C, Hand T, Rosseau N, O'Neil E. The use of participatory visual methods with community health workers: a systematic scoping review of the literature. *Glob Public Health*. 2019;14(5):722–36. doi: 10.1080/17441692.2018.1536156.
448. Flanagan EH, Buck T, Gamble A, Hunter C, Sewell I, Davidson L. "Recovery speaks": a photovoice intervention to reduce stigma among primary care providers. *Psychiatr Serv*. 2016;67(5):566–9. doi: 10.1176/appi.ps.201500049.
449. Dogan T. The effects of the psychodrama in instilling empathy and self-awareness: a pilot study. *Psych J*. 2018;7(4):227–38. doi: 10.1002/pchj.228.
450. Gjengedal E, Lykkeslet E, Sæther WS, Sørbrø JI. "Theatre as an eye-opener": how theatre may contribute to knowledge about living close to persons with dementia. *Dementia*. 2016;17(4):439–51. doi: 10.1177/1471301216647890.
451. Jensen A, Bonde L. The use of arts interventions for mental health and wellbeing in health settings. *Perspect Public Health*. 2018;138(4):209–14. doi: 10.1177/1757913918772602.
452. Horwitz EB. Humanizing the working environment in health care through music and movement. In: Bonde LO, Theorell T, editors. *Music and public health: a Nordic perspective*. Cham: Springer International; 2018;187–99.
453. Doo E-Y, Seo H-E, S Choi, Chang B-K, Kim M. Effects of group art and music therapy in newly hired nurses: a mixed method study. *J Korean Acad Nurs Adm*. 2018;24(2):118–29. doi: <https://doi.org/10.11111/jkana.2018.24.2.118>.
454. Tjasink M, Soosaipillai G. Art therapy to reduce burnout in oncology and palliative care doctors: a pilot study. *Int J Art Ther*. 2019;24(1):12–20. doi: 10.1080/17454832.2018.1490327.
455. van Westrhenena N, Fritz E. The experiences of professional hospice workers attending creative arts workshops in Gauteng. *Health Ed J*. 2013;72(1):34–46. doi: 10.1177/0017896911430545.
456. Salas R, Steele K, Lin A, Loe C, Gauna L, Jaf P. Playback theatre as a tool to enhance communication in medical education. *Med Educ Online*. 2013;18(1):22622. doi: 10.3402/meo.v18i0.22622.
457. Shapiro J, Youm J, Heare M, Hurria A, Miotto G, Nguyen BN et al. Medical students' efforts to integrate and/or reclaim authentic identity: insights from a mask-making exercise. *J Med Humanit*. 2018;39(4):483–501. doi: 10.1007/s10912-018-9534-0.
458. Zazulak J, Sanaee M, Frolic A, Knibb N, Tesluk E, Hughes E et al. The art of medicine: arts-based training in observation and mindfulness for fostering the empathic response in medical residents. *Med Humanit*. 2017;43(3):192–8. doi: 10.1136/medhum-2016-011180.
459. Rodenhauser P, Strickland MA, Gambala CT. Arts-related activities across US medical schools: a follow-up study. *Teach Learn Med*. 2004;16(3):233–9. doi: 10.1207/s15328015tlm1603_2.
460. Wilson C, Bungay H, Munn-Giddings C, Boyce M. Healthcare professionals' perceptions of the value and impact of the arts in healthcare settings: a critical review of the literature. *Int J Nurs Stud*. 2016;56:90–101. doi: 10.1016/j.ijnurstu.2015.11.003.
461. Steensma DP. Stories we tell one another: narrative reflection and the art of oncology. *Am Soc Clin Oncol Educ Book*. 2013. doi: 10.1200/EdBook_AM.2013.33.e331.
462. Williams B. Using collage art work as a common medium for communication in interprofessional workshops. *J Interprof Care*. 2002;16(1):53–8. PMID: 11915717.

463. Sheingold BH, Hahn JA. The history of healthcare quality: the first 100 years 1860–1960. *Int J Africa Nurs Sci*. 2014;1:18–22. doi: 10.1016/j.ijans.2014.05.002.
464. Klugman CM, Peel J, Beckmann-Mendez D. Art rounds: teaching interprofessional students visual thinking strategies at one school. *Acad Med*. 2011;86(10):1266–71. doi: 10.1097/ACM.0b013e31822c1427.
465. Potash JS, Hy Ho A, Chan F, Lu Wang X, Cheng C. Can art therapy reduce death anxiety and burnout in end-of-life care workers? A quasi-experimental study. *Int J Palliat Nurs*. 2014;20(5):233–40. doi: 10.12968/ijpn.2014.20.5.233.
466. Boone BC, Castillo LG. The use of poetry therapy with domestic violence counselors experiencing secondary posttraumatic stress disorder symptoms. *J Poet Ther*. 2008;21(1):3–14. doi: <https://doi.org/10.1080/08893670801886865>.
467. Genovese JM, Berek JS. Can arts and communication programs improve physician wellness and mitigate physician suicide? *J Clin Oncol*. 2016;34(15):1820–2. doi: 10.1200/JCO.2015.65.1778.
468. Broome E, Denning T, Schneider J, Brooker D. Care staff and the creative arts: exploring the context of involving care personnel in arts interventions. *Int Psychogeriatr*. 2017;29(12):1979–91. doi: 10.1017/S1041610217001478.
469. Kim B, Dvorak AL. Music therapy and intimacy behaviors of hospice family caregivers in South Korea: a randomized crossover clinical trial. *Nord J Music Ther*. 2018;27(3):218–34. doi: 10.1080/08098131.2018.1427783.
470. Hammar LM, Emami A, Engström G, Götell E. Communicating through caregiver singing during morning care situations in dementia care. *Scand J Caring Sci*. 2011;25(1):160–8. doi: 10.1111/j.1471-6712.2010.00806.x.
471. Rio R. *Connecting through music with people with dementia: a guide for caregivers*. London: Jessica Kingsley; 2009.
472. Hunt B, Truran L, Reynolds F. “Like a drawing of breath”: leisure-based art-making as a source of respite and identity among older women caring for loved ones with dementia. *Arts Health*. 2018;10(1):29–44. doi: 10.1080/17533015.2016.1247370.
473. Pienaar L, Reynolds F. “A respite thing”: a qualitative study of a creative arts leisure programme for family caregivers of people with dementia. *Health Psychol Open*. 2015;2(1):2055102915581563. doi: 10.1177/2055102915581563.
474. Lewis V, Bauer M, Winbolt M, Chenco C, Hanley F. A study of the effectiveness of MP3 players to support family carers of people living with dementia at home. *Int Psychogeriatr*. 2015;27(3):471–9. doi: 10.1017/S1041610214001999.
475. Camicia M, Lutz BJ, Markoff N, Catlin A. Determining the needs of family caregivers of stroke patients during inpatient rehabilitation using interview, art, and survey. *Rehabil Nurs*. 2018 [Epub ahead of print]. doi: 10.1097/RNJ.000000000000129.
476. Kidd LI, Zauszniewski JA, Morris DL. Benefits of a poetry writing intervention for family caregivers of elders with dementia. *Issues Ment Health Nurs*. 2011;32(9):598–604. doi: 10.3109/01612840.2011.576801.
477. Baker FA. A theoretical framework and group therapeutic songwriting protocol designed to address burden of care, coping, identity, and wellbeing in caregivers of people living with dementia. *Aus J Music Ther*. 2017;28:16.
478. Mondro A, Connell CM, Li L, Reed E. Retaining identity: creativity and caregiving. *Dementia (London)*. 2018 [Epub ahead of print]. doi: 10.1177/1471301218803468.
479. Cutillo A, Reynolds N, Madan-Swain A. Music therapy and coping in caregivers of children with cancer. *Ann Pediatr Child Health*. 2015;3(5):1069.
480. O’Kelly. Saying it in song: music therapy as a carer support intervention. *Int J Palliat Nurs*. 2008;14(6):281–6. doi: 10.12968/ijpn.2008.14.6.30023.
481. Clark IN, Tamplin JD, Baker FA. Community-dwelling people living with dementia and their family caregivers experience enhanced relationships and feelings of well-being following therapeutic group singing: a qualitative thematic analysis. *Front Psychol*. 2018;9:1332. doi: 10.3389/fpsyg.2018.01332.
482. Fancourt D, Warran K, Finn S, Wiseman T. Psychosocial singing interventions for the mental health and wellbeing of family carers of cancer patients: results from a longitudinal controlled study. *BMJ Open*. 2019;9(8):e026995. doi: 10.1136/bmjopen-2018-026995.
483. Burtseva EO. *Dancing and motor therapy as a method of psychological preparation of future parents*. St. Petersburg: II All-Russian Scientific Practical Conference; 2019.
484. Sezen C, Ünsalver BÖ. Group art therapy for the management of fear of childbirth. *Arts Psychother*. 2018;64:9–19. doi: 10.1016/j.aip.2018.11.007.
485. Chang HC, Yu CH, Chen SY, Chen CH. The effects of music listening on psychosocial stress and maternal–fetal attachment during pregnancy. *Complement Ther Med*. 2015;23(4):509–15. doi: 10.1016/j.ctim.2015.05.002.
486. Ventura T, Gomes MC, Carreira T. Cortisol and anxiety response to a relaxing intervention on pregnant women awaiting amniocentesis. *Psychoneuroendocrinology*. 2012;37(1):148–56. doi: 10.1016/j.psyneuen.2011.05.016.

487. Liu YH, Lee CS, Yu CH, Chen CH. Effects of music listening on stress, anxiety, and sleep quality for sleep-disturbed pregnant women. *Women Health*. 2016;56(3):296–311. doi: 10.1080/03630242.2015.1088116.
488. Corbijn van Willenswaard K, Lynn F, McNeill J, McQueen K, Dennis CL, Lobel M et al. Music interventions to reduce stress and anxiety in pregnancy: a systematic review and meta-analysis. *BMC Psychiatry*. 2017;17(1):271. doi: 10.1186/s12888-017-1432-x.
489. Toker E, Kömürçü N. Effect of Turkish classical music on prenatal anxiety and satisfaction: a randomized controlled trial in pregnant women with pre-eclampsia. *Complement Ther Med*. 2017;30:1–9. doi: 10.1016/j.ctim.2016.11.005.
490. Cao S, Sun JJ, Wang Y, Zhao Y, Sheng Y, Aiguo X. Music therapy improves pregnancy-induced hypertension treatment efficacy. *Int J Clin Exp Med*. 2016;9(5):8833–8.
491. Fancourt D, Perkins R. Could listening to music during pregnancy be protective against postnatal depression and poor wellbeing post birth? Longitudinal associations from a preliminary prospective cohort study. *BMJ Open*. 2018;8(7):e021251. doi: 10.1136/bmjopen-2017-021251.
492. García González J, Ventura Miranda MI, Requena Mullor M, Parron Carreño T, Alarcón Rodríguez R. Effects of prenatal music stimulation on state/trait anxiety in full-term pregnancy and its influence on childbirth: a randomized controlled trial. *J Matern Fetal Neonatal Med*. 2018;31(8):1058–65. doi: 10.1080/14767058.2017.1306511.
493. Garcia-Gonzalez J, Ventura-Miranda MI, Requena-Mullor M, Parron-Carreño T, Alarcon-Rodriguez R. State-trait anxiety levels during pregnancy and foetal parameters following intervention with music therapy. *J Affect Disord*. 2018;232:17–22. doi: 10.1016/j.jad.2018.02.008.
494. García González J, Ventura Miranda MI, Manchon García F, Pallarés Ruiz TI, Marin Gascón ML, Requena Mullor M et al. Effects of prenatal music stimulation on fetal cardiac state, newborn anthropometric measurements and vital signs of pregnant women: a randomized controlled trial. *Complement Ther Clin Pract*. 2017;27:61–7. doi: 10.1016/j.ctcp.2017.03.004.
495. Chuang CH, Chen PC, Lee CS, Chen CH, Tu YK, Wu SC. Music intervention for pain and anxiety management of the primiparous women during labour: a systematic review and meta-analysis. *J Adv Nurs*. 2018;75(4):723–33. doi: 10.1111/jan.13871.
496. Gokyildiz Surucu S, Ozturk M, Avci Bay Vurgeç B, Alan S, Akbas M. The effect of music on pain and anxiety of women during labour on first time pregnancy: a study from Turkey. *Complement Ther Clin Pract*. 2018;30:96–102. doi: 10.1016/j.ctcp.2017.12.015.
497. Kushnir J, Friedman A, Ehrenfeld M, Kushnir T. Coping with preoperative anxiety in cesarean section: physiological, cognitive, and emotional effects of listening to favorite music. *Birth*. 2012;39(2):121–7. doi: 10.1111/j.1523-536X.2012.00532.x.
498. Li Y, Dong Y. Preoperative music intervention for patients undergoing cesarean delivery. *Int J Gynaecol Obstet*. 2012;119(1):81–3. doi: 10.1016/j.ijgo.2012.05.017.
499. Handan E, Sahiner NC, Bal MD, Dissiz M. Effects of music during multiple cesarean section delivery. *J Coll Physicians Surg Pak*. 2018;28(3):247–9. doi: 10.29271/jcpsp.2018.03.247.
500. Kurdi MS, Gasti V. Intraoperative meditation music as an adjunct to subarachnoid block for the improvement of postoperative outcomes following cesarean section: a randomized placebo-controlled comparative study. *Anesth Essays Res*. 2018;12(3):618–24. doi: 10.4103/aer.AER_114_18.
501. Ebneshahidi A, Mohseni M. The effect of patient-selected music on early postoperative pain, anxiety, and hemodynamic profile in cesarean section surgery. *J Altern Complement Med*. 2008;14(7):827–31. doi: 10.1089/acm.2007.0752.
502. Laopaiboon M, Lumbiganon P, Martis R, Vatanasapt P, Somjaiyong B. Music during caesarean section under regional anaesthesia for improving maternal and infant outcomes. *Cochrane Database Sys Rev*. 2009;(2):CD006914. doi: 10.1002/14651858.CD006914.pub2.
503. Reza N, Ali SM, Saeed K, Abul-Qasim A, Reza TH. The impact of music on postoperative pain and anxiety following cesarean section. *Middle East J Anaesthesiol*. 2007;19(3):576–86. PMID: 18044285.
504. Setola N, Naldi E, Cocina GG, Eide LB, Iannuzzi L, Daly D. The impact of the physical environment on intrapartum maternity care: identification of eight crucial building spaces. *HERD*. 2019;12(4):67–98. doi: 10.1177/1937586719826058.
505. Tseng YF, Chen CH, Lee CS. Effects of listening to music on postpartum stress and anxiety levels. *J Clin Nurs*. 2010;19(7–8):1049–55. doi: 10.1111/j.1365-2702.2009.02998.x.
506. Ericksen J, Loughlin E, Holt C, Rose N, Hartley E, Buultjens M. A therapeutic playgroup for depressed mothers and their infants: feasibility study and pilot randomized trial of community hugs. *Infant Ment Health J*. 2018;39(4):396–409. doi: 10.1002/imhj.21723.
507. Fancourt D, Perkins R. Effect of singing interventions on symptoms of postnatal depression: three-arm randomised controlled trial. *Br J Psychiatry*. 2018;212(2):119–21. doi: 10.1192/bjp.2017.29.

508. Perkins R, Yorke S, Fancourt D. How group singing facilitates recovery from the symptoms of postnatal depression: a comparative qualitative study. *BMC Psychol*. 2018;6(1):41. doi: 10.1186/s40359-018-0253-0.
509. Reilly N, Turner G, Taouk J, Austin MP. "Singing with your baby": an evaluation of group singing sessions for women admitted to a specialist mother-baby unit. *Arch Womens Ment Health*. 2019;22(1):123–7. doi: 10.1007/s00737-018-0859-5.
510. Geipel J, Koenig J, Hillecke TK, Resch F, Kaess M. Music-based interventions to reduce internalizing symptoms in children and adolescents: a meta-analysis. *J Affect Disord*. 2018;225:647–56. doi: 10.1016/j.jad.2017.08.035.
511. Philipsson A, Duberg A, Möller M, Hagberg L. Cost-utility analysis of a dance intervention for adolescent girls with internalizing problems. *Cost Eff Resour Alloc*. 2013;11(1):4. doi: 10.1186/1478-7547-11-4.
512. Jeong YJ, Hong SC, Lee MS, Park MC, Kim YK, Suh CM. Dance movement therapy improves emotional responses and modulates neurohormones in adolescents with mild depression. *Int J Neurosci*. 2005;115(12):1711–20. doi: 10.1080/00207450590958574.
513. Williams E, Dingle GA, Clift S. A systematic review of mental health and wellbeing outcomes of group singing for adults with a mental health condition. *Eur J Public Health*. 2018;28(6):1035–42. doi: 10.1093/eurpub/cky115.
514. Fancourt D, Perkins R, Ascenso S, Atkins L, Kilfeather S, Carvalho L et al. Group drumming modulates cytokine response in mental health services users: a preliminary study. *Psychother Psychosom*. 2016;85(1):53–5. doi: 10.1159/000431257.
515. Fancourt D, Perkins R, Ascenso S, Carvalho LA, Steptoe A, Williamon A. Effects of group drumming interventions on anxiety, depression, social resilience and inflammatory immune response among mental health service users. *PLoS One*. 2016;11(3):e0151136. doi: 10.1371/journal.pone.0151136.
516. Van Lith T, Schofield MJ, Fenner P. Identifying the evidence-base for art-based practices and their potential benefit for mental health recovery: a critical review. *Disabil Rehabil*. 2013;35(16):1309–23. doi: 10.3109/09638288.2012.732188.
517. Leckey J. The therapeutic effectiveness of creative activities on mental well-being: a systematic review of the literature. *J Psychiatr Ment Health Nurs*. 2011;18(6):501–9. doi: 10.1111/j.1365-2850.2011.01693.x.
518. Williams E, Dingle GA, Jetten J, Rowan C. Identification with arts-based groups improves mental wellbeing in adults with chronic mental health conditions. *J Appl Soc Psychol*. 2019;49(1):15–26. doi: <https://doi.org/10.1111/jasp.12561>.
519. Leubner D, Hinterberger T. Reviewing the effectiveness of music interventions in treating depression. *Front Psychol*. 2017;8:1109. doi: 10.3389/fpsyg.2017.01109.
520. Stevens J, Butterfield C, Whittington A, Holttum S. Evaluation of arts based courses within a UK recovery college for people with mental health challenges. *Int J Environ Res Public Health*. 2018;15(6):1170. doi: 10.3390/ijerph15061170.
521. Chippendale T, Bear-Lehman J. Effect of life review writing on depressive symptoms in older adults: a randomized controlled trial. *Am J Occup Ther*. 2012;66(4):438–46. doi: 10.5014/ajot.2012.004291.
522. Aalbers S, Fusar Poli L, Freeman RE, Spreen M, Ket CFJ, Vink CA et al. Music therapy for depression. *Cochrane Database Syst Rev*. 2017;11:CD004517. doi: <https://doi.org/10.1002/14651858.CD004517.pub3>.
523. Zhao K, Bai ZG, Bo A, Chi I. A systematic review and meta-analysis of music therapy for the older adults with depression. *Int J Geriatr Psychol*. 2016;31(11):1188–98. doi: 10.1002/gps.4494.
524. Werner J, Wosch T, Gold C. Effectiveness of group music therapy versus recreational group singing for depressive symptoms of elderly nursing home residents: pragmatic trial. *Aging Ment Health*. 2017;21(2):147–55. doi: 10.1080/13607863.2015.1093599.
525. Bungay H, Clift S. Arts on prescription: a review of practice in the UK. *Perspect Public Health*. 2010;130(6):277–81. doi: 10.1177/1757913910384050.
526. Jensen A, Stickley T, Torrissen W, Stigmar K. Arts on prescription in Scandinavia: a review of current practice and future possibilities. *Perspect Public Health*. 2016;137(5):268–74. doi: 10.1177/1757913916676853.
527. Crone DM, Sumner RC, Baker CM, Loughren EA, Hughes S, James DVB. "Artlift" arts-on-referral intervention in UK primary care: updated findings from an ongoing observational study. *Eur J Public Health*. 2018;28(3):404–9. doi: 10.1093/eurpub/cky021.
528. Lin ST, Yang P, Lai CY, Su YY, Yeh YC, Huang MF et al. Mental health implications of music: insight from neuroscientific and clinical studies. *Harv Rev Psychiatry*. 2011;19(1):34–46. doi: 10.3109/10673229.2011.549769.
529. Perkins R, Ascenso S, Atkins L, Fancourt D, Williamon A. Making music for mental health: how group drumming mediates recovery. *Psychol Well Being*. 2016;6(1):11. doi: 10.1186/s13612-016-0048-0.
530. Solli HP, Rolvsjord R, Borg M. Toward understanding music therapy as a recovery-oriented practice within mental health care: a meta-synthesis of service users' experiences. *J Music Ther*. 2013;50(4):244–73. doi: 10.1093/jmt/50.4.244.

531. Stickley T, Wright N, Slade M. The art of recovery: outcomes from participatory arts activities for people using mental health services. *J Ment Health*. 2018;27(4):367–73. doi: 10.1080/09638237.2018.1437609.
532. Stewart V, Roennfeldt H, Slattery M, Wheeler AJ. Generating mutual recovery in creative spaces. *Mental Health Soc Inklus*. 2018;23(1):16–22. doi: 10.1108/MHSI-08-2018-0029.
533. Dunphy K, Baker FA, Dumaresq E, Carroll-Haskins K, Eickholt J, Ercole M et al. Creative arts interventions to address depression in older adults: a systematic review of outcomes, processes, and mechanisms. *Front Psychol*. 2019;9:2655. doi: 10.3389/fpsyg.2018.02655.
534. Gray E, Kiemle G, Davis P, Billington J. Making sense of mental health difficulties through live reading: an interpretative phenomenological analysis of the experience of being in a reader group. *Arts Health*. 2016;8(3):248–61. doi: 10.1080/17533015.2015.1121883.
535. Ngong PA. Therapeutic theatre: an experience from a mental health clinic in Yaoundé- Cameroon. *Arts Health*. 2017;9(3):269–78. doi: 10.1080/17533015.2017.1296007.
536. Garrido S, Eerola T, McFerran K. Group rumination: social interactions around music in people with depression. *Front Psychol*. 2017;8:490. doi: 10.3389/fpsyg.2017.00490.
537. Feng F, Zhang Y, Hou J, Cai J, Jiang Q, Li X et al. Can music improve sleep quality in adults with primary insomnia? A systematic review and network meta-analysis. *Int J Nurs Stud*. 2018;77:189–96. doi: 10.1016/j.ijnurstu.2017.10.011.
538. Jespersen KV, Koenig J, Jennum P, Vuust P. Music for insomnia in adults. *Cochrane Database Syst Rev*. 2015;(8):CD010459. doi: 10.1002/14651858.CD010459.pub2.
539. Wang CF, Sun YL, Zang HX. Music therapy improves sleep quality in acute and chronic sleep disorders: a meta-analysis of 10 randomized studies. *Int J Nurs Stud*. 2014;51(1):51–62. doi: 10.1016/j.ijnurstu.2013.03.008.
540. de Niet G, Tiemens B, Lendemeijer B, Hutschemaekers G. Music-assisted relaxation to improve sleep quality: meta-analysis. *J Adv Nurs*. 2009;65(7):1356–64. doi: 10.1111/j.1365-2648.2009.04982.x.
541. Aleksandrova EA, Lesheva MM, Yakupov EZ. [Art-therapies as treatment of insomnia disorders in patients with central nervous system diseases]. *Bulletin of Contemporary Clinical Medicine*. 2015;8:23 (in Russian).
542. Trahan T, Durrant SJ, Müllensiefen D, Williamson VJ. The music that helps people sleep and the reasons they believe it works: a mixed methods analysis of online survey reports. *PLOS One*. 2018;13(11):e0206531. doi: 10.1371/journal.pone.0206531.
543. Osokina O, Putyatin GG, Seleznyova SV, Nesterenko TV. Art therapy in the complex treatment of patients with chronic neuropsychiatric diseases. *Int Neurolog J*. 2017;2(88):106–13. doi: 10.22141/2224-0713.2.88.2017.100201.
544. Gold C, Solli HP, Krüger V, Lie SA. Dose–response relationship in music therapy for people with serious mental disorders: systematic review and meta-analysis. *Clin Psychol Rev*. 2009;29(3):193–207. doi: 10.1016/j.cpr.2009.01.001.
545. Carr C, Odell-Miller H, Priebe S. A systematic review of music therapy practice and outcomes with acute adult psychiatric in-patients. *PLOS One*. 2013;8(8):e70252. doi: 10.1371/journal.pone.0070252.
546. Fenner P, Abdelazim RS, Bräuninger I, Strehlow G, Seifert K. Provision of arts therapies for people with severe mental illness. *Curr Opin Psychiatry*. 2017;30(4):306–11. doi: 10.1097/YCO.0000000000000338.
547. Silverman MJ. Comparison of two educational music therapy interventions on recovery knowledge and affect: a cluster-randomized study. *Nord J Music Ther*. 2017;26(4):359–75. doi: 10.1080/08098131.2016.1259646.
548. Uttley L, Scope A, Stevenson M, Rawdin A, Taylor Buck E, Sutton A et al. Systematic review and economic modelling of the clinical effectiveness and cost-effectiveness of art therapy among people with non-psychotic mental health disorders. *Health Technol Assess*. 2015;19(18):1–120. doi: 10.3310/hta19180.
549. Müller W, Haffelder G, Schlotmann A, Schaeffers AT, Teuchert-Noodt G. Amelioration of psychiatric symptoms through exposure to music individually adapted to brain rhythm disorders: a randomised clinical trial on the basis of fundamental research. *Cogn Neuropsychiatry*. 2014;19(5):399–413. doi: 10.1080/13546805.2013.879054.
550. Volpe U, Gianoglio C, Autiero L, Marino ML, Facchini D, Mucci A et al. Acute effects of music therapy in subjects with psychosis during inpatient treatment. *Psychiatry*. 2018;81(3):218–27. doi: 10.1080/00332747.2018.1502559.
551. Silverman MJ. The influence of music on the symptoms of psychosis: a meta-analysis. *J Music Ther*. 2003;40(1):27–40. PMID: 17590966.
552. Feng K, Shen CY, Ma XY, Chen GF, Zhang ML, Xu B et al. Effects of music therapy on major depressive disorder: a study of prefrontal hemodynamic functions using FNIRS. *Psychiatry Res*. 2019;275:86–93. doi: 10.1016/j.psychres.2019.03.015.
553. Attard A, Larkin M. Art therapy for people with psychosis: a narrative review of the literature. *Lancet Psychiatry*. 2016;3(11):1067–89. doi: 10.1016/S2215-0366(16)30146-8.

554. Nan JKM, Ho RTH. Effects of clay art therapy on adults outpatients with major depressive disorder: a randomized controlled trial. *J Affect Disord.* 2017;217:237–45. doi: 10.1016/j.jad.2017.04.013.
555. Graff V, Wingfield P, Adams D, Rabinowitz T. An investigation of patient preferences for music played before electroconvulsive therapy. *J ECT.* 2016;32(3):192. doi: 10.1097/YCT.0000000000000315.
556. Tseng P-T, Chen Y-W, Lin P-Y, Tu K-Y, Wang H-Y, Chen Y-S. Significant treatment effect of adjunct music therapy to standard treatment on the positive, negative, and mood symptoms of schizophrenic patients: a meta-analysis. *BMC Psychiatry.* 2016;16(1):16. doi: 10.1186/s12888-016-0718-8.
557. Geretsegger M, Mössler KA, Bieleninik Ł, Chen XJ, Heldal TO, Gold C. Music therapy for people with schizophrenia and schizophrenia like disorders. *Cochrane Database Syst Rev.* 2017;(5):CD004025. doi: 10.1002/14651858.CD004025.pub4.
558. Ren J, Xia J. Yoga as part of a package of care versus non standard care for schizophrenia. *Cochrane Database Syst Rev.* 2013;(1):CD006868. doi: 10.1002/14651858.CD006868.pub2.
559. Chu KY, Huang CY, Ouyang WC. Does Chinese calligraphy therapy reduce neuropsychiatric symptoms: a systematic review and meta-analysis. *BMC Psychiatry.* 2018;18(1):62. doi: 10.1186/s12888-018-1611-4.
560. Crawford MJ, Killaspy H, Barnes TR, Barrett B, Byford S, Clayton K. Group art therapy as an adjunctive treatment for people with schizophrenia: multicentre pragmatic randomised trial. *Health Technol Assess.* 2012;344:e846. doi: <https://doi.org/10.1136/bmj.e846>.
561. Kasahara-Kiritani M, Hadlaczy G, Westerlund M, Carli V, Wasserman C, Apter A et al. Reading books and watching films as a protective factor against suicidal ideation. *Int J Environ Res Public Health.* 2015;12(12):15937–42. doi: 10.3390/ijerph121215032.
562. Trzpcz SJ, Wendt KA, Heitzman SC, Skemp S, Thomas D, Dahl R. Does space matter? An exploratory study for a child-adolescent mental health inpatient unit. *HERD.* 2016;10(1):23–44. doi: 10.1177/1937586716634017.
563. Trondalen G. The future of music therapy for persons with eating disorders. In: Dileo C, editor. *Envisioning the future of music therapy.* Philadelphia (PA): Temple University; 2016:31–44.
564. Odell-Miller H. *The practice of music therapy for adults with mental health problems: the relationship between diagnosis and clinical method.* Ålborg: Ålborg University; 2007.
565. Robarts JZ, Sloboda A. Perspectives on music therapy with people suffering from anorexia nervosa. *J Brit Music Ther.* 1994;8(1):7–14. doi: 10.1177/135945759400800104.
566. Ki P. Exploring the experiences of participants in short-term art-based support groups for adults living with eating disorders. *Can Art Ther Assoc J.* 2011;24(2):1–13. doi: 10.1080/08322473.2011.11415546.
567. Loth H. Music therapy with people who have eating disorders. In: Edwards J, editor. *The Oxford handbook of music therapy.* Oxford: Oxford University Press; 2016.
568. Frisch MJ, Franko DL, Herzog DB. Arts-based therapies in the treatment of eating disorders. *Eat Disord.* 2006;14(2):131–42. doi: 10.1080/10640260500403857.
569. Thaler L, Drapeauc C-E, Leclerc J, Lajeunesse M, Cottier D, Kahan E et al. An adjunctive, museum-based art therapy experience in the treatment of women with severe eating disorders. *Arts Psychother.* 2017;56:1–6. doi: 10.1016/j.aip.2017.08.002.
570. van den Tol AJM, Coulthard H, Hanser WE. Music listening as a potential aid in reducing emotional eating: an exploratory study. *Mus Sci.* 2018. doi: 10.1177/1029864918780186.
571. Bibb J, Castle D, Newton R. The role of music therapy in reducing post meal related anxiety for patients with anorexia nervosa. *J Eat Disord.* 2015;3:50. doi: 10.1186/s40337-015-0088-5.
572. Hohmann L, Bradt J, Stegemann T, Koelsch S. Effects of music therapy and music-based interventions in the treatment of substance use disorders: a systematic review. *PLOS One.* 2017;12(11):e0187363. doi: 10.1371/journal.pone.0187363.
573. Mathis WS, Han X. The acute effect of pleasurable music on craving for alcohol: a pilot crossover study. *J Psychiatr Res.* 2017;90:143–7. doi: 10.1016/j.jpsychires.2017.04.008.
574. Mays KL, Clark DL, Gordon AJ. Treating addiction with tunes: a systematic review of music therapy for the treatment of patients with addictions. *Subst Abus.* 2008;29(4):51–9. doi: 10.1080/08897070802418485.
575. Morse N, Thomson LJM, Brown Z, Chatterjee HJ. Effects of creative museum outreach sessions on measures of confidence, sociability and well-being for mental health and addiction recovery service-users. *Arts Health.* 2015;7(3):231–46. doi: 10.1080/17533015.2015.1061570.

576. Abdulah DM, Alhakem SSM, Piro RS. Effects of music as an adjunctive therapy on severity of symptoms in patients with obsessive-compulsive disorder: randomized controlled trial. *Nord J Music Ther.* 2018;12:27–40. doi: <https://doi.org/10.1080/08098131.2018.1546222>.
577. Shiranibidabadi S, Mehryar A. Music therapy as an adjunct to standard treatment for obsessive compulsive disorder and co-morbid anxiety and depression: a randomized clinical trial. *J Affect Disord.* 2015;184:13–17. doi: [10.1016/j.jad.2015.04.011](https://doi.org/10.1016/j.jad.2015.04.011).
578. Lazarov A, Pine DS, Bar-Haim Y. Gaze-contingent music reward therapy for social anxiety disorder: a randomized controlled trial. *Am J Psychiatry.* 2017;174(7):649–56. doi: [10.1176/appi.ajp.2016.16080894](https://doi.org/10.1176/appi.ajp.2016.16080894).
579. Felsman P, Seifert CM, Himle JA. The use of improvisational theater training to reduce social anxiety in adolescents. *Arts Psychother.* 2018;63:111–17. doi: [10.1016/j.aip.2018.12.001](https://doi.org/10.1016/j.aip.2018.12.001).
580. Odell-Miller H. Music therapy for people with a diagnosis of personality disorder: considerations of thinking and feeling. In: Edwards J, editor. *The Oxford handbook of music therapy.* Oxford: University Press; 2016 (<http://www.oxfordhandbooks.com/view/10.1093/oxfordhb/9780199639755.001.0001/oxfordhb-9780199639755-e-46>).
581. Andemicael A. Positive energy: a review of the role of artistic activities in refugee camps. Geneva: Office of the United Nations High Commissioner for Refugees; 2011 (<http://www.unhcr.org/research/evalreports/4def858a9/positive-energy-review-role-artistic-activities-refugee-camps-awet-andemicael.html>).
582. Bergmann K. The sound of trauma: music therapy in a post-war environment. *Aus J Music Ther.* 2002;13:3–16.
583. Zhu Z, Wang R, Kao HSR, Zong Y, Liu Z, Tang S et al. Effect of calligraphy training on hyperarousal symptoms for childhood survivors of the 2008 China earthquakes. *Neuropsych Dis Treat.* 2014;10:977–85. doi: [10.2147/NDT.S55016](https://doi.org/10.2147/NDT.S55016).
584. Katz C, Barnett Z, Hershkowitz I. The effect of drawing on children's experiences of investigations following alleged child abuse. *Child Abuse Negl.* 2014;38(5):858–67. doi: [10.1016/j.chiabu.2014.01.003](https://doi.org/10.1016/j.chiabu.2014.01.003).
585. Katz C, Hershkowitz I. The effects of drawing on children's accounts of sexual abuse. *Child Maltreat.* 2009;15(2):171–9. doi: [10.1177/1077559509351742](https://doi.org/10.1177/1077559509351742).
586. Schouten KA, de Niet GJ, Knipscheer JW, Kleber RJ, Hutschemaekers GJ. The effectiveness of art therapy in the treatment of traumatized adults: a systematic review on art therapy and trauma. *Trauma Violence Abuse.* 2015;16(2):220–8. doi: [10.1177/1524838014555032](https://doi.org/10.1177/1524838014555032).
587. Huss E, Kaufman R, Avgar A, Shuker E. Arts as a vehicle for community building and post-disaster development. *Disasters.* 2016;40(2):284–303. doi: [10.1111/disa.12143](https://doi.org/10.1111/disa.12143).
588. Tyrer RA, Fazel M. School and community-based interventions for refugee and asylum seeking children: a systematic review. *PLoS One.* 2014;9(2):e89359. doi: [10.1371/journal.pone.0089359](https://doi.org/10.1371/journal.pone.0089359).
589. Rubesin H. The stories we share: reflections on a community-based art exhibit displaying work by refugees and immigrants. *J Appl Arts Health.* 2016;7(2):159–74. doi: [10.1386/jaah.7.2.159_1](https://doi.org/10.1386/jaah.7.2.159_1).
590. Gopalkrishnan N. Multicultural arts and integrative medicine: empowering refugees in the healing process. *Electronic J Study Trop.* 2016;12(2):119–33. doi: [10.25120/etropic.12.2.2013.3337](https://doi.org/10.25120/etropic.12.2.2013.3337).
591. Gerber MN, Semenova SV. [Art therapy and sociocultural adaptation of teenagers from migrant families]. *Bulletin of St Petersburg State University of Culture and Arts.* 2017;2(31):83–7 (in Russian).
592. Diamond S, Shrira A. Psychological vulnerability and resilience of Holocaust survivors engaged in creative art. *Psychiatry Res.* 2018;264:236–43. doi: [10.1192/bjp.bp.108.058784](https://doi.org/10.1192/bjp.bp.108.058784).
593. Jones C, Bäckman C, Capuzzo M, Egerod I, Flaatten H, Granja C et al. Intensive care diaries reduce new onset post traumatic stress disorder following critical illness: a randomised, controlled trial. *Crit Care.* 2010;14:R168. doi: [10.1186/cc9260](https://doi.org/10.1186/cc9260).
594. Landis-Shack N, Heinz AJ, Bonn-Miller MO. Music therapy for posttraumatic stress in adults: a theoretical review. *Psychomusicology.* 2017;27(4):334–42. PMID: 29290641.
595. Carr C, d'Ardenne P, Sloboda A, Scott C, Wang D, Priebe S. Group music therapy for patients with persistent post-traumatic stress disorder: an exploratory randomized controlled trial with mixed methods evaluation. *Psychol Psychother.* 2012;85(2):179–202. doi: [10.1111/j.2044-8341.2011.02026.x](https://doi.org/10.1111/j.2044-8341.2011.02026.x).
596. Bronson H, Vaudreuil R, Bradt J. Music therapy treatment of active duty military: an overview of intensive outpatient and longitudinal care programs. *Music Ther Perspect.* 2018;36(2):195–206. doi: <https://doi.org/10.1093/mtp/miy006>.
597. Pezzin LE, Larson ER, Lorber W, McGinley EL, Dillingham TR. Music-instruction intervention for treatment of post-traumatic stress disorder: a randomized pilot study. *BMC Psychol.* 2018;6(1):60. doi: [10.1186/s40359-018-0274-8](https://doi.org/10.1186/s40359-018-0274-8).
598. Levine B, Land HM. A meta-synthesis of qualitative findings about dance/ movement therapy for individuals with trauma. *Qual Health Res.* 2016;26(3):330–44. doi: [10.1177/1049732315589920](https://doi.org/10.1177/1049732315589920).

599. Ogden P, Minton K, Pain C. Trauma and the body: a sensorimotor approach to psychotherapy. New York: WW Norton; 2006.
600. Wilbur S, Meyer HB, Baker MR, Smiarowski K, Suarez CA, Ames D et al. Dance for veterans: a complementary health program for veterans with serious mental illness. *Arts Health*. 2015;7(2):96–108. doi: 10.1080/17533015.2015.1019701.
601. Gantt MA, Dadds S, Burns DS, Glaser D, Moore AD. The effect of binaural beat technology on the cardiovascular stress response in military service members with postdeployment stress. *J Nurs Scholarsh*. 2017;49(4):411–20. doi: 10.1111/jnu.12304.
602. Balfour M, Stewart D. Perspectives and contexts of arts, social health and the military. *Arts Health*. 2015;7(2):87–95. doi: <https://doi.org/10.1080/17533015.2014.999247>.
603. Hass-Cohen N, Bokoch R, Findlay JC, Witting AB. A four-drawing art therapy trauma and resiliency protocol study. *Arts Psychother*. 2018;61:44–56. doi: 10.1016/j.aip.2018.02.003.
604. Standley JM. Efficacy of music therapy for premature infants in the neonatal intensive care unit: a meta-analysis. *Arch Dis Child Fetal*. 2011;96(suppl 1):Fa52. doi: <http://dx.doi.org/10.1136/archdischild.2011.300164.118>.
605. Standley J. Music therapy research in the NICU: an updated meta-analysis. *Neonatal Netw*. 2012;31(5):311–16. doi: 10.1891/0730-0832.31.5.311.
606. Standley JM. A meta-analysis of the efficacy of music therapy for premature infants. *J Pediatr Nurs*. 2002;17(2):107–13. PMID: 12029604.
607. Bieleninik Ł, Ghetti C, Gold C. Music therapy for preterm infants and their parents: a meta-analysis. *Pediatrics*. 2016;138(3):pii:e20160971. doi: 10.1542/peds.2016-0971.
608. Keith DR, Russell K, Weaver BS. The effects of music listening on inconsolable crying in premature infants. *J Music Ther*. 2009;46(3):191–203. PMID: 19757875.
609. Filippa M, Devouche E, Arioni C, Imberty M, Gratier M. Live maternal speech and singing have beneficial effects on hospitalized preterm infants. *Acta Paediatr*. 2013;102(10):1017–20. doi: 10.1111/apa.12356.
610. Lejeune F, Lordier L, Pittet MP, Schoenhals L, Grandjean D, Hüppi PS et al. Effects of an early postnatal music intervention on cognitive and emotional development in preterm children at 12 and 24 months: preliminary findings. *Front Psychol*. 2019;10:494. doi: 10.3389/fpsyg.2019.00494.
611. Scala M, Seo S, Lee-Park J, McClure C, Scala M, Palafoutas JJ et al. Effect of reading to preterm infants on measures of cardiorespiratory stability in the neonatal intensive care unit. *J Perinatol*. 2018;38(11):1536–41. doi: 10.1038/s41372-018-0198-4.
612. Jayamala AK, Lakshmanagowda PB, Pradeep GCM, Goturu J. Impact of music therapy on breast milk secretion in mothers of premature newborns. *J Clin Diagn Res*. 2015;9(4):CC04–6. doi: 10.7860/JCDR/2015/11642.5776.
613. Keith DR, Weaver BS, Vogel RL. The effect of music-based listening interventions on the volume, fat content, and caloric content of breast milk-produced by mothers of premature and critically ill infants. *Adv Neonatal Care*. 2012;12(2):112–19. doi: 10.1097/ANC.0b013e31824d9842.
614. Kittithanesuan Y, Chiarakul S, Kaewkungwal J, Poovorawan Y. Effect of music on immediately postpartum lactation by term mothers after giving birth: a randomized controlled trial. *J Med Assoc Thai*. 2017;100(8):834–42.
615. Reducing violence and aggression in A&E: through a better experience. London: Design Council; 2013 (<https://www.designcouncil.org.uk/what-we-do/social-innovation/reducing-violence-and-aggression-ae>).
616. Sridharan K, Sivaramakrishnan G. Therapeutic clowns in pediatrics: a systematic review and meta-analysis of randomized controlled trials. *Eur J Pediatr*. 2016;175(10):1353–60. doi: 10.1007/s00431-016-2764-0.
617. Alcântara PL, Wogel AZ, Rossi MIL, Neves IR, Sabates AL, Puggina AC. Effect of interaction with clowns on vital signs and non-verbal communication of hospitalized children. *Rev Paul Pediatr*. 2016;34(4):432–8. doi: 10.1016/j.rppede.2016.02.011.
618. Bruins Slot J, Hendriks M, Batenburg R. Feeling happy and carefree: a qualitative study on the experiences of parents, medical clowns and healthcare professionals with medical clowns. *Int J Qual Stud Health Well-being*. 2018;13(1):1503909. doi: 10.1080/17482631.2018.1503909.
619. Lee JH. The effects of music on pain: a meta-analysis. *J Music Ther*. 2016;53(4):430–77. doi: 10.1093/jmt/thw012.
620. Ulyanoya PE. Hospital clowning as a way of creative self-realization and spiritual self-development. In: Annual International Scientific and Practical Conference, Kiev, 8 April 2016.
621. Shella TA. Art therapy improves mood, and reduces pain and anxiety when offered at bedside during acute hospital treatment. *Arts Psychother*. 2018;57:59–64. doi: 10.1016/j.aip.2017.10.003.

622. Sextou P, Monk C. Bedside theatre performance and its effects on hospitalised children's well-being. *Arts Health*. 2013;5(1):81–8. doi: 10.1080/17533015.2012.712979.
623. Rokach A, Matalon R. "Tails": a fairy tale on furry tails – a 15-year theatre experience for hospitalized children created by health professionals. *J Paediatr Child Health*. 2007;12(4):301–4. doi: 10.1093/pch/12.4.301.
624. Archambault K, Porter-Vignola É, Brière FN, Garel P. Feasibility and preliminary effectiveness of a drum circle activity to improve affect in patients, families and staff of a pediatric hospital. *Arts Health*. 2018 [Epub ahead of print]. doi: 10.1080/17533015.2018.1536673.
625. Al-Yateem N, Brenner M, Shorrab AA, Docherty C. Play distraction versus pharmacological treatment to reduce anxiety levels in children undergoing day surgery: a randomized controlled non-inferiority trial. *Child Care Health Dev*. 2016;42(4):572–81. doi: <https://doi.org/10.1111/cch.12343>.
626. Tilbrook A, Dwyer T, Reid-Searl K, Parson JA. A review of the literature: the use of interactive puppet simulation in nursing education and children's healthcare. *Nurse Educ Pract*. 2017;22:73–9. doi: 10.1016/j.nepr.2016.12.001.
627. Koukourikos K, Tzeza L, Pantelidou P, Tsaloglidou A. The importance of play during hospitalization of children. *Mater Sociomed*. 2015;27(6):438–41. doi: 10.5455/msm.2015.27.438-441.
628. Teksoz E, Bilgin I, Madzwamuse SE, Oscakci AF. The impact of a creative play intervention on satisfaction with nursing care: a mixed-methods study. *J Spec Pediatr Nurs*. 2017;22(1):e12169. doi: 10.1111/jspn.12169.
629. Rollins J, Wallace KE. The vintage photograph project. *Arts Health*. 2017;9(2):167–85. doi: 10.1080/17533015.2016.1223706.
630. Slater JK, Braverman MT, Meath T. Patient satisfaction with a hospital's arts-enhanced environment as a predictor of the likelihood of recommending the hospital. *Arts Health*. 2017;9(2):97–110. doi: 10.1080/17533015.2016.1185448.
631. Karnik M, Printz B, Finkel J. A hospital's contemporary art collection: effects on patient mood, stress, comfort, and expectations. *HERD*. 2014;7(3):60–77. PMID: 24782236.
632. Iyendo TO. Sound as a supportive design intervention for improving health care experience in the clinical ecosystem: a qualitative study. *Complement Ther Clin Pract*. 2017;29:58–96. doi: 10.1016/j.ctcp.2017.08.004.
633. Enhancing the healing environment. London: The King's Fund; 2004 (<https://www.kingsfund.org.uk/publications/enhancing-healing-environment>).
634. Devlin AS, Arneill AB. Health care environments and patient outcomes: a review of the literature. *Environ Behav*. 2003;35(5):665–94. doi: 10.1016/j.psych.2015.09.007.
635. Zhang Y, Tzortzopoulos P, Kagioglou M. Healing built-environment effects on health outcomes: environment-occupant-health framework. *Build Res Inf*. 2019;47(6):747–66. doi: 10.1080/09613218.2017.1411130.
636. Sustainable places for health and well-being. London: Design Council; 2009 (<https://www.designcouncil.org.uk/resources/report/sustainable-places-health-and-well-being>).
637. Bratt J, Dileo C, Shim M. Music interventions for preoperative anxiety. *Cochrane Database Syst Rev*. 2013;(6):CD006908. doi: 10.1002/14651858.CD006908.pub2.
638. Bringman H, Giesecke K, Thörne A, Bringman S. Relaxing music as pre-medication before surgery: a randomised controlled trial. *Acta Anaesthesiol Scand*. 2009;53(6):759–64. doi: 10.1111/j.1399-6576.2009.01969.x.
639. Hole J, Hirsch M, Ball E, Meads C. Music as an aid for postoperative recovery in adults: a systematic review and meta-analysis. *Lancet*. 2015;386(10004):1659–71. doi: 10.1016/S0140-6736(15)60169-6.
640. Kühlmann AYR, de Rooij A, Kroese LF, van Dijk M, Hunink MGM, Jeekel J. Meta-analysis evaluating music interventions for anxiety and pain in surgery. *Br J Surg*. 2018;105(7):773–83. doi: 10.1002/bjs.10853.
641. van der Heijden MJ, Oliai Araghi S, van Dijk M, Jeekel J, Hunink MG. The effects of perioperative music interventions in pediatric surgery: a systematic review and meta-analysis of randomized controlled trials. *PLoS One*. 2015;10(8):e0133608. doi: 10.1371/journal.pone.0133608.
642. Klassen JA, Liang Y, Tjosvold L, Klassen TP, Hartling L. Music for pain and anxiety in children undergoing medical procedures: a systematic review of randomized controlled trials. *Ambul Pediatr*. 2008;8(2):117–28. doi: 10.1016/j.ambp.2007.12.005.
643. Song M, Li N, Zhang X, Shang Y, Yan L, Chu J et al. Music for reducing the anxiety and pain of patients undergoing a biopsy: a meta-analysis. *J Adv Nurs*. 2018;74(5):1016–29. doi: 10.1111/jan.13509.
644. Kyriakides R, Jones P, Geraghty R, Skolarikos A, Liatsikos E, Traxer O et al. Effect of music on outpatient urological procedures: a systematic review and meta-analysis from the European Association of Urology section of uro-technology. *J Urol*. 2018;199(5):1319–27. doi: 10.1016/j.juro.2017.11.117.

645. Li J, Zhou L, Wang Y. The effects of music intervention on burn patients during treatment procedures: a systematic review and meta-analysis of randomized controlled trials. *BMC Complement Altern Med.* 2017;17(1):158. doi: 10.1186/s12906-017-1669-4.
646. Jayakar JP, Alter DA. Music for anxiety reduction in patients undergoing cardiac catheterization: a systematic review and meta-analysis of randomized controlled trials. *Complement Ther Clin Pract.* 2017;28:122–30. doi: 10.1016/j.ctcp.2017.05.011.
647. van der Wal-Huisman H, Dons KSK, Smilde R, Heineman E, van Leeuwen BL. The effect of music on postoperative recovery in older patients: a systematic review. *J Geriatr Oncol.* 2018;9(6):550–9. doi: 10.1016/j.jgo.2018.03.010.
648. Guo J, Wang J. Study on individual music intervention to reduce preoperative anxiety on patients undergoing laparoscopic surgery. *Chin J Nurs.* 2005;40(7):485–8.
649. Nilsson U. Soothing music can increase oxytocin levels during bed rest after open-heart surgery: a randomised control trial. *J Clin Nurs.* 2009;18(15):2153–61. doi: 10.1111/j.1365-2702.2008.02718.x.
650. Nilsson U, Unosson M, Rawal N. Stress reduction and analgesia in patients exposed to calming music postoperatively: a randomized controlled trial. *Eur J Anaesthesiol.* 2005;22(2):96–102. doi: 10.1017/s0265021505000189.
651. Miluk-Kolasa B, Matejek M, Stupnicki R. The effects of music listening on changes in selected physiological parameters in adult pre-surgical patients. *J Music Ther.* 1996;33(3):208–18. doi: 10.1016/j.aorn.2007.09.013.
652. Moghimian M, Akbari M, Moghaddasi J, Niknajad R. Effect of digital storytelling on anxiety in patients who are candidates for open-heart surgery. *J Cardiovasc Nurs.* 2019;34(3):231–5. doi: 10.1097/JCN.0000000000000569.
653. Taso Y, Kuo H-C, Lee H-C, Yiin S-J. Developing a medical picture book for reducing venipuncture distress in preschool-aged children. *Int J Nursing Practice.* 2017;23(5):e12569. doi: 10.1111/ijn.12569.
654. Tunney AM, Boore J. The effectiveness of a storybook in lessening anxiety in children undergoing tonsillectomy and adenoidectomy in Northern Ireland. *Issues Compr Pediatr.* 2013;36(4):319–35. doi: 10.3109/01460862.2013.834398.
655. Dionigi A, Gremigni P. A combined intervention of art therapy and clown visits to reduce preoperative anxiety in children. *J Clin Nurs.* 2017;26(5–6):632–40. doi: 10.1111/jocn.13578.
656. Oulton K, Oldrieve N, Bayliss J, Jones V, Manning I, Shipway L et al. Using participatory and creative research methods to develop and pilot an informative game for preparing children for blood tests. *Arts Health.* 2018;10(3):227–40. doi: 10.1080/17533015.2017.1392329.
657. Seiden SC, McMullan S, Sequera-Ramos L, De Oliveira GS Jr, Roth A, Rosenblatt A et al. Tablet-based Interactive Distraction (TBID) vs oral midazolam to minimize perioperative anxiety in pediatric patients: a noninferiority randomized trial. *Paediatr Anaesth.* 2014;24(12):1217–23. doi: 10.1111/pan.12475.
658. Liguori S, Stacchini M, Ciofi D, Olivini N, Bisogni S, Festini F. Effectiveness of an app for reducing preoperative anxiety in children: a randomized clinical trial. *JAMA Pediatr.* 2016;170(8):e160533. doi: 10.1001/jamapediatrics.2016.0533.
659. Cumino DO, Vieira JE, Lima LC, Stievano LP, Silva RAP, Mathias LAST. Smartphone-based behavioural intervention alleviates children's anxiety during anaesthesia induction: a randomised controlled trial. *Eur J Anaesthesiol.* 2017;34(3):169–75. doi: 10.1097/EJA.0000000000000589.
660. Chow CHT, Van Lieshout RJ, Schmidt LA, Buckley N. Tablet-based intervention for reducing children's preoperative anxiety: a pilot study. *J Dev Behav Pediatr.* 2017;38:409–16. doi: 10.1097/DBP.0000000000000454.
661. Caldwell RM, Ray R. Utilization of iPad technology to decrease pediatric preoperative anxiety. *J Pediatr Surg Nurs.* 2017;6(4):103–12. doi: 10.1097/JPS.0000000000000152.
662. Bonett J. Ceiling art in a radiation therapy department: its effect on patient treatment experience. *J Med Radiat Sci.* 2015;62(3):192–7. doi: 10.1002/jmrs.111.
663. McCabe C, Roche D, Hegarty F, McCann S. "Open Window": a randomized trial of the effect of new media art using a virtual window on quality of life in patients' experiencing stem cell transplantation. *Psychooncology.* 2013;22(2):330–7. doi: 10.1002/pon.2093.
664. Tkachenko GA. [Psychological support of patients with malignant neoplasms of maxillofacial part]. *Bull Psychotherapy.* 2014;51(56):58–68 (in Russian).
665. Sinbukhova EV, Konovalov AD. [Influence of patients emotional disorders and their possible correction using art-therapy during rehabilitation after neurosurgical treatment]. *Arhiv Vnutrennej Med.* 2016;2(28):55–60 (in Russian). doi: 10.20514/2226-6704-2016-6-2-55-60.
666. Sinbukhova EV, Kravchuk AD, Chobulov SA. [Emotional state of the patient at the stage of reconstructive surgery]. *Vyatka Med Herald.* 2017;2(54):85–7 (in Russian).

667. Hsu CC, Chen WM, Chen SR, Tseng YT, Lin PC. Effectiveness of music listening in patients with total knee replacement during CPM rehabilitation. *Biol Res Nurs*. 2016;18(1):68–75. doi: 10.1177/1099800415572147.
668. Lim HA, Miller K, Fabian C. The effects of therapeutic instrumental music performance on endurance level, self-perceived fatigue level, and self-perceived exertion of inpatients in physical rehabilitation. *J Music Ther*. 2011;48(2):124–48. PMID: 21938889.
669. Prahm C, Kayali F, Sturma A, Aszmann O. Playbionic: game-based interventions to encourage patient engagement and performance in prosthetic motor rehabilitation. *PM&R*. 2018;10(11):1252–60. doi: 10.1016/j.pmrj.2018.09.027.
670. Baur K, Speth F, Nagle A, Riener R, Klamroth-Marganska V. Music meets robotics: a prospective randomized study on motivation during robot aided therapy. *J Neuroeng Rehabil*. 2018;15(1):79. doi: 10.1186/s12984-018-0413-8.
671. Fulton S, Clohesy D, Wise FM, Woolley K, Lannin N. A goal-directed woodwork group for men in community rehabilitation: a pilot project. *Aust Occup Ther J*. 2016;63(1):29–36. doi: 10.1111/1440-1630.12242.
672. Murillo-García Á, Villafaina S, Adsuar JC, Gusi N, Collado-Mateo D. Effects of dance on pain in patients with fibromyalgia: a systematic review and meta-analysis. *Evid Based Complement Alternat Med*. 2018;2018:8709748. doi: 10.1155/2018/8709748.
673. Tarr J, Cornish F, Gonzalez-Polledo E. Beyond the binaries: reshaping pain communication through arts workshops. *Sociol Health Illn*. 2018;40(3):577–92. doi: 10.1111/1467-9566.12669.
674. Bradt J, Dileo C, Grocke D. Music interventions for mechanically ventilated patients. *Cochrane Database Syst Rev*. 2010;(12):CD006902. doi: 10.1002/14651858.CD006902.pub2.
675. Hetland B, Lindquist R, Chlan LL. The influence of music during mechanical ventilation and weaning from mechanical ventilation: a review. *Heart Lung*. 2015;44(5):416–25. doi: 10.1016/j.hrtlng.2015.06.010.
676. Lee CH, Lai CL, Sung YH, Lai MY, Lin CY, Lin LY. Comparing effects between music intervention and aromatherapy on anxiety of patients undergoing mechanical ventilation in the intensive care unit: a randomized controlled trial. *Qual Life Res*. 2017;26(7):1819–29. doi: 10.1007/s11136-017-1525-5.
677. Lee CH, Lee CY, Hsu MY, Lai CL, Sung YH, Lin CY et al. Effects of music intervention on state anxiety and physiological indices in patients undergoing mechanical ventilation in the intensive care unit: a randomized controlled trial. *Biol Res Nurs*. 2017;19(2):137–44. doi: 10.1177/1099800416669601.
678. Liang Z, Ren D, Choi J, Happ MB, Hravnak M, Hoffman LA. Music intervention during daily weaning trials: a 6 day prospective randomized crossover trial. *Complement Ther Med*. 2016;29:72–7. doi: 10.1016/j.ctim.2016.09.003.
679. Szilágyi A, Diószeghy C, Fritúz G, Gál J, Varga K. Shortening the length of stay and mechanical ventilation time by using positive suggestions via mp3 players for ventilated patients. *Interv Med Appl Sci*. 2014;6(1):3–15. doi: 10.1556/IMAS.6.2014.1.1.
680. Conrad C, Niess H, Jauch KW, Bruns CJ, Hartl W, Welker L. Overture for growth hormone: requiem for interleukin-6? *Crit Care Med*. 2007;35(12):2709–13. doi: 10.1097/01.ccm.0000291648.99043.b9.
681. Chlan LL, Engeland WC, Savik K. Does music influence stress in mechanically ventilated patients? *Intensive Crit Care Nurs*. 2013;29(3):121–7. doi: 10.1016/j.iccn.2012.11.001.
682. Yaman Aktaş Y, Karabulut N. The effects of music therapy in endotracheal suctioning of mechanically ventilated patients. *Nurs Crit Car*. 2016;21(1):44–52. doi: 10.1111/nicc.12159.
683. Tracy MF, Chlan L, Staugaitis A. Perceptions of patients and families who received a music intervention during mechanical ventilation. *Music Med*. 2015;7(3):54–8. PMID: 26301046.
684. Messika J, Martin Y, Maquigneau N, Puechberty C, Henry-Lagarrigue M, Stoclin A et al. A musical intervention for respiratory comfort during non-invasive ventilation in the ICU. *Eur Respir J*. 2019;53(1):pii:1801873. doi: 10.1183/13993003.01873-2018.
685. OpenWindow Project [website]. Roschprojects; 2019 [<http://www.roschprojects.com/openwindow-project>].
686. Magee WL, O’Kelly J. Music therapy with disorders of consciousness: current evidence and emergent evidence-based practice. *Ann N Y Acad Sci*. 2015;1337:256–62. doi: 10.1111/nyas.12633.
687. Grimm T, Kreutz G. Music interventions in disorders of consciousness (DOC): a systematic review. *Brain Inj*. 2018;32(6):704–14. doi: 10.1080/02699052.2018.1451657.
688. Janzen TB, Thaut MH. Rethinking the role of music in the neurodevelopment of autism spectrum disorder. *Music Sci*. 2018;1–18. doi: 10.1177/2059204318769639.
689. Geretsegger M, Elefant C, Mössler KA, Gold C. Music therapy for people with autism spectrum disorder. *Cochrane Database Syst Rev*. 2014;6(6):CD004381. doi: 10.1002/14651858.CD004381.pub3.

690. Shi Z-M, Lin G-H, Xie Q. Effects of music therapy on mood, language, behavior, and social skills in children with autism: a meta-analysis. *Chin Nurs Res.* 2016;3(3):137–41. doi: 10.1016/j.cnre.2016.06.018.
691. Schweizer C, Knorth EJ, Spreen M. Art therapy with children with autism spectrum disorders: a review of clinical case descriptions on “what works”. *Arts Psychother.* 2014;41(5):577–93. doi: <https://doi.org/10.1016/j.aip.2014.10.009>.
692. Vaiouli P, Andreou G. Communication and language development of young children with autism: a review of research in music. *Commun Disord Q.* 2018;39(2):323–9. doi: 10.1177/1525740117705117.
693. Ockelford A. Songs without words: exploring how music can serve as a proxy language in social interaction with autistic children. In: MacDonald R, Kreutz G, Mitchell L, editors. *Music, health, and wellbeing.* Oxford: Oxford University Press; 2012:289–323. doi: 10.1093/acprof:oso/9780199586974.003.0021.
694. Campbell PS. *Songs in their heads: music and its meaning in children’s lives.* Oxford: Oxford University Press; 2010.
695. Sharda M, Midha R, Malik S, Mukerji S, Singh NC. Fronto-temporal connectivity is preserved during sung but not spoken word listening, across the autism spectrum. *Autism Res.* 2015;8(2):174–86. doi: 10.1002/aur.1437.
696. Molnar Szakacs I, Heaton P. Music: a unique window into the world of autism. *Ann N Y Acad Sci.* 2012;1252(1):318–24. doi: 10.1111/j.1749-6632.2012.06465.x.
697. Bhat AN, Srinivasan S. A review of “music and movement” therapies for children with autism: embodied interventions for multisystem development. *Front Integr Neurosci.* 2013;7:22. doi: 10.3389/fnint.2013.00022.
698. Ruan Z-L, Liu L, Strodl E, Fan L-J, Yin X-N, Wen G-M et al. Antenatal training with music and maternal talk concurrently may reduce autistic-like behaviors at around 3 years of age. *Front Psychiatry.* 2018;8:305. doi: 10.3389/fpsy.2017.00305.
699. De Vries D, Beck T, Stacey B, Winslow K, Meines K. Music as a therapeutic intervention with autism: a systematic review of the literature. *Ther Recreat J.* 2015;49(3):220–37. doi: 10.1007/s10803-012-1615-8.
700. Poquérusse J, Azhari A, Setoh P, Cainelli S, Ripoli C, Venuti P et al. Salivary α -amylase as a marker of stress reduction in individuals with intellectual disability and autism in response to occupational and music therapy. *J Intellect Disabil Res.* 2018;62(2):156–63. doi: 10.1111/jir.12453.
701. Corbett BA, Blain SD, Ioannou S, Balsler M. Changes in anxiety following a randomized control trial of a theatre-based intervention for youth with autism spectrum disorder. *Autism.* 2017;21(3):333–43. doi: 10.1177/1362361316643623.
702. Nafikova LA, Sidorov IYU. [Art therapy as a form of the development of the creative potential of children sufficient autism]. *Bull Council Young Scientists Specialists Chelyabinsk Region No. 1.* 2017;1(16):89–91 (in Russian).
703. Cook A, Ogden J, Winstone N. The impact of a school-based musical contact intervention on prosocial attitudes, emotions and behaviours: a pilot trial with autistic and neurotypical children. *Autism.* 2018;23(4):933–42. doi: 10.1177/1362361318787793.
704. LaGasse AB. Social outcomes in children with autism spectrum disorder: a review of music therapy outcomes. *Patient Relat Outcome Meas.* 2017;8:23–32. doi: 10.2147/ PROM.S106267.
705. Corbett BA. Autism, art, and accessibility to theater. *Am Med Assoc J Ethics.* 2016;18(12):1232–40. doi: 10.1001/journalofethics.2016.18.12.imhl1-1612.
706. Mpella M, Evaggelinou C. Does theatrical play promote social skills development in students with autism? A systematic review of the methods and measures employed in the literature. *Preschool Primary Ed.* 2018;6(2):96–118. doi: 10.12681/ppj.16135.
707. Woodman AV, Breviglia E, Mori Y, Golden R. The effect of music on exercise intensity among children with autism spectrum disorder: a pilot study. *J Clin Med.* 2018;7(3):38. doi: 10.3390/jcm7030038.
708. Aghnihotri S, Gray J, Colantonio A, Polatajko H, Cameron D, Wiseman-Hakes C et al. Two case study evaluations of an arts-based social skills intervention for adolescents with childhood brain disorder. *Dev Neurorehabil.* 2012;15(4):284–97. doi: <https://doi.org/10.3109/17518423.2012.673178>.
709. Grabovskaya EY, Tarabrina NY. [Efficiency of application of art therapy in complex rehabilitation of younger school age patients with children’s cerebral paralysis]. *Sci Bull Crimea.* 2018;1(12):1–8 (in Russian).
710. Bringas ML, Zaldivar M, Rojas PA, Martinez-Monters K, Chongo DM, Ortega MA et al. Effectiveness of music therapy as an aid to neurorestoration of children with severe neurological disorders. *Front Neurosci.* 2015;9:427. doi: 10.3389/fnins.2015.00427.
711. Ghai S, Ghai I, Effenberg AO. Effect of rhythmic auditory cueing on gait in cerebral palsy: a systematic review and meta-analysis. *Neuropsychiatr Dis Treat.* 2017;14:43–59. doi: 10.2147/NDT.S148053.
712. Peng YC, Lu TW, Wang TH, Chen YL, Liao HF, Lin KH et al. Immediate effects of therapeutic music on loaded sit-to-stand movement in children with spastic diplegia. *Gait Posture.* 2011;33(2):274–8. doi: 10.1016/j.gaitpost.2010.

713. Teixeira-Machado L, Azevedo-Santos I, DeSantana JM. Dance improves functionality and psychosocial adjustment in cerebral palsy: a randomized controlled clinical trial. *Am J Phys Med Rehabil.* 2017;96(6):424–9. doi: 10.1097/PHM.0000000000000646.
714. López Ortiz C, Gaebler Spira DJ, McKeeman SN, McNish RN, Green D. Dance and rehabilitation in cerebral palsy: a systematic search and review. *Dev Med Child Neurol.* 2019;61(4):393–8. doi: 10.1111/dmnc.14064.
715. Stribling K, Christy J. Creative dance practice improves postural control in a child with cerebral palsy. *Pediatr Phys Ther.* 2017;29(4):365–9. doi: 10.1097/PEP.0000000000000450.
716. López-Ortiz C, Gladden K, Deon L, Schmidt J, Girolami G, Gaebler-Spira D. Dance program for physical rehabilitation and participation in children with cerebral palsy. *Arts Health.* 2012;4(1):39–54. doi: 10.1080/17533015.2011.564193.
717. Terada K, Satonaka A, Terada Y, Suzuki N. Training effects of wheelchair dance on aerobic fitness in bedridden individuals with severe athetospastic cerebral palsy rated to GMFCS level v. *Eur J Phys Rehabil Med.* 2017;53(5):744–50. doi: 10.23736/S1973-9087.17.04486-0.
718. Alves-Pinto A, Ehrlich S, Cheng G, Turova V, Blumenstein T, Lampe R. Effects of short-term piano training on measures of finger tapping, somatosensory perception and motor-related brain activity in patients with cerebral palsy. *Neuropsychiatr Dis Treat.* 2017;13:2705–18. doi: 10.2147/NDT.S145104.
719. Alves-Pinto A, Turova V, Blumenstein T, Lampe R. The case for musical instrument training in cerebral palsy for neuro-rehabilitation. *Neural Plast.* 2016;2016:1072301. doi: 10.1155/2016/1072301.
720. Marrades-Caballero E, Santonja-Medina CS, Sanz-Mengibar JM, Santonja-Medina F. Neurologic music therapy in upper-limb rehabilitation in children with severe bilateral cerebral palsy: a randomized controlled trial. *Eur J Phys Rehabil Med.* 2018;54(6):866–72. doi: 10.23736/S1973-9087.18.04996-1.
721. Ben-Pazzi H, Aran A, Pandyan A, Gelkop N, Ginsberg G, Pollay Y et al. Auditory stimulation improves motor function and caretaker burden in children with cerebral palsy: a randomized double blind study. *PLOS One.* 2018;13(12):e0208792. doi: <https://doi.org/10.1371/journal.pone.0208792>.
722. Breathe Magic intensive therapy programme [website]. London: BREATHE Arts Health Research; 2019 (<http://breathe-ahr.org/breathe-magic/>).
723. Green D, Schertz M, Gordon A, Moore A. A multi-site study of functional outcomes following a themed approach to hand–arm bimanual intensive therapy for children with hemiplegia. *Devel Med Child Neurol.* 2013;55(6):527–33. doi: 10.1111/dmnc.12113.
724. Weinstein M, Myers V, Green D, Schertz M, Fattal-Valevski A, Artzi M et al. Exploration of brain and behaviour changes following intensive bimanual therapy in children with hemiplegia/unilateral cerebral palsy. *Dev Med Child Neurol.* 2016;58:8–9.
725. Särkämö T, Soto D. Music listening after stroke: beneficial effects and potential neural mechanisms. *Ann N Y Acad Sci.* 2012;1252(1):266–81. doi: 10.1111/j.1749-6632.2011.06405.x.
726. Särkämö T, Pihko E, Laitinen S, Forsblom A, Soinila S, Mikkonen M et al. Music and speech listening enhance the recovery of early sensory processing after stroke. *J Cogn Neurosci.* 2010;22(12):2716–27. doi: 10.1162/jocn.2009.21376.
727. Särkämö T, Ripollés P, Vepsäläinen H, Autti T, Silvenno HM, Salli E et al. Structural changes induced by daily music listening in the recovering brain after middle cerebral artery stroke: a voxel-based morphometry study. *Front Hum Neurosci.* 2014;8:245. doi: 10.3389/fnhum.2014.00245.
728. Särkämö T, Tervaniemi M, Laitinen S, Forsblom A, Soinila S, Mikkonen M et al. Music listening enhances cognitive recovery and mood after middle cerebral artery stroke. *Brain.* 2008;131(3):866–76. doi: 10.1093/brain/awn013.
729. Forsblom A, Särkämö T, Laitinen S, Tervaniemi M. The effect of music and audiobook listening on people recovering from stroke: the patient’s point of view. *Mus Med.* 2010;2:229–34. doi: 10.1177/1943862110378110.
730. Raglio A, Zaliani A, Baiardi P, Bossi D, Sguazzin C, Capodaglio E et al. Active music therapy approach for stroke patients in the post-acute rehabilitation. *Neurol Sci.* 2017;38(5):893–7. doi: 10.1007/s10072-017-2827-7.
731. Fujioka T, Dawson DR, Wright R, Honjo K, Chen JL, Chen JJ. The effects of music-supported therapy on motor, cognitive, and psychosocial functions in chronic stroke. *Ann N Y Acad Sci.* 2018;1423(1):264–74. doi: 10.1111/nyas.13706.
732. Morris JH, Kelly C, Joice S, Kroll T, Mead G, Donnan P et al. Art participation for psychosocial wellbeing during stroke rehabilitation: a feasibility randomised controlled trial. *Disabil Rehabil.* 2019;41(1):9–18. doi: 10.1080/09638288.2017.1370499.
733. Kongkasuwan R, Voraakhom K, Pisolayabutra P, Maneechai P, Boonin J, Kuptniratsaikul V. Creative art therapy to enhance rehabilitation for stroke patients: a randomized controlled trial. *Clin Rehabil.* 2015;30(10):1016–23. doi: 10.1177/02692155155607072.

734. Ermakova NG. [Application of the program of individual psychological correction in the process of rehabilitation of patients with cognitive and motor disorders after the stroke]. *Bull Psychotherapy*. 57 (6):30–48 (in Russian).
735. Fogg-Rogers L, Buetow S, Talmage A, McCann CM, Leão SH, Tippett L et al. Choral singing therapy following stroke or Parkinson's disease: an exploration of participants' experiences. *Disabil Rehabil*. 2016;38(10):952–62. doi: 10.3109/09638288.2015.1068875.
736. Tamplin J, Baker FA, Jones B, Way A, Lee S. "Stroke a Chord": the effect of singing in a community choir on mood and social engagement for people living with aphasia following a stroke. *NeuroRehabilitation*. 2013;32(4):929–41. doi: 10.3233/NRE-130916.
737. Pohl P, Carlsson G, Bunketorp Käll L, Nilsson M, Blomstrand C. Experiences from a multimodal rhythm and music-based rehabilitation program in late phase of stroke recovery: a qualitative study. *PLOS One*. 2018;13(9):e0204215. doi: 10.1371/journal.pone.0204215.
738. Lo TLT, Lee JLC, Ho RTH. Creative arts-based therapies for stroke survivors: a qualitative systematic review. *Front Psychol*. 2018;9:1646. doi: 10.3389/fpsyg.2018.01646.
739. Zhang Y, Cai J, Zhang Y, Ren T, Zhao M, Zhao Q. Improvement in stroke-induced motor dysfunction by music-supported therapy: a systematic review and meta-analysis. *Sci Rep*. 2016;6:38521. doi: 10.1038/srep38521.
740. Patterson KK, Wong JS, Nguyen TU, Brooks D. A dance program to improve gait and balance in individuals with chronic stroke: a feasibility study. *Top Stroke Rehabil*. 2018;25(6):410–16. doi: 10.1080/10749357.2018.1469714.
741. Mainka S, Wissel J, Völler H, Evers S. The use of rhythmic auditory stimulation to optimize treadmill training for stroke patients: a randomized controlled trial. *Front Neurol*. 2018;9:755. doi: 10.3389/fneur.2018.00755.
742. Yoo GE, Kim SJ. Rhythmic auditory cueing in motor rehabilitation for stroke patients: systematic review and meta-analysis. *J Music Ther*. 2016;53(2):149–77. doi: 10.1093/jmt/thw003.
743. Baylan S, Swann-Price R, Peryer G, Quinn T. The effects of music listening interventions on cognition and mood post-stroke: a systematic review. *Expert Rev Neurother*. 2016;16(11):1241–9. doi: 10.1080/14737175.2016.1227241.
744. Chen JL. Music-supported therapy for stroke motor recovery: theoretical and practical considerations. *Ann N Y Acad Sci*. 2018;1423(1):57–65. doi: 10.1111/nyas.13726.
745. Straube T, Schulz A, Geipel K, Mentzel HJ, Miltner WH. Dissociation between singing and speaking in expressive aphasia: the role of song familiarity. *Neuropsychologia*. 2008;46(5):1505–12. doi: 10.1016/j.neuropsychologia.2008.01.008.
746. Hébert S, Racette A, Gagnon L, Peretz I. Revisiting the dissociation between singing and speaking in expressive aphasia. *Brain*. 2003;126(8):1838–50. doi: 10.1093/brain/awg186.
747. Racette A, Bard C, Peretz I. Making non-fluent aphasics speak: sing along! *Brain*. 2006;129(10):2571–84. doi: 10.1093/brain/awl250.
748. Zumbansen A, Peretz I, Hébert S. The combination of rhythm and pitch can account for the beneficial effect of melodic intonation therapy on connected speech improvements in Broca's aphasia. *Front Hum Neurosci*. 2014;8:592. doi: 10.3389/fnhum.2014.00592.
749. van der Meulen I, van de Sandt-Koenderman WM, Heijenbrok-Kal MH, Visch-Brink EG, Ribbers GM. The efficacy and timing of melodic intonation therapy in subacute aphasia. *Neurorehabil Neural Repair*. 2014;28(6):536–44. doi: 10.1177/1545968313517753.
750. Breier JI, Randle S, Maher LM, Papanicolaou AC. Changes in maps of language activity activation following melodic intonation therapy using magnetoencephalography: two case studies. *J Clin Exp Neuropsychol*. 2010;32(3):309–14. doi: 10.1080/13803390903029293.
751. Wan CY, Zheng X, Marchina S, Norton A, Schlaug G. Intensive therapy induces contralateral white matter changes in chronic stroke patients with Broca's aphasia. *Brain Lang*. 2014;136:1–7. doi: 10.1016/j.bandl.2014.03.011.
752. Tamplin J. A pilot study into the effect of vocal exercises and singing on dysarthric speech. *NeuroRehabilitation*. 2008;23(3):207–16. PMID: 18560137.
753. Kim SJ, Jo U. Study of accent-based music speech protocol development for improving voice problems in stroke patients with mixed dysarthria. *NeuroRehabilitation*. 2013;32(1):185–90. doi: 10.3233/NRE-130835.
754. Saita E, Tramontano M. Navigating the complexity of the therapeutic and clinical use of photography in psychosocial settings: a review of the literature. *Res Psychother*. 2018;21(1):1–11. doi: 10.4081/ripppo.2018.293.
755. Raglio A, Attardo L, Gontero G, Rollino S, Groppo E, Granie E. Effects of music and music therapy on mood in neurological patients. *World J Psychiatry*. 2015;5(1):68–78. doi: 10.5498/wjpv.v5.i1.68.

756. Magee WL, Clark I, Tamplin J, Bradt J Music interventions for acquired brain injury. *Cochrane Database Sys Rev*. 2017;1:CD006787. doi: 10.1002/14651858.CD006787.pub3.
757. Roddy C, Rickard N, Tamplin J, Lee YC, Baker FA. Exploring self-concept, wellbeing and distress in therapeutic songwriting participants following acquired brain injury: a case series analysis. *Neuropsychol Rehabil*. 2018:1–21 [Epub ahead of print]. doi: 10.1080/09602011.2018.1448288.
758. Baker F, Tamplin J, Rickard N, New P, Ponsford J, Roddy C et al. Meaning making process and recovery journeys explored through songwriting in early neurorehabilitation: exploring the perspectives of participants of their self-composed songs through the interpretative phenomenological analysis. *Front Psychol*. 2018;9:1422. doi: 10.3389/fpsyg.2018.01422.
759. Baker FA, Tamplin J, Rickard N, Ponsford J, New PW, Lee YC. A therapeutic songwriting intervention to promote reconstruction of self-concept and enhance well-being following brain or spinal cord injury: pilot randomized controlled trial. *Clin Rehabil*. 2019;33(6):1045–55. doi: 10.1177/0269215519831417.
760. Aghnihotri S, Gray J, Colantonio A, Polatajko H, Cameron D, Wiseman-Hakes C et al. Arts-based social skills interventions for adolescents with acquired brain injuries: five case reports. *Dev Neurorehabil*. 2014;17(1):44–63. doi: <https://doi.org/10.3109/17518423.2013.844739>.
761. D’Cruz K, Douglas J, Serry T. Narrative storytelling as both an advocacy tool and a therapeutic process: perspectives of adult storytellers with acquired brain injury. *Neuropsychol Rehabil*. 2019:1–21 [Epub ahead of print]. doi: 10.1080/09602011.2019.1586733.
762. Masters B, Kiratli BJ, Hong M. Physical benefits in dancers with spinal cord injury participating in six week mixed ability Latin dance class. *PM&R*. 2013;5(9):S236. doi: 10.1016/j.pmrj.2013.08.377.
763. Macrì E, Limoni C. Artistic activities and psychological well-being perceived by patients with spinal cord injury. *Arts Psychother*. 2017;54:1–6. doi: 10.1016/j.aip.2017.02.003.
764. Nazari H, Saadatjoo A, Tabiee S, Nazari A. The effect of clay therapy on anxiety, depression, and happiness in people with physical disabilities. *Mod Care J*. 2018;15(4):e83455. doi: 10.5812/modernc.83455.
765. Loïselle F, Rochette A, Tétreault S, Lafortune M, Bastien J. Social circus program (Cirque du Soleil) promoting social participation of young people living with physical disabilities in transition to adulthood: a qualitative pilot study. *Dev Neurorehabil*. 2019;22(4):250–9. doi: 10.1080/17518423.2018.1474502.
766. Tamplin J, Baker FA, Grocke D, Brazzale DJ, Pretto JJ, Ruehland WR et al. Effect of singing on respiratory function, voice, and mood after quadriplegia: a randomized controlled trial. *Arch Phys Med Rehabil*. 2013;94(3):426–34. doi: 10.1016/j.apmr.2012.10.006.
767. Vaudreuil R, Avila L, Bradt J, Pasquina P. Music therapy applied to complex blast injury in interdisciplinary care: a case report. *Disabil Rehabil*. 2019;41(19):2333–42. doi: 10.1080/09638288.2018.1462412.
768. Park S, Williams RA, Lee D. Effect of preferred music on agitation after traumatic brain injury. *West J Nurs Res*. 2016;38(4):394–410. doi: 10.1177/0193945915593180.
769. Berberian M, Walker MS, Kaimal G. “Master my demons”: art therapy montage paintings by active-duty military service members with traumatic brain injury and post-traumatic stress. *Med Humanit*. 2018 [Epub ahead of print]. doi: 10.1136/medhum-2018-011493.
770. Brackney DE, Brooks JL. Complementary and alternative medicine: the Mozart effect on childhood epilepsy: a systematic review. *J Sch Nurs*. 2017;34(1):28–37. doi: 10.1177/1059840517740940.
771. Bedetti C, D’Alessandro P, Piccirilli M, Marchiafava M, Baglioni A, Giuglietti M. Mozart’s music and multidrug-resistant epilepsy: a potential EEG index of therapeutic effectiveness. *Psychiatr Danub*. 2018;30(suppl 7):567–71. PMID: 30439848.
772. Liao H, Jiang G, Wang X. Music therapy as a non-pharmacological treatment for epilepsy. *Expert Rev Neurother*. 2015;15(9):993–1003. doi: 10.1586/14737175.2015.1071191.
773. Sharp K, Hewitt J. Dance as an intervention for people with Parkinson’s disease: a systematic review and meta-analysis. *Neurosci Biobehav Rev*. 2014;47:445–56. doi: 10.1016/j.neubiorev.2014.09.009.
774. Dos Santos Delabary M, Komerowski IG, Monteiro EP, Costa RR, Haas AN. Effects of dance practice on functional mobility, motor symptoms and quality of life in people with Parkinson’s disease: a systematic review with meta-analysis. *Aging Clin Exp Res*. 2018;30(7):727–35. doi: 10.1007/s40520-017-0836-2.
775. Shulman LM, Gruber-Baldini AL, Anderson KE, Fishman PS, Reich SG, Weiner WJ. The clinically important difference on the unified Parkinson’s disease rating scale. *Arch Neurol*. 2010;67(1):64–70. doi: 10.1001/archneurol.2009.295.
776. Heiberger L, Maurer C, Amtage F, Mendez-Balbuena I, Schulte-Mönting J, Hepp-Reymond M-C et al. Impact of a weekly dance class on the functional mobility and on the quality of life of individuals with Parkinson’s disease. *Front Aging Neurosci*. 2011;3:14 doi: 10.3389/fnagi.2011.00014.

777. Duncan RP, Earhart GM. Randomized controlled trial of community-based dancing to modify disease progression in Parkinson's disease. *Neurorehabil Neural Repair*. 2012;26(2):132–43. doi: 10.1177/1545968311421614.
778. Hackney ME, Earhart GM. Effects of dance on movement control in Parkinson's disease: a comparison of Argentine tango and American ballroom. *J Rehabil Med*. 2009;41(6):475–81. doi: 10.2340/16501977-0362.
779. Rios Romenets S, Anang J, Fereshtehnejad SM, Pelletier A, Postuma R. Tango for treatment of motor and non-motor manifestations in Parkinson's disease: a randomized control study. *Complement Ther Med*. 2015;23(2):175–84. doi: 10.1016/j.ctim.2015.01.015.
780. Volpe D, Signorini M, Marchetto A, Lynch T, Morris ME. A comparison of Irish set dancing and exercises for people with Parkinson's disease: a phase II feasibility study. *BMC Geriatr*. 2013;13:54. doi: 10.1186/1471-2318-13-54.
781. Ghai S, Ghai I, Schmitz G, Effenberg AO. Effect of rhythmic auditory cueing on Parkinsonian gait: a systematic review and meta-analysis. *Sci Rep*. 2018;8(1):506. doi: 10.1038/s41598-017-16232-5.
782. Harrison EC, McNeely ME, Earhart GM. The feasibility of singing to improve gait in Parkinson disease. *Gait Posture*. 2017;53:224–9. doi: 10.1016/j.gaitpost.2017.02.008.
783. Ghai S, Ghai I. Effects of rhythmic auditory cueing in gait rehabilitation for multiple sclerosis: a mini systematic review and meta-analysis. *Front Neurol*. 2018;9:386. doi: 10.3389/fneur.2018.00386.
784. Patterson KK, Wong JS, Prout EK, Brooks D. Dance for the rehabilitation of balance and gait in adults with neurological conditions other than Parkinson's disease: a systematic review. *Heliyon*. 2018;4(3):e00584. doi: 10.1016/j.heliyon.2018.e00584.
785. Scheidler AM, Kinnett-Hopkins D, Learmonth YC, Motl R, López-Ortiz C. Targeted ballet program mitigates ataxia and improves balance in females with mild-to-moderate multiple sclerosis. *PLoS One*. 2018;13(10):e0205382. doi: 10.1371/journal.pone.0205382.
786. Young H-J. Movement-to-music program improves physical function and sleep quality in multiple sclerosis: a three-arm rct. *Arch Phys Med Rehabil*. 2017;98(10):e8. doi: 10.1016/j.apmr.2013.01.025.
787. Conklyn D, Stough D, Novak E, Paczak S, Chemali K, Bethoux F. A home-based walking program using rhythmic auditory stimulation improves gait performance in patients with multiple sclerosis: a pilot study. *Neurorehabil Neural Repair*. 2010;24(9):835–42. doi: 10.1177/1545968310372139.
788. Gatti R, Tettamanti A, Lambiase S, Rossi P, Comola M. Improving hand functional use in subjects with multiple sclerosis using a musical keyboard: a randomized controlled trial. *Physiother Res Int*. 2015;20(2):100–7. doi: 10.1002/pri.1600.
789. Kloos AD, Fritz NE, Kostyk SK, Young GS, Kegelmeyer DA. Video game play [Dance Dance Revolution] as a potential exercise therapy in Huntington's disease: a controlled clinical trial. *Clin Rehabil*. 2013;27(11):972–82. doi: 10.1177/0269215513487235.
790. Trinkler I, Chéhère P, Salgues J, Monin ML, Tezenas du Montcel S, Khani S et al. Contemporary dance practice improves motor function and body representation in Huntington's disease: a pilot study. *J Huntingtons Dis*. 2019;8(1):97–110. doi: 10.3233/JHD-180315.
791. Davies R, Baker FA, Tamplin J, Bajo E, Bolger K, Sheers N et al. Music-assisted relaxation during transition to non-invasive ventilation in people with motor neuron disease: a qualitative case series. *Br J Music Ther*. 2016;30(2):74–82. doi: 10.1136/jnnp-2011-300480.
792. Harris R, Leenders KL, de Jong BM. Speech dysprosody but no music "dysprosody" in Parkinson's disease. *Brain Lang*. 2016;163:1–9. doi: 10.1016/j.bandl.2016.08.008.
793. Di Benedetto P, Cavazzon M, Mondolo F, Rugio G, Peratoner A, Biasutti E. Voice and choral singing treatment: a new approach for speech and voice disorders in Parkinson's disease. *Eur J Phys Rehabil Med*. 2009;45(1):13–19. PMID: 18987565.
794. Evans C, Canavan M, Foy C, Langford R, Proctor R. Can group singing provide effective speech therapy for people with Parkinson's disease? *Arts Health*. 2012;4(1):83–95. doi: 10.1080/17533015.2011.584883.
795. Haneishi E. Effects of a music therapy voice protocol on speech intelligibility, vocal acoustic measures, and mood of individuals with Parkinson's disease. *J Music Ther*. 2001;38(4):273–90. PMID: 11796078.
796. Tanner M, Rammage L, Liu L. Does singing and vocal strengthening improve vocal ability in people with Parkinson's disease? *Arts Health*. 2016;8(3):199–212. doi: 10.1080/17533015.2015.1088047.
797. Barnish J, Atkinson RA, Barran SM, Barnish MS. Potential benefit of singing for people with Parkinson's disease: a systematic review. *J Parkinsons Dis*. 2016;6(3):473–84. doi: 10.3233/JPD-160837.
798. Han EY, Yun JY, Chong HJ, Choi KG. Individual therapeutic singing program for vocal quality and depression in Parkinson's disease. *J Mov Disord*. 2018;11(3):121–8. doi: 10.14802/jmd.17078.

799. Stegemöller EL, Hibbing P, Radig H, Wingate J. Therapeutic singing as an early intervention for swallowing in persons with Parkinson's disease. *Complement Ther Med*. 2017;31:127–33. doi: 10.1016/j.ctim.2017.03.002.
800. Raglio A, Giovanazzi E, Pain D, Baiardi P, Imbriani C, Imbriani M et al. Active music therapy approach in amyotrophic lateral sclerosis: a randomized-controlled trial. *Int J Rehabil Res*. 2016;39(4):365–7. doi: 10.1097/MRR.000000000000187.
801. Bognar S, DeFaria AM, O'Dwyer C, Pankiw E, Simic Bogler J, Teixeira S. More than just dancing: experiences of people with Parkinson's disease in a therapeutic dance program. *Disabil Rehabil*. 2017;39(11):1073–8. doi: 10.1080/09638288.2016.1175037.
802. Dance for PD [website]. Brooklyn: Mark Morris Dance Group; 2019 ([https:// danceforparkinsons.org/](https://danceforparkinsons.org/))
803. The programs. In: World Dance for Parkinson's Day [website]. (<https://www.danceforparkinsons.online/work>).
804. Jacobsen JH, Stelzer J, Fritz TH, Chételat G, La Joie R, Turner R. Why musical memory can be preserved in advanced Alzheimer's disease. *Brain*. 2015;138(8):2438–50. doi: 10.1093/brain/awv135.
805. Chang YS, Chu H, Yang CY, Tsai JC, Chung MH, Liao YM et al. The efficacy of music therapy for people with dementia: a meta-analysis of randomised controlled trials. *J Clin Nurs*. 2015;24(23–24):3425–40. doi: 10.1111/jocn.12976.
806. Fusar-Poli L, Bieleninik Ł, Brondino N, Chen XJ, Gold C. The effect of music therapy on cognitive functions in patients with dementia: a systematic review and meta-analysis. *Aging Ment Health*. 2018;22(9):1103–12. doi: 10.1080/13607863.2017.1348474.
807. Vasionytė I, Madison G. Musical intervention for patients with dementia: a meta- analysis. *J Clin Nurs*. 2013;22(9–10):1203–16. doi: 10.1111/jocn.12166.
808. Moreira SV, dos Reis Justi FR, Moreira M. Can musical intervention improve memory in Alzheimer's patients? Evidence from a systematic review. *Dement Neuropsychol*. 2018;12(2):133–42. doi: 10.1590/1980-57642018dn12-020005.
809. Koelsch S. Brain correlates of music-evoked emotions. *Nat Rev Neurosci*. 2014;15(3):170. doi: 10.1038/nrn3666.
810. Särkämö T, Tervaniemi M, Laitinen S, Numminen A, Kurki M, Johnson JK et al. Cognitive, emotional, and social benefits of regular musical activities in early dementia: randomized controlled study. *Gerontologist*. 2014;54(4):634–50. doi: 10.1093/geront/gnt100.
811. Mabire J-B, Aquino J-P, Charras K. Dance interventions for people with dementia: systematic review and practice recommendations. *Int Psychogeriatr*. 2019;31(7):977–87. doi: 10.1017/S1041610218001552.
812. Young R, Camic PM, Tischler V. The impact of community-based arts and health interventions on cognition in people with dementia: a systematic literature review. *Aging Ment Health*. 2016;20(4):337–51. doi: 10.1080/13607863.2015.1011080.
813. Dowlen R, Keady J, Milligan C, Swarbrick C, Ponsillo N, Geddes L et al. The personal benefits of musicking for people living with dementia: a thematic synthesis of the qualitative literature. *Arts Health*. 2018;10(3):197–212. doi: 10.1080/13607863.2018.1433634.
814. Lyons S, Karkou V, Roe B, Meekums B, Richards M. What research evidence is there that dance movement therapy improves the health and wellbeing of older adults with dementia? A systematic review and descriptive narrative summary. *Arts Psychother*. 2018;60:32–40. doi: 10.1016/j.aip.2018.03.006.
815. Brotans M, Koger SM. The impact of music therapy on language functioning in dementia. *J Music Ther*. 2000;37(3):183–95. PMID: 10990596.
816. Ho RTH, Fong TCT, Chan WC, Kwan JSK, Chiu PKC, Yau JCY et al. Psychophysiological effects of dance movement therapy and physical exercise on older adults with mild dementia: a randomized controlled trial. *J Gerontol B Psychol Sci Soc Sci*. 2018:1–11 (Epub ahead of print). doi: 10.1093/geronb/gby145.
817. Steen JT, van Soest-Poortvliet MC, van der Wouden JC, Bruinsma MS, Scholten RJ, Vink AC. Music based therapeutic interventions for people with dementia. *Cochrane Database Syst Rev*. 2018;(7):CD003477. doi: 10.1002/14651858.CD003477.pub4.
818. Curtis A, Gibson L, O'Brien M, Roe B. Systematic review of the impact of arts for health activities on health, wellbeing and quality of life of older people living in care homes. *Dementia*. 2018;17(6):645–69. doi: 10.1177/1471301217740960.
819. Lepp M, Ringsberg KC, Holm AK, Sellersjö G. Dementia – involving patients and their caregivers in a drama programme: the caregivers' experiences. *J Clin Nurs*. 2003;12(6):873–81. PMID: 14632980.
820. Gjernes T. Knitters in a day center: the significance of social participation for people with mild to moderate dementia. *Qual Health Res*. 2017;27(14):2233–43. doi: 10.1177/1049732317723890.
821. Beard RL. Art therapies and dementia care: a systematic review. *Int J Soc Res Pract*. 2011;11(5):633–56. doi: 10.1177/1471301211421090.

822. Pérez-Sáez E, Cabrero-Montes EM, Llorente-Cano M, González-Ingelmo E. A pilot study on the impact of a pottery workshop on the well-being of people with dementia. *Dementia (London)*. 2018;18. doi: 10.1177/1471301218814634.
823. Richards AG, Tietyen AC, Jicha GA, Bardach SH, Schmitt FA, Fardo DW et al. Visual arts education improves self-esteem for persons with dementia and reduces caregiver burden: a randomized controlled trial. *Dementia (London)*. 2018;18(7-8):3130-42. doi: 10.1177/1471301218769071.
824. Latchem JM, Greenhalgh J. The role of reading on the health and well-being of people with neurological conditions: a systematic review. *Aging Ment Health*. 2014;18(6):731-44. doi: 10.1080/13607863.2013.875125.
825. Van Steenwinkel I, Dierckx de Casterlé B, Heylighen A. How architectural design affords experiences of freedom in residential care for older people. *J Aging Stud*. 2017;41:84-92. doi: 10.1016/j.jaging.2017.05.001.
826. Zhang Y, Cai J, An L, Hui F, Ren T, Ma H et al. Does music therapy enhance behavioral and cognitive function in elderly dementia patients? A systematic review and meta-analysis. *Aging Res Rev*. 2017;35:1-11. doi: 10.1016/j.arr.2016.12.003.
827. Ueda T, Suzukamo Y, Sato M, Izumi S. Effects of music therapy on behavioral and psychological symptoms of dementia: a systematic review and meta-analysis. *Ageing Res Rev*. 2013;12(2):628-41. doi: 10.1016/j.arr.2013.02.003.
828. Ing-Randolph AR, Phillips LR, Williams AB. Group music interventions for dementia-associated anxiety: a systematic review. *Int J Nurs Stud*. 2015;52(11):1775-84. doi: 10.1016/j.ijnurstu.2015.06.014.
829. Istvandy L. Combining music and reminiscence therapy interventions for wellbeing in elderly populations: a systematic review. *Complement Ther Clin Pract*. 2017;28:18-25. doi: 10.1016/j.ctcp.2017.03.003.
830. Takahashi T, Matsushita H. Long-term effects of music therapy on elderly with moderate/severe dementia. *J Music Ther*. 2006;43(4):317-33. PMID: 17348758.
831. Pedersen SKA, Andersen PN, Lugo RG, Andreassen M, Sütterlin S. Effects of music on agitation in dementia: a meta-analysis. *Front Psychol*. 2017;8:742. doi: 10.3389/fpsyg.2017.00742.
832. Tsoi KKF, Chan JYC, Ng YM, Lee MMY, Kwok TCY, Wong SYS. Receptive music therapy is more effective than interactive music therapy to relieve behavioral and psychological symptoms of dementia: a systematic review and meta-analysis. *J Am Med Dir Assoc*. 2018;19(7):568-76.e3. doi: 10.1016/j.jamda.2017.12.009.
833. Cowl AL, Gaugler JE. Efficacy of creative arts therapy in treatment of Alzheimer's disease and dementia: a systematic literature review. *Act Adapt Agin*. 2014;38(4):281-330. doi: 10.1080/01924788.2014.966547.
834. Goddaer J, Abraham IL. Effects of relaxing music on agitation during meals among nursing home residents with severe cognitive impairment. *Arch Psychiatr Nurs*. 1994;8(3):150-8. PMID: 8080303.
835. Thomas DW, Heitman RJ, Alexander T. The effects of music on bathing cooperation for residents with dementia. *J Music Ther*. 1997;34(4):246-59. doi: 10.1093/jmt/34.4.246.
836. Daykin N, Parry B, Ball K, Walters D, Henry A, Platten B, Hayden R. The role of participatory music making in supporting people with dementia in hospital environments. *Dementia (London)*. 2017;17(6):686-701. doi: 10.1177/1471301217739722.
837. Kumar AM, Tims F, Cruess DG, Mintzer MJ, Ironson G, Loewenstein D et al. Music therapy increases serum melatonin levels in patients with Alzheimer's disease. *Altern Ther Health Med*. 1999;5(6):49-57. PMID: 10550905.
838. Staal JA, Sacks A, Matheis R, Collier L, Calia T, Hanif H et al. The effects of Snoezelen (multi-sensory behavior therapy) and psychiatric care on agitation, apathy, and activities of daily living in dementia patients on a short term geriatric psychiatric inpatient unit. *Int J Psychiatry Med*. 2007;37(4):357-70. doi: 10.2190/PM.37.4.a.
839. Aguilar BA. The efficacy of art therapy in pediatric oncology patients: an integrative literature review. *J Pediatr Nurs*. 2017;36:173-8. doi: 10.1016/j.pedn.2017.06.015.
840. Bilgiç Ş, Acaroğlu R. Effects of listening to music on the comfort of chemotherapy patients. *West J Nurs Res*. 2017;39(6):745-62. doi: 10.1177/0193945916660527.
841. Burns DS, Meadows AN, Althouse S, Perkins S, Cripe L. Differences between supportive music and imagery and music listening during outpatient chemotherapy and potential moderators of treatment effects. *J Music Ther*. 2018;55(1):83-108. doi: 10.1093/jmt/thy001.
842. Bro ML, Johansen C, Vuust P, Enggaard L, Himmelstrup B, Mourits-Andersen T et al. Effects of live music during chemotherapy in lymphoma patients: a randomized, controlled, multi-center trial. *Support Care Cancer*. 2019;27(10):3887-96. doi: 10.1007/s00520-019-04666-8.
843. Altay N, Kilicarslan-Toruner E, Sari Ç. The effect of drawing and writing technique on the anxiety level of children undergoing cancer treatment. *Eur J Oncol Nurs*. 2017;28:1-6. doi: 10.1016/j.ejon.2017.02.007.
844. Tuinmann G, Preissler P, Böhmer H, Suling A, Bokemeyer C. The effects of music therapy in patients with high-dose chemotherapy and stem cell support: a randomized pilot study. *Psychooncology*. 2017;26(3):377-84. doi: 10.1002/pon.4142.

845. Alcântara-Silva TR, de Freitas-Junior R, Freitas NMA, de Paula Junior W, da Silva DJ, Machado GDP et al. Music therapy reduces radiotherapy-induced fatigue in patients with breast or gynecological cancer: a randomized trial. *Integr Cancer Ther.* 2018;17(3):628–35. doi: 10.1177/1534735418757349.
846. Tahmasebi Z, Maghsoudi J, Talakoub S. The effect of painting on depression in children with cancer undergoing chemotherapy. *Iran J Nurs Midwifery Res.* 2017;22(2):102–5. doi: 10.4103/ijnmr.IJNMR_242_15.
847. Abdulah DM, Abdulla BMO. Effectiveness of group art therapy on quality of life in paediatric patients with cancer: a randomized controlled trial. *Complement Ther Med.* 2018;41:180–5. doi: 10.1016/j.ctim.2018.09.020.
848. Pisu M, Demark-Wahnefried W, Kenzik KM, Oster RA, Lin CP, Manne S. A dance intervention for cancer survivors and their partners (rhythm). *J Cancer Surviv.* 2017;11(3):350–9. doi: 10.1007/s11764-016-0593-9.
849. Boing L, Rafael AD, De Oliverira Braga H, Moraes A. Dance as treatment therapy in breast cancer patients: a systematic review. *Rev Bras Ativ Fis Saude.* 2017;22(4):319–31. doi: <https://doi.org/10.12820/rbafs.v.22n4p319-331>.
850. da Silva LAGP, Baran FDP, das Mercês NNA. Music in the care of children and adolescents with cancer: integrative review. *Texto Contexto Enferm.* 2016;25(4): E1720015. doi: 10.1590/0104-07072016001720015.
851. Kim KS, Loring S, Kwekkeboom K. Use of art-making intervention for pain and quality of life among cancer patients: a systematic review. *J Holist Nurs.* 2018;36(4):341–53. doi: 10.1177/0898010117726633.
852. Bradt J, Dileo C, Magill L, Teague A. Music interventions for improving psychological and physical outcomes in cancer patients. *Cochrane Database Syst Rev.* 2016;(8):CD006911. doi: 10.1002/14651858.CD006911.pub3.
853. Toccafondi A, Bonacchi A, Mambrini A, Miccinesi G, Prosseda R, Cantore M. Live concerts reduce cancer inpatients' anxiety. *Eur J Cancer Care.* 2017;26(6):e12590. doi: 10.1111/ecc.12590.
854. Arruda MA, Garcia MA, Garcia JB. Evaluation of the effects of music and poetry in oncologic pain relief: a randomized clinical trial. *J Palliat Med.* 2016;19(9):943–8. doi: 10.1089/jpm.2015.0528.
855. la Cour K, Ledderer L, Hansen HP. Storytelling as part of cancer rehabilitation to support cancer patients and their relatives. *J Psychosoc Oncol.* 2016;34(6):460–76. doi: 10.1080/07347332.2016.1217964.
856. Li XM, Yan H, Zhou KN, Dang SN, Wang DL, Zhang YP. Effects of music therapy on pain among female breast cancer patients after radical mastectomy: results from a randomized controlled trial. *Breast Cancer Res Treat.* 2011;128(2):411–19. doi: 10.1007/s10549-011-1533-z.
857. Wang X, Zhang Y, Fan Y, Tan XS, Lei X. Effects of music intervention on the physical and mental status of patients with breast cancer: a systematic review and meta-analysis. *Breast Care [Basel].* 2018;13(3):183–90. doi: 10.1159/000487073.
858. Boehm K, Cramer H, Staroszyński T, Ostermann T. Arts therapies for anxiety, depression, and quality of life in breast cancer patients: a systematic review and meta-analysis. *Evid Based Complement Alternat Med.* 2014;2014:103297. doi: 10.1155/2014/103297.
859. Tang Y, Fu F, Gao H, Shen L, Chi I, Bai Z. Art therapy for anxiety, depression, and fatigue in females with breast cancer: a systematic review. *J Psychosoc Oncol.* 2019;37(1):79–95. doi: 10.1080/07347332.2018.1506855.
860. Hertrampf R-S, Wårja M. The effect of creative arts therapy and arts medicine on psychological outcomes in women with breast or gynecological cancer: a systematic review of arts-based interventions. *Arts Psychother.* 2017;56:93–110. doi: 10.1016/j.aip.2017.08.001.
861. Sandel SL, Judge JO, Landry N, Faria L, Ouellette R, Majczak M. Dance and movement program improves quality-of-life measures in breast cancer survivors. *Cancer Nurs.* 2005;28(4):301–9. PMID: 16046894.
862. Gale N, Enright S, Reagon C, Lewis I, van Deursen R. A pilot investigation of quality of life and lung function following choral singing in cancer survivors and their carers. *Ecancermedicalscience.* 2012;6:261. doi: 10.3332/ecancer.2012.261.
863. Reagon C, Gale N, Dow R, Lewis I, van Deursen R. Choir singing and health status in people affected by cancer. *Eur J Cancer Care [Engl].* 2017;26(5):e12568. doi: 10.1111/ecc.12568.
864. Pothoulaki M, MacDonald R, Flowers P. An interpretative phenomenological analysis of an improvisational music therapy program for cancer patients. *J Music Ther.* 2012;49(1):45–67. PMID: 22803257.
865. Gozashti MA, Moradi S, Elyasi F, Daboui P. Improvement in patient-reported outcomes after group poetry therapy of women with breast cancer. *Soc Determ Health.* 2017;3(2):58–63. doi: 10.22037/sdh.v3i2.17845.
866. Nakayama H, Kikuta F, Takeda H. A pilot study on effectiveness of music therapy in hospice in Japan. *J Music Ther.* 2009;46(2):160–72. doi: 10.1093/jmt/46.2.160.
867. Lee J, Choi MY, Kim YB, Sun J, Park EJ, Kim JH et al. Art therapy based on appreciation of famous paintings and its effect on distress among cancer patients. *Qual Life Res.* 2017;26(3):707–15. doi: 10.1007/s11136-016-1473-5.

868. Ennis G, Kirshbaum M, Waheed N. The beneficial attributes of visual art-making in cancer care: an integrative review. *Eur J Cancer Care*. 2018;27(1):e12663. doi: 10.1111/ecc.12663.
869. Butler M, Snook B, Buck R. The transformative potential of community dance for people with cancer. *Qual Health Res*. 2015;26(14):1928–38. doi: 10.1177/1049732315602721.
870. Mische Lawson L, Wedan L, Stock M, Glennon C. A qualitative study of blood and marrow transplant patient experiences participating in art making and music listening. *Eur J Oncol Nurs*. 2016;22:71–7. doi: 10.1016/j.ejon.2016.03.010.
871. Warran K, Fancourt D, Wiseman T. How does the process of group singing impact on people affected by cancer? A grounded theory study. *BMJ Open*. 2019;9(1):e023261. doi: 10.1136/bmjopen-2018-023261.
872. Derman YE, Deatrck JA. Promotion of well-being during treatment for childhood cancer: a literature review of art interventions as a coping strategy. *Cancer Nurs*. 2016;39(6):E1–16. doi: 10.1097/NCC.0000000000000318.
873. O'Callaghan CC, McDermott F, Michael N, Daveson BA, Hudson PL, Zalcborg JR. A quiet still voice that just touches: music's relevance for adults living with life-threatening cancer diagnoses. *Support Care Cancer*. 2014;22(4):1037–47. doi: 10.1007/s00520-013-2059-1.
874. Dibbell-Hope S. The use of dance/movement therapy in psychological adaptation to breast cancer. *Arts Psychother*. 2000;27(1):51–68. doi: 10.1002/14651858.CD007103.pub2.
875. Warran K, Fancourt D, Wiseman T. The experience and perceived impact of group singing for men living with cancer: a phenomenological study. *Psych Music*. 2019:1–16. doi: 10.1177/0305735619854526.
876. Bradt J, Potvin N, Kesslick A, Shim M, Radl D, Schriver E et al. The impact of music therapy versus music medicine on psychological outcomes and pain in cancer patients: a mixed methods study. *Support Care Cancer*. 2015;23(5):1261–71. doi: 10.1007/s00520-014-2478-7.
877. Magill L, Berenson S. The conjoint use of music therapy and reflexology with hospitalized advanced stage cancer patients and their families. *Palliat Support Care*. 2008;6(3):289–96. doi: 10.1017/S1478951508000436.
878. Hyslop S, Sunga L, Steina E, Dupuis LL, Spieglere B, Vettesea E, Tomlinson D. Identifying symptoms using the drawings of 4–7 year olds with cancer. *J Oncol Nurs*. 2018;36:56–61. doi: 10.1016/j.ejon.2018.08.004.
879. Linder LA, Bratton H, Nguyen A, Parker K, Wawrzynski S. Symptoms and self-management strategies identified by children with cancer using draw-and-tell interviews. *Oncol Nurs Forum*. 2018;45(3):290–300. doi: 10.1188/18.ONF.290-300.
880. Wong SS, George TJ Jr, Godfrey M, Le J, Pereira DB. Using photography to explore psychological distress in patients with pancreatic cancer and their caregivers: a qualitative study. *Support Care Cancer*. 2019;27(1):321–8. doi: 10.1007/s00520-018-4330-y.
881. Berterö C. Young women with breast cancer: using the healing tool – writing blogs. *Nurs Palliat Care*. 2017;2(4):1–5. doi: 10.15761/NPC.1000158.
882. Gripsrud BH, Brassil KJ, Summers B, Sjøiland H, Kronowitz S, Lode K. Capturing the experience: reflections of women with breast cancer engaged in an expressive writing intervention. *Cancer Nurs*. 2016;39(4):E51–60. doi: 10.1097/NCC.0000000000000300.
883. Quinlan E, Thomas R, Ahmed S, Fichtner P, McMullen L, Block J. The aesthetic rationality of the popular expressive arts: lifeworld communication among breast cancer survivors living with lymphedema. *Soc Theory Health*. 2014;12(3):291–312. doi: 10.1057/sth.2014.9.
884. Chuang CY, Han WR, Li PC, Young ST. Effects of music therapy on subjective sensations and heart rate variability in treated cancer survivors: a pilot study. *Complement Ther Med*. 2010;18(5):224–6. doi: 10.1016/j.ctim.2010.08.003.
885. Saunders S, Hammond C, Thomas R. Exploring gender-related experiences of cancer survivors through creative arts: a scoping review. *Qual Health Res*. 2019;29(1):135–48. doi: 10.1177/1049732318771870.
886. Lukina EN. Application of the method of dance-motor-therapy in rehabilitation of women after the mastectomy. *St Petersburg: II All-Russian Scientific Practical Conference; 2019*.
887. Lewis A, Cave P, Stern M, Welch L, Taylor K, Russell J et al. Singing for lung health: a systematic review of the literature and consensus statement. *NPJ Prim Care Respir Med*. 2016;26:16080. doi: 10.1038/npjpcrm.2016.80.
888. Goldenberg RB. Singing lessons for respiratory health: a literature review. *J Voice*. 2018;32(1):85–94. doi: 10.1016/j.jvoice.2017.03.021.
889. McNaughton A, Weatherall M. Sing your lungs out – a community singing group for chronic obstructive pulmonary disease: a 1-year pilot study. *BMJ Open*. 2017;7(1):e014151. doi: 10.1136/bmjopen-2016-014151.
890. Liu H, Song M, Zhai ZH, Shi RJ, Zhou XL. Group singing improves depression and life quality in patients with stable copd: a randomized community-based trial in China. *Qual Life Res*. 2019;28(3):725–35. doi: 10.1007/s11136-018-2063-5.

891. Skingley A, Clift S, Hurley S, Price S, Stephens L. Community singing groups for people with chronic obstructive pulmonary disease: participant perspectives. *Perspect Public Health*. 2018;138(1):66–75. doi: 10.1177/1757913917740930.
892. Lee AL, Desveaux L, Goldstein RS, Brooks D. Distractive auditory stimuli in the form of music in individuals with COPD: a systematic review. *Chest*. 2015;148(2):417–29. doi: 10.1378/chest.14-2168.
893. Panigrahi A, Sohani S, Amadi C, Joshi A. Role of music in the management of chronic obstructive pulmonary disease (COPD): a literature review. *Technol Health Care*. 2014;22(1):53–61. doi: 10.3233/THC-130773.
894. Lee AL, Dolmage TE, Rhim M, Goldstein RS, Brooks D. The impact of listening to music during a high-intensity exercise endurance test in people with COPD. *Chest*. 2018;153(5):1134–41. doi: 10.1016/j.chest.2017.12.001.
895. Reychler G, Mottart F, Boland M, Wasterlain E, Pieters T, Caty G et al. Influence of ambient music on perceived exertion during a pulmonary rehabilitation session: a randomized crossover study. *Respir Care*. 2015;60(5):711–17. doi: 10.4187/respcare.03671.
896. Ho CF, Maa SH, Shyu YI, Lai YT, Hung TC, Chen HC. Effectiveness of paced walking to music at home for patients with COPD. *COPD*. 2012;9(5):447–57. doi: 10.3109/15412555.2012.685664.
897. Shingai K, Kanezaki M, Senjyu H. Distractive auditory stimuli alleviate the perception of dyspnea induced by low-intensity exercise in elderly subjects with COPD. *Respir Care*. 2015;60(5):689–94. doi: 10.4187/respcare.03533.
898. Kruavit A, The E, Clark I, Vadhwa V. The role of music in improving exercise capacity in patients with acute exacerbation of chronic obstructive pulmonary disease as measured by the 2-minute walking test. *Music Med*. 2015;7(4):32–9.
899. Calik-Kutukcu E, Saglam M, Vardar-Yagli N, Cakmak A, Inal-Ince D, Bozdemir-Ozel C. Listening to motivational music while walking elicits more positive affective response in patients with cystic fibrosis. *Complement Ther Clin Pract*. 2016;23:52–8. doi: 10.1016/j.ctcp.2016.03.002.
900. Irons JY, Kenny DT, McElrea M, Chang AB. Singing therapy for young people with cystic fibrosis: a randomized controlled pilot study. *Music Med*. 2012;4(3):136–45. doi: 10.1177/1943862112452150.
901. Ergin E, Sagkal Midilli T, Baysal E. The effect of music on dyspnea severity, anxiety, and hemodynamic parameters in patients with dyspnea. *J Hosp Palliat Nurs*. 2018;20(1):81–7. doi: 10.1097/NJH.0000000000000403.
902. Sign VP, Rao V, V P, RC S, K KP. Comparison of the effectiveness of music and progressive muscle relaxation for anxiety in COPD: a randomized controlled pilot study. *Chron Respir Dis*. 2009;6(4):209–16. doi: 10.1177/1479972309346754.
903. Canga B, Azoulay R, Raskin J, Lowey J. AIR: advances in respiration – music therapy in the treatment of chronic pulmonary disease. *Respir Med*. 2015;109(12):1532–9. doi: 10.1016/j.rmed.2015.10.001.
904. Horuz D, Kurcer MA, Erdoğan Z. The effect of music therapy on anxiety and various physical findings in patients with copd in a pulmonology service. *Holist Nurs Pract*. 2017;31(6):378–83. doi: 10.1007/s40271-017-0218-z.
905. Kaptein AA, Tiemensma J, Broadbent E, Asijee GM, Voorhaar M. COPD depicted: patients drawing their lungs. *Int J Chron Obstruct Pulmon Dis*. 2017;12:3231–6. doi: 10.2147/COPD.S139896.
906. Sliwka A, Wloch T, Tynor D, Nowobilski R. Do asthmatics benefit from music therapy? A systematic review. *Complement Ther Med*. 2014;22(4):756–66. doi: 10.1016/j.ctim.2014.07.002.
907. Roslita R, Nurhaeni N, Wanda D. The effects of music therapy on the physiological response of asthmatic children receiving inhalation therapy. *Compr Child Adolesc Nurs*. 2017;40(suppl 1):45–51. doi: 10.1080/24694193.2017.1386970.
908. Eley R, Gorman D, Gately J. Didgeridoos, songs and boomerangs for asthma management. *Health Promot J Aust*. 2010;21(1):39–44. PMID: 20406151.
909. Cheung MMY, Saini B, Smith L. Drawing asthma: an exploration of patients' perceptions and experiences. *J Asthma*. 2018;55(3):284–93. doi: 10.1080/02770903.2017.1325492.
910. Mosnaim GS, Cohen MS, Rhoads MS, Rittner SS, Powell LH. Use of MP3 players to increase asthma knowledge in inner-city African-American adolescents. *Int J Behav Med*. 2008;15(4):341–6. doi: 10.1080/10705500802365656.
911. Finn S, Fancourt D. The biological impact of listening to music in clinical and nonclinical settings: a systematic review. *Prog Brain Res*. 2018;237:17. doi: 10.1016/bs.pbr.2018.03.007.
912. Gelernter R, Lavi G, Yanai L, Brooks R, Bar Y, Bistrizer Z et al. Effect of auditory guided imagery on glucose levels and on glycemic control in children with type 1 diabetes mellitus. *J Pediatr Endocrinol Metab*. 2016;29(2):139–44. doi: 10.1515/jpem-2015-0150.
913. Mandel SE, Davis BA, Secic M. Effects of music therapy and music-assisted relaxation and imagery on health-related outcomes in diabetes education: a feasibility study. *Diabetes Educ*. 2013;39(4):568–81. doi: 10.1177/0145721713492216.
914. Stuckey HL, Tisdell EJ. The role of creative expression in diabetes: an exploration into the meaning-making process. *Qual Health Res*. 2010;20(1):42–56. doi: 10.1177/1049732309355286.

915. Basso RVJ, Pelech WJ. A creative arts intervention for children with diabetes. Part 1: development. *J Psychosocial Nurs Mental Health Serv.* 2008;46(10):25–9. PMID: 18935933.
916. Bradt J, Dileo C, Potvin N. Music for stress and anxiety reduction in coronary heart disease patients. *Cochrane Database Syst Rev.* 2013;(12):CD006577. doi: 10.1002/14651858.CD006577.pub3.
917. do Amaral MA, Neto MG, de Queiroz JG, Martins-Filho PR, Saquetto MB, Oliveira Carvalho V. Effect of music therapy on blood pressure of individuals with hypertension: a systematic review and meta-analysis. *Int J Cardiol.* 2016;214:461–4. doi: 10.1016/j.ijcard.2016.03.197.
918. Conceição LS, Neto MG, do Amaral MA, Martins-Filho PR, Oliveira Carvalho V. Effect of dance therapy on blood pressure and exercise capacity of individuals with hypertension: a systematic review and meta-analysis. *Int J Cardiol.* 2016;220:553–7. doi: 10.1016/j.ijcard.2016.06.182.
919. Kühlmann AY, Etnel JR, Roos-Hesselink JW, Jeekel J, Bogers AJ, Takkenberg JJ. Systematic review and meta-analysis of music interventions in hypertension treatment: a quest for answers. *BMC Cardiovasc Disord.* 2016;16(1):69. doi: 10.1186/s12872-016-0244-0.
920. Bittman B, Croft DT Jr, Brinker J, van Laar R, Vernalis MN, Ellsworth DL. Recreational music-making alters gene expression pathways in patients with coronary heart disease. *Med Sci Monit.* 2013;19:139–47. doi: 10.12659/MSM.883807.
921. Burrai F, Hasan W, Luppi M, Micheluzzi V. A conceptual framework encompassing the psychoneuroimmunoendocrinological influences of listening to music in patients with heart failure. *Holist Nurs Pract.* 2018;32(2):81–9. doi: 10.1097/HNP.0000000000000253.
922. Hanser SB. Music therapy in cardiac health care: current issues in research. *Cardiol Rev.* 2014;22(1):37–42. doi: 10.1097/CRD.0b013e318291c5fc.
923. Vlachopoulos C, Aggelakas A, Ioakeimidis N, Xaplanteris P, Terentes-Printzios D, Abdelrasoul M et al. Music decreases aortic stiffness and wave reflections. *Atherosclerosis.* 2015;240(1):184–9. doi: 10.1016/j.atherosclerosis.2015.03.010.
924. Belardinelli R, Lacalaprince F, Ventrella C, Volpe L, Faccenda E. Waltz dancing in patients with chronic heart failure: new form of exercise training. *Circ Heart Fail.* 2008;1(2):107–14. doi: 10.1161/CIRCHEARTFAILURE.108.765727.
925. Bronas UG, Everett S, Steffen A, Briller J, Hannan M, Hernandez A et al. Rhythmic auditory music stimulation enhances walking distance in patients with claudication: a feasibility study. *J Cardiopulm Rehabil Prev.* 2018;38(4):E1–5. doi: 10.1097/HCR.0000000000000300.
926. Alter DA, O'Sullivan M, Oh PI, Redelmeier DA, Marzolini S, Liu R et al. Synchronized personalized music audio-playlists to improve adherence to physical activity among patients participating in a structured exercise program: a proof-of-principle feasibility study. *Sports Med Open.* 2015;1(1):23. doi: 10.1186/s40798-015-0017-9.
927. Jang S-H, Lee J-H, Lee H-J, Lee S-Y. Effects of mindfulness-based art therapy on psychological symptoms in patients with coronary artery disease. *J Korean Med Sci.* 2018;33(12):e88. doi: 10.3346/jkms.2018.33.e88.
928. McConnell T, Porter S. Music therapy for palliative care: a realist review. *Palliat Support Care.* 2017;15(4):454–64. doi: 10.1017/S1478951516000663.
929. Lefèvre C, Ledoux M, Filbet M. Art therapy among palliative cancer patients: aesthetic dimensions and impacts on symptoms. *Palliat Support Care.* 2016;14(4):376–80. doi: 10.1017/S1478951515001017.
930. Warth M, Keßler J, Hillecke TK, Bardenheuer HJ. Music therapy in palliative care. *Dtsch Arztebl Int.* 2015;112(46):788–94. doi: 10.3238/arztebl.2015.0788.
931. Gao Y, Wei Y, Yang W, Jiang L, Li X, Ding J et al. The effectiveness of music therapy for terminally ill patients: a meta-analysis and systematic review. *J Pain Symptom Manage.* 2018;57(2):319–29. doi: 10.1016/j.jpainsymman.2018.10.504.
932. Vesel T, Dave S. Music therapy and palliative care: systematic review. *J Pain Symptom Manage.* 2018;56(6):e74. doi: 10.1016/j.jpainsymman.2018.07.016.
933. O'Kelly J. Music therapy in palliative care: current perspectives. *Int J Palliat Nurs.* 2002;8(3):130–6. doi: 10.12968/ijpn.2002.8.3.10249.
934. O'Kelly J, Koffman J. Multidisciplinary perspectives of music therapy in adult palliative care. *Palliat Med.* 2007;21(3):235–41. doi: 10.1177/0269216307077207.
935. Orlova TV. [Short-term variant of Creative Self-expression Therapy (CSE) after Burno for application in palliative oncology]. *Consult Psychol Psychother.* 2014:156–77 (in Russian).
936. Burns DS, Perkins SM, Tong Y, Hilliard RE, Cripe LD. Music therapy is associated with family perception of more spiritual support and decreased breathing problems in cancer patients receiving hospice care. *J Pain Symptom Manage.* 2015;50(2):225–31. doi: 10.1016/j.jpainsymman.2015.02.022.

937. McClean S, Bunt L, Daykin N. The healing and spiritual properties of music therapy at a cancer care center. *J Altern Complement Med.* 2012;18(4):402–7. doi: 10.1089/acm.2010.0715.
938. Cadrin ML. Music therapy legacy work in palliative care: creating meaning at end of life. *Can J Music Ther.* 2006;12(1):109.
939. Schmid W, Rosland JH, von Hofacker S, Hunskaar I, Bruvik F. Patient's and health care provider's perspectives on music therapy in palliative care: an integrative review. *BMC Palliat Care.* 2018;17(1):32. doi: 10.1186/s12904-018-0286-4.
940. Cadwalader A, Orellano S, Tanguay C, Roshan R. The effects of a single session of music therapy on the agitated behaviors of patients receiving hospice care. *J Palliat Med.* 2016;19(8):870–3. doi: 10.1089/jpm.2015.0503.
941. Burrai F, Lupi R, Luppi M, Micheluzzi V, Donati G, Lamanna G et al. Effects of listening to live singing in patients undergoing hemodialysis: a randomized controlled crossover study. *Biol Res Nurs.* 2018;21(1):30–8. doi: 10.1177/1099800418802638.
942. Gutgsell KJ, Schluchter M, Margevicius S, DeGolia PA, McLaughlin B, Harris M et al. Music therapy reduces pain in palliative care patients: a randomized controlled trial. *J Pain Symptom Manage.* 2013;45(5):822–31. doi: 10.1016/j.jpainsymman.2012.05.008.
943. Gallagher LM, Lagman R, Rybicki L. Outcomes of music therapy interventions on symptom management in palliative medicine patients. *Am J Hosp Palliat Care.* 2018;35(2):250–7. doi: 10.1177/1049909117696723.
944. Woolf S, Fisher P. The role of dance movement psychotherapy for expression and integration of the self in palliative care. *Int J Palliat Nurs.* 2015;21(7):340–8. doi: 10.12968/ijpn.2015.21.7.340.
945. Tishelman C, Lindqvist O, Hajdarevic S, Rasmussen BH, Goliath I. Beyond the visual and verbal: using participant-produced photographs in research on the surroundings for care at the end-of-life. *Soc Sci Med.* 2016;168:120–9. doi: 10.1016/j.socscimed.2016.09.012.
946. Walter T. How people who are dying or mourning engage with the arts. *Music Arts Action.* 2012;4(1):73–98.
947. Blood C, Cacciatore J. Best practice in bereavement photography after perinatal death: qualitative analysis with 104 parents. *BMC Psychol.* 2014;2(1):15. doi: 10.1186/2050-7283-2-15.
948. Schaefer MR, Spencer SK, Barnett M, Reynolds NC, Madan-Swain A. Legacy artwork in pediatric oncology: the impact on bereaved caregivers' psychological functioning and grief. *J Palliat Med.* 2019;22(9):1124–8. doi: 10.1089/jpm.2018.0329.
949. McGuinness B, Finucane N, Roberts A. A hospice-based bereavement support group using creative arts: an exploratory study. *Illness Crisis Loss.* 2015;23(4):323–42. doi: 10.1177/1049909114555155.
950. Fancourt D, Finn S, Warran K, Wiseman T. Group singing in bereavement: effects on mental health, self-efficacy, self-esteem and well-being. *BMJ Support Palliat Care.* 2019 [Epub ahead of print]. doi: 10.1136/bmjspcare-2018-001642.
951. Young L, Pringle A. Lived experiences of singing in a community hospice bereavement support music therapy group. *Bereave Care.* 2018;37(2):55–66. doi: 10.1080/02682621.2018.1493646.
952. Weiskittle RE, Gramling SE. The therapeutic effectiveness of using visual art modalities with the bereaved: a systematic review. *Psychol Res Behav Manag.* 2018;11:9–24. doi: 10.2147/PRBM.S131993.
953. O'Callaghan CC, McDermott F, Hudson P, Zalcborg JR. Sound continuing bonds with the deceased: the relevance of music, including preloss music therapy, for eight bereaved caregivers. *Death Stud.* 2013;37(2):101–25. doi: 10.1080/07481187.2011.617488.
954. Turton BM, Williams S, Burton CR, Williams L. Arts-based palliative care training, education and staff development: a scoping review. *Palliat Med.* 2018;32(2):559–70. doi: 10.1177/0269216317712189.
955. Millard C, Wessely S. Parity of esteem between mental and physical health. *BMJ.* 2014;349:g6821. doi: 10.1136/bmj.g6821.
956. Petrescu N. Loud music listening. *McGill J Med.* 2008; 11(2):169–76. PMID: 19148318.
957. Nielsen SS, Krasnik A. Poorer self-perceived health among migrants and ethnic minorities versus the majority population in Europe: a systematic review. *Int J Public Health.* 2010;55(5):357–71. doi: 10.1007/s00038-010-0145-4.
958. Hoffman TV, Glasziou PP, Milne R, Moher D, Barbour V, Johnston M et al. Better reporting of interventions: template for intervention description and replication (TIDieR) checklist and guide. *BMJ.* 2014;348:g1687. doi: 10.1136/bmj.g1687.
959. Tuft M, Nakken KO. Epilepsy and stigma in popular music. *Tidsskr Nor Laegeforen.* 2014;134(23–24):2290–3. doi: 10.4045/tidsskr.12.0092.
960. Jiang W, Zhao F, Guderley N, Manchaiah V. Daily music exposure dose and hearing problems using personal listening devices in adolescents and young adults: a systematic review. *Int J Audiol.* 2016;55(4):197–205. doi: 10.3109/14992027.2015.1122237.

— Bibliografia —

961. Serrone RO, Weinberg JA, Goslar PW, Wilkinson EP, Thompson TM, Dameworth JL et al. Grey's Anatomy effect: television portrayal of patients with trauma may cultivate unrealistic patient and family expectations after injury. *Trauma Surg Acute Care Open*. 2018;3(1):e000137. doi: 10.1136/tsaco-2017-000137.
962. Vitek K, Ward LM. Risky, dramatic, and unrealistic: reality television portrayals of pregnancy and childbirth and their effects on women's fear and self-efficacy. *Health Commun*. 2018;34(11):1-7. doi: 10.1080/10410236.2018.1481708.

Pubblicato in inglese da:

© **WHO Regional Office for Europe 2019**

Fancourt D, Finn S. What is the evidence on the role of the arts in improving health and well-being? A scoping review. Copenhagen: WHO Regional Office for Europe; 2019 (Health Evidence Network (HEN) synthesis report 67)

Il Centro di Documentazione per la Promozione della Salute DoRS Regione Piemonte è responsabile della traduzione italiana avendone fatto richiesta all'Ufficio OMS Regione Europa.

© Dors Regione Piemonte Centro di Documentazione per la Promozione della salute, 15.05.2020

WHO EURO Health Evidence Network- Report di sintesi 67

Quali sono le evidenze sul ruolo delle arti nel miglioramento della salute e del benessere? Una scoping review.

Traduzione a cura di Alessandra Rossi Ghiglione, Catterina Seia, Claudio Tortone

Il testo originale, in lingua inglese, è disponibile all'indirizzo:

<https://apps.who.int/iris/bitstream/handle/10665/329834/9789289054553-eng.pdf>

La traduzione italiana è disponibile sul blog CWC www.culturalwelfarecenter.wordpress.com, e sui siti:

www.dors.it,

www.socialcommunitytheatre.com

www.medicinamisuradidonna.it
