

Multidisciplinary Approaches to Health and Arts Research

Nyiramukama Diana Kashaka

Faculty of Education, Kampala International University, Uganda

ABSTRACT

This paper examines the intersection of health and the arts, highlighting the historical and contemporary significance of multidisciplinary collaboration in promoting well-being. Through a review of frameworks, methodologies, and case studies, the paper demonstrates how combining artistic and health disciplines can enhance patient outcomes, community engagement, and cultural relevance in healthcare. Challenges such as funding limitations, siloed disciplines, and the need for shared evaluation metrics are addressed, as well as future directions for policy development and interdisciplinary training. Emphasis is placed on the necessity of community-driven research that incorporates diverse voices from the outset, fostering collaborative environments that maximize social impact and inclusivity.

Keywords: Multidisciplinary research, Health and arts integration, Community well-being, Arts-based health interventions, Participatory research.

INTRODUCTION

The modern human condition presents unprecedented challenges for the present and the future. In the twenty-first century, globalized living, rapidly advancing technology, and armed conflict across the world have resulted in psychosocial impacts for the current population. Key terms are introduced as an auto-ethnographic framework to organize the content; definitions are presented and elucidated. Mutual benefits are proposed for collaborating artists, healthcare professionals, and researchers while exploring the potential outcomes [1, 2]. There are a few collaborations undertaken by art researchers, artists, and healthcare professionals. The upsurge of connectedness at a professional level means that the next decade is likely to see expansion in highly diverse partnerships that will be shaped by an intensely changing society. This paper is

offered as a way of addressing a broad audience, some of whom may be new to this area of work and may even be seeking definitions and conceptual clarifications. Consequently, the piece is bound to ensure fairness and clarity across a variety of readers [3, 4]. The origins of the integration of health and arts are expected to be firmly rooted in the displacement of creativity as a core human asset. Before embarking on the intricacies of these arguments, some definitions are warranted. The meanings of the key terms will be unstitched for readers, in turn, to seek assurance of the intention of the research project behind the framework. This is important for engagements of this type to provide clarity to a range of academic disciplines and communities. Therefore, some definitions and explanations are due [5, 6].

The Intersection of Health and Arts: Historical and Contemporary Perspectives

Historical Perspectives

It has been suggested that the historical attraction of the intersection between health and the arts is related to an ongoing concern with the nature of well-being and 'the good life', as well as shifts over time in how the meaning of such things is understood. In times of economic growth and decline, philosophies of culture and artistic expression have been seen to both reflect

and shape corresponding cultural values. Sculptures and frescoes from ancient Minoan culture on Crete reflect an interplay between visual art and the sacred, and were thought to reflect a strong and harmonious collective society ... a world before the hierarchies, the oppressions, and exploitations of patriarchy'. The art and literature of ancient Greece have

also been depicted as highly coherent and reflective of 'an organic culture, an integral, aesthetic expression of the life of the polis and polity' [7, 8]. More recently, several major cultural and art movements have been tied to changing perspectives on health, including 'holistic' perspectives of health care. The birth of the 'anti-psychiatry' movement in the USA in the 1960s was based on a similar impulse to the 'whole health' movement but linked to current anti-Vietnam War sentiment. One-time marathon dancer Dr. Patch Adams is perhaps best known for his novel experiments in clowning around the hospital ward, and some

Methodologies and Frameworks in Multidisciplinary Health and Arts Research

The methodologies and theoretical frameworks for conducting cross-sectional, multidisciplinary research into health and arts are broad and diverse. Some researchers argue for the need for well-designed and rigorous quantitative research to explore intersections across the different practice approaches; others advocate for the use of qualitative and ethnographic research to speak to these intersections. Indeed, many recommend both qualitative and quantitative analysis to elucidate multidisciplinary work. In relation to health, a 'three-push model' summarizes various collaborative cultures between health and arts: art as an alternative to health interventions; artists working with and enabling the work of health professionals; and empowered individuals managing their use of health and arts activities [11, 12]. Consequently, research can vary greatly not only according to academic discipline but also according to the modes and models of practice chosen for combining artists and health professionals. Examples include, but are not limited to, uses of a single artist or art form, the depth, and range of work with patient groups, types and styles of art, staging, location of the work, and whom it is co-produced by. Many research recommendations state the importance of including patient/participant/service user voices throughout this research. The emphasis on participatory research consequently engages the beneficiaries or service users of arts and health practice and guides further methodology for interdisciplinary research. In this respect, some argue that effective arts and health research is

Case Studies and Applications in Health and Arts Collaborations

The potential of art to promote healing has been the focus of numerous reviews. The outcomes of such endeavors are related not just to a strategy for treatment or distraction. In the examples presented, it is shown how varied art therapies, storytelling, or engagement in the art-making

significant 'anti-medical' gurus have also sang the praises of 'art therapy'. More serious-minded critics of biological psychiatry have also suggested that, as scientists and citizens, we might be well served by the efforts of 'a dedicated cadre of creators of madness metaphors'. A number of examples of the use of artistic expressions for health are presented in the Introduction to this volume, including poetry and literature about cancer and AIDS, as well as visual artwork by patients suffering long-term cognitive and behavioral impairments after radiation or surgery for brain tumors [9, 10].

informed by communities and shapes or is shaped by the communities and issues it works with. In particular, good arts and health research is based on working with the community that is the subject of the research and developing an authentic and responsive project that reflects the community's needs and values [13, 14]. The involvement of different health and arts researchers within an interdisciplinary approach may require a measure of codification or framework. There are various different models in this regard. One example is conceptual frameworks, which describe the dimensions that underpin these activities. Another example is a study that explores the conceptual pathways between creative arts and science. There are potential pitfalls in exploring the various models because the assumptions and underlying values may clash with one another, perhaps denoting very different epistemic spaces and repudiating exploration across disciplines. Consequently, the strength of these and other studies that present specific models depends on the detailed elaboration of the theoretical and methodological frameworks that underpin the studies. The usefulness of each methodological framework is likely to depend upon the exact nature of both the research questions and the interdisciplinary setting. In attempting to pull the two extreme ends to the different methodological aspects of research into health and arts, there is an underlying assumption that different research approaches offer different outcomes or 'depths' of understanding [15, 16].

process can have health-related outcomes [17, 18]. Such outcomes are in fitness attributes and health management beyond alleviating or distracting from symptoms. How these outcomes are affected is harder to determine and may vary from person to person. In essence, the

arts are offering outcomes with uncertain mechanisms of action, although the resulting feelings and emotions may be the conduit for

Challenges and Future Directions in Multidisciplinary Health and Arts Research

Despite the excitement surrounding multidisciplinary health and arts research, there are many barriers to collaborative endeavors. First, funding opportunities are not distributed equitably across fields, making it difficult to foster relationships where artists and scientists are not all treated equally. Additionally, universities and medical schools are made up of silos that often reward expertise in one very narrow area without much support for those looking to broaden their knowledge. This is compounded by the fact that artists and scientists often speak quite different professional languages. The impact of participatory projects in the community, the association of arts training on communication skills, and a patient's willingness to receive nontraditional health care are all likely to be viewed and valued differently by anyone in the community, regardless of disciplinary background. It is also likely that some outcomes will be valued more highly by potential project or funder stakeholders. Developing shared evaluation metrics across ideas of positive social impact that can be applied consistently and fairly is an important future direction. There is also an important discussion about whether subjects at the intersection of arts and health should have an expanded understanding of what counts as "intervention" or "outcome" and consideration of implications for these conceptual discussions. Reconciling the complex ethical considerations of programming at the intersection of health and arts is another future direction. There is ethical programming for both the concert and the project—concerns around audience welfare, the potential impact of the audience on participants, and long-term funding are born out of a commitment to producing patient-

the achievement of health and wellness motives where prescribed drugs lead to 'numbness' and 'no spark in life' [10, 19].

centered programming. Beyond those currently involved, there is also a pressing need for policy changes that may facilitate such cross-sector collaborations. The personnel who can "speak the language" of both sectors are well-placed to facilitate such conversations, and they are critical stakeholders to nurture. As interdisciplinary work is nurtured and sustained, it will be important to continue to reflect on the specific challenges that may be faced in this work and how they may be mitigated. Given the continuing growth and interest within this field, conceptualizing a research agenda and a narrative for the future can support an attempt to secure continuing funding, and also encourage interested parties to begin research projects in dialogue with others. Additionally, given the concerns raised about same-as studies and the growth of potential collaborators, together, may result in a generation of interdisciplinary studies. We also suggest the importance of developing a consultative research process that might encourage co-creation to begin at the research question formulation stage, respectfully incorporating diverse perspectives into themes and questions from the outset. Scoping out the fundamental questions that need to be addressed to take change forward and support policy is also key. In terms of forward direction, at the simplest level, the implications of this report are to identify who else may wish to collaborate or to find out who is already working in this complemented sphere to ensure a strong impact on program development to make the best use of resources to avoid waste in repeated administrative and programmatic work [20, 21].

CONCLUSION

The integration of health and arts presents a promising avenue for addressing complex health challenges through creative, multidisciplinary approaches. This paper emphasizes the mutual benefits of collaboration among artists, healthcare professionals, and researchers, advocating for a participatory approach that reflects community needs. Looking forward, establishing standardized evaluation methods, fostering interdisciplinary training, and creating

policies that support cross-sector partnerships will be essential for sustaining this work. Multidisciplinary arts and health research can redefine health interventions, improve community engagement, and contribute to holistic well-being, making a valuable contribution to addressing health disparities and enhancing quality of life across diverse populations.

REFERENCES

1. Prati G, Mancini AD. The psychological impact of COVID-19 pandemic lockdowns: a review and meta-analysis of longitudinal studies and natural experiments. *Psychological medicine*. 2021 Jan;51(2):201-11.

2. Browning MH, Larson LR, Sharaievska I, Rigolon A, McAnirlin O, Mullenbach L, Cloutier S, Vu TM, Thomsen J, Reigner N, Metcalf EC. Psychological impacts from COVID-19 among university students: Risk factors across seven states in the United States. *PloS one*. 2021 Jan 7;16(1):e0245327. plos.org
3. Devaux A, Goffart JP, Kromann P, Andrade-Piedra J, Polar V, Hareau G. The potato of the future: opportunities and challenges in sustainable agri-food systems. *Potato Research*. 2021 Dec;64(4):681-720. springer.com
4. Rachmad YE, Budiyanoto B. Perception Analysis of Sales Volume on Partner Who Using Three Food Delivery Apps in Surabaya. In *International Conference of Business and Social Sciences 2022* Mar 22 (pp. 116-122). stiesia.ac.id
5. Amankwah-Amoah J, Abdalla S, Mogaji E, Elbanna A, Dwivedi YK. The impending disruption of creative industries by generative AI: Opportunities, challenges, and research agenda. *International Journal of Information Management*. 2024 Feb 8;102759. swan.ac.uk
6. Barry K, Southern J, Baxter T, Blondin S, Booker C, Bowstead J, Butler C, Dillon R, Ferguson N, Filipiska G, Hieslmair M. An agenda for creative practice in the new mobilities paradigm. *Mobilities*. 2023 May 4;18(3):349-73. tandfonline.com
7. Lee CJ, Northcott SJ. Art for health's sake: community art galleries as spaces for well-being promotion through connectedness. *Annals of Leisure Research*. 2021 May 27;24(3):360-78.
8. Tan MK, Tan CM, Tan SG, Yoong J, Gibbons B. Connecting the dots: The state of arts and health in Singapore. *Arts & Health*. 2023 May 4;15(2):119-34.
9. Wiratno TA, Callula B. Transformation of beauty in digital fine arts aesthetics: An artpreneur perspective. *Aptisi Transactions on Technopreneurship (ATT)*. 2024 Jul 17;6(2):231-41. aptisi.or.id
10. De Witte M, Orkibi H, Zarate R, Karkou V, Sajnani N, Malhotra B, Ho RT, Kaimal G, Baker FA, Koch SC. From therapeutic factors to mechanisms of change in the creative arts therapies: A scoping review. *Frontiers in Psychology*. 2021 Jul 15;12:678397. frontiersin.org
11. Jokom R, Thio S, Kartika EW. Why Tourists Consumed Local Food in Bali During the Pandemic?. In *International Academic Conference on Tourism (INTACT)" Post Pandemic Tourism: Trends and Future Directions"*(INTACT 2022) 2022 Dec 26 (pp. 227-244). Atlantis Press.
12. Tompea RC. Europe's Migrant Human Trafficking--a Case Study of Romania's Sexually Exploited Women. *Journal of Modern Slavery: A Multidisciplinary Exploration of Human Trafficking Solutions*. 2023 Jan 1;8(1).
13. Leach MJ. Rapport: A key to treatment success. *Complementary therapies in clinical practice*. 2005 Nov 1;11(4):262-5.
14. Goopy S, Kassan A. Arts-based engagement ethnography: An approach for making research engaging and knowledge transferable when working with harder-to-reach communities. *International Journal of Qualitative Methods*. 2019 Jan 18;18:1609406918820424.
15. Taherdoost H. Data collection methods and tools for research; a step-by-step guide to choose data collection technique for academic and business research projects. *International Journal of Academic Research in Management (IJARM)*. 2021 Sep 22;10(1):10-38. hal.science
16. Prosek EA, Gibson DM. Promoting rigorous research by examining lived experiences: A review of four qualitative traditions. *Journal of Counseling & Development*. 2021 Apr;99(2):167-77.
17. ben Hammouda S, Chen Z, An C, Lee K. Recent advances in developing cellulosic sorbent materials for oil spill cleanup: A state-of-the-art review. *Journal of Cleaner Production*. 2021 Aug 15;311:127630.
18. Qi M, Li W, Zheng X, Li X, Sun Y, Wang Y, Li C, Wang L. Cerium and its oxidant-based nanomaterials for antibacterial applications: a state-of-the-art review. *Frontiers in Materials*. 2020 Jul 17;7:213. frontiersin.org
19. Radermecker AS. Art and culture in the COVID-19 era: for a consumer-

- oriented approach. *SN Business & Economics*. 2020 Nov 2;1(1):4.
20. Gesare, Demtillah. (2024). The Role of Public Art in Community Identity and Urban Development. *International Journal of Arts, Recreation and Sports*. 3. 14-26. 10.47941/ijars.2068.
21. Lee SS, Walker A, Callier SL, Fletcher FE, Galarneau C, Garrison N, James

JE, McLeod-Sordjan R, Ogbogu U, Sederstrom N, Smith PT. Racial equity, diversity and inclusion in bioethics: Recommendations from the Association of Bioethics Program Directors Presidential Task Force. *The American Journal of Bioethics*. 2024 Oct 2;24(10):3-14. [tandfonline.com](https://doi.org/10.1016/j.ajbio.2024.09.001)

CITE AS: Nyiramukama Diana Kashaka (2024). Multidisciplinary Approaches to Health and Arts Research. IDOSR JOURNAL OF ARTS AND MANAGEMENT 9(2):6-10. <https://doi.org/10.59298/IDOSRJAM/2024/9.2.61000>