

CREATING HEALTHY COMMUNITIES: ARTS + PUBLIC HEALTH IN AMERICA

*A national initiative led by the University of Florida
Center for Arts in Medicine in partnership with ArtPlace America*

Working Group Proceedings

January 17-18, 2019, The Brookings Institution and Georgetown University, Washington, DC

Creating Healthy Communities: Arts + Public Health in America

A Focus on Public Health Policy: Fourth National Convening Working Group



Presented by
the University of Florida Center for Arts in Medicine in partnership with ArtPlace America

Hosted by the Georgetown Lombardi Arts & Humanities program
and the Johns Hopkins University International Arts + Minds Lab

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David Leventhal, Dance for PD

Grim Jackson



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**CREATING HEALTHY
COMMUNITIES**

**ARTS + PUBLIC HEALTH IN AMERICA
UNIVERSITY OF FLORIDA**

ARTPLACE

Center for **ARTS IN MEDICINE**

UNIVERSITY OF FLORIDA / COLLEGE OF THE ARTS

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Executive Summary

This working work convened 50 invited participants to discuss policy related to the arts in public health. The two-day working group included performances, presentations of practice models, panel discussions, brainstorming exercises, small working groups, provocations (dialogue designed to provoke deeper and broader thought) and consensus building. Recordings of the event were transcribed and thematic analyses were conducted to garner key takeaways as summarized below.

Key Policy Influencers:

- Government agencies (CDC, NIH, HHS)
- Progressive insurance companies
- Media (WISE Entertainment)
- Interagency Task Force
- Surgeon General
- State Health Departments
- Philanthropists (Ex. Bloomberg Philanthropies)
- Public health schools
- National Association for Rural Health
- Major corporations
- Grass roots movements
- Kaiser Permanente
- Americans for the Arts, National Assembly of State Arts Agencies

Key Policy Changes

- Generate more funding for the arts
- Ensure that spaces which integrate arts, health, and community development are created and sustained
- Permit Medicaid and Medicare to allow coverage of arts therapies for isolated elders
- Promote social prescribing through insurers as prevention, not through the biomedical system
- Eliminate art deserts in the U.S
- Create positions for artists in health departments
- Incentivize arts engagement through corporate tax credits and private-public partnerships

Key Strategies

- Design more interdisciplinary meetings
- Develop clear evidence and data
- Create a set of core outcomes to find common language
- Pay special attention to equality
- Communicate the importance of the arts to public health and community development
- Present priority issues when addressing policy (priority issues include: mental health, social isolation, socio-emotional health, gun violence, equality, racism, agism, the opioid epidemic, school-based health programs)
- Present a business angle for artists
- Develop communication strategy training so that we speak with a unified message
- Normalize the idea of doctors recommending art activities

Introduction

Over the past several decades, evidence has mounted to demonstrate that the arts and culture have measurable impacts on health and wellbeing. Today, innovation is taking root at the intersections of arts and public health throughout the nation. *Creating Healthy Communities: Arts + Public Health in America* is a national initiative designed to accelerate this innovation to build healthy communities in alignment with national public health goals through strategic cross-sector collaboration, research and translation. Led by the University of Florida Center for Arts in Medicine, in partnership with ArtPlace America, the initiative engages a comprehensive agenda – including research, collaboration, publication and mass communication – to drive significant improvements in the health of American communities through evidence-based use of the arts.

The *Creating Healthy Communities: Arts + Public Health in America* initiative brings together artists, researchers, public health professionals, community builders, policy-makers and others in conversations around how the arts and culture can be used to improve health in the United States. Alongside convenings, a professional consortium, and network, the initiative is leading research that explores work being conducted at the intersections of the arts, community building and public health. With the overarching goal of building healthier communities through the arts, the *Creating Healthy Communities: Arts + Public Health in America* initiative is designed to support the development of arts and public health as a field by highlighting current programs and best practices and by creating resources to advance best practices and the evidence base. Research findings and key points emerging from working group convenings will contribute to the development of relevant policy recommendations, publications, and an evidence-based framework for using the arts in public health. There are four components to this two-year initiative, which focuses on creating stronger and healthier communities in the United States. This proceeding details the fourth working group convening, UF will host nine convenings in total.

4th Working Group of the Initiative: Focus on Public Health Policy Washington, DC, January 17-18, 2019

Each of the initiative's working group convenings are designed to examine the intersections of the arts, community building and public health from a unique perspective. This fourth convening of 50 invited participants focused on public health policy. While the group of participants included a diverse array of practitioners and stakeholders, an intentional effort was made to curate the working group to include thought leaders with broad public health policy experience and capacity. The working group examined current practice models, evidence, and reviews of the literature, and then engaged in discussion targeted at developing strategies for strengthening the intersections of the arts, public health, and community development in relation to public health policy.

Graphic Recorder, Constance Wilson (the Sketch Effect), captured and illustrated the working group sessions on large boards throughout the second day of the working group. Some of these images are found on the following pages of these proceedings.

Agenda

DAY ONE: Thursday, January 17, Brookings Institution

9:30-10:00	Coffee, tea and check-in	
10:00-10:10	Performance	Grim Jackson, Dew More Baltimore
10:10 – 10:55	Welcomes, Introductions Initiative & Working Group Overviews	Jamie Bennett, ArtPlace America Jamie Hand, ArtPlace America Jill Sonke, University of Florida Anita Chandra, Rand Corporation
10:55-11:40	Practice Model: <i>Dance for PD</i>	David Leventhal, <i>Dance for PD</i> , Mark Morris Dance Group
11:40-11:50	Break	
11:50 – 12:20	Considering the Intersections: Arts, Community Building & Public Health <ul style="list-style-type: none"> ○ Public Health Priorities ○ Arts, Culture & Health 	Moderator: Jill Sonke Anita Chandra, Rand Corporation David Richards, APHA Jamie Hand, ArtPlace America
12:20-12:45	Practice Models	Moderator: Jamie Hand, ArtPlace America Irfana Jetha Noorani, 11 th Street Bridge Project Kathy Le Backes, WISE Entertainment Sara Kass, Creative Forces, NEA/Creative Forces
12:45-1:35	Lunch	
1:35 – 2:00	Sociometry Exercise	Moderator: Jill Sonke, University of Florida
2:00-2:35	The long-term public health impact of arts and cultural engagement	Daisy Fancourt, University College London
2:35-3:20	Panel Discussion: Considering Policy	Moderator: Anita Chandra, Rand Corporation Jeremy Liu, PolicyLink Randy Cohen, Americans for the Arts Jennifer Lo, Boston Public Health Commission Emmeline Edwards, National Institutes of Health Vincent Lafronza, NNPHI
3:20-3:35	Break	
3:35-4:45	Discussion #1: Key Issues Small Groups, Reporting & Discussion	Moderator: Anita Chandra, Rand Corporation
4:45-5:00	Closing	Jill Sonke, University of Florida
5:00-6:00pm	Reception	Brookings Institution

DAY TWO: Friday, January 18, Georgetown Alumni House

8:00-8:30	Coffee, tea and check-in	
8:30-8:50	Welcome & Overview of the Day	Julia Langley, Georgetown University Susan Magsamen, Johns Hopkins University Jill Sonke, University of Florida
8:50-9:00	Open Provocations	Moderator: Jill Sonke, University of Florida
9:00-9:45	Presentations: Considering the Evidence-base	Moderator: Jill Sonke, University of Florida Stacey Springs, Brown University Kelley Sams, University of Florida Margy Waller, Topos Partnership
9:45 – 10:35	Discussion #2: Key Influencers Small Groups, Reporting & Discussion	Moderator: Anita Chandra, Rand Corporation
10:35-10:50	Break	
10:50-12:10	Question #3: Key Strategies Small Groups, Reporting & Discussion	Moderator; Jamie Hand, ArtPlace America
12:10-1:00	Lunch	
1:00-1:25	Sociometry Exercise	
1:25-2:15	Mapping the Key Opportunities & Priorities	Moderator: Jill Sonke, University of Florida
2:15-2:45	Open Provocations, Calls to Action & Discussion	
2:45-3:00	Closing	Jamie Hand, ArtPlace America

Working Group Participants

Elaine Auld	Chief Executive Officer, Society for Public Health Education
Jamie Bennett	Executive Director, ArtPlace America
Steven Boudreau	Chief Administrative Officer, RI Department of Health
Kimberlee Campbell-Smith	Operations Manager, University of Florida Center for Arts in Medicine
Anita Chandra	Vice President and Director, Social and Economic Well-BeingRAND Corporation
Randy Cohen	VP of Research & Policy, Americans for the Arts
Yessica Corporán	Membership Manager, Grantmakers in the Arts
Nick Dawson	Program Chair, Stanford School of Medicine
Emmeline Edwards	Director of the Division of Extramural Research, National Center for Complementary and Integrative Health (NCCIH)
David Fakunle	Co-Founder and CEO, DiscoverME/RecoverME
Daisy Fancourt	Senior Research Fellow, University College London
Janet Fulton	Chief, Physical Activity and Health Branch, Centers for Disease Control and Prevention
Tasha Golden	Doctoral Researcher, University of Louisville
Kristina Gray-Akpa	Program Director, Grantmakers In Health
Maggie Grieve	VP, Success Measures Neighborworks America
Jamie Hand	Director of Research Strategies, ArtPlace America
Gay Hanna	President, Hanna Merrill Inc.
Max Helgemo	Research Coordinator / Musician in Residence, University of Florida Center for Arts in Medicine
Irfana Jetha Noorani	Deputy Director, 11th Street Bridge Park Building Bridges Across the River
Sara Kass	Military and Medical Advisor, Creative Forces/National Endowment for the Arts
Bridget Kerner	Senior Program Analyst, National Association of County and City Health Officials
Tracey Knuckles	Arts Team member, Bloomberg Philanthropies
Morgan Kulesza	Program Coordinator, Georgetown Lombardi Arts and Humanities Program
April Kyle	Vice President of Behavioral Services Division, Southcentral Foundation
Vincent Lafronza	President and Chief Executive Officer, National Network of Public Health Institutes
Julia Langley	Faculty Director, Georgetown Lombardi Arts and Humanities Program
Kathy Le Backes	Vice President Research & Development, Wise Entertainment
David Leventhal	Program Director, Dance for PD, Mark Morris Dance Group

Jeremy Liu	Senior Fellow for Arts, Culture, and Equitable Development, PolicyLink
Jennifer Lo	Medical Director, Boston Public Health Commission
Bridget Madden	Events Coordinator, University of Florida Center for Arts in Medicine
Susan Magsamen	Executive Director International Arts + Mind Lab, Johns Hopkins University School of Medicine Brain Science Institute
Aly Maier	Program and Research Assistant, University of Florida Center for Arts in Medicine
Carmen Martin	Senior Community Health Specialist, Kaiser Permanente Colorado
Kathryn Matthew	Director, Institute of Museum and Library Services
Leslie Meehan	Director, Office of Primary Prevention, Tennessee Department of Health
Rebecca Morley	Consultant, Rebecca Morley Consulting, LLC
Amanda Navarro	Managing Director, PolicyLink
Onye Ozuzu	Dean, University of Florida College of the Arts
Margery Pabst-Steinmetz	President, Pabst Steinmetz Foundation
Paul Pietsch	Research Manager, National Assembly of State Arts Agencies
Deborah Reed	Professor, University of Kentucky, College of Nursing
David Richards	Project Coordinator, Healthiest Cities & Counties Challenge, American Public Health Association
Julia Ryan	Vice President, Health Initiatives, Local Initiatives Support Corporation
Kelley Sams	Visiting Research Scholar, University of Florida Center for Arts in Medicine
Jill Sonke	Director, University of Florida Center for Arts in Medicine
Stacey Springs	Investigator, Center for Evidence Synthesis in HealthBrown University, School of Public Health
Eddie Torres	President and CEO, Grantmakers in the Arts
Megan Van Voorhis	President and CEO, Arts Cleveland
Jennifer Vey	Senior Fellow and Director, The Brookings Institution
Margy Waller	Senior Fellow, Topos Partnership
Primus Wheeler	Executive Director, Jackson Medical Mall Foundation
Naj Wikoff	Founder, Arts on Call (also Vice President, National Organization for Arts & Health)
Constance Wilson	Graphic Recorder, The Sketch Effect

Advance Data Collection

In advance of the working group, participants were asked through an online registration survey what perspective they would like to bring to the event as well as what they hoped to take away. Both of these questions resulted in a broad diversity of responses, many centering upon the participants' experiences using the arts to facilitate social change and effective communication.

What perspectives would you like to bring to this event? (Participant Responses)

- *"I aim to bring the perspective of an artist, forged by and committed to community building, who became a public health researcher and practitioner who intentionally uses art for purposes of research dissemination, data acquisition, relationship building and elevation of historically divested populations."*
- *"I'm interested in the ways thinking, perceiving the world and moving through life with an artist's approach can impact the daily experience of someone living with a chronic health challenge--more specifically, what sorts of physical, cognitive, emotional and social changes take place when people with Parkinson's and other movement disorders understand movement and creativity the way a dancer does. How can we harness this understanding and perspective to address critical public health issues related to chronic, long-term neurodegenerative conditions including, but not limited to, mobility, self-efficacy, confidence, mood, social inclusion, and well-being."*
- *"As an evaluator specializing in participatory approaches to outcome measurement within housing and community development, recently we have been exploring and developing tools and methods for practitioners to measure how their health and arts focused strategies benefit both the people and places served. In 2018, we released a new set of data collection tools to measure the health outcomes of upstream housing, community engagement, financial capability and other community development programs. We are just beginning to adapt some of our existing set of measurement tools to focus on arts and creative placemaking outcomes and also will be developing some new tools using arts methods. Having worked with almost 1,000 community development organizations on measurement efforts, we bring a particular perspective about how to do systematic outcome tracking in practical, accessible ways."*

Overall, participants stated that they hoped to increase their understanding of arts + public health by attending this working group as well as improve their ability to create effective programs.

What do you hope to take away from this event? (Participant Responses)

- *"A greater understanding of the intersection of the arts in the public health field. Potential contacts who might be interested in future programmatic or research collaboration. A*

recognition that for many populations, healthcare as delivered in physicians' offices and medical centers is just one piece of an overall, comprehensive approach to managing the growing epidemic of chronic neurological diseases. A roadmap for designing policy, including funding models, based on that recognition."

- *"I hope to learn how arts and culture can serve as a mechanism for community engagement in creating healthy communities and how arts and culture can help elucidate community assets and context that should be considered in health and community planning efforts."*
- *"I recently started a project on creative peacemaking that brings together local recreation and parks agencies, local health departments, and artists to create healthier communities through creative placemaking. Being new to this work, but not new to planning and public health, I hope to learn from the work other participants have completed so that it can inform my own project and my future work supporting health departments on built environment related initiatives."*

Performance, Welcome, Introductions, Initiative & Working Group Overview

The day began with a powerful performance by **Grim Jackson**. Grim's spoken word pieces addressed social issues, as well as issues of power and wellbeing. In his first piece, he embodied a young boy struggling within the education system. In this performance, he posed questions such as, "**How can you equate excellence to an exam?**" and made statements like: "**Success is living happily and not in fear.**"

"We all write our own history because the best teachers are us" said 21-year-old Grim, poet and educator. He encouraged all of us to embrace a more inclusive definition of a scholar— someone who is not only smart, but innovative. He highlighted the need to consider scholars of all disciplines and all subjects: scholars of video games, scholars of football, etc. Grim spoke about his plans to launch a center to highlight "how smart the bad kids are." He offered, "We need to stop teaching kids as a group and start teaching and seeing them as individuals."

Grim's second spoken word piece began in the high-pitched voice of a child asking his mother questions. He began with general questions like "Why does the moon follow me?" He then quickly progressing to questions about oppression, religion, and government, "**If money is the root of all evil, then why is 'In God we trust' written on it?**"

His voice changed again to a final statement in a slow, drugged voice; "I don't have any more questions." Working group participants described the 2-minute performance as "devastating," "powerful," and "viscerally clear".



Grim Jackson giving his performance

Grim's performance was followed by welcomes from **Jamie Bennett** and **Jamie Hand** (both from ArtPlace America). Bennett explained the purpose of ArtPlace is to work with artists as allies in community development. ArtPlace is a ten-year fund to support the engagement of arts in a broad number of sectors relevant to community wellbeing. The *Creating Healthy Communities: Art + Public Health in America* initiative focuses on how the engagement of the arts can be accelerated and facilitated in the health sector. There is a strong tradition in this country of engaging the arts at an individual level in the clinical setting, but we have not as robustly done this yet in the public health sphere.

Hand presented the community development matrix that ArtPlace uses to understand and analyze community stakeholders and the types of work being done in communities. For each sector where they work (housing, public safety, etc.), ArtPlace supports partners to conduct field scans and convene working groups to understand what types of tools and resources are needed to enhance the performance of the field. This working group was situated on the public health side of this work as part of the initiative led by University of Florida Center for Arts in Medicine.

Because health is such a broad sector, there is synergy to work within other areas. ArtPlace is not trying to promote silos, instead engage diverse perspectives to create interaction between sectors. Hand stated, “**Really great things happen when you have great partners.**”

Next, **Jill Sonke (University of Florida Center for arts in Medicine)** described how individuals and organizations are “bubbling up” from everywhere with interest in this work. The time is ripe for work to support the intersection between public health and the arts. She provided an overview of the *Creating Healthy Communities: Art in Public Health in America* initiative:

- There are four components to this two-year initiative, which focuses on creating stronger and healthier communities in the United States. This is the fourth working group convening, and UF will be hosting nine convenings in total.
- In November, the initiative will be launching a webinar series, and a national network has been created. The UF Center for Arts in Medicine is doing the “heavy lifting” on behalf of the field to collect and consolidate the current evidence. This includes a field survey, focus groups, two scoping reviews, and a systematic review.

At its heart, Jill stated, “This initiative is an act of translation. We are gathering knowledge and conducting research that can be translated into effective practice and policy.” In Spring 2019, the initiative will support the drafting of a first white paper by bringing a group of scholars to Gainesville, Florida, where the Center is located. The initiative’s ultimate deliverable is to create an evidence-based framework built upon the contributions of others working at these intersections, including the participants of this working group.

The *Creating Healthy Communities: Art + Public Health* initiative has supported three previous working groups. Thematic analysis was conducted on the transcripts from each working group.

June 14-15, 2018, Cincinnati, Ohio: Creative Placemaking & Wellbeing

Key Themes:

- *Arts in Public Health*, as a concept, needs to be framed and communicated:
 - art as activity (verb)
 - need for common language/taxonomy
 - need for communications-intensive translation plan
- Cross-sector collaboration is critical:
 - need for collaborations that promote equity & community participation
 - cognitive science and neuroaesthetics are important partners
- The evidence base must be strengthened:
 - need for outcomes measurement (core outcomes recommendations)
 - need to consolidate and assess the current literature

October 8, 2018, Austin, Texas: Practice

Key Themes:

- Cross-sector connection is critical:
 - for communication and building bridges through shared language
 - for policy implementation and change
 - for partnership between arts & public health funders
- Field building must be considered:
 - development and dissemination of tools
 - need for outcomes-based research
- Equity and inclusion:
 - need for consideration of power, profit, and policy
 - need to engage and listen to communities

Arts *can* help increase equity, but some added that they “aren’t a magic bullet”

October 2018, Athens, Georgia: Research

Key Themes:

- Core outcomes measurement is critical to strengthening the evidence base and practice
 - A process for development of core outcomes should be considered.
- Key outcomes to measure should include:
 - social cohesion - stigma, belonging, civil/community engagement
 - wellbeing - physical, mental, emotional, happiness
 - policy implementation and change
 - self-efficacy and behavior change
- Values must be articulated to guide research
 - Research must be community-centered, culturally relevant, question centers of power, interdisciplinarity, and trauma-informed
- The evidence base can be strengthened by identifying gaps, aligning with public health priorities, identifying core outcomes, and building a research repository

Jill offered a definition of policy that would guide this working group: “We’ll think of policy as actions, structures and expectations that help guide change in organizational and community practice; including big ‘P,’ Policy in relation to governmental actions and small ‘p,’ policy, in relation to organizational actions.”

The two-day working group included performances, presentations of practical models, panel discussions, brainstorming exercises, small working groups, provocations (dialogue designed to provoke deeper and broader thought) and consensus building.

Practice Model: *Dance for PD*

The Dance for Parkinson’s Disease program, directed by David Leventhal, began in 2001 as part of the Mark Morris Dance Group. It has now expanded into an international movement. Leventhal has won numerous awards for this work and has spoken internationally about dance and its effects.

Leventhal began his presentation with a video highlighting the *Dance for PD* program. The video included interviews with the dancers. David stated that one of the most important benefits for participants is how dancing reinforces that **“who they are is the most important component of their existence, not Parkinson’s Disease.”**



David Leventhal (Dance for PD, Mark Morris Dance Group) presents the history and goals of the program

David explained that when he began this program, there was no framework or policy, all he had were stories from individuals with Parkinson’s. He listened to carefully to those stories. These individuals described feeling isolated and medicalized because of their condition. David hoped that dance could change these stories. Beginning with a single class in Brooklyn, the program now exists in 35 countries. There are peer-reviewed studies that demonstrate the impact of dance on the lives of people with Parkinson’s Disease.

The benefits of dancing are as comprehensive as the challenges of Parkinson’s. **“Parkinson’s is a disease of subtraction, and dance is addition,”** David stated. Dance addresses physical wellbeing, but also social and cognitive wellbeing. Here, dance and the arts are an effective way to enhance and build upon the biomedical model.

This program's research has articulated many benefits of dance in relation to PD, with implications for public health as well:

- high rates of adherence
- cheaper than medication
- produces sustainable behavior change
- provides social connection
- no negative side effects
- no need for health insurance

David ended his presentation by sharing a video about Cyndy, a dancer from one of the Mark Morris Dance Group's classes. Cyndy stated that Dance for PD helped her discover her own value, reminding her that she is a dancer. It allows her to take better care of herself and to sit up straight. "Parkinson's forces you to reveal your vulnerabilities. **Sometimes I cannot walk, but I can dance,**" Cyndy stated.

In 2012, Dance for PD launched their first performance project, followed by a second performance in 2014, a collaboration between dancers in Brooklyn and Toronto.

To conclude the presentation, six dancers from Dance for PD performed for the working group. They entered from different sides of the room before joining together on stage. Some of the dancing was performed standing and some seated in chairs. The dancers' movements were strong, fluid, and expressive - the energy of their performance filled the room. The Working Group members watched the performance with silent focus, and then erupted in a standing ovation. Following their performance, David introduced the dancers to the working group. The dancers responded to questions from working group participants about the most meaningful elements of being in this program.



Dancers from Dance for PD perform for the working group

Why do you do this? What does it bring to your life?

- “The dancers are my family. This is my support system. It’s fun.”
- “I do it for the community, but I also do it because I’m not sick when I’m dancing. It connects me with a part of myself that I’m not attuned to otherwise.”
- “Je danse donc je suis” (I dance, therefore, I am)
- “It allows me to wake up every morning and look forward to something. It has saved my life.”
- “Dance is what has kept me going.”
- “With Parkinson’s I often feel like I’m losing myself. Dance allows me to reclaim myself.”
- “It’s as much medicine to me as my pills are.”

Considering the Intersections: Arts, Community Building & Public Health

David Richards from the American Public Health Association (APHA) shared some of the work that APHA has done to address community health.

- Community health is strongly influenced by the social determinants of health: the environments where we live, work, and play.
- APHA has been at the forefront of highlighting the impact of these determinants and the need to think about and address public health holistically.
- Building public health infrastructure and capacity requires us to also build public health equity.
- We need to breakdown the systems that create inequality. We urgently need to address social justice and inequalities in the environments that shape health.
- Collaboration over competition: we need to come together to overcome inequality.
- Over the last two years, APHA has given over 50 grants to towns and cities that are focusing on improving community health.

Jamie Hand (ArtPlace America) discussed the relationship between the Arts, Culture, and Public Health.

- What do we mean by Arts and Culture? What are we looking at?
 - ArtPlace uses a very inclusive definition of art and considers studio practice, social practice, and civic practice.
 - In civic practice, artists co-create with communities.
- Emerging patterns: What can the arts do?
 - address specific community health concerns/diseases
 - improve health care access or delivery
 - improve health communication
 - support collective healing from trauma
 - reduce stigma
 - nurture cultural identity and social cohesion

Anita Chandra (Rand Corporation) shared the Robert Wood Johnson’s Culture of Health Action Framework and its applications.

- 90% of our health outcomes stem from our environments. However, 90% of health funding goes toward biomedical healthcare.
- A **Culture of Health** is defined as one in which good health and wellbeing flourish across sectors.
- We have to shift mindsets in our communities around health and wellbeing to see our primary goal as making sure that everyone has the opportunity to make choices that lead to healthy lifestyles.
- Health needs to be embedded as a priority across sectors.
- Anita left the working group with two key questions to reflect upon:
 - How do we create narrative around health?
 - How can artists help us create and share new ways of thinking?

The three presenters then engaged the audience in a discussion about what the arts can do for health. Key points from that discussion included:

- In a decade when the arts are considered essential within healthcare practice, how can we extend this to highlight the need for arts beyond the clinical setting, and in a public health context?
- When we talk about health, people think that we are talking about healthcare and disease. We need to move beyond this. The arts can help reframe what comes up for people when they hear the word “health” and help shift the emphasis from “sick care”.
- Participatory research and program design as well as community engagement can be accomplished through the arts. The arts can play a role by bringing people together. Public health has a history of collecting information from people. However, rather than a public health department descending upon a community, art can help lift up voices and people.
- The arts can be used as a way of knowing. “Art is storytelling,” one participant stated. We all love a good story, no matter who we are. And we love stories because they connect us to our humanity.

Practice Models

This session, moderated by Jamie Hand, presented three practice models of programs that engage the arts to address public health: **11th Street Bridge Project, WISE Entertainment, and NEA/Creative Forces.**

Irfana Jetha Noorani (11th Street Bridge Project) is a longtime grantee of ArtPlace America.

- Irfana shared a video about the 11th Street Bridge Park, a planned public park that brought community members together to design a project that addressed diverse priorities.

- This social infrastructure project is more than just a park. In addition to safety, enjoyment, and physical activity, the park engages the arts and culture to provide opportunities for the community to connect.
- The project brought together partners who had previously been siloed in order to ensure that this infrastructure would be beneficial to the people in the community.
- “I believe this can be a model for how development can take place within communities” one community member stated.
- Irfana described the work as an anti-gentrification project born from an equity-based model.



Irfana Jetha Noorani presents the 11th Street Bridge Project

Kathy Le Backes (WISE Entertainment) explained that although she works in the entertainment industry, her background is in public health. Her work at WISE Entertainment merges these two fields, producing shows by and for women and minorities that address health and social issues.

- East Los High, a teen drama series that streamed on Hulu for five seasons, was originally designed to tackle issues about teen pregnancy and sexual health. It was the first English-language show in the U.S. to feature an all Latinx cast, and addressed a wide range of issues related to health.
- The show was built upon data collected through interviews and focus groups, from a variety of stakeholders
- It engaged an individual and systemic lens by discussing broader social determinants of health via the individual stories of the characters portrayed.
- The show engaged universal storylines and complex characters, with aesthetic experience and aesthetic considerations at the heart of the show’s design

- Kathy ended her presentation by showing a video of East Los High that was rich with upbeat music, dance and drama. The video also showed some of the multi-modal resources with which the show connected to its viewers, including a website, social media, character vlogs, and widgets that link viewers to resources.
- The show's producers evaluated every season, and researchers conducted outcomes research. A key study finding was that transmedia (telling a single story or story experience across multiple platforms and formats using current digital technologies) was the most effective method of information delivery, especially when related to condom use. Significant behavior changes were found in the research.
- One study publication won APHA's 2018 Best Article of the Year award (*East Los High Transmedia Edutainment to Promote the Sexual and Reproductive Health of Young Latina/o Americans*, Wang & Singhal, 2016).



Kathy Le Backes (WISE Entertainment) shares her experience working with East Los High

Sara Kass (NEA/Creative Forces) spoke about Creative Forces, an initiative developed through partnerships between the National Endowment of the Arts, the U.S. Departments of Defense and Veterans Affairs, and state and local arts agencies that provides military service members and veterans access to creative arts therapies as well as community arts activities.

- Creative Forces works to breakdown the silos of care for veterans and engage the arts in the scope of work.
- The program grew out of the National Intrepid Center of Excellence (NICOE) treatment model, where every patient experiences art therapy as an intervention while they are in care. Participants consistently named art therapy as one of the five most effective modalities they experienced in their care.
- In 2016, congress took notice and provided funding to expand and launch Creative Forces. A connection to the community was included as a part of this initiative.

- The arts create connections, which are especially important when injured veterans are removed from a group that they used to belong to.
- Creative Forces is asset-based. It focuses on what we CAN do.
- Arts Cafés provide space for the participants to share what they are doing and transfer the connection that they have built with clinicians to the community.
- Sara emphasized the strong need for cultural competency and the creation of shared language between the arts and the military.
- War has often been a time of medical innovation, innovations which were subsequently shared with the community. As Traumatic Brain Injury and Post-Traumatic Stress Disorder become increasingly prevalent in the U.S. population beyond veterans, the efficacy of creative arts therapies for treating them can now be cited due to the work and research of Creative Forces.

Sociometry: Arts + Equity

The sociometry exercise brought participants to their feet in an open space as they responded to questions designed to generate lively and embodied dialogue. In these exercises, questions were posed by a facilitator and participants position themselves in the room across a spectrum from “yes” to “no.” The facilitator asked select attendees to explain why they are standing where they were, and invited others to move and/or speak in response.



Participants prepare to position themselves in the room in response to the sociometry question

Participants were asked three questions during this exercise. Answers ranged from absolute “yes” to “no,” and everywhere in between – lively dialogue ensued.



David Fakunle (DiscoverME/RecoverME) shares his thoughts about the equity of research

Questions 1: The public health system and those of us working at the intersections of arts and public health are working to advance equity, are our own practices, including research practices, equitable?

- “We speak a lot about patient-first language and healthcare provider communications, but what about researchers? We should share these considerations.”
- “We have made a lot of progress in the past decades but need to go further. We are starting to see more focus on equity in transportation and urban planning. Can this extend to research?”
- “When we talk about equity, I am thinking about racial equity. Knowing something and doing something about it are two different things. Being aware of the racial history of this country is a first step, but it is not enough.”
- “Implicit bias is a discussion that people are having, but how can we address this through our practices?”
- “Socio-economic equity is important. The people who are leaders in public health are rather homogenous and come from the same socioeconomic perspective. **We cannot say that we have equity in research if the people designing the research are so different from the people in the communities of focus.**”
- “We have come very far in documenting inequities, but we need to advance how we track progress related to health equity. How do we know what we know?”
- “How do we use community-driven methodologies? Indigenous methodologies?”

Question 2: How well-suited are *the arts* in helping us do better with equity?

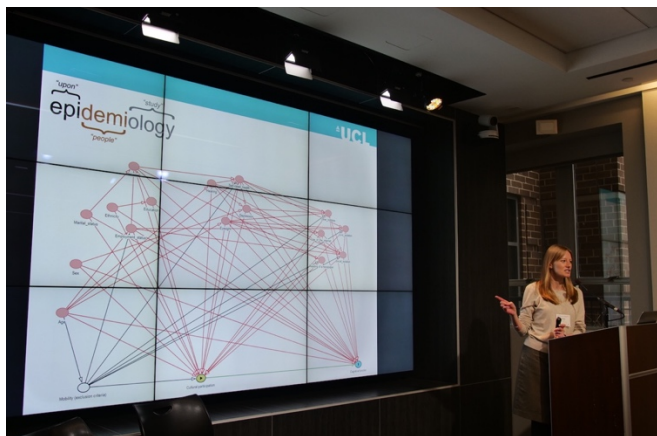
- “The arts are not always equitable. Taking art classes, going to see shows, or buying art work is not affordable or accessible for everyone. Perhaps we should be using the word “creativity” instead, which is free.”
- **“As long as zip code still predicts our life expectancy, which in this country it does, we need to tell stories.”**
- “The arts are always the first thing to get cut from schools. In medicine we are getting better at getting healthcare providers schooled in the arts, but we remain siloed. There is tremendous opportunity for integration.”
- “Meaningful engagement of the arts can help challenge the systems we take for granted.”

Question 3: What is it about the arts that can address equity?

- “Art at its very nature is not bound by convention. Through art, you can say whatever you want. Research constricts all of that; however, art is a science and science is an art. They are kindred spirits. Freedom needs to be found in research as well.”
- “Talking about racism, classism, homophobia, etc. is not easy, and needs to be approached creatively.”
- “We bring the world in through our senses. We are wired for the arts. We are wired for connection, beauty, and feeling.”

The Long-Term Public Health Impact of Arts and Cultural Engagement

Dr. Daisy Fancourt (University College London) presented her team’s research about the benefits of arts engagement. Their research methods are grounded in basic science, applied science, and population science. This approach thinks of the arts as multi-model interventions that can have benefits at an individual, community, and social level. They look at the psychological, physiological, and behavioral impacts and are interested in seeing who benefits most and how.



Daisy Fancourt (University College London) presents the relationships she has found between the arts and health

Daisy presented results from her UK population-based epidemiological studies with the working group. This work uses longitudinal big data sets, and investigates the relationships between arts and cultural participation and health outcomes. The studies carefully adjust for confounding factors, such as education and socio-economic status. Daisy noted that her research considers passive arts engagement such as theatre and concert attendance, along with active creative engagement.

Mental health: We know that the arts can help manage mental illness issues, but can they be used to protect *against* mental health issues?

- Daisy's team found a 23% lower chance of depression incidence among individuals who regularly engaged in cultural activities.
- Signing lessons were found to help with postnatal depression.
- Music exposure during pregnancy was associated with higher wellbeing post-birth.
- The team found an independent protective association between listening to music and postnatal depression.
- Arts-engagement correlated in higher self-esteem in children, especially when parents engaged in the activity with the children.
- The team found a 49% lower risk of maladjustment among children who engaged in the arts.
- Reading was found to reduce behavior problems, even in children who already had behavior problems.

Cognition: There is quite a bit of research about how the arts can impact cognition in people who already have cognitive problems. But can the arts help reduce the incidence of cognitive problems?

- Once monthly participation in arts and cultural activities provide a protective effect against cognitive decline. Conversely, cinema and TV watching produce a higher incidence of cognition issues.
- The team’s findings included that the more that people engage with the arts, the lower the risk of dementia. The arts appear to support cognitive ability.

Physical health

- Cultural engagement reduces sedentary behaviors and also improves social health.
- There is a 27% lower risk of disability for individuals who engage in cultural activities once a year, 44% every few months or more. This is due to a combination of physical and psycho-social effects.
- Arts engagement was also shown to reduce premature mortality.

Daisy stated, **“the arts are a vehicle to addressing these health outcomes, and they are a vehicle that is fun to ride.”**

Her team has formulated several policy recommendations from this work, including:

- It is important to have plans in place on how the arts can be engaged for healthcare emergencies, such as epidemics.
- There is a danger in cutting arts budgets, as these cuts increase health care costs.

Social prescribing is now becoming quite popular in the UK, the time is ripe, but it is important to make sure that people are listening. Evidence can help people listen.

The NHS is supporting link workers, who help connect patients with community arts groups and other social activities based on their own preferences. The costs are often split between the NHS and arts groups. *The NHS has found that this reduces their costs, and are very supportive of social prescribing at present.*

Panel Discussion: Considering Policy

Moderated by Anita Chandra, four experts in health policy presented their work at the start of this panel discussion: Emmeline Edwards, Jennifer Lo, Vincent Lafronza, Jeremy Liu, and Randy Cohen.

Emmeline Edwards (National Institutes of Health)

- One of her team’s key topics of focus is responding to the opioid crisis. In their work, they have become more aware of pain as the entry point for opioids. Studying improved pain management has brought her group together with others to focus on non-pharmaceutical solutions to pain management as well as opioid addiction.

- The NIH supports *Sound Health*, a partnership between several agencies that works to explore how the arts can impact both the brain and the body. This work has been effective in exciting the community about the use of the arts.
- On the NIH webpage, NIH Director Dr. Francis Collins can be seen in a video discussing the positive impacts music can have.



Emmeline Edwards (National Institutes of Health) shares her team's work on the opioid crisis

Jennifer Lo (Boston Public Health Commission):

- How does policy on health equity and racial justice intersect with art?
- The Boston Public Health Commission considers the arts as a way to give “voice” to those who are often “voiceless”.
- Start Strong is a youth program in Boston that addresses violence in relationships. It addresses media literacy and teaches youth to have a critical lens. The program gives them a way to express the nuances of what they have going on in their lives.
- Throughout all work, it is important to address the social determinants of health: supporting employment opportunities, inclusion of LGBTQ individuals, and people of color.
- Health equity in all policies is also essential. The Boston Public Health Commission has created a guide that they are distributing widely with recommendations on how to integrate health equity within day-to-day programming.

Vincent Lafronza (National Network of Public Health Institutes):

- The NNPHI consists of 44 Public Health Institutes throughout the country that work to improve health through systems, structures, and outcomes. Much of their policy focus relates to public health issues like tobacco and addiction.
- Vincent's father was a musician. He described music as an integral part of his life.
- Public health initiatives and schools can highlight the need for arts programming in educational curricula. Braiding funding for health improvement in schools with arts programming can be an excellent strategy.

- Vincent explained that in Cuba, the arts are routinely funded as a part of health. The government there prioritizes the arts as an essential part of healthcare and prevention. He ended with a call to move this work forward so the United States might see a similar future.

Jeremy Liu (PolicyLink):

- PolicyLink's research about the arts reveals disparities in resources and how the arts can reveal cultural understandings and priorities.
- They built a tool for leaders in organizations to help engage arts and culture in equity work.
- PolicyLink manages the funding for community foundations to tackle health and health equity.
- Jeremy suggested that maybe we need a "culture in all policies" approach to go alongside "health in all policies."

Randy Cohen (Americans for the Arts):

- Americans for the Arts works to advance the arts by promoting the integration of the arts in all sectors.
- "National leadership, local tools."
- In the years leading up to healthcare reform, Americans for the Arts focused on the need for healthcare coverage for artists.
- Arts Advocacy Day: Americans for the Arts brings artists together to highlight their needs in Washington, DC. They partner with 85 national organizations on the day. "It's amazing to get that many people in this city to agree."
- They also publish full page advertisements in *The Hill* newspaper, since key decision makers read it every day.
- Arts and culture is not a partisan issue. It is important for us to communicate value.

A general discussion took place with the panel and the working group participants following the presentations.

Highlights from the discussion include:

- Working group participants and panelists shared ways to foster cross-sector collaborations, such as through braided funding, incentivizing, and targeting parts of the population.
- Some comments focused on the practical aspects of this work, such as funding: "I'm a realist. We talk about NEA getting additional funding.... I'm just wondering if we should take a really serious look about how much it would cost to do what we need to do"

- The arts generate revenue, help economic growth. This is what these decision-makers care about. We need to be able to demonstrate this. For people who are looking at life and policy through an economic lens, we need to be able to show this evidence.
- It is important to be mindful of the different priorities of both groups and individuals.
- Arts and prisons: Yes, the arts are being used for rehabilitation in prisons, but artists are also working to help shut down prisons. PolicyLink's priority is to abolish prisons, which would be complete prison reform.
- School-based health programs are developing arts interventions to address mental health in young people. Having an intermediary from the hospital system can help support the development of these programs. We should highlight the potential and need for these intermediaries.



The panel discusses the challenges and opportunities of using the arts to address public health issues

Discussion #1: Key Issues

The first discussion, moderated by Anita Chandra, highlighted that policy includes actions, structures, and expectations that help guide change in organizational and/or community practice. It is both big “P” (e.g., governmental actions) and small “p” (e.g., organizational actions). The goals of this discussion were to: 1) identify key public health issues that could be significantly addressed by particular cross-sector collaboration among arts, public health and community development professionals; and 2) specify policy changes or innovations that would foster collaboration to address these issues.

Participants were organized into small groups and asked to discuss priority issues and how they could be addressed. Several different approaches were taken by the groups and diverse priority issues were identified, including:

- **Gun violence:** Arts and culture can play a key role in helping to foster consensus about how this can be addressed. An example of a creative approach is an intervention that showed guns that were used to kill people and discussed the destructive and creative loss potential. It can be powerful to tie the narrative to other stories.

- **Mental health, trauma, and social isolation:** Trauma and isolation impacts people across all populations and all ages. USDA extension services are powerhouses at the national and state level that can provide placemaking programming to ameliorate this issue. The CDC is also doing very important work related to placemaking. In Tennessee, there is a \$.005 tax that goes toward the arts. We need to think of creative ideas about funding. School policies that support interdisciplinary activities should be supported as well.
- **Contributions to arts + public health research:** We need to consider both active and passive art and engagement in private and public settings. Arts in public settings increases social cohesion. A multi-sectoral effort is key. We do not need to standardize, but the work needs to be presented in a way that communicates value.
- **Public health capacity and staffing:** Artists can be effective at creating collaborations within communities. Engaging with the arts can be a form of prevention. Engaging artists as agents of community change (for example, in Smoketown, Louisville, an artist was integral in highlighting predatory advertising). Cultural programming should be Medicaid eligible. More arts work should be presented in medical journals.
- **Socio-emotional health:** The arts, inclusive of empathy, design-thinking, and storytelling can make an impact on factors such as chronic stress, happiness, anxiety, etc. Funders could add questions about socio-emotional health so that grant applicants would be required to reflect upon how they will address socio-emotional health in proposed projects. Funders should be more inclusive and engage communities in accountability and needs assessments.
- **Social isolation, ageism/racism and how many bodies are invisible:** Humanizing older adults and empathy. Titus Kaphar of NXTHVN paired MD and MFA students to address the invisibility of older adults. This could be extended to researchers and medical residents as well to combat “isms” (racism, ageism, ableism, etc.), create connections, and combat invisibility.

The general discussion that followed returned to the importance of addressing wellbeing and systematically including the arts in health work. Notes from the general discussion:

- When we say “health”, people think of healthcare - we need to work toward talking about wellbeing. In academic training, we see multidisciplinary groups of healthcare professionals, but we do not see artists being included in these conversations.
- We also need to improve the accessibility of clinical and arts data so that it is readily available for researchers to analyze and study.
- Caregiver burn out/compassion fatigue (family members, health professionals, etc.) is an important issue to think about. For example, in Orlando they are using theatre and caregiver choirs to work on this.
- There is a strong need to collect evidence! Conduct systematic data collection and synthesis. A lot of what is out there is anecdotal evidence.

- We should also be exploring the use of technology such as telemedicine in order to reach isolated populations in culturally relevant ways.
- Older adults: there is a problem with ageism, paternalistic health care and the general invisibility of older adults. Perhaps we could address this by fostering partnerships between healthcare workers, art students, and older adults.

DAY TWO: Welcome & Overview of the Day

Jill Sonke (University of Florida Center for Arts in Medicine) began the day with a poem by Mary Oliver, who passed away on the previous day. She then provided an overview of the day.

Julia Langley (Arts and Humanities Program, Georgetown University) welcomed working group participants by urging them to consider artists as caregivers of the community. She described the goal of her arts and humanities program to normalize the arts in healthcare and community health, and to create fluidity between healthcare providers and art practitioners. Julia shared some of her work integrating dance and movement for people with Multiple Sclerosis. Her *Movement for MS* class combines music, movement, and dance. She shared a video of the program that highlighted the fun and challenging aspects of the class.

Susan Magsamen (International Arts & Mind Lab, Johns Hopkins University) then delivered an overview of the work that she is leading to “amplify human potential through the arts”. When the Lab was created, Susan and her team scanned the artistic environment and discovered that although there were many arts programs, many of the organizations were not aware of what other programs existed. “The arts are hidden in plain sight” Susan remarked. The International Arts & Mind Lab focuses primarily on three areas: 1) research, 2) community building, 3) outreach/education. Susan detailed some of the translational research being done by the lab.

This second day of the working group was intended to foster discussion and collective critical thought, and to “create some footholds for those who are ready to jump into this work at the intersections of art, public health, and community building/development”.

Open Provocations

The opening session of the morning provided a short time for participants to reflect on the previous day through provocations. The discussion centered strongly on the issue of equity. The question, “*how are we looking at diversity, equity and inclusion in the arts?*” was raised and participants offered their perspectives in response.

- “Racial inequity is closely related to economic inequity. This is manifested in the arts field as much as other fields. When we are looking toward the arts, we need to recognize that these inequities exist here as well.”

- “We need to consider the importance of architecture and design. Looking at the bridge project from Day 1, design was very important there, as was the therapist’s office in *East Los High*. We need to be very aware of the built environment.”
- “How art functions and creates value in society in the US is defined by a white, upper-middle class lens. If we look beyond this lens, we can see that the arts are being used in a variety of ways, including to promote wellness. We need to focus on this.”
- “The arts can be an asset-based way to engage with communities. When people share things that are wrong in their lives, they often also share what is going well. We need to remain cognizant that we are not just bringing the arts to people, but that they are bringing it to us.”
- “Who is not in the room? We must continue to ask this question. Who is not engaged in these programs? What kind of teachers do we have? Do the teachers reflect the community members? Who can afford to get a degree in the arts (which is a risky endeavor)? We need to provide scholarships and invitations to people who may want to join but haven’t been able to.”
- “A lot of funders are also not in the room. A lot of folks out there would be interested in this work. We should go toward private foundations and individuals in the communities, not just the same funders. In our communities, almost everyone has been touched by the arts. There are so many segments where we can find diverse people and funders to engage in the conversation and work.”



Onye Ozuzu (Dean, UF College of the Arts) reflects upon equity in the arts

Presentations: Considering the Evidence-base

This session focused on the evidence that demonstrates how the arts are being used and the related impacts, best practices, and challenges. Three presenters shared different types of investigations and reflected upon the application of their findings in this session: Stacey Springs, Kelley Sams, and Margy Waller.

Stacey Springs (Brown University Center for Evidence Synthesis in Health):

- Stacey encouraged working group participants to think about the difference between evidence-based vs. research-backed. The identification of good evidence to inform practice is still viewed through a certain lens. One randomized control trial is not enough to change practice. It's important for us to synthesize the evidence.
- Academic literature is what gets the credence and drives what gets put into practice. Stacey's job is to synthesize and share evidence. Artists can help with this.
- "If you are not in a systematic review, you do not get into regulatory frameworks." When designing studies, we need to think about this.
- Her team engaged an evidence mapping process in Rhode Island and identified over 6,000 studies in initial searches about the use of the arts in clinical settings. The review included 481 studies.
- Some issues: too many outcomes were being measured in each study. A solution would be to develop core outcome sets that could be used for the populations being studied. There needs to be a domain level approach.



Stacey Springs (Brown University) shares her evidence mapping process

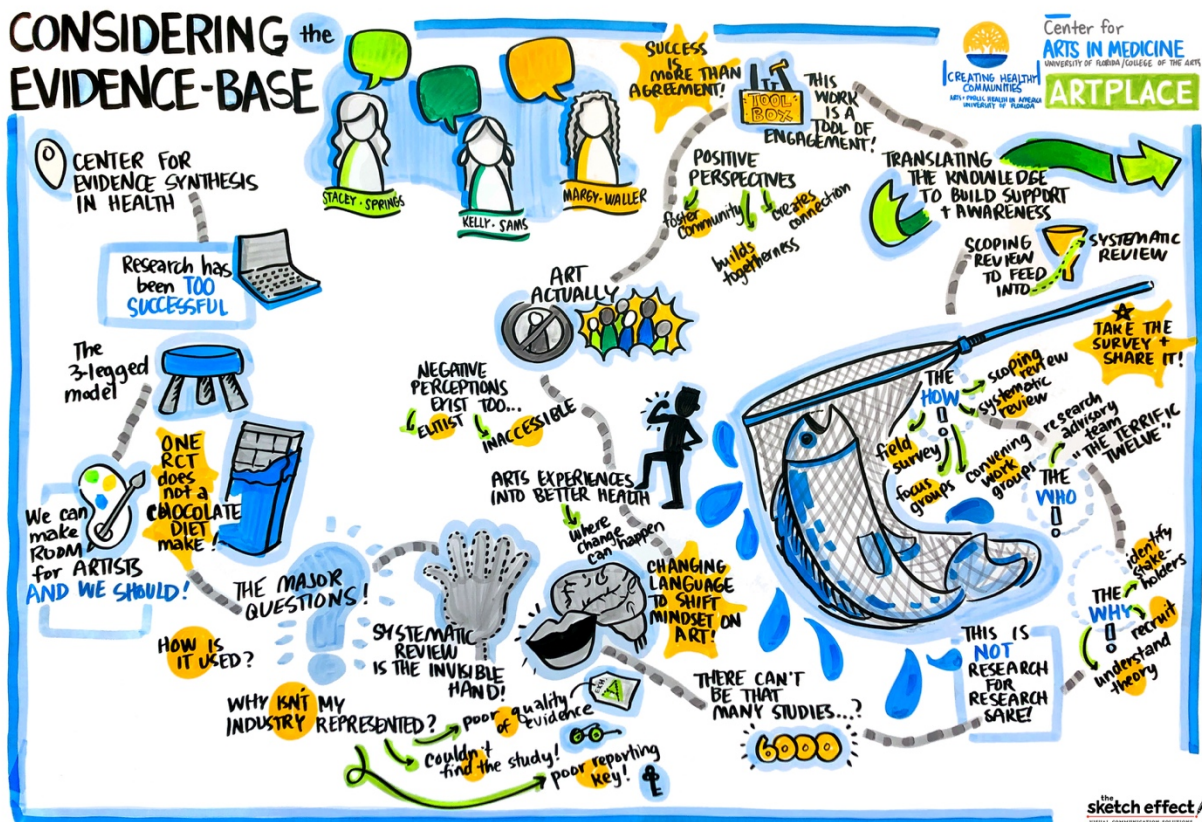
Kelley Sams (University of Florida Center for Arts in Medicine):

- Kelley presented the research that is in progress as part of the *Creating Healthy Communities: Art + Public Health in America* initiative.

- This research is focused on collecting evidence about the use of the arts in community settings (outside of the clinical setting) to shape health behaviors and knowledge.
- The team at the University of Florida is currently undertaking:
 - **A field survey:** this online survey has been sent to individuals working in community building/development, public health, and the arts. The goal is to capture key types of work, collaborations, and challenges.
 - **A scoping review:** the scoping review explores how the arts are being used to address community wellbeing and health communication outside of the clinical setting.
 - **Analysis of working group discussions.**
 - **A systematic review.**
- This evidence will feed into a white paper that will be written by key stakeholders in March 2019 as well as an evidence-based framework to be published in 2020, along with articles in academic journals.

Margy Waller (Topos Partnership):

- Margy shared her work centered on communications research. She described this as “a deep dive into cultural common sense.”
- She presented a pilot study conducted with Americans for the Arts that used a multi-method qualitative approach to examine how to best develop effective communication around arts and health.
- Margy said that she would like the working group to think of this method as a tool that others can use. This approach will help translate research in ways that are relevant for people.
- The findings from her research in the Twin Cities showed that it is almost too easy to talk about the importance of the arts because of the priority placed on the arts in the region. People already knew that the arts promote better mental health. They also brought up new ideas about how the arts could promote open-mindedness. Arts bring people together, and promote problem solving in the community.
 - One individual who was interviewed for this project stated, “my child is totally different from being exposed to an instrument at a young age.”
 - However, the arts were also seen in negative ways, as an individualistic, elitist activity. “I think in Minnesota, sometimes the arts are for the rich” one research participant reflected.
- Recommendations that emerged from this pilot research centered around **the need to position arts experiences as related to better physical and mental health outcomes, and to share how the arts are being prescribed by some health care providers.** This could help extend this from an individual to a community level.



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Discussion #2: Key Influencers

In this second discussion, moderated by Anita Chandra, participants discussed key influencers of public health policy and how they can best be reached. After working to brainstorm ideas in small groups, participants reported back to the larger group and discussed their thoughts. The goal of this session was to determine the key influencers in each of the three sectors and what needs to be done to advance collaboration among the sectors. Each group was provided with specific written guidelines and discussion prompts, as well as a table for reporting discussion results. Assigned groups (arts group, public health group, and community development group) discussed each sector and made the following recommendations:

- **Arts Group**
 - **Actions:** Support provision of arts in health (change public guidelines), peer-to-peer advocacy by funders, change guidelines for accreditation, set standards, award funding, convene stakeholders in the space, matching grants.
 - **Influencers:** artists and cultural producers, local arts service organizations, donors, storytellers, Americans for the Arts, local funders and foundations. State arts agencies and NASA (National Assembly of State Arts Agencies).

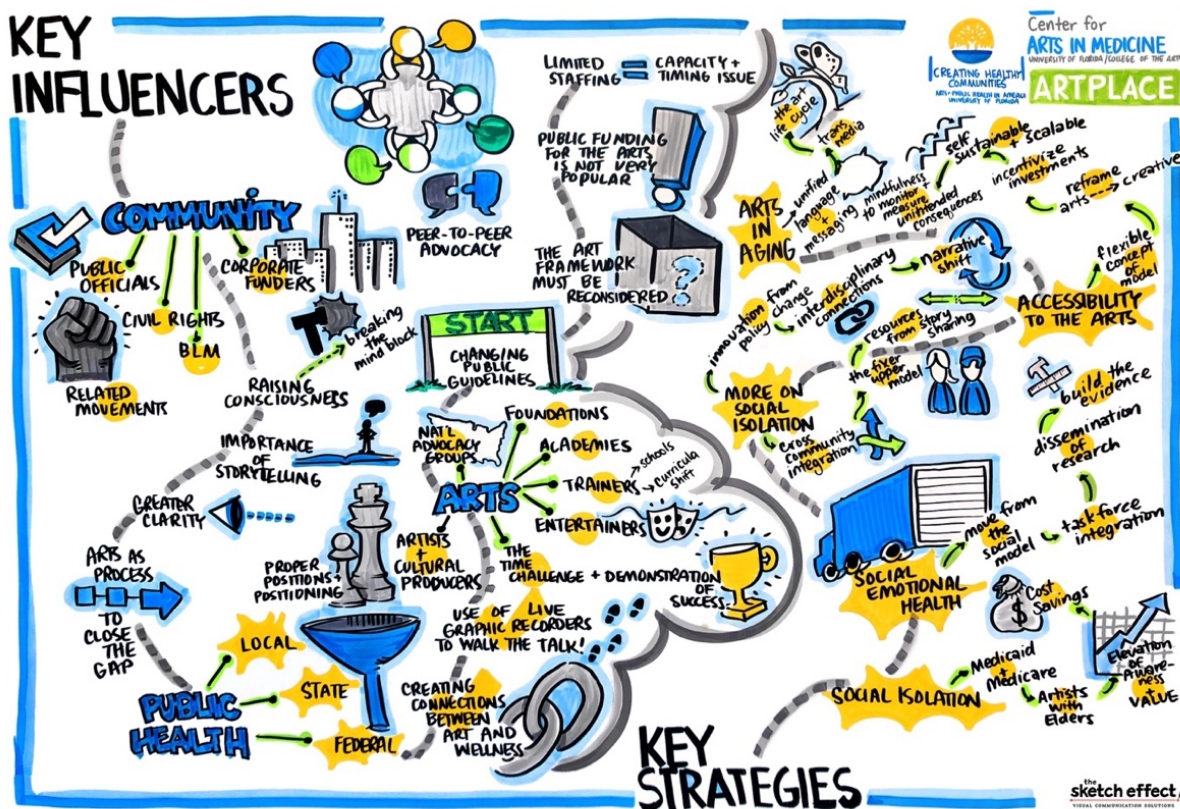
- **Needs:** evidence of benefits, communication tools. Rework narratives about wellbeing.
- **Barriers:** funding guidelines, funding criteria. Effective lobbying and advocacy is expensive: evidence takes time. Demonstrating success: how do you do this? How do you convey research findings into practical ideas? Threat of mission creep (institutions are not comfortable funding work beyond the scope of their mission).



Participants work in small group to discuss how to reach key influencers of public health policy

- **Public Health Group**
 - **Actions:** evidence-based models, public health fellowships, tangible link between public health and arts. Train artists to work with people in trauma informed ways. Rework narratives about wellbeing. Create positions in health departments.
 - **Influencers:** surgeon general, public figures, Kaiser and state health systems, Association of Schools and Programs of Public Health, Bloomberg Philanthropies, Public Health departments and related entities (including Public Health schools), CDC, HHS, National Association for Rural Health, youth. We need to incorporate youth. Look at ways outside of schools: youth groups, clubs, etc.
 - **Needs:** a decisive message. This could be shaped by data like the data shared by Daisy Fancourt yesterday. Perhaps we can form an interagency collaboration between NIH, NEA, and CDC. It needs to be a collective approach. This could provide the clear evidence and package it in a way that can be accessible to the influencers.

- **Barriers:** one of the barriers is that randomized controlled trials are the gold standard, and that some of the findings are not shared in a way that is relevant for communities or key influencers. Artists can help share findings in ways that are interesting, engaging, and relevant. Visual representations of data. Bringing people in from local communities to tell their story.
- **Community Development Group**
 - **Actions:** need to show evidence of the impact and success of arts in community development. RWJF culture of health prize: can we make arts a more prominent piece of this? Highlight the importance of storytelling.
 - **Influencers:** Grass roots movements, philanthropists, major corporate interventions, champions.
 - **Needs:** Need to raise consciousness around all that art and culture can do for a community. Speak the language of those who we are speaking to. If they speak “numbers” then we need to speak “numbers” too.
 - **Barriers:** arts activities are not always seen as necessary or eligible. Seen as “extras” rather than “essentials”.



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Discussion #3: Key Strategies

The third discussion, introduced and moderated by Jill Sonke, focused on identifying specific strategies to engage toward policy change and innovation to enable arts, public health, community development collaboration.

Jill explained that this discussion was intended to really drill down to the priority level related to policy. "We have done so well to think about these issues holistically, and now we are going to dig deep and get specific."

Social isolation:

- **Policy change:**
 - Get Medicaid and Medicare to allow coverage of arts therapies for isolated elders. This would be used as a starting point to bring this issue to private insurers.
 - Ensure that spaces that integrate arts, health and community development are created and sustained in every community.
- **Resources:**
 - pairing artists and elders

- progressive insurance companies
- media reporting: transmedia approach
- write legislation
- WISE entertainment
- funding library of existing examples
- research
- money
- **Evidence:** We need documentation.
- **Strategy:**
 - designing an interdisciplinary meeting like this one that results in grant proposal templates, etc.



Eddie Torres (President and CEO, Grantmakers in the Arts) shares his thoughts on effective collaboration

Socio-emotional health:

- **Policy change:** Social prescribing through insurers as prevention, not through the biomedical system
- **Key strategies:**
 - getting the evidence and creating understanding of it
 - leveraging the key health partners (CDC, NIH, etc.) that can share the data
 - create a core outcome set that is functional-based, not disease-dependent
 - scaled roll-out
 - importance of investigating unintended consequences
- **Influencers:** inter-agency task force

Accessibility to the arts:

- **Policy:** eliminate arts deserts in the U.S.
- **Strategy:**
 - map assets at a national level (non-restrictive, but conceptual)
 - incentivize this through corporate tax credits, private-public partnerships

- develop evidence base, including spatial analysis
- **Resources:**
 - economic modeling of anticipated return on investments
 - business angle for artists themselves



Yessica Corporán (Grantmakers in the Arts) reflects upon accessibility to the arts

Arts and Aging: (which can include isolation and arts as a preventive model)

- **Policy:** increase funding for the arts and aging
- **Strategies:**
 - media campaigns, education, and advocacy
 - communications strategy training so that we speak with a unified message and have language for PR
 - Investing in professional PR to disseminate
 - collecting intergenerational participatory stories
 - educating seniors on the power of their vote
- **Evidence:** narrative of aging would change

Sociometry: Enacting Change

This sociometry exercise invited participants to physically position themselves along the “yes” to “no” continuum in the room in response to two questions and then explain why they chose the position that they did.

Can the arts facilitate behavior change at the collective level? Participants positioned themselves overwhelmingly toward the “yes” end of the spectrum in response to this question.

- “I believe that this is already evident in the way that arts are made themselves.... almost any form of outcome of the arts represents something that is a result of collective action.”
- “Collective behavior is inherent in art-making”
- “Ten years ago, you might say ‘arts and wellness or arts and health’ and they would look at you with a glassy stare. I don’t see that anymore. People are nodding their heads.”
- Example of the play Dear Evan Hansen, which promotes collective change and suicide awareness.
- “In some indigenous cultures there is not even a separate word for the arts...”
- “We need to challenge the arts to reach out to people more.... some artists love their practice because it allows them to stick to themselves. We need to encourage them to reach out.”

Where should we start? At the local level or federal level?

- “I am a believer in connective tissue. That’s why I’m in the middle.”
- “This is already happening at the local level...”
- “I’m at the center because it depends on the issue and the political climate”
- “I’m more at the federal level.... I’d love for someone to pick ‘the wall’ or gun violence or something and demonstrate how the arts can have an impact.”
- “Entities exist that are doing everything that we’ve mentioned in the past two days...But do we really want to trust the government with all of this? Why not give more power to the organizations that are already doing this....”
- “It’s not just federal, but national, which gets money back to the local level.”

Mapping the Key Opportunities & Priorities

Jill Sonke, the moderator of this session, asked participants to distill and examine what aspects of our discussions were the “low hanging fruit”. “Knowing that we cannot do everything, what can we do first?”

The first question she posed to the group was **What rises to the top: What policy changes or innovations would enable collaboration among the arts, public health, and community development sectors?**

- Start to normalize the idea: have doctors recommend arts activities

- Example of a Medicaid waiver that enabled one native American tribal community to reduce insurance premiums for people who engage in arts activities.
- Partnering data collection innovations that encourage people to speak about issues such as gun violence.
- Judges are now starting to hand out sentences that have to do with the courts and artistic partners.
- It's important to get physicians involved, but it's also important to teach the folks who will be the end users to ask for these initiatives. A good collaboration between artists and public health practitioners would be engaging and educating the community.
- "We want consumers to buy into the importance of art."
- Research is a useful endorsement. Research itself is not persuasive unless it corresponds with perceived priorities.
- Be present in conversations surrounding guidelines for Health People 2030 and the like.
- "Convening workshops like the one we are having now are very important. We are helping to empower one another to create change."
- "We should think about a political campaign, create a movement to cross the divides between science and art."
- Example of Lily Yeh who went into a blighted community and used art to engage community members. This resulted in a community that has been brought together and improved through the arts.
- The idea that a lot of this work is place-based is what unifies these three sectors.
- Is there a way to siphon or hack the 20% of our GDP that goes toward healthcare and use this in the arts?
- "In gun violence, the youth were integral in linking their voices to the Black Lives Matter movement. Race is very much on the table right now. There is an important conversation going on. There are ways in which leaders, directors of arts advocacy organizations, etc. and practitioners of religions such as the Yoruba use the arts in their daily practices. Those are not ancient practices. They are going on right now. We need to figure out ways to link up the power in these movements. There are religious leaders right now that are involved in civil rights, etc."

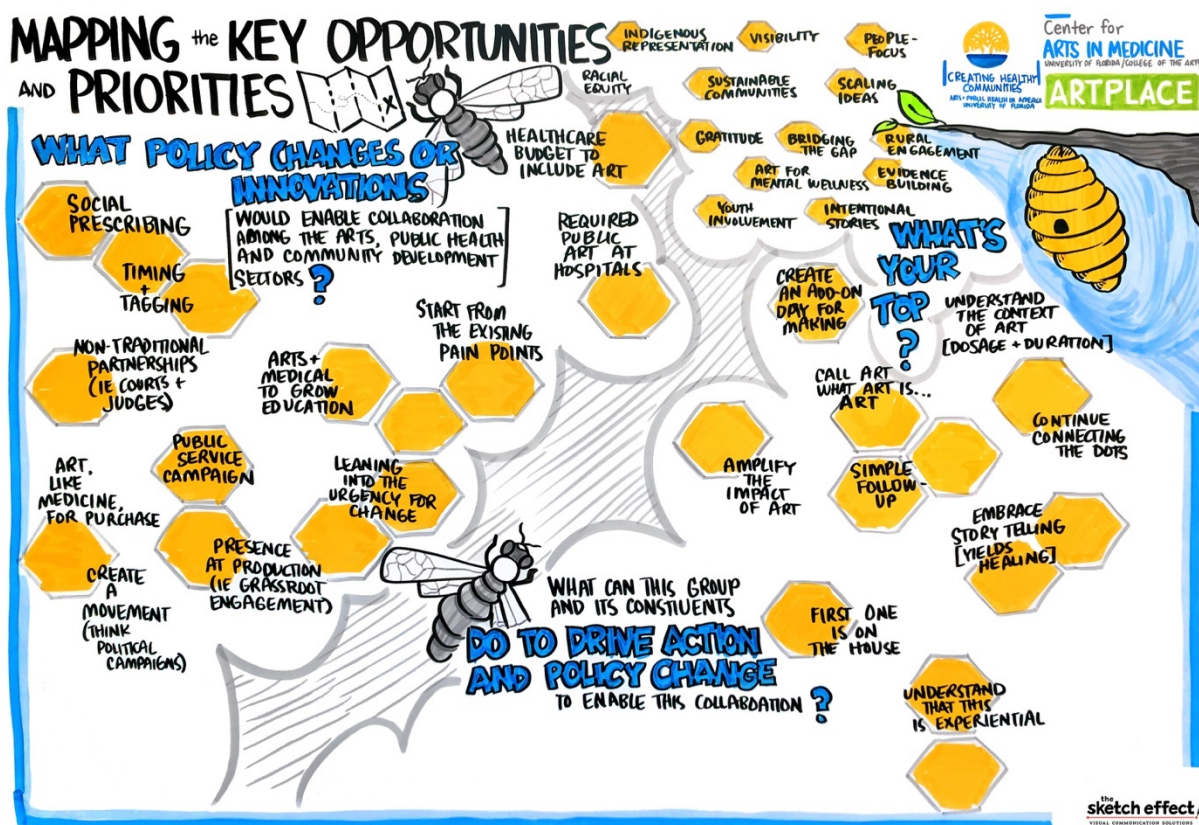


Onye Ozuzu (Dean, University of Florida College of the Arts) discusses the importance of cultural heritage in health

Jill then asked participants a second question: **What can this group and its constituents do to drive action and policy change to enable this collaboration?**

- One participant voiced having a personal connection with the head of an organization of mayors that could potentially be leveraged.
- David Fakunle highlighted the importance of experience. “We need to stop talking and just do it.” Storytelling is one of the most powerful ways to do this. “People need to see it to believe it...once it clicks there is no turning back.”
- We should mobilize our group and follow-up with this network.
- Artists can be great partners for embracing risk, starting activities without knowing. Certain institutions’ leaders were skeptical at first about arts and health, but they are “all in” now.
- Artists are natural researchers. Multiple ways of knowing is really our holy grail in this area.
- Focusing on the opioid epidemic, many professionals seem to be stuck on the treatment side. Vincent Lafronza (NNPHI) says that his organization would love to bring people together, act as a catalyst and a framework.
- “Research doesn’t convince people, it just confirms what they already believe. We need to think about how to bring performance and the creative arts to people so that they can believe even before they know they believe.”
- We need to amplify the impact of the arts space. It’s important to call art “art”. To celebrate the “art-ness” of photovoice or other methods.

- Need to be careful in tossing around the word “art”. Every place, every person, every art, must meet the audience. For every different type of art there is a different type of community. “The wrong artist in the wrong place can be disastrous”
- Perhaps the University of Florida could host a working group to discuss some of the language around art and public health.
- Core outcomes: “we are all excited about these, but we need to keep the nuance and the nature of the work that we are doing.”
- “It would be great if, after these two days, we had a third day that was dedicated to practice and making. A day for all of us to create, maybe with the community.”



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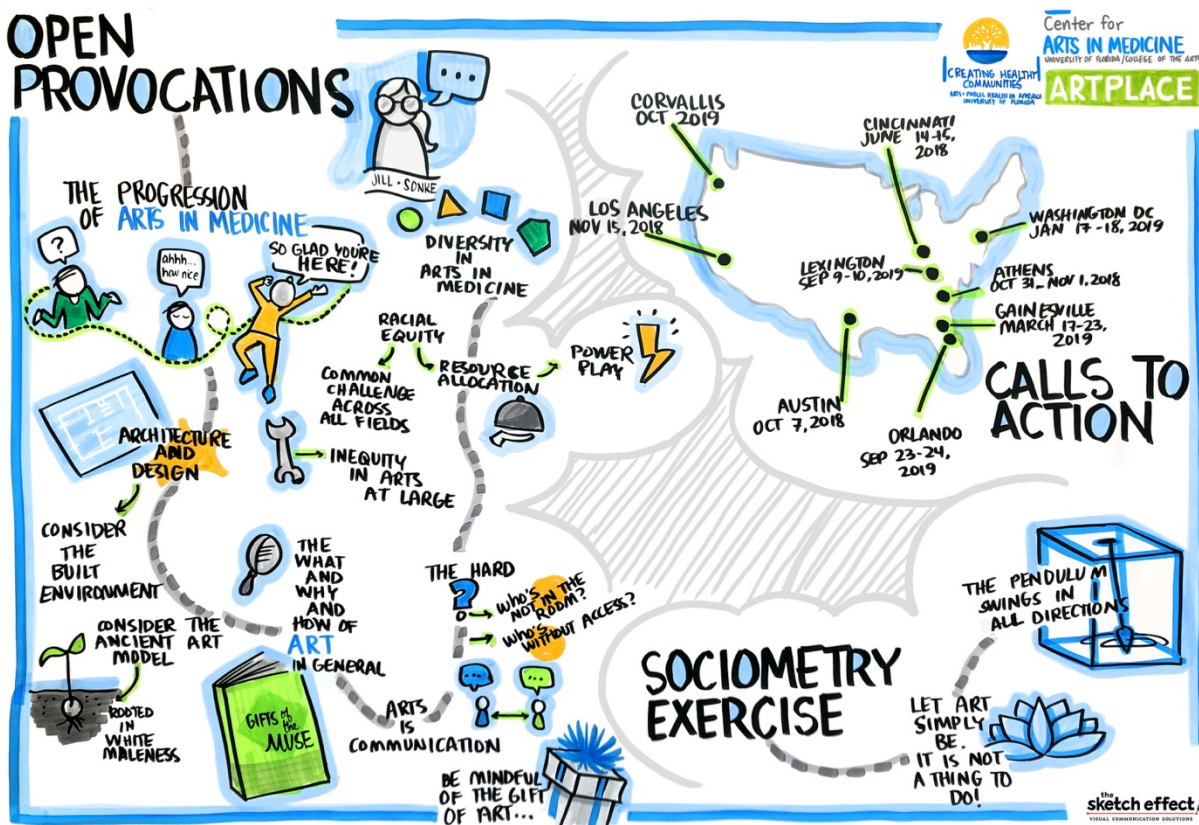


Open Provocations, Calls to Action & Discussion

Participants were again asked to share their thoughts about how to engage the arts in public health policy. **If there was one thing that you were to recommend after today, what would it be?**

- Let's think of who is not in the room? How do we engage youth? They are the best artists. Let's let them lead us.
- Need to focus on evidence. How these ideas can be taken to scale.
- Continue to take risks, be intentional. Lift up the stories of those that need to be told.
- The ripple effect: this can be so big in a community. We need to keep it simple and focus on key models first.
- It's exciting to see the resonance the room.
- The roots of Western art and Western medicine are in the same place.
- Speaking on behalf of those who are already working at these intersections, we need to come together. Increase our visibility to one another and to the funding community.
- Keep pushing whoever we can to keep garnering support for this work.
- We all have a duty to be a communicator and an advocate.
- Translation and interpretation are two important words. Sometimes direct translation is possible, but not always.
- Need to have representation of indigenous healing practices (particularly of black and brown people) in this room that have used art for centuries.
- "In curricular design, we are training artists who are ready to address these issues. We are producing artists that are ready to go beyond the stage and the frame."
- "We should look into good lobbying and strategizing firms, legislation and ways to join this bigger picture conversation."
- Grantmakers in the Arts has a racial equity workshop that is upcoming and has a lot of overlap with some of the issues that have been mentioned today.
- Look for opportunities in research sharing to convince decision makers at APHA and beyond.
- "Several times throughout this workshop I felt like I was going to cry, or I had goosebumps from something that someone said.... the arts are evolutionary and biochemical. Once we understand more about how the arts work, we can scale this and move it forward."
- Inspired by the energy here. We need to keep advancing the evidence base, not only in the general population, but also in specific populations.
- "Faster alone but further together"
- We need to question the difference between health and social justice. Is there a difference? What would it mean to break down these distinctions?
- "Nothing about us without us". It's important to have these conversations with target populations.
- Money! How to bring it in and flow it toward these interventions and communities. There is so much going on around health and community development. Those of us who are involved in these conversations should highlight the importance of arts and culture.

- “If we do not center this work on racial equity and have communities of color leading this work, then it will all be for naught.”
- One participant described how ArtPlace came along to his organization and asked the question: “can art make your co-work better?” After four years of creating the three-legged stool, we may have become confused about interconnection and intersection. We need to highlight synergy. “1+1+1 should equal 4”
- There is still a lot of disconnect that we need to address. “Find your community development organizations when you go home because they are your allies!”



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Closing

Jill Sonke and Jamie Hand closed the working group by reflecting briefly on the discussions that had occurred over the past two days and encouraging participants to stay engaged. Both Jamie and Jill expressed gratitude to working group participants and for one another.

Upcoming Creating Healthy Communities: Art + Public Health initiative working group convenings:

- **September 9-10, 2019:** A Focus on Health Equity. Louisville, KY
- **October 23-24, 2019:** Art + Public Health Conference with an open call for presentations. Orlando, FL
- **Oregon:** TBD

February 2019:

- Creating Healthy Communities: Art + Public Health initiative blog launch

November 2019

- Beginning of the Creating Healthy Communities: Art + Public Health in America webinar series

August 2019

- Re-launch of the 10-month Arts + Public Health graduate certificate at the University of Florida Center for Arts in Medicine

Workshop Participants

Participant Biographies

Elaine Auld

Chief Executive Officer
Society for Public Health
Education - SOPHE

As SOPHE's CEO, Elaine Auld, MPH, MCHES, oversees SOPHE's portfolio of professional publications, meetings, cooperative agreements, and advocacy. She has spent more than 35 years in health education, with publications in credentialing, workforce development, public policy, school health, and health equity. She has played a role in developing the first graduate standards for health educators, three studies of health education competencies, and two crosswalks of the competencies in health education with public health and with diabetes education. In 2012, she helped to plan and convene SOPHE's Youth Health Disparities Invitational Meeting and co-authored the recommendations. She is a member of the steering committee of the Student Health Advocacy Coalition and the National Coordinating Committee on School Health and Safety and chairs APHA PHEHP's Advocacy Committee. Elaine has received many honorifics including SOPHE Distinguished Fellow, University of Michigan School of Public Health Alumna of the Year, and APHA PHEHP's Distinguished Career Award.

Jamie Bennett

Executive Director,
ArtPlace America

Jamie Bennett is the executive director of ArtPlace America, a partnership among private foundations, federal agencies, and financial institutions working to position arts and culture as a core sector of community planning and development, so that artists and arts organizations are regular collaborators in helping to build equitable, healthy, and sustainable futures. To date, ArtPlace has invested over \$100 million in local projects, national research, and field building. Previously, Jamie worked at the National Endowment for the Arts, the NYC Department of Cultural Affairs, Columbia University, the Agnes Gund Foundation, The Museum of Modern Art, and the New York Philharmonic.

Steven Boudreau

Chief Administrative
Officer, Rhode Island
Department of Health

Steven serves as the Rhode Island Department of Health Chief Administrative Officer, assisting six divisions and a staff of 500 in meeting the objectives and priorities of the Department. He is also the Department lead for the RIDOH Workforce and Career Development Network which is housed in the RIDOH Academic Center and serves as RIDOH Diversity Liaison and Strengths Coach, and CO-Chair of the RI State Arts and Health Advisory Group.

Kimberlee Campbell-Smith

Kimberlee is a decorated U.S. Army war veteran with over 15 years of professional service in health promotion programming, focused in

Operations Manager, UF
Center for Arts in
Medicine

chronic disease management and social and emotional health conditions. She has accomplished her work through developing program design, marketing and sales strategies, operations management and evaluation of effective service delivery. Kimberlee's ability to develop and facilitate training and development opportunities, coach and consult executives, staff, community leaders and volunteers has supported her ability to further business goals. Her professional experience has taken her to various settings including managed care, clinical, government, non-profit, and education. Linking experience with the performing arts and with her work duties has allowed her to excel in public speaking, teaching, coaching and sharpening her entrepreneurial mindset. Kimberlee holds a Bachelors of Science in Kinesiology from Temple University, and served in the U.S. Army as a Mental Health Specialist supporting Operation Enduring Freedom and Operation Iraqi Freedom (2001-2005). She has a Masters in Public Health from Florida International University and her professional coach credentialing is from the International Coach Federation at Duquesne University in Pittsburgh, PA. Kimberlee recently completed the Masters of Science in Entrepreneurship program at Warrington College of Business, class of 2017.

Anita Chandra
Vice President and
Director,
RAND Social and Economic
Wellbeing

Anita Chandra is VP of RAND Social and Economic Well-Being and senior policy researcher. She leads studies on civic well-being and urban planning; community resilience; effects of military deployment; health and advancing a culture of health; and child health and development. Chandra has engaged government and nongovernmental partners for cross-sector solutions to improve community well-being and to build more robust systems. Her work includes engaging government agencies for emergency preparedness and resilience both in the US and globally; and partnering with private sector organizations to develop child systems. Chandra has also partnered with community organizations to conduct health and environmental needs assessments, for the integration of health and human service systems, and to determine how to address the needs of historically marginalized populations. Chandra earned a Dr.P.H. in population and family health sciences from the Johns Hopkins Bloomberg School of Public Health.

Randy Cohen
Vice President of Research
& Policy, Americans for the
Arts

Randy has been a member of the Americans for the Arts staff since 1991. He recently published "Americans Speak Out About the Arts," one of the largest public opinion studies about the arts ever conducted. He has conducted several arts and healthcare surveys with the Joint Commission as well as co-authored reports such as the "Arts & Healthcare State of the Field Report." Randy developed the National Arts Policy Roundtable, an annual convening of leaders who focus on the advancement of American culture, in partnership with Robert Redford and the Sundance Institute. His "10 Reasons to Support the Arts" blog recently received the Gold Award from the Association of Media & Publishing, their top honor for

best blog post of the year. Randy worked in medical research for Stanford University and Scripps Clinic & Research Foundation. He has given speeches in all 50 states and regularly appears in the news media, including the Wall Street Journal, The New York Times, and on C-SPAN, CNN and NPR.

Yessica Corporán
Membership Manager,
Grantmakers in the Arts

Yessica Corporán, Membership Manager at Grantmakers in the Arts (GIA), previously held positions in the public healthcare sector. Prior to her work with GIA, Yessica was employed at Morris Heights Health Center (MHHC) — a federally qualified health center (FQHC), and an affordable and accessible healthcare service provider for the local community, the Bronx and beyond — where she worked in development, marketing, and planning for six years under the chief planning and development officer. She has extensive experience in event planning and fundraising and was responsible for producing the MHHC Foundation’s annual gala. Prior to her work at MHHC, she held positions at the City Parks Foundation and Ballet Hispánico’s School of Dance. A Bronx native, her desire to help her community led her to the nonprofit sector. Yessica hopes to someday start her own arts and wellness center in the Bronx.

Nick Dawson
Program Chair, Stanford
School of Medicine

Nick is the Executive Director of Innovation at Kaiser Permanente, the largest non-profit healthcare provider in the United States. He is also the Program Chair for Stanford’s Medicine X program. Nick is a designer and has been at the forefront of bringing human-centered design to healthcare as a way to solve our most intractable, wicked problems. Previously, Nick led the Innovation Hub at Johns Hopkins Medicine - one of the first design-based innovation studios in a community hospital setting. He also worked with President Obama’s White House to bring patient co-design to the forefront of health policy and national innovation efforts including the 2015 ebola response, President Obama’s precision medicine initiative, and the response to our opioid crisis. He skis in the winter, runs most days and is forever restoring his antique Land Rover.

Emmeline Edwards, Ph.D.
Director, Division of
Extramural Research,
National Center for
Complementary and
Integrative Health (NCCIH),
NIH

Dr. Emmeline Edwards is director of the Division of Extramural Research of the National Center for Complementary and Integrative Health (NCCIH). In that capacity, she is responsible for development of scientific programs or areas of science that fulfill NCCIH's mission as well as planning, implementation and policy. NCCIH is one of 27 components of the National Institutes of Health (NIH), with a mission to define, through rigorous scientific investigation, the usefulness and safety of complementary and alternative medicine interventions and their roles in improving health and health care.

Currently, Dr. Edwards is Co-Chair of the trans NIH Music and Health working group and member of the Interagency Task Force on the Arts and Human Development. Dr. Edwards is also Chair of Women World in

Neuroscience (WWN), an independent mentoring and networking organization for women neuroscientists across the globe.

David O. Fakunle, Ph.D.
Co-Founder & CEO,
DiscoverME/RecoverME:
Enrichment Through the
African Oral Tradition

David Olawuyi Fakunle, Ph.D. is a self-described “mercenary for change”, willing to employ any talent and occupy any space in the effort to elevate people of African descent and anyone who feels divested from their truest self. David earned a Ph.D. from the Johns Hopkins Bloomberg School of Public Health, and prior to doctoral study earned a B.A. in Psychology and Criminology & Criminal Justice from the University of Maryland, College Park. David’ research interests include sociodemographic relationships with stressors within the built environment such as tobacco outlet density and e-cigarette availability, the manifestations of institutional racism in society, and the utilization of arts and culture to promote equity and ultimately, liberation. David is Co-Founder and CEO of DiscoverME/RecoverME, an organization that utilizes the African oral tradition to encourages the claiming of one’s narrative for personal and organizational growth.

Daisy Fancourt, Ph.D
Senior Research Fellow,
University College London

Dr. Daisy Fancourt is a Senior Research Fellow / Wellcome Research Fellow in Psychoneuroimmunology and Epidemiology at UCL (University College London). She studied at Oxford, King's College London and UCL as well as undertaking a postdoctoral fellowship at Imperial College London. Her research explores the effects arts participation on neuroendocrine and immune response, the benefits of targeted arts programmes for specific clinical populations, and the health and social impact of cultural engagement at a population level. Daisy’s research has won over £3.5 million in funding and been recognised with national and international awards from the Wellcome Trust, Leverhulme Trust, Arts and Humanities Research Council, British Science Association, British Academy, British Federation of Women Graduates, American Psychosomatic Society, Royal Society for Public Health and NHS England. Daisy has also been named a World Economic Forum Global Shaper and a BBC New Generation Thinker.

Janet Fulton, Ph.D
Chief, Physical Activity and
Health Branch, Centers for
Disease Control &
Prevention

Dr. Janet E. Fulton is Chief of the Physical Activity and Health Branch in the Division of Nutrition, Physical Activity, and Obesity at the CDC in Atlanta. Janet has a doctoral degree in Epidemiology from the University of Texas, School of Public Health. She has been at CDC for many years studying patterns of physical activity in the US population and working to make opportunities for physical activity a national priority, most recently by advancing a new national initiative , Active People, Healthy Nation. When she is not hitting fuzzy yellow balls or taking spin classes, she works to encourage people and communities to provide easy and safe options for physical activity. She is particularly interested in emerging evidence

at the intersection between the arts, physical activity, and public health communities.

Tasha Golden
Doctoral Researcher,
University of Louisville

Tasha Golden is a public health researcher whose work is informed by her career in the arts. As frontwoman & songwriter for the critically-acclaimed band Ellery, Golden's songs have been in feature films and TV dramas, and her debut book of poems, *Once You Had Hands* was a finalist for the 2016 Ohioana Book Award. Now a PhD candidate in Public Health, Golden develops interdisciplinary, creative partnerships and practices that address stigma, mental health, policy advocacy, futures literacy, and critically reflective research & education processes. She also consults for organizations and awareness campaigns to develop creative, research-based strategies that further their goals. Golden trains in Youth Mental Health First Aid and is the founder of Project Uncaged—which conducts trauma-informed writing workshops for incarcerated teen women in Ohio and Kentucky. www.tashagolden.com

Kristina Gray-Akpa
Program Director,
Grantmakers in Health

Kristina Gray-Akpa is a Program Director at Grantmakers In Health (GIH), responsible for health equity programming on disparities and the social determinants of health. Prior to joining GIH, she was a program analyst with the National Association of County and City Health Officials, where she helped build a national network of public health officials taking collective action against health inequity. She also served as a consultant to the CDC Addressing Gender Inequities in Health and Safety project. Previously, she developed media advocacy strategies focused on health, financial security, and aging at AARP. Earlier in her work, she led youth advocacy, leadership development, and youth organizing efforts in Washington, DC schools. She holds a bachelor's degree in communications from Goucher College and a Master of social work degree from the University of Maryland.

Maggie Grieve
VP, Success Measures,
NeighborWorks America

Maggie Grieve directs Success Measures at NeighborWorks America, providing evaluation consulting, technology and measurement tools to community development and health organizations, intermediaries and foundations. Grieve advised the NW Arts initiative, which developed NeighborWorks' enhanced agenda for the arts and is resulting in expansion of Success Measures' 350 measurement tools to include arts and creative placemaking. Previously, Grieve directed development of the Success Measures evaluation approach and the Success Measures Data System, a technology to support evaluation efforts. Grieve has served as program designer and manager for municipal community development and engagement programs, and as a consultant to help design and implement innovative participatory planning, evaluation, community revitalization, and action research initiatives. An urban

planner, she did graduate work at University of Pennsylvania and has a B.A. in American Studies from the University of Minnesota.

Jamie Hand
Director of Research
Strategies, ArtPlace
America

Jamie Hand brings a background in landscape architecture, project management, and grantmaking to her role as Director of Research Strategies at ArtPlace America, a national consortium of foundations, federal agencies and financial institutions established to support arts-driven community planning and development across the U.S. Prior to ArtPlace, Jamie worked at the National Endowment for the Arts, where she managed the Our Town grant program, the Mayors' Institute on City Design, and the Citizens' Institute on Rural Design. She also advised the Hurricane Sandy Rebuilding Task Force on the development of Rebuild by Design, after leading several large-scale design competitions as Program Director at the Van Alen Institute in New York City. Jamie co-edited Gateway: Visions for an Urban National Park and began her career in the Bay Area as project manager for public artist Topher Delaney. Jamie is on the board of ioby ("in our back yards") and holds degrees from Princeton University's School of Architecture and the Harvard Graduate School of Design.

Gay Hanna
President,
Hanna Merrill, Inc.

Gay Powell Hanna, PhD, MFA, is a scholar and an artist, who works at the intersection of the arts, health and community. Dr. Hanna serves as President of Hanna Merrill Inc. a research and development corporation dedicated to supporting arts in health services - clients include among others Grantmakers in the Arts, MedStar Health Philanthropy and the National Organization for Arts in Health. She is the lead author of two White Papers for the National Endowment for the Arts, The Arts and Human Development , Framing A National Research Agenda for the Arts, Lifelong Learning, And Individual Well-Being (2011) and The Summit on Creativity and Aging in America Report (2016) as well as recently published Literature Review on Arts in Medicine (2017) commissioned by Grantmakers in the Arts; and, Addressing the Future of Arts in Health in America (2018) commissioned by the National Organization for Arts in Health. Dr, Hanna is adjunct faculty at George Mason University Arts Management Program

Max Helgemo
Artist in Residence, UF
Center for Arts in
Medicine

Max Helgemo is a research coordinator with the Center for Arts in Medicine at the University of Florida. He graduated with his BS in exercise physiology from UF in 2016. He has coordinated studies that revolve around arts in health topics. His most recent publication, "Arts in health mapping project: Florida," explores a systematic way of characterizing arts in health programs by use of a 25 question survey. Max also contributed to the three-phase "Arts & Wellbeing Indicators" project, which aimed to develop a statistical model that evaluated self-reported arts participation and health measures. Max also works as a musician in

residence for the Shands Arts in Medicine program, performing acoustic music for patients at the bedside.

Yumiko L. Ikuta

Director of Rehabilitation,
NYC Dept. of Health &
Mental Hygiene

Yumiko Ikuta is a person who lives with a mental illness and is the Director of the Office of Rehabilitation in the Bureau of Mental Health at the NYC Dept. of Health & Mental Hygiene. In addition to the Mural Arts advocacy program, her Office oversees over 90 contracted non-clinical treatment, rehabilitation programs including supported employment, clubhouses, crisis respite and peer support among others. Her experience in mental health peer support and education is extensive and is a strong advocate in the community for people with serious mental illness. Yumiko also worked for over 15 years in the corporate sector and for the US Agency for International Development at the Dept. of State as an economic development officer in several developing countries. Yumiko holds a BA in Economics and East Asian Studies and an MBA in Marketing and International Business both from Columbia University.

Sunil Iyengar

Director of Research &
Analysis, National
Endowment for the Arts

Sunil Iyengar directs the Office of Research & Analysis at the National Endowment for the Arts. Under his leadership, the office has produced dozens of research reports (e.g., "Staying Engaged: Health Patterns of Older Americans"), hosted periodic research events and webinars, led strategic plan development for the agency, and established research and data partnerships throughout government. Working with his team, Iyengar has created and pursued a long-term research agenda, founded a national data repository for the arts, and launched two awards programs for arts researchers. He chairs a federal Interagency Task Force on the Arts and Human Development. He contributes a monthly research post ("Taking Note") to the NEA's official blog. Iyengar and his team have partnered with organizations such as Brookings Institution, the National Academy of Sciences, and the National Institutes to Health. Iyengar previously worked for a host of news publications covering pharmaceuticals and biotech.

Irfana Jetha Noorani

Deputy Director, 11st
Street Bridge Park

Irfana Jetha Noorani is the Deputy Director of the 11th Street Bridge Park, a public/private partnership between the District of Columbia and the local nonprofit Building Bridges Across the River to build a civic space that spans the Anacostia River and connects the communities of Capitol Hill/Navy Yard and Anacostia/Fairlawn. Along with fundraising, Irfana works closely with local stakeholders to plan community-driven programs like the Anacostia River Festival and other placekeeping initiatives in the adjoining neighborhoods. She promotes the project's equity-first model by providing planning and implementation support on the Bridge Park's Equitable Development Plan—a \$56MM+ initiative to ensure that investments in nearby neighborhoods benefit current residents. Irfana recently completed a planning process with local artists and residents to develop cultural strategies to add to the Plan.

Sara Kass, Ph.D.
Military and Medical
Advisor, Creative
Forces/National
Endowment for the Arts

Dr. Kass retired from the Navy in March of 2015. Prior to retirement she served as Deputy Commander, National Intrepid Center of Excellence (NICoE), Walter Reed National Military Medical Center. Dr. Kass earned a BS in Biology from Pacific Lutheran University in 1987. She attended Medical School at George Washington University and earned her Doctor of Medicine degree in 1992. Following medical school, she received her training in Family Medicine at the Puget Sound Family Medicine Residency. While serving as the Officer in Charge of the NICoE, Dr. Kass witnessed the healing power of the arts. Driven to increase access to these powerful services for military members and Veterans as well as enhance research to understand their impact, Dr. Kass partnered with the NEA to develop and implement Creative Forces. Today she remains a strong advocate and leader for the initiative by serving as the Senior Military and Medical Advisor.

Bridget Kerner
Senior Program Analyst,
National Association of
County and City Health
Officials

Bridget Kerner, MS is a Senior Program Analyst on NACCHO's Environmental Health team. Ms. Kerner's responsibilities include supporting local health department to implement Health in All Policies (HiAP) initiatives. Ms. Kerner also works on collaborative environmental health projects focused on the land use planning, creative placemaking, and active transportation. Before joining NACCHO, Ms. Kerner was a Research Assistant supporting a National Science Foundation EPSCoR grant titled "Adapting Socio-Ecological Systems to Climate Variability" at Oklahoma State University. Specifically, she worked with the 39 federally recognized Tribes across Oklahoma to document the impacts of climate change on tribal communities and develop adaptation strategies. Ms. Kerner has a BA in Environmental Studies, an MS in Sociology, and is currently a doctoral student in the Urban and Regional Planning and Design program at the University of Maryland.

Tracey Knuckles
Arts team member,
Bloomberg Philanthropies

With deep experience in public policy, non-profit governance and grant-making, Tracey is a thought leader and key strategist for Bloomberg's Arts Team and its consulting arm, Bloomberg Associates. Her work is focused on helping cities support and grow the cultural sector with particular emphasis on creation and retention of creative work space, strategies for enhancing arts leadership, and improving organizational management. Prior to Bloomberg, she was Deputy Commissioner & General Counsel for the NYC Department of Cultural Affairs (DCA), the nation's largest municipal funder of the arts. At DCA, she managed core operations, guided the agency through strategic reforms, stewarded a host of major projects, and represented the City on the boards of several major cultural institutions. Before DCA, Tracey was an Assistant U.S. Attorney in the Eastern District of New York and served as Deputy Chief of the Asset Forfeiture Unit. Prior to that, she was an attorney in private practice.

Morgan Kulesza
Program Coordinator,
Georgetown Lombardi
Arts and Humanities
Program

Morgan Kulesza is the program coordinator for The Georgetown Lombardi Arts and Humanities Program, a therapeutic arts program that provides various art modalities to patients, caregivers, and staff members throughout MedStar Georgetown University Hospital. She is an M.A. candidate for the Georgetown University's Masters of Arts in Liberal Studies Program, an interdisciplinary program where she is focusing on arts in health. Additionally, Morgan works as a contractor for the National Gallery of Art to lead tours for their "Picture This" program; these tours are designed for people with visual impairments and blindness. In 2016, she earned a dual degree from Rhodes College in Memphis TN in visual arts and anthropology. While in Memphis, she worked with St. Jude's Children Research Hospital to provide art programs for children in the long-term patient housing. Morgan is passionate about infusing arts into healthcare and making art accessible to all people.

April Kyle
Vice President of
Behavioral Services
Division, Southcentral
Foundation

April Kyle, of Athabascan descent and a Cook Inlet Region, Inc. shareholder, joined Southcentral Foundation (SCF) in 2003 as the Human Resources Manager of Employment and Recruitment. Kyle was recently promoted to Vice President of Behavioral Services. A Montana State University at Bozeman graduate with a bachelor's degree in sociology, Kyle rose through the years to become the human resources director. She has a certification in the Alaska Native Executive Leadership Program from the Alaska Pacific University.

Vincent Lafronza
President and Chief
Executive Officer, National
Network of Public Health
Institutes

Vincent Lafronza, EdD, and Chief Executive Officer of the National Network of Public Health Institutes (NNPHI), provides leadership and direction on all NNPHI initiatives, and develops collaborative efforts with NNPHI's numerous public health institutes and partners throughout the nation. Dedicated to the vision of improving the public's health through innovation, NNPHI is the national membership network committed to helping public health institutes promote and sustain improved health and wellness for all. Beginning his career in health and human services in 1985, Dr. Lafronza has held health policy and programming positions in government, nonprofit, and university sectors to advance population health at multiple levels of intervention, including community, state, federal, national, and tribal spheres of influence.

Julia Langley
Faculty Director,
Georgetown Lombardi
Arts and Humanities
Program

Julia Langley, Faculty Director, Georgetown Lombardi Arts and Humanities Program, leads a program promoting a holistic approach to healthcare for patients, caregivers, medical staff and visitors through the use of music, expressive writing, dance and visual arts. She manages fifteen professional artists-in-residence and two Georgetown University undergraduate student groups who work throughout MedStar

Georgetown University Hospital to promote healing, resilience and wellness.

Kathy Le Backes

Vice President, Research & Development, Wise Entertainment

Kathy is the Vice President of Research & Development at Wise Entertainment. She oversees integration of social issues into Wise's creative IPs, manages relationships with non-profit organizations that serve on the company's advisory committees. Kathy is also a producer whose credits include the six-time Emmy nominated Hulu original drama, East Los High as well as various transmedia and social media campaigns. Prior to joining Wise, Kathy served as the Digital Campaign Manager for the Entertainment Industry Foundation's Stand Up To Cancer program. In that role, she produced multi-platform digital and social media campaigns to help raise awareness for cancer research. Before her role at the EIF, Kathy served as Program Manager at The Norman Lear Center's Hollywood, Health & Society program, where she worked closely with writers and producers from hit TV shows to facilitate storylines that educate viewers on social issues. Kathy holds an MPH from USC and a BS from UC Davis.

Jeremy Liu

Senior Fellow for Arts, Culture, and Equitable Development, PolicyLink

Jeremy Liu is Senior Fellow for Arts, Culture, and Equitable Development at PolicyLink. He has a background in equitable community development, affordable housing and real estate development, social innovation, and is an award-winning artist whose work has shown up in neighborhoods, museums, and art centers around the U.S. As a Senior Fellow, he is shaping and guiding the integrating of arts and culture into equitable development and he co-authored Creative Change: Arts, Culture, and Equitable Development, a Policy and Practice Primer. From 2009 to 2012, he led the strategic repositioning of a nationally-recognized community development corporation to focus on the social determinants of health. He co-founded Creative Ecology Partners, an art and design studio incubating economic and community development innovation, which developed the Creative Determinants of Health framework and created the National Bitter Melon Council, winner of the 2005 Artadia Award, to address social bitterness.

Jennifer Lo

Medical Director, Boston Public Health Commission

Dr. Jennifer Lo is the Medical Director at the Boston Public Health Commission, where she works to advance the mission to protect, preserve, and promote the health and well-being of all Boston residents, particularly the most vulnerable. She previously served as Medical Director at the Greater Roslindale Medical and Dental Center, where she implemented programs such as behavioral health integration and complex care management in order to position the health center as an NCQA-certified Patient-Centered Medical Home. He also helped to expand services such as family planning, community health worker outreach, and residency training clinics. Prior to that role, she served as

Family Team Medical Director at Boston Health Care for the Homeless Program, where she led a multidisciplinary team to increase access to health care for homeless families and children in Boston. Dr. Lo is also a faculty member in the Department of Family Medicine at Boston University School of Medicine.

Bridget Madden
Events & Communications
Coordinator, UF Center for
Arts in Medicine

Bridget Madden is the Events and Communications Coordinator with the University of Florida, Center for Arts in Medicine. She is a fully qualified Irish Dancer Teacher (TCRG) and is the Co-Director of a dual-national Irish Dance school *Scoil Rince an Chroí* based in Gainesville, FL and Belfast, Ireland. As a professional dancer, she performed in various dance shows in over 20 countries worldwide, including the Kremlin, Red Square (Moscow), Royal Concert Hall (Tokyo), Citifield stadium (New York), Inside/Out stage (Massachusetts) and Queen Elizabeth Theatre (Vancouver). She has hosted masterclasses in Irish Dance and Dance and movement in the USA, Czech Republic, Estonia, Holland, Finland, Poland and Russia. As a Choreographer, she created work for stage, Opera, open air arena, Healthcare settings and Film: winning the Reel Islington short film Award (London, UK) and 3rd place for the Grolsch International film festival for 'Belfast Dance', alongside NI Screen. Along with dance, Bridget also raises funds for various charities including running the Disneyland Half marathon in Los Angeles, for the Arts Care Charity (Belfast, Northern Ireland) and she also visited, rebuilt 4 homes alongside a team of other Volunteers in Malawi in South Africa, with Habitat for Humanity.

Susan Magsamen
Executive Director
International Arts + Mind
Lab, Johns Hopkins
University School of
Medicine Brain Science
Institute

Susan H. Magsamen is a leader in behavioral translational health and learning through the arts with more than 35 years of experience bringing academic research to practice to maximize learning, health and wellness through scalable initiatives. She has created social impact programs and products for the private and public sectors from early childhood to aging adults. Susan is an active member of the brain sciences research, arts, education and social impact communities. In addition to her role at the IAM Lab, Susan is a senior advisor to the Science of Learning Institute at Johns Hopkins University. In her role as executive director at the International Arts + Minds Lab, Susan combines interdisciplinary, evidence-based research with practical, applicable ideas and programs. Susan is pioneering Impact Thinking, a research approach to enhance human potential in health, wellbeing and learning through the arts.

Alyson Maier
Program Associate, UF
Center for Arts in
Medicine

Aly is the Program and Research Associate for Creating Healthy Communities, Arts + Public Health in America at the University of Florida Center for Arts in Medicine, and the Special Project Coordinator for the National Organization for Arts in Health (NOAH). She holds a BFA in Creative Photography and a MA in Arts in Medicine from the University of Florida. Aly is a visual artist whose arts in healthcare practice and

research focuses on relieving caregiver burnout, stress, and turnover through creative practice. She recently traveled to Rwanda with the UF Center for Arts in Medicine and Gibney Dance team on an arts in health outreach trip, facilitating community-driven murals. In her personal practice, Aly frequently explores a variety of mediums including photography, illustration, painting, ceramics, and fiber art. She looks forward to contributing to the field of arts in health via practice, research, and professionalization.

Carmen Martin
Senior Community Health
Specialist, Kaiser
Permanente Colorado

Carmen Martin received her Bachelor of Science degree in psychology from Colorado State University. She graduated Phi Beta Kappa, cum laude in 1995. In 2000, she completed her master's degree in public health with an emphasis in public policy and health care law from the University of Denver. Carmen worked in a variety of public health settings, including the Tri-County Health Department before Kaiser Permanente.

Carmen recently transitioned from Arts Integrated Resources to Community Benefit and Relations (CB&R) as a Senior Community Health Specialist. Her hope is to establish a foundation in integrating the arts with public health and generate further interest in exploring the potential of that intersection.

Kathryn Matthew
Director,
Institute of Museum and
Library Services

Dr. Kathryn K. Matthew's career spans nonprofit, government, and corporate sectors, ranging from a museum directorship, several product manager roles, and leading a national funder. She believes that community-centric organizations need to create networks of learning experiences with their partners and supporters in order to thrive. They are essential contributors to community wellbeing in all its aspects, including social, cultural, civic, health and economic. Her insights into the vital roles of museums, libraries and related organizations in anchoring and catalyzing vibrant and resilient communities have driven her to apply community-centric approaches such as collective impact, user-centered design, and asset-based community development across industries. During her IMLS tenure, this community-centric approach has been expressed through the Community Catalyst initiative, that includes Community Salute and STEMex, among other grant-making programs.

Leslie Meehan
Director, Office of Primary
Prevention, Tennessee
Department of Health

Leslie Meehan, MPA AICP oversees the Office of Primary Prevention in the Commissioner's Office of the Tennessee Department of Health. The Office serves as a hub for upstream, primary prevention policies and strategies, including increasing physical activity through the built environment as the foremost way to combat the state's largest health issues. Ms. Meehan facilitates creative statewide collaborations, including an active aging arts program co-sponsored by TN health, arts and aging organizations. Previously, Ms. Meehan served ten years as the

Director of Healthy Communities for the Nashville Area Metropolitan Planning Organization in Tennessee. Her work has been recognized nationally and internationally, most recently by the Assoc. of State and Territorial Health Officials (2018 Vision Award), Nat'l Assoc. of Chronic Disease Directors (2017 Joseph W. Cullen Excellence Award) and the Institute of Transportation Engineers (2017 Transportation Achievement Award for Planning).

Rebecca Morley
Consultant,
Rebecca Morley
Consulting, LLC

Rebecca Morley is a passionate advocate for and expert in improving the health of underserved places and populations through a focus on social determinants of health. She is a consultant to the Robert Wood Johnson Foundation and the Local Initiatives Support Corporation. Previously, Ms. Morley was Director of the Health Impact Project, a collaboration of the Robert Wood Johnson Foundation and the Pew Charitable Trusts. Ms. Morley was director of the National Center for Healthy Housing for 12 years where she led efforts to create safer and healthier environments for all people. Ms. Morley worked for the U.S. Department of Housing and Urban Development and in the United States Senate. Ms. Morley authored the book "Healthy & Safe Homes: Research, Practice, and Policy." She holds a master's degree in public policy from the Georgia Institute of Technology and is a graduate of Achieving Excellence, a joint leadership program of NeighborWorks America and Harvard University.

Amanda Navarro
Managing Director,
PolicyLink

Amanda M. Navarro oversees and leads capacity-building efforts with government agencies and philanthropy, training diverse leaders and constituencies across the country on a range of strategies to advance racial and health equity. Amanda brings deep expertise in collaborative efforts to advance equitable policy and practice change and is a frequent keynote speaker on equity-focused policy and organizational strategy. Before joining PolicyLink, Amanda worked at the U.S. Centers for Disease Control and Prevention coordinating several programmatic and research activities related to health disparities, social determinants of health, and community health promotion. She holds a Master of Public Health from Boston University and a Doctor of Public Health from the University of Texas School of Public Health-Houston.

Onye Ozuzu
Dean, UF College of the
Arts

Onye Ozuzu is a performing artist, choreographer, administrator, educator and researcher currently serving as the Dean of the College of the Arts at the University of Florida, Gainesville, Florida. Onye has been presenting dance works since 1997. Based in the US, her work has been seen at venues such as Seattle Festival of Improvisational Dance, Kaay Fecc Festival Des Tous les Danses (Dakar, Senegal), La Festival del Caribe (Santiago, Cuba), Lisner Auditorium (Washington DC), McKenna Museum of African American Art (New Orleans, LA), danceGATHERING Lagos, as well as many anonymous site-specific locations. Recent work includes

Touch My Beloved's Thought, a collaboration with composer Greg Ward, Project Toola which garnered a 2018 Joyce Award. She facilitates work in a group improvisational score, The Technology of the Circle. She continues to serve the field of dance as a thought leader, speaker and curator.

Margery Pabst Steinmetz
President, Pabst Steinmetz
Foundation

Margery Pabst Steinmetz is President and Co-Founder of The Pabst Steinmetz Foundation. The mission of the Foundation is to stimulate innovative community work at the intersection of arts and wellness and to encourage and award collaborative efforts across arts, education, community health and wellness. Margery is a speaker, writer and owner of mycaregivingcoach.com, a website for and about caregivers featuring blogs, radio shows and other resources for caregivers. Her book, Enrich Your Caregiving Journey, is the winner of a national award.

Paul Pietsch
Research Manager,
National Assembly of State
Arts Agencies

Paul Pietsch leads NASAA's qualitative research efforts. He focuses on programmatic and policy trends in state arts agencies and state legislation, reporting on them in policy briefs and strategy samplers. He also highlights innovative state arts agency practices in the monthly State to State column in NASAA Notes. Paul has researched programs and policies supporting arts and military, creative aging, arts in health care, cultural districts, the creative economy, public art, arts education, arts based rural development, and diversity, equity and inclusion in the arts, among other things. Prior to joining NASAA in 2012, Paul managed the research efforts of the Association for Demand Response and Smart Grid as well as those of the Demand Response and Smart Grid Coalition. He also has worked as a writer and fundraiser at Harvard University, Dartmouth College and the Smithsonian. Paul also is an artist with an M.F.A. and a graduate certificate in arts management from American University.

Deborah Reed
Professor, University of KY
College of Nursing

Dr. Deborah Reed, PhD, MSPH, RN, FAOHN, FAAN holds the Good Samaritan Chair in Community Health Nursing at the University of Kentucky. For the past 27 years Dr. Reed has worked with farm families throughout the nation to promote their health and prevent the many injuries that are so common in this occupation. She has developed and tested health education programs for children and youth on farms, and is currently testing a novel intervention, Didactic Readers Theater, for the adult farmer population, a program that was recently designated as an Edge Runner by the America Academy of Nursing. Dr. Reed also founded the UK College of Nursing Occupational Health Nurse PhD Program, funded through the Centers for Disease Control. She mentors nursing students through her research and teaching. Dr. Reed is internationally known for her research with agricultural populations and she is as much

at ease on the farm as she is in a classroom. Her favorite work outfit includes jeans and boots.

David Richards
Project Coordinator,
Healthiest Cities &
Counties Challenge,
American Public Health
Association

David Richards is an environmental policy and communications specialist with an emphasis on environmental health and natural resource management. He currently works at the American Public Health Association (APHA) in Washington, DC, as a project coordinator for the Healthiest Cities & Counties Challenge. Richards received a master's degree in International Environmental Policy from the Middlebury Institute of International Studies in Monterey, California, and a bachelor's degree in Communication from the University of Maryland in College Park, Maryland.

Julia Ryan
Vice President, Health
Initiatives, LISC

Julia Ryan leads LISC's national work to improve health in communities across America, with a particular focus on social and environmental determinants of health that account for stark differences in life expectancy across under resourced and more affluent places. Julia brings 20 years of experience in community development to this role at LISC. She previously served as Director of LISC's national safety and criminal justice initiatives from 2004 through 2017. This included technical assistance and grantmaking activities in support of partnerships between police, prosecutors and community developers in more than 80 sites across urban and rural America, as well as federal advocacy for supportive policies and funding streams for criminal justice reform and place-based safety initiatives. Julia holds a BA from Middlebury College in Vermont and a Master of Public Administration degree from Columbia University.

Kelley Sams Ph.D
Visiting Research Scholar,
UF Center for Arts in
Medicine

Dr. Kelley Sams is a medical anthropologist with a background in fine art photography and public health. She was a Fulbright-Hays scholar and Peace Corps volunteer in Niger where her work focused on health communication and the circulation of perceptions related to health. During the eight years that she spent with the Norbert Elias Center/EHESS/CNRS in Marseille, France, she helped develop La Fabrique, a center that broadens the audience for social science research through collaborations between artists and investigators. Her current position as a Visiting Research Scholar at the University of Florida's Center for Arts in Medicine supports ArtPlace America's Creating Healthy Communities: Arts + Public Health initiative that is being implemented with the goal of expanding the intersections of arts, community development and public health through cross-sector collaborations, discovery, translation, and dissemination.

Jill Sonke
Director, UF Center for
Arts in Medicine

Jill Sonke is director of the University of Florida Center for the Arts in Medicine and Assistant Director of UF Health Shands Arts in Medicine. She serves on the faculty of the Center for Arts in Medicine, and is an affiliated faculty member in the School of Theatre & Dance, the Center for African Studies, the Center for Translational Communication, and the Center for Movement Disorders and Neurorestoration. Jill is also an Entrepreneurship Faculty Fellow in the UF Warrington College of Business and serves on the board of Citizens for Florida Arts. With 25 years of leadership in arts in medicine, Jill is active in research, teaching, and international cultural exchange. Her current research focuses on the arts in public health and the effects of music on emergency medicine.

Stacey Springs
Investigator, Center for
Evidence Synthesis in
Health, Brown University

Dr. Springs is an AHRQ K12 Scholar in Comparative Effectiveness and Patient-Centered Outcomes Research in the Center for Evidence Synthesis in Health and an Investigator in the Department of Health Services, Policy & Practice at Brown University School of Public Health. She also serves as an Engaged Scholars Faculty Fellow in the Swearer Center for Public Service at Brown University and completed a fellowship in Bioethics at Harvard Medical School. She holds a PhD in Pharmaceutical Economics and Health Policy and is a research methodologist in the AHRQ funded Evidence-based Practice Center at Brown University. Her research leverages a complement of methods to improve the uptake of evidence in health policy and clinical decision making and promote patient and community engagement in research. Her work focuses on the evidence based practice in newborn medicine and pediatric pain management, shared decision making and the maternal/infant dyad and the ethical implications of exceptionalizing research vulnerable populations. Dr. Springs has co-authored methods guidance on assessing harms in systematic reviews and meta-analyses, conducting systematic reviews of complex interventions and improving the uptake of evidence by health systems.

Eddie Torres
President & CEO,
Grantmakers in the Arts

Edwin Torres joined Grantmakers in the Arts in October 2017. He most recently served as deputy commissioner of cultural affairs for New York City. Torres served on the GIA board of directors from 2011 through 2016. Prior to joining the NYC Department of Cultural Affairs, he was a program officer with The Rockefeller Foundation. He prior served as director of external partnerships for Parsons the New School for Design. He has also served on the arts and culture team at The Ford Foundation as well as on the staff of the Bronx Council on the Arts. He holds a Master of Arts in Art History from Hunter College and a Master of Science in Management from The New School.

Megan Van Voorhis
President and CEO,
Arts Cleveland

Megan Van Voorhis grew up in Flint, Michigan. She completed a BFA in dance from The Ohio State University in 1998. Van Voorhis began her professional career at the Royal George Theatre Center in Chicago, Illinois. She returned to Ohio in 2001 to pursue an MBA at Case Western

Reserve University. In 2003, Van Voorhis joined the program staff of Community Partnership for Arts and Culture. She became President and CEO in January 2018. Van Voorhis's health-related community activities include serving as Chair of the Mental Health & Addiction Advocacy Coalition and advisory committee member for MetroHealth's Arts-In-Medicine program.

Jennifer S. Vey
Senior fellow and Director,
The Brookings Institute

Jennifer S. Vey is a senior fellow and the Director of the Anne T. and Robert M. Bass Center for Transformative Placemaking at the Brookings Institution. Jennifer's work primarily focuses on the connection between placemaking and inclusive economic development in the digital economy. She is the author or co-author of numerous Brookings publications, including "Why we need to invest in transformative placemaking," "Assessing your innovation district: A how-to guide," and "Building from strength: Creating opportunity in Greater Baltimore's next economy." She also co-edited *Retooling for Growth: Building a 21st Century Economy in America's Older Industrial Areas*. Prior to joining Brookings in June 2001, Jennifer was a Community Planning and Development Specialist at the U.S. Department of Housing and Urban Development. She earned a Master of Planning degree from the University of Virginia and holds a B.A. in Geography from Bucknell University. She lives with her family in Baltimore.

Margy Waller
Senior Fellow,
Topos Partnership

Margy Waller is a Senior Fellow at Topos Partnership (a national strategic communications organization), founder and Serendipity Director of Art on the Streets, and was a leader in the transformation of ArtsWave, an arts advocacy and support non-profit. She has served as advisor on national initiatives to Americans for the Arts, LISC, ArtPlace, Kresge Foundation, PolicyLink, and others. Previously she was Visiting Fellow at the Brookings Institution, with a joint appointment in the Economic Studies and Metropolitan Policy programs. Prior to Brookings, she was Senior Advisor on domestic policy in the Clinton-Gore White House. In 2010, Margy was named one of the nation's 25 most "powerful and influential" nonprofit arts leaders and she comments on arts, community, and strategic communications on twitter: @margyartgrrl and her Arts Journal blog, The Bright Ride. Waller is a graduate of Northwestern University and The Ohio State University College of Law.

Primus Wheeler
Executive Director,
Jackson Medical Mall
Foundation

Primus Wheeler, Jr. is currently the Executive Director of the Jackson Medical Mall Foundation in Jackson, MS. He graduated from Tougaloo College with a B.S. in Biology. He also has an Associate's Degree in Respiratory Therapy from Hinds Community College and a Masters Degree in Education and Administration from Jackson State University. His professional career as a healthcare administrator spans for more than forty years. The Jackson Medical Mall Foundation manages the Jackson Medical Mall facility. The facility is a one a kind comprehensive

healthcare facility that intersects art, human/cultural services, healthcare and community development into an interconnected one stop shop with the primary goal of improving health and wealth outcomes for the Jackson Medical Mall District. This one stop shop provides more than 200,000 healthcare and related encounters annually.

Resources

Alliance for the Arts in Research Universities (a2ru)

<https://www.a2ru.org>

American Public Health Association

<https://www.apha.org>

Americans for the Arts

<https://www.americansforthearts.org>

ArtPlace America

<https://www.artplaceamerica.org>

Arts & Wellbeing: Toward a Culture of Health, US Department of Arts & Culture, 2018

<https://usdac.us/cultureofhealth>

Arts, Health & Wellbeing in America, National Organization for Arts in Health, 2017

<https://thenoah.net/about/arts-health-and-well-being-in-america-a-white-paper/>

Arts, Public Health and the National Arts and Health Framework

<https://pdfs.semanticscholar.org/19d0/4ee7ad4f085d73fc188389e97dac1c742ff9.pdf>

Centers for Disease Control, Social Determinants of Health

<https://www.cdc.gov/socialdeterminants/>

Creative and Cultural Activities and Wellbeing in Later Life, Age UK Policy and Research Department, 2018

https://www.ageuk.org.uk/globalassets/age-uk/documents/reports-and-publications/reports-and-briefings/health--wellbeing/rb_apr18_creative_and_cultural_activities_wellbeing.pdf

Creative Health: The Arts for Health and Wellbeing, UK All-Party Parliamentary Group, 2017

http://www.artshealthandwellbeing.org.uk/appg-inquiry/Publications/Creative_Health_Inquiry_Report_2017.pdf

Curriculum Development in the Arts, Sciences, and Humanities (CDASH)

<https://cdash.atec.io>

Evidence for Action, Culture of Health

<http://www.evidenceforaction.org/what-culture-health>

Healthy Equity Institute

<https://healthequity.sfsu.edu>

Healthy People 2020

<https://www.healthypeople.gov>

Louisville Center for Health Equity

<https://louisvilleky.gov/government/center-health-equity>

Mind, Body, Spirit: How Museums Impact Health & Wellbeing, Research Centre for Museums and Galleries, 2018

<https://www2.le.ac.uk/departments/museumstudies/rcmg/publications>

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<https://www.arts.gov.au/national-arts-and-health-framework>

National Endowment for the Arts, Creative Placemaking

<https://www.arts.gov/sites/default/files/CreativePlacemaking-Paper.pdf>

Robert Wood Johnson Foundation, Health Equity

<https://www.rwjf.org/en/library/features/achieving-health-equity.html>

Robert Wood Johnson Foundation, Building a Culture of Health

<https://www.rwjf.org/en/how-we-work/building-a-culture-of-health.html>

Staying Engaged: Health Patterns of Older Americans who Participate in the Arts, National Endowment for the Arts, 2017

https://www.arts.gov/sites/default/files/StayingEngaged_0917.pdf

Supporting Practice in the Arts, Research, and Curricula (SPARC) Knowledge Engine

<https://www.sparc.a2ru.org/insights/>

The Arts Ripple Effect: Valuing the Arts in Communities, Arts Victoria, 2014

https://creative.vic.gov.au/__data/assets/pdf_file/0010/56359/The_Arts_Ripple_Effect_Valuing_the_Arts_in_Communities-2.pdf

The HUB for Creative Placemaking

<https://www.a2ru.org/the-hub/>

The National Endowment for the Arts Guide to Community-engaged Research in the Arts & Health, NEA, 2017

<https://www.arts.gov/publications/>

UF Center for Arts in Medicine Research Database

<https://arts.ufl.edu/academics/center-for-arts-in-medicine/research-database/>

University of Florida Center for Arts in Medicine

<https://arts.ufl.edu/academics/center-for-arts-in-medicine/>

Unnatural Causes

<https://www.unnaturalcauses.org>