Museum Bathing: Redefining Art, Accessibility and Everyday Wellbeing

Jane Findlay
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the CHURCHILL fellowship

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About the author

Jane Findlay is Dulwich Picture Gallery's Head of Programme and Engagement with responsibility for the Gallery's exhibitions and learning activities. She specializes in participation fostering connection and curiosity between audiences and collections. She is also an interpretation specialist and has curated three critically acclaimed exhibitions at Dulwich Picture Gallery: "Hokusai: Thirty Six Views of Mount Fuji" in 2026, "Rachel Jones: Gated Canyons" in 2025 and "Helen Frankenthaler: Radical Beauty" in 2021. She has worked in learning and engagement in UK museums and galleries for 20 years. Her experience spans the British Museum, National Maritime Museum, Kenwood House and the London Transport Museum.

Over the past nine years at Dulwich Picture Gallery Jane has built expertise in health and wellbeing establishing it as a driving force for our engagement work. She works across the spectrum from general wellbeing to targeted work in clinical services with a strong understanding of the creative health landscape. A flagship project, in 2020 at DPG Jane led an innovative new creative health partnership with the NHS for the new Tessa Jowell Healthcare Centre serving 250,000 people in Southwark. This involves co-produced art commissions, an onsite creative programme, and social prescribing for adults with complex health conditions and is a best practice model for the NHS. She is committed to creating healthier & happier communities by embedding creativity in people's lives and wants to unlock new thinking in the UK through looking at it through an international lens.

Definitions

Creative Health

Creative health is defined according to the National Centre for Creative Health definition, as, creative approaches and activities which have benefits for our health and wellbeing.

Activities can include visual and performing arts, crafts, film, literature, cooking and creative activities in nature, such as gardening; approaches may involve creative and innovative ways to approach health and care services, co-production, education and workforce development.

Creative health can be applied in homes, communities, cultural institutions and heritage sites, and healthcare settings.

Creative health can contribute to the prevention of ill-health, promotion of healthy behaviours, management of long-term conditions, and treatment and recovery across the life course.

Prevention

Prevention is actions taken that keep people healthy and reduce the risk of ill health or death.

Social Prescribing

Social Prescribing is connecting people to non-medical support such as community activities, sport and volunteering to address health issues and other unmet needs.

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Introduction

In the UK health inequalities mean that while some enjoy the highest standards of living, for many others it is a different story. Communities lack the social, economic & environmental conditions to lead healthy lives. Art can change how we feel and function. The 2019 WHO report *What is the evidence on the role of the arts in improving health and well-being?* by Dr Daisy Fancourt and Dr Saoirse Finn looked at over 3000 global studies concluding that the arts play a major role in preventing & managing poor health[1].

Ongoing research undertaken at UCL by Fancourt published in the journal *Innovation in Aging*, further links the arts and improved health by suggesting that visiting a gallery or museum can help us to age more slowly.[2] Yet in conversations with UK health professionals, I regularly hear that people feel they can only consider the arts once basic needs are met or that creative interventions do not speak to them. This prevents people, particularly those facing intersectional inequality, from accessing Creative Health activities.

In Japan the development of Museum Bathing projects offers a new way of conceptualising creative health. It makes a visit to a museum as normal as taking a daily bath and something that can support people at any point in their health journey. In my research I was keen to understand how this everyday & destigmatising practice might help us to tackle health inequality in the UK and widen who can benefit from the arts.

Aims

During my time in Japan, I aimed to explore how Creative Health is conceptualised and communicated to health professionals and participants alike. And how Creative Health approaches can be better integrated into daily life and our lived experiences.

My key research questions can be summarised as:

- How does the way we talk about art impact who can benefit from it to live healthier and happier lives?
- How can we find new ways to bring art into our everyday experiences to support health and wellbeing?
- How can new models of practice help us to break down barriers to ensure people all can access the power of the arts to support their health at any stage in their life?

My primary focus was the practice of Museum Bathing, but alongside this I also wanted to examine the two comparative approaches of Creative Prescribing and a philosophical or spiritual framing to provide a contextual and multidimensional understanding of practice in Japan to contribute to the conversation in the UK.

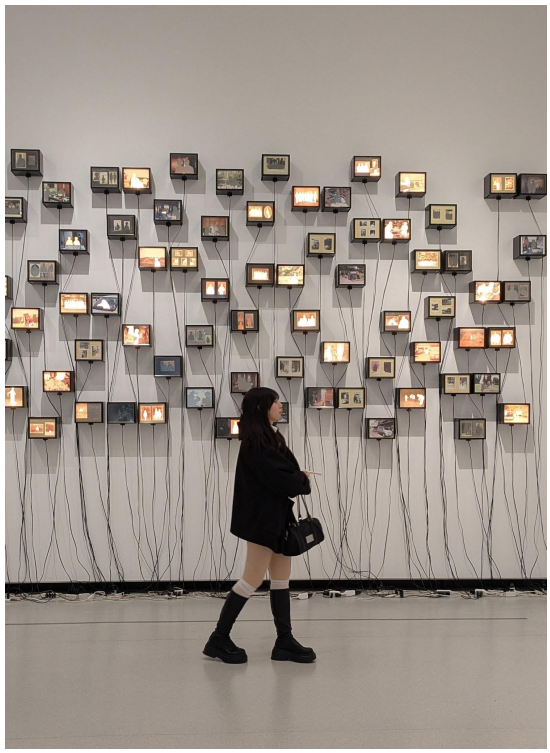
Finally, outside of these questions I also wanted to highlight excellent and innovative practice through a broad range of case studies. I saw many different projects with

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[1] Fancourt, Daisy & Finn, Saoirse (2019). What is the evidence on the role of the arts in improving health and well-being? A scoping review. World Health Organization. Regional Office for Europe.

[2] Daisy Fancourt, Lehané Masebo, Saoirse Finn, Hei Wan Mak, Feifei Bu (2026), Does leisure activity matter for epigenetic aging? Analyses of arts engagement and physical activity in the UK Household Longitudinal Study, *Innovation in Aging*, Volume 10, Issue 6, 2026

artists, patients and medical professionals collaborating to bring the power of art to everyone. I hope this additional learning would provide inspiration more broadly to the sector.



Fukuoka Museum of Art

Why Japan? Why *Museum Bathing*?

Since 2018 I have been in dialogue with colleagues in Japan about Creative Health from conferences to knowledge exchanges. This has enabled me to build strong links with colleagues and to understand developing practice. Initially Creative Health was predominately focused on older people around the idea of Creative Aging. Now, however, it is being explored across all sections of society and there is interest from welfare, medical and cultural sectors.

As Chika SUDO, Head of Arts at the British Council Japan, notes the establishment of the Creative Well-being Tokyo (CWT) Initiative in 2020 by Tokyo Metropolitan Government and Tokyo Metropolitan Foundation for History and Culture, and its international conference, Creative Well-being Tokyo 2022, demonstrated a significant expanding interest in Japan on initiatives around diversity, social inclusivity, and programs designed to improve wellbeing through the arts. The latest prefectural museum in Japan, the Tottori Prefectural Museum of Art, which opened in 2025, also placed health and wellbeing at the centre of its development. It has an expanded art education offer with the new *Art Learning Lab (A.L.L.)* and a design focused on creating multiple spaces where people can come together and relax.

Although Japan and the UK have different health systems and different social complexities there is much common ground and as a result there has been shared learning across both countries.[3] Equally in the cultural sector, although organised

[3] East meets west: What the UK and Japan can learn from each other in healthcare, Royal College of Physicians blog, 08/07/25, https://www.rcp.ac.uk/news-and-media/news-and-opinion/east-meets-west-what-the-uk-and-japan-can-learn-from-each-other-in-healthcare/

and funded in a very different way, there is a shared energy and commitment to work towards how we can harness the arts to support better health outcomes and reduce inequality for all. Japan also has a real speciality in art communication and therefore is the ideal place to explore different ways to talk about Creative Health. Bringing a Japanese sensibility to the established and varied arts, health and wellbeing practice in the UK feels fertile ground for new thinking and reflection.

Museum Bathing is a Japanese practice developed out of the Japanese concept of Shinrin-Yoku or Forest Bathing, an established preventative health practice, which highlights the powerful impact of spending time immersed in nature to feel and function better. Forest Bathing dates back to the 1980s with experimental studies measuring its physiological impact beginning the 1990s with Miyazaki Yoshifumi's research.[4] Since then it has gathered a robust evidence-base, demonstrating its ability to reduce blood pressure, improve sleep quality and mood and decrease stress hormones.

It also represents the importance of bathing culture in Japan where a bath plays a key daily role as somewhere to mentally & physically unwind. Spearheaded by Professor Izumi OGATA of Kyushu Sangyo University (KSU) the development of a Museum Bathing programme looks to explore and evidence the impact of immersive museum experiences on our health from both a physiological and psychological point of view.

This growing research serves as an opportunity to put forward a new framework for community healthcare that places an everyday and ordinary focus on the extraordinary benefits of the arts. It also provides a way to explore the broader value of museums as a healing environment.

Purpose of the report

The purpose of this report is to learn from Museum Bathing and other current Japanese Creative Health practice so we can understand not only its impact on individuals and communities but crucially how it is being communicated and the language used to frame activities have contributed to these outcomes. It aims to offer suggestions how approaches normalising the arts & knitting it into the fabric of its communities could be implemented in the UK. And how it could shift the perception of our role and value as institutions in supporting health and happiness.

Research Journey

My research took me throughout Japan. Over two months I covered projects from Tokyo to Okinawa and much in between. As I developed my research it divided into three particular areas: Museum Bathing, Cultural Prescribing and philosophical or spiritual framing. I mapped out case studies in these areas and interviewed culture professionals, health professionals and many people who were taking part in projects to get a rounded picture. I also immersed myself in projects observing and participating in sessions where appropriate.

[4] Kawamura Yusuke (2024),JAPAN'S HEALING FORESTS (PART 1), Why do People Relax when they Go to the Forest? in Highlighting Japan, Volume 192, May 2024

Findings

Museum Bathing

The term *Museum Bathing* was coined by Professor Izumi OGATA of Kyushu Sangyo University (KSU). Aware of the benefits to health of engaging with museum collections, the Museum Bathing project began to find a way to promote long term preventative health through Japan's 5700 museums.

Key health concerns in Japan include super aging populations, social isolation (with approximately 350,000 elementary and junior high school students currently absent from school and approximately 1.46 million people between the ages of 15 and 64 who are socially withdrawn), and high levels of stress and anxiety, with 70% of working people experiencing these feelings daily.

At the same time, although Japan has a real density of museums with the third highest number in the world, people only visit twice a year on average. For young people this is even less, with half not visiting at all. Key barriers to this low participation include people not finding anything that speaks to them in museum collections, high ticket prices, and content in displays and exhibitions feeling hard to engage with. All issues which will resonate with UK museums and that the sector has been actively trying to address.

Museum Bathing seeks to tackle these issues through repositioning museums as places of everyday connection. In Japan it aims to add social value to institutions taking them beyond being places of intellectual stimulation, learning and enjoyment to one of supporting personal and social wellbeing. It also aims to shift the perception of needing a lot of prior knowledge and cultural capital to get the most of your visit to one of ease with an emphasis on allowing people to be themselves.



Suizenji Park, Kumamoto

The development of Museum Bathing took inspiration from the Japanese practice of Forest Bathing. With its wealth of evidence gathered over 30 years it has demonstrated that spending regular and intentional time with nature has many health benefits including reduced blood pressure, improved sleep quality and improvements in mood. It aims to explore museums as environments that offer similar healing and relaxing properties and aims to develop an equally robust scientific evidence base that can speak to health and welfare professionals.

The project was also inspired by a number of preliminary studies of the impact of viewing art on health in London (Claw 2006) Switzerland (Tschacher 2012 and Krauss 2021) and Italy (Siri 2018 and Grossi 2019). It looks to standardise and broaden these methodologies to build a strong evidence base and to reduce their limitations.[5] Through developing the Museum Bathing approach and building a robust case the intention is to provide support for a stressful society with a hope that museums in Japan, but also all over the world, can be “health stations” for local people.

In a Museum Bathing experiment physiological measurements are taken including participants' blood pressure and pulse at the start and end of a museum experience for a small cohort of people (approximately 10 to 30 people). Alongside this a psychological assessment is also completed using the established Profile of Mood States framework (POMS2) to evaluate mood status. The differences in pre and post are then compared to identify changes in vitals and psychological states and what the overall impact is on people from spending time in a museum.



Museum Bathing at Kyushu National Museum, Dazaifu

I observed a number of these experiences during my research trip. In Kyushu National Museum 15 people, who were regular museum goers, took part. They were

[5] Izumi OGATA (2021), Prospects for Furthering the Study of Museum Bathing: A Review of the International Research Literature Based on a Scoping Review by Law et al.,
Kyushu Sangyo University Journal of Collaborative Regional Development vol 7 article, 35-52, 2021.

asked to take measurements (blood pressure and pulse rate) themselves and complete a psychological test (POMS2) considering their thoughts and feelings over the past week. Participants then spent 20 minutes in the museum's galleries. In the first 10 minutes they enjoyed quite individual looking (Silent looking) and in the second 10 minutes they were invited to talk to each other about what they were looking at (Conversational looking).

At the end they completed the same physiological measurements and psychological assessment. It was interesting to see how people responded to the experience. The start felt a little quiet and reserved while people completed the initial assessments. Although people were very diligent, wanting to make sure they had measured correctly. By the end people were chatting and asking questions and engaged fully in the talk about the science behind what they'd just experienced. Consolidated results afterwards confirmed a positive shift in mood.



Museum Bathing at Chatan Town Museum, Okinawa

Technological developments are also supporting the development of Museum Bathing. In the Museum Bathing experience I observed in Chatan Museum, Okinawa, the online tool "MindScale" was used to assess people's vitals before and after alongside the POMS2 questionnaire. This online tool has been developed through collaborative research by Yamagata University, Tohoku University and Fukui University of Health Sciences. Using a smartphone, users simply read a short passage aloud and answer a few simple questions. In approximately 30 seconds, the system can objectively assess the state of their autonomic nervous system and level of brain alertness.

At Chatan 30 older people, who were first time or infrequent museum users, took part. They were guided through using the online tool by the MindScale team. After filling out the psychological questionnaire they spent 20 minutes in the Museum's

galleries with a short highlights tour of the exhibition. The same process to measure impact was carried out using the online tool and POMS2 questionnaire. Again, results showed a positive impact on mood with very similar results to those recorded at the National Museum in Kyushu.

Museum Bathing research began at Kyushu Sangyo University (KSU) Museum and then soon spread out into museums and galleries in Fukuoka. Spanning a wide range of collections including history, art, archaeology, folklore, natural history, science, and other fields, 12 museums in the Fukuoka area took part between 2020 and 2021 with the results published. Participants' tension-anxiety decreased and their vigor-activity indicators rose. Blood pressure maximums also dropped.

The work coincided with an increasing need to find solutions for Japan's aging crisis to support the implications of this challenge on the economy, infrastructure and society. Recognising its potential from the initial studies provided impetus to develop it further across more sites and to reduce variance and take account of biases where possible. To scale up the project nationwide the KSU team were able to build Museum Bathing collaborations with partner museums. Inviting print and broadcast media to see the work in action also led to news coverage that was uploaded on YouTube channels taking it beyond the area of Kyushu. As more people found out about it, the team started to be able to set up projects even as far as Hokkaido in the far north of Japan.

As well as expanding geographically the research scope broadened to explore impact on different ages, particularly focusing on the benefits of Museum Bathing to young people. A Japan Red Cross survey in 2022 highlighted that half of Japanese young people did "not want to do anything" with one in three also worried about the impact on "relationship building" and "interpersonal skills".[6] A Japanese Ministry of Health, Labour and Welfare survey around the same time also brought to light that 55% of young people felt anxiety and a 5th of young people were unable to relieve their stress.

Research began with four experiments across four museums in Fukuoka with junior high (12-15 years) and high school (16-18 years) students. It saw reductions in anger-hostility, confusion-bewilderment, dejection-depression measures across all venues after museum viewing showing its ability to reduce negative mood and vigour-activity indicators increased demonstrating a boost to positive mood. Blood pressure and pulse also dropped after spending time in the galleries.

Since September 2020 data has been collected from more than 1800 participants and over 110 locations across Japan from Hokkaido to Okinawa. A regional approach in Yokohama working across a network of institutions is being planned to see if this pilot can create a model to adopt in different cities in Japan. A large pilot with office workers is planned from August 2026 onwards also taking place at the National Museum of Western Art in Tokyo.

Reflecting back on the project since 2020 some key trends have emerged to date that can be summarised as:

[6] Japanese Red Cross Society "Survey on the New Coronavirus Crisis and the Future Anxiety of Young People (2021).

- Duration: Visits of 30, 20 or even 10 minutes produce results. Showing that *Museum Bathing* is a quick and easy approach to supporting health.

- Diversity of Museums: From history and art to natural history and science, all types of museum produced positive results, meaning any museum can support *Museum Bathing* through their collections.

- Audience: Both regular museum goers and people who rarely visit showed the same positive results, showing that it can be a support for a variety of people.

One of the particular outcomes of the data also demonstrated *Museum Bathing's* ability to have a positive effect on homeostasis, the body's internal system of self-regulation. Spending even just 10 minutes in a museum enabled participants' bodies to return to a balanced state. This also was shown across a variety of visit experiences from slow looking, to slow walking and slow handling of museum objects. In every instance the sympathetic and parasympathetic systems were stimulated in a balanced way - producing a state of "positive arousal".

Another interesting outcome is that the results cut across demographic groups and visit habits. From old to young people, and people who frequently attend museums to people who never or rarely go, the same impact was felt. There might be a preconception that people who are more comfortable in museum spaces because they go often and are familiar with conventions may experience more positive results, but the data shows a real flattening of effects to health. Professor Ogata feels that a key factor in this is slowing down, and the museum is a place where you can find a different slower pace away from a busy, high-stress society. Through his research he highlights that when the nervous systems work in harmony there is a powerful "Resilience Effect".

It's clear that by running these sessions across museums in Japan, people are becoming aware of the impact a museum visit can have on their life. People's personal stories of change kept the team going as they developed this work. A young person who'd tried everything to support their low blood pressure found that Museum Bathing was the one thing that worked for them. An older person with high blood pressure shared that the effect felt better than their medication. These personal outcomes were motivating and significant. Moreover, there was a feeling that attitudes to museums were shifting in a meaningful way that was understandable beyond the sector. This is something I felt strongly as I visited and interviewed sites which have taken part. Several exciting initiatives have developed out of Museum Bathing experiments.



Minokamo City Museum, Gifu

At the Minokamo City Museum, Gifu, their aim is to be “a familiar forest for people, enriching their daily lives, discovering the beauty of the region, and serving as a starting point for expansion and connection”. Here a Museum Bathing experiment has led to the establishment of a walking programme with the newly formed Central Japan International Medical Center. This state-of-the-art hospital based at the crossroads leading to the museum, has a focus on prevention. In particular it is keen to support people in their 40s to 60s as well as those who would be considered elderly. The concept has played a key part in the hospital’s management team recognising this importance of the museum's role in people’s wellbeing - particularly mental health - and enthusiasm for continuing the collaboration. A permanent walking route is also now installed in the grounds by Minokamo City’s public health team. One of two to exist in the municipality, placing the museum firmly in the space of a “place of health” for all.



Feelings board, Nagoya University Museum, Aichi

In nearby prefecture Aichi, is Nagoya University Museum. It was established in 2000 and is Japan's 5th university museum. Its aim is to care for the Nagoya University's collections, as well as to provide feedback, resources, and social contributions from university research. Stemming from a Museum Bathing experiment here two new ideas emerged, led by curator Ayako UMEMURA. First a new interactive allowing all visitors to conduct their own Museum Bathing experiment before and after their visit to appreciate and advocate for the health benefits of using the space.

Interestingly, it has produced similar physiological and psychological shifts to the Museum Bathing research, most notably visible in the written commentary which Umemura has been coding and analysing. From understanding the changes in people's mood and stress levels, not only does she have a better insight into visitors and what they are bringing to the museum with them – she is also raising awareness of how the museum can be used in different ways to support people's everyday lives. "People are coming with a whole range of different moods….Some are sleepy, some are stressed, some are tired. A whole range. And, actually, we need to think about all those different places people might be in when they come to a museum.…not everyone is the same."

The second, is more of a cultural shift to reposition the museum as a "third space" for students. Using the concept of a "health room" which is a place in every Japanese school where students can drop in to talk to a nurse or counsellor at any time, the Nagoya University Museum is encouraging them to use the galleries in a similar way to recharge or relax during their studies with positive results. Meeting this need feels particularly important as once you get to university this type of place does not exist and wellbeing provision is more formal providing less of the "emotional support" or "place to escape to" that students miss from high school.

Giving people permission to just bring themselves has gained traction. Students can be observed there just sitting, demonstrating that they are just happy to be in the space and can use its environment to relax or do nothing. As Umemera reflects "Nothing. It's a beautiful word." It also provided a further useful case study of how the concept of Museum Bathing can be implemented in different contexts to support resilience and generate behaviours that support preventative health.

For other museums taking part, it has strengthened their case for being a space that is invested in social issues and contributing to their local community in meaningful ways. For the Fukuoka Art Museum it coincided with a new redevelopment that saw them removing a wall and creating a new entrance directly into their local park - connecting them both physically and conceptually to their community.

For the Showa Era Lifestyle Museum, a tiny museum in Kitanagoya (Aichi Prefecture) which runs an award-winning reminiscence programme, it has given them a boost to keep prioritising health and engagement in their activities and to look for opportunities to develop this work.

At Shimonoseki City Archaeological Museum, Yamaguchi it has been a breakthrough moment for them and their education board for recognising the value of the museum to young people and has been significant in their strategic development. Their motto "Museum Bathing > Relaxation & Refreshment > Resilience" has cut through to welfare staff who are promoting its benefits independently to their local area.

Learnings



Reminiscence Method School in Kitanagoya City, Photo courtesy of Showa Era Lifestyle Museum, Kitanagoya

From both an institutional and personal point of view there are some key things to consider from this research. Evidently, Museum Bathing is bringing together a solid evidence base that helps demonstrate the impact of museum environment on our health. Yet beyond this there are other really interesting things going on in the way it frames and communicates Creative Health.

- For institutions that took part it gave permission to use spaces in different ways - recognising that longer dwell time and deep engagement are just one way for people to take positive benefits. The evidence here shows that both more socially motivated visits and also shorter regular dips into the museum space can be just as valuable for visitors.
- It also offers a more expansive and accessible way of looking at how our collections can support local audiences. It shows that as a local resource we can be places of learning, belonging, experiences but also rest and revitalisation. Again, this suggests that a closeness to our local communities, woven into the fabric of daily life, museums and galleries could be vital spaces for people. It places the emphasis on fostering welcome, open, accessible hubs alongside creating relevant and inclusive content.
- From a programming point of view there are also greater considerations for not just developing programmes but looking at a whole-site approach and particularly how front-of-house teams might be more involved in cultivating these experiences for people. Libraries which have been in recent times evolving from primarily being a place to borrow books to being a valuable local resource and a place of connection might be a useful model to look to.
- From a Communication and public engagement point of view too everyone I spoke to was clear that communicating this to local people is a key goal for their teams to be able to position museums as part of healthy habits. And that to do that the messaging should convey the sentiment of ease. “Take a museum bath, relax!” is the call to action for the project's pamphlet.
- Museum Bathing also removes the fear of having to have substantial prior knowledge, encouraging people to be drawn to something that catches their

eye or intrigues them. Or looking for something that you want to talk about with a friend. It also celebrates short social visits in any capacity. This focuses on people being themselves and encouraging people to bring a friend or family, visit the cafe, enjoy the shop. This takes into account the full environment that the museum and space offers as being meaningful.

- Finally, from measuring impact, this also suggests that we need to look more broadly at different ways to understand how museums can support people's health and wellbeing and also what might be considered successful engagement. It raises the need to look beyond how deeply people engage with the content or how long their dwell time is in the galleries or which creative programmes they attend and provides a way to look at the whole experience for people. And how they arrive at our spaces can impact on what they need or can take away from a visit.

Cultural Prescribing

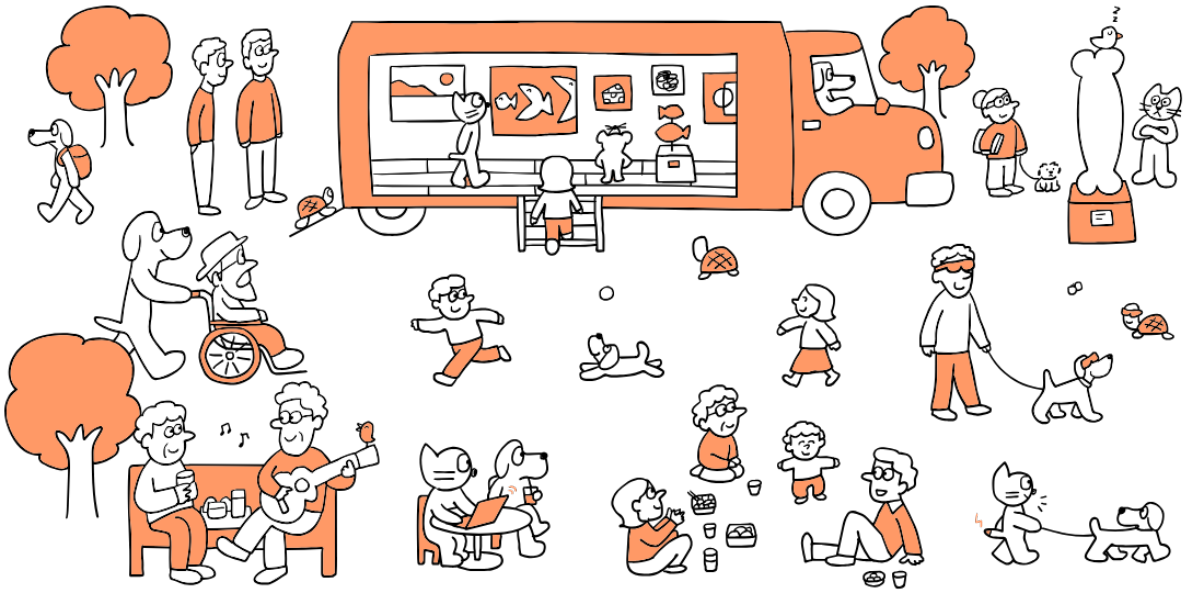


Illustration courtesy of aa-tomo TODAY

Alongside Museum Bathing another key concept in Japanese Creative Health is *Cultural Prescribing*. This project has a long history of development. Its origins lie in Tokyo Metropolitan Art Museum's Art Communication programme launched by Inawia SAWAKO who joined the institution as a curator in 2011. Whilst developing its pioneering projects such as Tobira Project and Museum Start Aiueno, Sawako researched museum practices in the UK, the US and elsewhere addressing issues such as dementia, ageing, social isolation and social inclusion.

Noting barriers to accessing cultural institutions for older Japanese people, in 2019 while developing a proposal for a new initiative for the Tokyo Metropolitan Government, she proposed the Japanese term Bunkateki Shoho (文化的処方). The English expression "Cultural Prescribing" was adopted later as a translation of this Japanese term. The choice of bunka ("culture"), rather than "art", was intentional and transformative. It also reflected the initiatives scope, that went beyond museums to a much wider network of cultural institutions. Crucially the key question *Bunkateki Shoho* posed was how these cultural resources could function as a kind of social

infrastructure supporting people to remain connected, participate in society and live as themselves. There is a clear dialogue here too between its concerns and direction as part of a wider trajectory in Japan at the time that later connected with Creative Well-being Tokyo in 2022.

Growing out of the initial proposal for a Tokyo Metropolitan context came collaboration with Tokyo University of the Arts (Tokyo Geidai) and access to external research funding. This enabled the idea of Cultural Prescribing to continue to be explored. Eventually it developed into the Art Communication Co-Creation Center for an Inclusive Society Programme under Japan Science and Technology COI-NEXT (An open innovation platform for industry-academia co-creation). Here Sawako, who is now Senior Curator of Learning, National Center for Art Research (NCAR), Tokyo, leads the first R&D Project on Cultural Prescribing.

Many in the UK will be familiar with *Social Prescribing.* Here this is delivered primarily by linkworkers, embedded in the NHS and its 10 year plan, and has long roots that go back as far as The Peckham Experiment in the 1920s and the establishment of the Bromley By Bow centre in the 1980s.

Cultural Prescribing is a uniquely Japanese counterpart to Social Prescribing. These two concepts provide two different routes to reach the top of the mountain but both have distinct characteristics in reaching this shared goal of better health for all:

- Social Prescribing - health-led and focused on referral to community-based assets by linkworker or other health professional.
- Cultural Prescribing - community-based, everyday and culture-led supporting agency for individuals

The R&D Project on Cultural Prescribing project aims to build bridges between the people, things, and events around museums, and explore how public institutions should be used within society. It has been developed in Japan from culture-led practice and within Japanese cultural, medical and welfare contexts, while also learning from international developments in Creative Health, Social Prescribing and museum practice.

Cultural Prescribing centres on the practice of reconnecting with the culture that we encounter every day in all sorts of circumstances so that we can be happy in our lives, and it is closely related to the concept of wellbeing. Moreover as Sawako explains, “In the context of medical support, receiving support can sometimes be stigmatized, with labels like weakness, illness, or loneliness being attached. However, in Cultural prescribing, cultural activities, museum visits, and workshops are more likely to be positive aspects of everyday life, and the sense of receiving support is less prominent. Even without necessarily having a program, I feel that the museum itself is extremely valuable within the idea of Cultural Prescribing.”

This emphasises the importance of arts and cultural spaces feeling safe and accessible places where people can be themselves. Another significant aspect of Cultural Prescribing is that it is non-clinical and driven by citizens. This operates on two complementary levels: cultural linking which can be widely shared by all, and people who take on the role more intentionally and with appropriate training. In Kawasaki a ground-breaking project That! That? Kawasaki「こと！こと？かわさき」 speaks to this distinction. It aims to empower people to access and participate in art and culture through a team of local *Kotora* or art communicators.

People taking part range from 19 to over 80 years old and come from a variety of backgrounds including company employees, students, freelancers, housewives, and retired workers. They sign up for a three-year voluntary programme to connect local people to the rich cultural resources in their area, and meet on average weekly to co-produce activities. *Kotora* do not have to know anything about art but need to love spending time with people and have an open mind to different perspectives. They are guided through an initial three-month training programme with a real focus on active listening, tuning into people's needs, and how to create space for dialogue.



Kotora art communicators, Courtesy of *That! That? Kawasaki*

Care is an important pillar of the *That! That? Kawasaki* project. Rather than seeing care as something that we *should do* the project defines it as using communication and attunement to people to enrich people's lives. The intention is to close the gap between feeling like a customer or patient with your care provider which the project team describe as a kind of care that can feel lonely. Instead, fostering meaningful communication with care where you are aiming to find real connection with the individual is key to supporting people's health and wellbeing. And enabling people to soften to each other so they feel less alone and they know that they can ask for help. As one of its project managers Kondo expresses the project aim is "building a more liveable city with culture at its core".

Contextualisation is also a big part of the Cultural Prescribing R&D project. The NCAR and Tokyo Geidai project has 42 individual projects which are all different and demonstrates how this approach can be supported by a variety of people, not just experts, but artists, educators and citizens. For Sawako through developing a contextual model, we can promote community participation and encourage a broader sharing of a healthy society.

In Kumamoto there is an innovative Cultural Prescribing project started in 2025 based at the Contemporary Museum of Art (CMAK). A partnership with the Kumamoto City, Kumamoto City Art and Culture Foundation and Kumamoto University, it will train Kumamoto City Workers as cultural linkworkers. Importantly, this is not a voluntary project, 16 Kumamoto City Officer Workers are able to take part in their paid work time and budget is being contributed by the municipality to allow them to complete the training in their work time. It shows the value the city places on this investment. People taking part range from welfare workers to structural engineers bringing their different specialisms and perspectives together to support a better life in their city is another key point of the programme.

For the City Hall workers taking part the benefits have been clear. They have been discovering the value of art and culture through experiencing the programme and thinking about how to apply it in their roles. The programme also focuses on how to listen actively and respectfully to people which is something that people have found enriches their roles. They've also been put in contact with people they would not traditionally encounter day to day.

Other reflections from participants included a growing awareness of their need to care for themselves so they can provide better care for the people they work with and support every day. And the different value in tactile, making experiences, that are different from thinking activities. After this first year of training the next step will be to put things into practice, making connections and co-designing activities with members of the public. For the museum team they want to build on the growing interest and understanding of participants in creative health. And the new ideas that are forming and shaping across the diverse team.

They also feel that there is a clear ripple effect with participants being able to provide a better quality of service in their role and connecting more to people's everyday life.



A Nurse's office for everyday life, Kawasaki

Another part of Cultural Prescribing is also about giving people more choice and agency in how much they want to participate and in what way they do. This is evident in another Kawasaki-based project called *「暮らしの保健室川崎」* (Community Health Room). It was started by Dr Tomohiro Nishi in 2017, originally in a café, but now it has its own dedicated space. As with the project at Nagoya

University Museum which was also inspired by Japanese schools' “health room”, Dr Nishi’s idea was to give people living in the community access to a similar space where they could share anything that is going on in their life. People might come because they have a heavy illness that is hard to talk about or there is something that they are worrying about. Families too might need someone to talk about a person who is going through something and people who might feel socially isolated can come and chat. Running four days a week and now with the addition of a small library for people to use, it is different from a doctor consultation room. Each interaction just starts with a simple question: “What would you like to talk about today?” In contrast to his clinical practice where there is an established relationship and somewhat exchange-based relationship between a doctor and a patient, the *暮らしの保健室川崎* dynamic is different. It is about empowering people to find their own way and supporting them along the way. From the project team there is a strong feeling that they believe in the potential of everyone who comes into this room. They see their role as really being there and say: “Hey, you're not alone”. In trying to remove the stigma that if you’re ill or need help that you’re considered “weak” they also feel that through this approach where people feel seen they can release everyone’s potential to thrive.

Finally Cultural Prescribing is interest-led and requires connecting to people’s lived experience and passions to support their health and wellbeing. Rather than starting with a conversation about health it is about finding out what is enjoyable and meaningful and leaning into that to support people to live a healthier life. This is clearly evident in the Douzen Community Hospital in Taito Ward, Tokyo. Here a focus has been placed on creating a common space where citizens, patients, welfare and hospital staff can come together to connect on an equal footing. This space, known as Mino’s Room has been cultivated through co-created creative activities that are honed by staff and community with care and consideration as they share meaningful conversations. Its name comes from the community: Minowa 箕輪 it’s based and the Japanese verb Minoru 実る which means to ripen or bare fruit.

The room is open two to three days a week and can be used by patients, hospital staff as well as anyone in the neighbourhood. Around 80% of the people are return users and 20% first time visitors. It provides creative activities and hosts monthly events that are co-produced by its users. Activities include community-based walks, art-based dialogue sessions and active games that support movement and coordination but more importantly social interaction. I joined an activity, playing a Finnish game called *Mölkky*, where participants included community members, hospital patients and staff and local social workers. The community members welcomed me in with warm and generous environment, within minutes I felt part of the community. First hand I was able to experience how Douzen cultivates a space where people feel that they belong.

As Ayaka FUKUI, the hospital’s Community Planning Senior Associate notes, “We often talk about our desire to create a society where hospitals and the community are integrated to create a cycle of support.” This shifts people’s relationship with a hospital from a place that is separate from their lives, and they only go on occasions when they are unwell, to one where it is a part of health in everyday life and fosters social connections.

Learnings



Kumamoto Cultural Prescribing Training Session in Kumamoto, Courtesy of Museum of Contemporary Art Kumamoto

There are important things that we can take away from this framing of Creative Health.

- One is how we understand and measure health itself. In Cultural Prescribing, the definition of health is more affirming and empowering about people being able to connect back to their own selves and find what's within them and within their community. This also moves us away from understanding health from a deficit model.
- Our role too, as arts and cultural providers becomes not only about providing activities to support people's health but also using the skills we possess as communicators and specialists in engagement, often employed in deepening connecting with artworks or objects, to support people to tune into themselves and what they need to live healthy and fulfilling lives. It expands our role from not only the provision of stuff and space but to using our energy to build the capacity of the community to surface assets that people need.
- With referrals to cultural spaces still the lowest amongst social prescriptions in the UK, it offers a hopeful change of approach that encourages us as organisations to be knitted into our community in a meaningful and everyday way. For the goals such as the NHS 10-year plan too this approach feels like it has the potential to support its goals around community-based care and neighbourhood approaches.
- Finally, it raises the need to think more about how being really seen and perceived as ourselves can contribute strongly to our sense of wellbeing. None of the projects mention health overtly but all deeply invested in making people feel that they were understood. Projects were invested in asking: do you feel more like yourself, are you connecting to your authenticity – do you feel seen and heard? And also, how the ripples of impact from individual to collective supported communities capacity to care for one another.

Art as an anchor in hope



Naoshima Island, Japan

The third conceptual Creative Health frame that I looked through in Japan was a spiritual or philosophical framing. It focused on art as a grounding or steady force in either oneself or one's context to provide wellbeing and resilience. This idea that art is always with us is intertwined with Japanese religious and cultural traditions. It speaks to Shinto principles of the importance in appreciating what is all around us and its focus on the natural world. Furthermore, it connects to the Buddhist philosophy of impermanence.

At Benesse Art Site Noashima (BASN), an island in the Seto Inland Sea of Japan, a unique practice developed by its Education Team is rooted in its geographic and artist context. It supports people, faced with the uncertainty of what tomorrow might hold, to use art as a powerful force of self-actualisation and compassion to self.

Since the opening of Benesse House in 1992, the organization has melded art with the landscape of Naoshima for many years. Well-Being too has always been central to the BASN vision. Their name is from the Latin: "bene" (well) and "esse" (being). Through experiences in art and nature they hope that people will, step by step, be able to gradually move closer to the realisation of their dreams, finding purpose in their life. And feel empowered to shape their lives and challenges they face.

As Rieko OSAKA, former Director of The National Art Center, Tokyo, noted at a 2023 conference in Naoshima, visitors "can experience serendipity that they can find nowhere else and discover something unknown within themselves".[7]

[7] Eriko Osaka (2023). "A Harmony of Human Relationships and the Environment: Benesse Art Site Naoshima Connects the Present and the Future" in Individual Facilities to a Group of Museums; The Past and Future of Benesse Art Site Naoshima, Naoshima, Japan, October 28, 2023

I was keen to understand how this framing of wellbeing resonates with the young people and adults that take part in their Education Programmes. Speaking to Ayano FUJIWARA, Education Curator, I had a strong feeling of the care and consideration that shapes the programmes she has established and developed over the past eight years.

Flowing from BASN's vision, wellbeing is the overarching goal of the programme. Yet, they do not talk explicitly about wellbeing or health. Based on a method akin to Visual Thinking Strategies, Benesse's Education Team has developed a proprietary method that guides their work. They use art-based dialogue to dig deeper, focusing on cultivating self-actualisation and introspective connection with oneself. This is encapsulated in the team's objectives for young people to take away:

- Discover and accept their own uniqueness.
- Verbalize current concerns and goals.
- Concretize their personal vision of "well-being."
- Develop non-cognitive skills and resilience.

The approach starts with looking at art, it then moves to sharing your view, hearing others perspectives, being immersed in an art environment and using all your senses actively. Through the programme young people get a clearer sense of themselves and what makes them them, and are given the tools to communicate and express their ideas with confidence. This zoom out and philosophical framing, recognising your place in the world through art, is invaluable for young people to navigate new experiences and challenges as they head into adulthood and provides vital personal, mental and emotional resilience.



Envisioning the Future Methodology, Courtesy of Benesse Art Site Naoshima.

Two particular targeted programmes that deliver on these also put an emphasis on this idea of knowing yourself. The "14-Year-Old Art Fest in Naoshima" uses art to ground young people in themselves through giving them diverse perspectives at a big period of instability and self-doubt in their lives, and the "High School Idea Programme" focuses on helping students to find their own interests and topic of

research based on looking at themselves through the lens of contemporary art. Powerful testimony from participants who shared how participating gave them the freedom to “create a world where even if I am different from others, I can fit in” and confidence to voice opinions without fearing “being wrong” attests to its impact.

In measuring their programmes using before and after questionnaires programmes, based on these concepts and non-cognitive skills, the BASN team can see that across age groups it develops people’s self-awareness, their ability to express and perseverance. Anecdotally, they also see big mindset shifts when working with participants. Young people may start as nervous, maybe feeling negative and disinterested but leave feeling motivated and that they’ve encountered themselves through art.

One student commented, “I began to think more deeply about personal identity and goals”. Although not talking about wellbeing explicitly it’s clear to see that the programme delivers on helping young people to identify what wellbeing means to them and fosters a closeness and appreciation of the role of art in feeling good about themselves and how it can empower them to live their life. A clear vision towards wellbeing is being delivered here in a way that is connecting meaningfully with young people. And allowing them to feel the transformation in themselves in an individual way.



L: Zentsu-ji Temple, Shikoku R: Reception area at Shikoku Adult and Children Medical Centre, Shikoku

On the island of Shikoku, the Shikoku Medical Centre for Children and Adults (SMCCA) also shares a spiritual approach to art. The centre is located close to the Zentsuji Temple. This is the birthplace of Shingon Buddhism in Japan and its Camphor tree on the temple plot inspired the first artwork they created at the new SMCCA. Hospital Art Director, Aine Mori, chose the over-1000-year-old tree – a tree that holds no judgement and is steadfast as a presence in people’s lives weathering the seasons – to symbolise what their hospital can be for everyone.

Historically, the temple and the hospital were much more closely connected, a shared support for people living in the area. In the case of medicine and art, Japanese hospitals came from shrines. The very first and oldest hospitals in Japan provided medical care, but they also provided jobs, welfare, and education. The hospital also wants to rekindle this spirit and important local culture.

Art at Shikoku Medical Centre for Children and Adults is not something distant and passive on the wall. It's part of the essence of the hospital and all the people that live and work there. In their programmes art is a process and a language they can use to make the hospital a better environment for everyone who lives there. They are always looking for ways in which it can infiltrate the fabric of people's lives. This framing has made their approach different and powerful. Often in a clinical space we think of how we can treat patients first, and creative arts can fall into this dynamic too. The team quickly realised that it was not just about the patients but there was a whole ecosystem within the hospital with different people's lives interwoven. From the patients and their families to the staff and the local community living around the hospital; they feel it is for everyone.

Being true to this ethos their work always begins with a challenge or idea from a person. Aine Mori in her role has a keen understanding of the building through talking and listening to people every day. She participate as an observer in the Public Relations Committee, the hospital newsletter group, the website subcommittee, the Service Leaders' Meeting, and the Service Improvement Committee, so that she can understand the overall flow of discussions and decision-making across the hospital.

There is also a Google form for people in the hospital to share anything that they need help with. A group made up of members from multiple professional groups consider these requests and projects are implemented with approval from the Hospital Director. From there things develop through dialogue and creativity comes in to facilitate working through challenges together. The result is a hospital full of beautiful art inside and out, but moreover a culture of care for everyone. This is a gentle and subtle approach, responding to people's interests and needs, and allowing art to seep into the healing environment.



Gift giving installations, Shikoku Medical Centre for Children and Adults, Kagawa

One example of this are the 17 gift giving cubby holes that are found throughout the hospital. Here people can leave or pick up a gift anonymously. The team understood the power of being able to give something when you're unwell and normally on the receiving end of treatment. It also speaks to the relief of being able to give a gift without pressure of reciprocation. The role of creating and packaging gifts has also been something special for people in the hospital to come together to do and has provided valuable social connection and a place to share experiences. Aine Mori reflects, "When people hear "hospital art," they think of artwork or decorations, but our hospital's art is more like a prayer—something that takes shape from stories."

Another key concept is healing as being something that comes from within. It's not something that happens to us. It's a proactive act and not a passive one. A new project: Cultivating Love: The Healing Garden continues this work. The garden is not just about the hospital but also the community. It's a collaboration between the Zentsuji Daiichi High School Design Department, Zentsuji monks, the municipality and the hospital. In cultivating the garden together, they are working creatively and inclusively dissolving hierarchies' or roles. And promoting dialogue over conflict to each understand one another more. "Compassionate actions bring about changes in relationships. This is what art does. It's the same with medicine," explains Aine Mori.

This interest-led approach enabled people to have agency in their own health and wellbeing and to understand on their own terms what role art could play in their lives. This real deep listening and attunement to people improved cultural spaces, and in some cases, whole communities' capacity to promote a sustainable and longer-term relationship with the arts for wellbeing. It also made fewer assumptions about people based on diagnosis or medical condition and encouraged people to connect with themselves.

Importantly these different approaches also intentionally differentiated themselves from a clinical relationship between professional and patient. Collaborative and equitable models collapsed the hierarchical dynamic to one of more human-to-human. This removed the stigma of living with ill physical or mental health and created a supportive and non-judgmental environment. These concepts too looked more holistically at people's lives as a whole and how the arts can be part of this rather than looking at a problem that can be solved by creativity.

Enabling and broadening the people who are able to support people's health and wellbeing in their community was also significant. A whole-citizen approach amplified the work of arts and health organisations to bring people into contact with the arts to support their health. It also empowered people to realise the cultural assets around them in ways that were relevant to them and created new and exciting ways to bring people and art together.

Ultimately, they all recognised that being communicated with care is critical for our personal wellbeing and that as arts professionals seeing the person first is the most important thing we can do to support someone's health and wellbeing. Focusing time on really listening to our diverse communities and creating the right conditions for people to feel safe and seen in our spaces will enable them to make the most of the art and culture in their lives and as a result live in a way that is healthier and happier.

Learnings

Taking an approach to Creative Health that is spiritual and philosophical is key for providing a wider view. This reframing takes us out of the intensity of our individual feelings and grounds us in ourselves and our world. It acknowledges the unstable and uncertain world in which we live in and what that might feel like for us and those around us. Again, there is lots to take away from this approach.

- Providing a larger perspective to life is a powerful coping tool for resilience and wellbeing. The examples of using art-dialogue to let us return to ourselves amongst all the things in the world that we cannot control highlights a key grounding role that art can play. And one that feels particularly important in such chaotic times.
- It reminds us that wellbeing is personal and will look different for everyone. This moves us from generic approaches to what should feel good and fits more with models of intersectionality. It also destigmatizes differences, which is a supportive approach for people experiencing inequality, those living with mental health conditions or neurodiversity who lived experiences may have been overlooked by conventional healthcare.
- Importantly, too, the programmes here equip people with the vocabulary to identify what is different and helpful for their wellbeing. This is vital for resilience as it both recognises our individuality and provides agency to make positive changes in our lives.
- We do not always need to talk about health and wellbeing explicitly to deliver programmes that support us to live healthily. Pitching programmes that speak to how you can understand yourself and your environment connected to people's lived experience in a way that badging something as a wellbeing programme might not. It also does not make assumptions about needs or define people by a particular condition.
- These approaches focus on how collective and connected approaches to creativity which are based on equal footing are effective in feeling better in oneself. And in how these interconnected actions can give each of us individual strength inside. Enabling people to feel that they can make changes for themselves by creating an environment that is supportive and compassionate.
- Finally, they highlight that art does not happen in a void and that engaging meaningfully with the past, present and future of our spaces is key to enhanced healing environments. In Naoshima they prioritise an immersive and full sensory experience that makes the most of art in natural environments. For Shikoku the hospital's art programme is rooted in its historic and social culture and deeply connected to its community through art. Moreover, understanding the rich interplay between these different spaces has rich potential to draw from to support health outcomes.

Concluding Thoughts

- How does the way we talk about art impact who can benefit from it to live healthier and happier lives?
- How can we find new ways to bring art into our everyday experiences to support health and wellbeing?

- How can new models of practice help us to break down barriers to ensure people all can access the power of the arts to support their health at any stage in their life?

The way we talk about Creative Health does make a difference. Across the three strands, although all focused on supporting health and wellbeing, they each framed it in a different way that best served their audience and their approach. Notably the idea of something being “good for your health” was not the focus.

For *Museum Bathing* the focus was on relaxation, ritual and ways to slow down. It prioritised ease of use of cultural spaces with the idea of encouraging audiences to make regular “dips” as part of daily life in a way that made sense to them and fitted into their lives.

Cultural Prescribing’s practice of active listening and communication with care, was at the heart of its approach to bringing people closer to art in their everyday lives. Its gentle and non-transactional method brought whole communities into the conversation and promoted healthy habits inclusively.

Finally, spiritual and philosophical framings zoomed out from the day-to-day to position art and creativity as a source of daily strength to ground people in their world providing an anchor of hope in times of uncertainty. They equipped people to create their own language around wellbeing and to define what this look liked for them in a way that connected to their lives meaningfully.



Kotora art communicators planning session, Kawasaki, Courtesy of *That! That? Kawasaki*

Importantly all these conceptual framings for Creative Health made people feel seen. They opened up space for people to be their authentic self and affirmed people’s individuality. Rather than suggesting they do something that would benefit their health they focused on empowering people to discover what they wanted and needed in their lives. And what was relevant and interesting to them.

This interest-led approach enabled people to have agency in their own health and wellbeing and to understand on their own terms what role art could play in their lives. This real deep listening and attunement to people improved cultural spaces, and in

some cases, whole communities' capacity to promote a sustainable and longer-term relationship with the arts for wellbeing. It also made fewer assumptions about people based on diagnosis or medical condition and encouraged people to connect with themselves.

Importantly these different approaches also intentionally differentiated themselves from a clinical relationship between professional and patient. Collaborative and equitable models collapsed the hierarchical dynamic to one of more human-to-human. This removed the stigma of living with ill physical or mental health and created a supportive and non-judgmental environment. These concepts too looked more holistically at people's lives as a whole and how the arts can be part of this rather than looking at a problem that can be solved by creativity.

Enabling and broadening the people who are able to support people's health and wellbeing in their community was also significant. A whole-citizen approach amplified the work of arts and health organisations to bring people into contact with the arts to support their health. It also empowered people to realise the cultural assets around them in ways that were relevant to them and created new and exciting ways to bring people and art together.

Ultimately, they all recognised that being communicated with care is critical for our personal wellbeing and that as arts professionals seeing the person first is the most important thing we can do to support someone's health and wellbeing. Focusing time on really listening to our diverse communities and creating the right conditions for people to feel safe and seen in our spaces will enable them to make the most of the art and culture in their lives and as a result live in a way that is healthier and happier.

Recommendations

Ease - Prioritising ease in our cultural environments and approaches to participation can support more people to engage with arts in their daily life. What rituals or daily practices, like taking a museum bath is to Japan, might we find in a UK context to weave in creativity to our everyday? On an institutional level too, how can adapt ourselves to consider this holistically from the way people are welcomed to site, to the words we use to message our offers, and also to the way our spaces are designed and involve staff, volunteers and audiences.

Small and regular - *Museum Bathing* demonstrates how people can get lots of health benefits from short and frequent use of museums and galleries to regulate their nervous system and build resilience. Consider how you might enable this through programmes and project work and what barriers there may be to people accessing your provision in this way. These might be attitudinal, structural, economic or geographical. Libraries too which are often hubs for a range of services might also be good reference points. Rather than look to specific funding for creative health projects, can we consider making small-scale changes and adaptations that shift audiences behaviour and relationships towards museums?

Slowing down and zooming out - Japanese practices focused on art's amazing ability to take us out of our day to day worries through both providing opportunities to pause and relax, and by offering a wider perspective that enables us to find new headspace. Exploring ways to do both of these things creatively and meaningfully for

all our visitors on their own terms could ensure that our spaces are a vital resource for communities and can be a big part of community-based care. Adaptations to programme or trying new interpretation could be an effective and low-cost way to bring in these concepts into existing activities.

Communication is care - These models show that communication that moves beyond exchange to one of mutual understanding enables people to feel connected to their community and self. How can we make space to actively listen to all our audiences? Can we channel our engagement skills with collections to better understand needs? What training and support might we be able to provide to enable communities to care for one another? Might we find new ways for the cultural and health sector work together to think across neighbourhood health policy by taking meaningful communication as a focus?

Involve more people - Enabling us all to be "cultural linkworkers" and giving people from across our community the agency to talk about art and culture could open up access to a broader range of people and reduce the stigma about needing help. It could also allow for a more collective responsibility to health and happiness for everyone, and support sustainable neighbourhood-based care. Volunteering could be an interesting area in which to explore this approach particularly when focused on a local placemaking approach.

Interest-led - Allow people to show the way and follow their cues in how best to integrate creativity into their lives. Wellbeing is personal and will look different for everyone. Projects in Japan understood this deeply in their design, and their level of trust with their audiences. Sector policy could support more active listening to tune in and models of co-production and co-design to give people agency in their own wellbeing. This means building in time at the outset of projects in planning to allow this to happen, and different funding models towards Creative Health. Leaving space for things to grow organically could also be key to being responsive and relevant in preventative health care. Funders could also show flexibility in outcomes at the application stage.

Measuring impact - Furthering our understanding of the unique environment of museums and galleries to support physical and psychological health is important to realise their social value. *Museum Bathing* offers an interesting model which could be applied in a UK context. Moreover, developing new models that move beyond short-term or purely measurable outcomes is essential if we are to fully understand the impact that arts and culture have from interpersonal relationships through to the community level. Narrative based tools like the Most Significant Change methodology[8] perhaps could be useful to identify key enablers or new approaches could be forged in response. Policy could also take into account different ways to assess impact that go beyond quantitive data and that take a longitudinal look.

[8] Willetts, J., & Crawford, P. (2007). The most significant lessons about the Most Significant Change technique. Development in Practice, 17(3), 367–379. https://doi.org/10.1080/09614520701336907

Appendix One: Research Itinerary

Tokyo [2/1/2026-11/01/2026]	Meet Sawako INANIWA at the National Centre of Art, Tokyo. Visiting creative health projects in Tokyo with Sawako including Douzen Community Hospital.. Meet Hayato FUJIOKA at Tokyo Metropolitan Museum of Art and observing Tobira projects with volunteers and local community partners in Ueno. Meeting with Nagako KAKEHI, National Museum of Western Art, Tokyo	5/1/2026 5-8/1/2026 9/1/2026 13/1/2026
Nagoya [11/1/2026-16/1/2026]	Day trip to meet Director Mitsuo KANI and visit Minokamo City Museum. Research Cultural Forest Initiative. https://www.forest.minokamo.gifu.jp Meet Ayako UMEMURA and visit Nagoya University Museum. https://www.num.nagoyau.ac.jp/english/index.html Nanzan university Museum of Anthropology to meet Professor KUROSAWA https://rci.nanzan-u.ac.jp/museum/ North-Nagoya City Museum of History and Folklore to meet Director ITO and Iki Iki Tai volunteers ,https://www.city.kitanagoya.lg.jp/rekimin/english/1006061.html	14/1/2026 15/1/2026 15/1/2026 16/1/2026
Osaka [16/1/2026-18/1/2026]	Time in Osaka Transfer for ferry to Naoshima	16/1/2026-18/1/2026

Naoshima [19/1/2026-21/1/2026]	Meet Ayano FUJIWARA and visit to Benesse Art Site. Observations of Benessee Art Site Programmes. TBC	20/1/2026 - 21/1/2026
Okayama [22/1/2026]	Return ferry transfer from Naoshima.	22/1/2026
Fukuoka [23/1/2026-30/1/2026]	Kyushu Sangyo University International Symposium 24/1/2026 Meet and interview Professor OGATA and team at Kyushu Sangyo University to research Museum Bathing project - past projects and findings. Visit to Fukuoka museums to interview about museum bathing and creative health programmes. ● Nogata Tani-o Art Museum Meeting Curator ICHIKAWA ● Kitakyushu Museum of Natural History & Human History Meeting Director MANABE ● Kyushu National Museum Meeting NISHIJIMA ● Fukuoka Asian Art Museum Meeting with KAMACHI. ● Fukuoka Art Museum Meeting with SAKITA	24/1/2026 24/1/2026? 27/1/2026-29/1/2026
Okinawa [31/1/2026-5/2/2026]	Visits to Okinawa museums to interview about museum bathing and creative health programmes. ● Okinawa Prefectural Museum & Art Museum (Director SATOI) ● Chatan Town Museum (Curator FUJI – conducting a museum bathing experiment and hosting a lecture by Jane san) ● Onna Village Museum (Curator GOTO)	2/2/2026? 3/2/2026 4/2/2026

Fukuoka [5/2/2026-11/2/2026]	Visits to Fukuoka Museums and observations of programmes where possible. ● Kyushu Sangyo University Art Museum Meeting with NAKAGOME san, FUKUMA san,TSUCHIYA san,YOSHIDA san ● Iwatoyama History and Culture Exchange Center Meeting with Director ISAKI san. ● Meeting with TESHIMA san, linkworker, and MISUMI san Fukuoka City Museum at the Kyushu University ● Visit to Kumamoto City Contemporary Art Museum meeting Kumamoto Meeting Curator IWASAKI san. ● Reflection time with Professor OGATA and team at Kyushu Sangyo University if convenient.	6/2/2026 and 10/2/2026 9/2/2026 10/2/2026
Kansai area [11/2/2026 - 15/2/2026]	Meeting with Ayaka IKEDA, Curator, Hiroshima Prefectural Art Museum Meeting with Mana SATO Tottori Prefectural Museum of Art	13/2/2026 14/2/2026
Tokyo [15/2/2026-22/2/2026]	Reflection Meeting with Sawako INANIWA and at the National Centre of Art, Tokyo. Interview with “aa-tomo” Art and Wellbeing magazine, Tokyo. Meeting with Tomohiro NISHI Kawasaki Municipal Ida Hospital, Living Room Clinic/Social Prescribing. Meeting with Chika SUDO British Council Japan on creative health programmes and reflections with local Japanese colleagues. Meeting with Atsuko SAKAI, Head of Education, National Museum of Western Art, Tokyo.	16/2/2026 18/2/2026 19/2/2026
Tokyo Haneda -> London Heathrow [22/2/2026]	Return flight to the UK	