Professional paper

Public Presentation of the Results of the National Mapping of Stakeholders Active in the Field of Arts and Health in Croatia

Culture and Health: A European Cultural Policy Perspective

Prof. Dr. Art. **Jasmina Pacek**, univ. spec. art. therap.
Academy of Art and Culture in Osijek, University of Josip Juraj Strossmayer in Osijek
jasminapacek@yahoo.com

Prof. **Josipa Forjan**, PhD.
Economy Faculty in Osijek, University of Josip Juraj Strossmayer in Osijek
josipa@efos.hr

Assist. Prof. **Sanela Janković**, MFA
Academy of Art and Culture in Osijek, University of Josip Juraj Strossmayer in Osijek
sanelajmarusic@gmail.com

Magdalena Rubeša, mag. edu., univ. spec. art. therap.
Croatian Art Therapy Association, HART
magdalenapenovic@gmail.com

Krunislav Stojanovski, MA (Arts), univ. spec. art therap.
Croatian Art Therapy Association, HART
krunislav.stojanovski.kiz@gmail.com

Assoc. Prof. Dr. Art. **Tihana Škojo**, univ. spec. art therap.
Academy of Art and Culture in Osijek, University of Josip Juraj Strossmayer in Osijek
tihana.skojo@skojo.hr

Abstract

This professional paper reports on the public presentation of the results of the study Mapping Stakeholders Active in the Field of Arts and Health in Croatia. Although the primary focus of the paper is the research itself, it also situates the

findings within the broader context of European cultural policies and examples of good practice emerging from the fields of education, healthcare, culture, social welfare, and civil society organizations, thereby highlighting the inherently interdisciplinary and cross-sectoral nature of the arts and health field.

The first national mapping study of stakeholders active in the field of arts and health in Croatia was conducted in 2025 following the initiative of the Ministry of Culture and Media of the Republic of Croatia and organized by the Croatian Art Therapy Association. The mapping process was aligned with the European guidelines outlined in the report Culture and Health: Time to Act (Europen Commission, 2025) and aimed to identify professionals and organizations, analyze their practices and needs, and establish a foundation for the development of public policies and a national digital registry.

The study included 356 professionals and 316 organizations and employed a combination of quantitative and qualitative research methods. The findings indicate considerable diversity of practice, with the visual arts representing the most prevalent artistic modality and creative arts therapies accounting for a substantial proportion of activities, among which art therapy was the most frequently reported modality. Activities are most commonly implemented within the non-governmental and cultural sectors, while representation within healthcare and social welfare institutions remains comparatively limited. The findings further reveal a trend toward professionalization alongside the continued prevalence of partial and non-standardized training pathways, suggesting the need for clearer educational standards and a more coherent professional framework.

The organizational landscape is characterized by the prevalence of civil society organizations and a substantial reliance on external collaborators, indicating limited institutional capacities. Key identified needs include financial support, professional education and training, networking opportunities, and increased visibility. Respondents also emphasized the necessity of integrating arts and health practices into healthcare, educational, correctional, and social welfare systems, thereby supporting the institutionalization of the field and fostering both theoretical development and the advancement of practice.

In conclusion, the findings highlight the need for a coherent national arts and health strategy that would facilitate systematic collaboration among the cultural, healthcare, educational, and social welfare sectors.

Keywords: arts and health; stakeholder mapping; creative therapies; national strategy; European policies

Introduction

The mapping study of stakeholders active in the field of arts and health was initiated by the Ministry of Culture and Media of the Republic of Croatia and by the Croatian Art Therapy Association. This initiative was informed by European guidelines on culture and health developed by the European Commission's Open Method of Coordination (OMC) Working Group. Within the European Union, the Open Method of Coordination represents a form of "soft law," or intergovernmental policy-making, which does not result in binding legislation or require amendments to national laws. It is based on cooperation among Member States through the joint definition of objectives, the use of indicators and peer-review mechanisms, while the European Commission assumes a supervisory role (European Commission, n.d.).

The field of culture and health was identified as a priority area within the EU Work Plan for Culture 2023–2026. As a result of the Working Group's two-year collaboration, the report Culture and Health: Time to Act (European Commission, 2025) was published, accompanied by summaries in all oficial languages of the European Union and a collection of examples of good practice. The report serves as a key reference framework for the development of policies and practices in the field.

The recognition that arts, culture, and creativity play a vital role in healing processes and overall well-being, and that they should be integrated into public health systems across Europe reflects a broader shift from a predominantly biomedical model of health toward a biopsychosocial approach. A growing body of research demonstrates that participation in cultural activities reduces stress, contributes to improved mental health, supports disease prevention and treatment, enhances quality of life, and fosters social inclusion, particularly among vulnerable populations such as young people, older adults, individuals living with chronic illnesses, migrants, and refugees.

Creative activities such as dance, music, and visual arts, support mental health and emotional expression. They may also contribute to slowing cognitive decline, mitigating neurological deterioration, and strengthening community relationships and resilience.

A prominent example is the *Arts on Prescription* programme, which involves general practitioners who refer patients to cultural and artistic activities. Evidence indicates that these interventions enhance participants' self-confidence, emotional well-being, and social inclusion. The report advocates integrating culture into healthcare systems through the development of national culture and health strategies, the incorporation of arts into mental health promotion and prevention policies, the strengthening of

partnerships between healthcare services, cultural institutions, educational and social sectors, investment in artists and cultural workers, and increased support for research, innovation, and culture-and-health projects.

The report highlights three Croatian initiatives as examples of good practice: the pan-European programme *Film in Hospital*, the artistic project *Healing Nature* by Melinda Šefčić and Lea Vidaković, and the national programme *Born to Read* , implemented through the collaboration of the Ministry of Culture and Media of the Republic of Croatia and the Ministry of Health of the Republic of Croatia, with the support of the Croatian Paediatric Society and the Croatian Society for Social and Preventive Paediatrics.

In line with these guidelines, the aim of the Croatian mapping study was to identify professionals and organizations active in the field of arts and health and to analyse the structure, practices, and needs of the sector to establish a digital registry and formulating recommendations for its future development. The mapping study, whose findings were presented at the public event described in this paper, was conducted by a working group of the Croatian Association for Art Therapy (HART) consisting of Prof. dr. Jasmina Pacek, univ. spec. art therap.; Krunislav Stojanovski, MA (Arts), univ. spec. art therap.; Assoc. Prof. dr. art. Tihana Škojo, univ. spec. art therap.; Assist. Prof. Sanela Janković, MFA; and Magdalena Rubeša, MEd, univ. spec. art therap., with statistical analysis conducted by Prof. Josipa Forjan, PhD.

Public Presentation of the Results of the Stakeholder Mapping Study in the Field of Arts and Health

On December the 1st 2025, the first public presentation of the results of the national mapping study of stakeholders active in Arts and Health in Croatia was held in the Aula of the Rectorate at Josip Juraj Strossmayer University of Osijek. The University was selected as the venue due to its unique position as the only higher education institution in Croatia that provides systematic academic education in the field of creative therapies through the collaboration of the Academy of Arts and Culture and the Faculty of Medicine in Osijek. This training is delivered through a University specialist programme in Creative Therapies, comprising specializations in art therapy, dramatherapy, music therapy, and dance and movement therapy.

The opening address on behalf of the host institution was given by the Rector of Josip Juraj Strossmayer University of Osijek, Professor Drago Šubarić, who welcomed the initiative and emphasized Osijek's role as a leading centre for the development of creative therapies in Croatia. He also

highlighted that members of the working group responsible for the mapping study are among the programme's faculty and alumni of this specialist programme.

The Minister of Culture and Media of the Republic of Croatia, Nina Obuljen Koržinek, PhD, emphasized the importance of stakeholder mapping as a foundation for establishing a national electronic registry that would enable clearer identification and clasification of stakeholders in the field and create conditions for targeted financial support through various funding mechanisms and policy measures. She further noted that the first dedicated funding resources for civil society organizations working in the field of culture and health had been secured through the Kultura Nova Foundation.

The Minister also highlighted Croatia's active participation in the European Union's Open Method of Coordination (OMC) Working Group on Culture and Health. Throughout its two-year mandate, the Working Group focused on raising awareness of the positive impacts of culture, fostering and deepening cross-sectoral collaboration, developing recommendations for the implementation of participatory cultural practices with a particular emphasis on mental health, and identifying examples of good practice across Member States.

Representing the Ministry of Culture and Media, Pia Sopta provided a detailed overview of the OMC Working Group's activities. She noted that its work was informed by several influential international reports and policy documents, most notably the World Health Organization's 2019 scoping review *What Is the Evidence on the Role of the Arts in Improving Health and Well-being? and the report Culture for Health* (2022), published by Culture Action Europe within the framework of a European Commission Preparatory Action. These studies provide substantial evidence supporting positive effects of cultural participation on health, well-being, quality of life, and social cohesion, while also demonstrating significant societal and economic benefits. The key recommendations included: the integration of culture and health across all relevant policy domains; the strengthening of cross-sectoral collaboration and institutional synergies at national and European levels; increased financial investment; the implementation of social prescribing models; and systematic efforts to raise awareness of the importance of the arts and health field.

The next segment of the programme presented the activities of the Croatian Art Therapy Association (HART), the findings of the stakeholder mapping study, and selected examples of good practice from the fields of education, healthcare, culture, social welfare, and civil society. Together, these presentations highlighted the interdisciplinary and cross-sectoral nature of the Arts and Health field.

Findings of the Stakeholder Mapping Study in the Field of Arts and Health

The findings of the stakeholder mapping study were presented by Prof. Dr. Art. Jasmina Pacek, univ. spec. art therap., Vice-President of HART and Coordinator of the Art Therapy Programme at the Academy of Arts and Culture in Osijek. In her previous role as Vice-Dean for Academic Programmes (2013–2020), she chaired the committee that established the University's Postgraduate Specialist Programme in Creative Therapies.

In the introductory section of her presentation, Pacek outlined the conceptual framework of the arts and health field, emphasising that it encompasses a broad range of practices linking artistic expression with the promotion of health, well-being, and social inclusion. Particular attention was given to the distinction between two interconnected but conceptually distinct domains: arts-based practices focused on creativity and expression, and arts therapies, which employ artistic processes as professionally informed interventions that support health and well-being.

Arts-based practices are primarily oriented toward creative engagement, artistic production, and the enhancement of well-being through enjoyment, recreation, and self-expression, whereas arts therapies utilize the artistic process as a medium for communication, reflection, and personal insight, with the aim of achieving therapeutic, psychological, social, and developmental outcomes. These approaches also differ in terms of professional qualifications, as arts therapies require specialized professional education and training in creative therapies.

Participants were recruited through a collaborative process involving the HART working group and the Ministry of Culture and Media of the Republic of Croatia. The selection process aimed to include relevant professionals and organizations active in the arts and health field while ensuring regional representation across different creative therapy disciplines.

The study sample was limited by the response rates of professionals and organizations. The actual number of professionals active within the healthcare sector is therefore likely to be larger. This methodological limitation should be considered when interpreting the findings, particularly those concerning the integration of arts-based and arts therapy practices within healthcare systems.

The mapping study targeted two stakeholder groups: professionals, defined as individuals actively working in the field of arts and health, and organizations, defined as legal entities implementing arts and health activities within the sector. The final sample comprised 356 professionals and 316 organizations.

Data were collected through an online questionnaire distributed via email between June and October 2025 using the Alchemer platform. The survey gathered both quantitative and qualitative data, which were analysed using a mixed-methods approach that incorporated descriptive statistics, content analysis, and thematic analysis.

Survey questions allowing multiple responses could yield percentages exceeding 100%; the tables showing this data were marked with an asterisk (*).

The findings were organised into series of thematic categories. For professionals, these included types of cultural activities, forms of practice, education and training, education and training in creative therapies, education and training in artistic disciplines, implementation settings, professional afiliations and associations, and professional fields of practice and occupations. For organizations, categories included legal status, areas of organizational activity, geographical distribution by county, implementation of mental health-related activities, and future plans and support needs. Given the scope of this article, only the principal findings are presented.

Mapping Results: Professionals

This section presents findings derived from questionnaire data provided by participants working in the field of Arts and Health (Tables 1 - 12).

The results indicate that respondents represent a diverse range of cultural activities (Table 1), categorized according to the classification system of the Ministry of Culture and Media of the Republic of Croatia. The largest proportion of respondents (45.6%) identified the visual arts as their primary field of practice, while the remaining categories ranged from 7.9% to 27%.

Table 1*

Types of Cultural Activities Practised by Professionals

Cultural activities*	Responses		% Respondents
	n	%	
Visual arts	162	23.2	45.6%
Innovative arts practice	99	14.2	27.9%
Music	94	13.5	26.5%
Literature	87	12.5	24.5%
Drama	83	11.9	23.4%
Dance and Movement	74	10.6	20.8%
Other	39	5.6	11.0%
Audiovisual art	32	4.6	9.0%
Design	28	4.0	7.9%
Total	698	100.0	196.6%

**Note: For survey items allowing multiple responses, percentage totals may exceed 100%.*

Table reprinted from Pacek et al. (2025), "Mapping of the Stakeholders Active in Arts and Health," and used with the permission of the authors.

Most respondents practice various forms

of art (76.1%), while approximately half (50.6%) implement or incorporate creative arts therapies (Table 2). These findings indicate a strong integration of therapeutic and artistic approaches within professional practice, as a substantial proportion of respondents are simultaneously involved in both artistic creation and therapeutic work. Among the creative arts therapies, art therapy was the most frequently represented discipline (49.7%), whereas the remaining therapeutic modalities were more evenly distributed (Table 3).

Table 2*

Types of Practice within the Arts and Health Field

Types of Practice*	Responses		% Respondents
	n	%	
Creative arts therapies (art therapy, music therapy, dance movement therapy, dramatherapy)	180	39.9	50.6%
Art	271	60.1	76.1%
Total	451	100.0	126.7%

*Note. Percentages exceed 100% because respondents were able to select multiple answers.

The table is reprinted from Pacek et al. (2025), Mapping Stakeholders Active in the Field of Arts and Health, and is published with the authors' permission.

Table 3*

Creative Therapy Disciplines Practised

Creative arts therapies discipline*	Responses		% Respondents
	n	%	
Art therapy	89	34.2	49.7%
Music therapy	40	15.4	22.3%
Dance movement therapy	46	17.7	25.7%
Dramatherapy	34	13.1	19.0%
Other	51	19.6	28.5%
Total	260	100.0	145.3%

*Note. Percentages exceed 100% because respondents were able to select multiple answers.

The table is reprinted from Pacek et al. (2025), Mapping Stakeholders Active in the Field of Arts and Health, and is published with the authors' permission.

Analysis of respondents' educational background (Table 4) indicates that the majority has appropriate qualifications (62.4%), while one quarter had not received formal training (25.0%) and 12.6% were still undertaking professional education. These findings suggest a clear trend towards professionalisation, while also highlighting the need for the continued development of educational standards. The University Specialist Programme in Creative Arts Therapies at the Academy of Arts and Culture in Osijek stands out as the principal pathway to full professional qualification in Croatia, whereas a smaller proportion of practitioners obtained their qualifications abroad. Partial qualifications are most commonly acquired through higher education institutions, including the Faculty of Education and Rehabilitation Sciences at the University of Zagreb, as well as through various forms of non-formal education (Table 5).

Furthermore, the results presented in Table 6 indicate that 54.6% of respondents had obtained a full qualification to practise as creative arts therapists, while 45.4% possessed partial or supplementary training. With regard to artistic education, the majority of respondents had graduated from the Academy of Fine Arts (64.6%), whereas 20.3% had completed

Table 4

Training Status for Creative Arts Therapy and/or Artistic Practice

Response	n	%
Yes	222	62.4
No	89	25.0
Currently undertaking training	45	12.6
Total	356	100.0

Note. The table is reprinted from Pacek et al. (2025), Mapping Stakeholders Active in the Field of Arts and Health, and is published with the authors' permission.

Table 5*

Types of Education Specific to Creative Arts Therapists

Educational pathway*	Responses		% Respondents
	n	%	
University Specialist Programme in Creative Arts Therapies (art therapy, music therapy, dramatherapy, dance movement therapy), Academy of Arts and Culture in Osijek in collaboration with the Faculty of Medicine Osijek	43	23.9	33.1
Master's degree (MA/MSc) in creative arts therapies obtained at a higher education institution abroad	10	5.6	7.7
Individual courses or modules in creative arts therapies within higher education programmes	15	8.3	11.5
Multi-year professional training programmes leading to full professional qualification recognised by the relevant professional association	43	23.9	33.1
Workshops or short-term training programmes that do not lead to full professional qualification but provide specialised knowledge in specific areas of creative arts therapies	45	25.0	34.6
Other education	24	13.3	18.5
Total	180	100.0	138.5

+*Respondents were invited to provide further details regarding the selected educational pathway.*

**Note. Percentages exceed 100% because respondents were able to select multiple answers. The table is reprinted from Pacek et al. (2025), Mapping Stakeholders Active in the Field of Arts and Health, and is published with the authors' permission.*

secondary-level arts education and 43.8% reported additional forms of professional training, including workshops and spe-cialised programmes.

Table 6

Types of Educational Qualifications for Creative Arts Therapists

Type of qualification	n	%
Full qualification	65	54.6
Partial or supplementary qualification	54	45.4
Total	119	100.0

Note. The table is reprinted from Pacek et al. (2025), Mapping Stakeholders Active in the Field of Arts and Health, and is published with the authors' permission.

Table 7*

Settings in Which Arts and Health Activities Are Delivered

Setting*	Responses		% Respondents
	n	%	
Civil society organisations (non-governmental organisations/associations)	193	22.0	55.1
Cultural institutions (museums, galleries, theatres, libraries, etc.)	190	21.6	54.3
Educational institutions (kindergartens, schools, universities, etc.)	166	18.9	47.4
Private practice	143	16.3	40.9
Social welfare organisations and institutions (residential homes for older adults, children's homes, social welfare centres, family centres, etc.)	92	10.5	26.3
Healthcare institutions (hospitals, primary healthcare centres, etc.)	65	7.4	18.6
Justice system institutions (prisons, juvenile detention facilities, etc.)	15	1.7	4.3
Other	15	1.7	4.3
Total	879	100.0	251.1

**Note. Percentages exceed 100% because respondents were able to select multiple responses. The table is reprinted from Pacek et al. (2025), Mapping Stakeholders Active in the Field of Arts and Health, and is published with the authors' permission.*

Analysis of the institutional context (Table 7) shows that Arts and Health activities are most frequently implemented within civil society organisations (55.1%) and cultural institutions (54.3%), followed by educational institutions (47.4%) and private practice (40.9%). Such activities are less commonly delivered within the social welfare system (26.3%) and healthcare institutions (18.6%)

Analysis of participant groups (Table 8) indicates that the largest proportion of programmes targeted the general population (adults, 65.3%; children, 58.2%; adolescents, 52.3%), suggesting a strong orientation towards preventive and developmental approaches. At the same time, a substantial proportion of activities were

directed towards vulnerable populations, including children and young people with developmental disabilities, attention and behavioural dificulties, individuals living with chronic physical and mental health conditions, as well as older adults and people receiving palliative care.

Table 8*

Participant Groups Engaged in Arts and Health Activities

Participant group*	Responses		% Respondents
	n	%	
Children (general population)	205	11.1	58.2
Children with attention disorders	117	6.3	33.2
Children with developmental disabilities	121	6.5	34.4
Children with acute and chronic illnesses	43	2.3	12.2
Children with behavioural dificulties	100	5.4	28.4
Adolescents (general population)	184	10.0	52.3
Adolescents with attention dificulties	89	4.8	25.3
Adolescents with developmental disabilities	73	3.9	20.7
Adolescents with acute and chronic illnesses	36	1.9	10.2
Adolescents with behavioural dificulties	86	4.7	24.4
Adults (general population)	230	12.4	65.3
LGBTQ+ population	81	4.4	23.0
Military veterans with PTSD and their family members	38	2.1	10.8
Adults living with mental illness	76	4.1	21.6
Persons with substance use disorders	39	2.1	11.1
Persons with physical disabilities	81	4.4	23.0
Oncology patients	41	2.2	11.6
Members of dysfunctional families	67	3.6	19.0
Offender population	28	1.5	8.0
Older adults and people receiving palliative care	94	5.1	26.7
Other	20	1.1	5.7
Total	1849	100.0	525.3

**Note. Percentages exceed 100% because respondents were able to select multiple responses. The table is reprinted from Pacek et al. (2025), Mapping Stakeholders Active in the Field of Arts and Health, and is published with the authors' permission.*

Analysis of membership in professional associations revealed that 56.7% of respondents belonged to one or more organisations. Among arts organisations, the Croatian Association of Artists was the most frequently represented (12.6%), while the Croatian Art Therapy Association was the most frequently represented professional organisation in the field of creative arts therapies (11.6%).

In terms of professional background (Table 9), artists constituted the largest group of respondents (61.0%), followed by creative arts therapists (8.0%). Psychologists, psychotherapists and counselling therapists together accounted for approximately 14% of respondents, while healthcare and social care professionals represented around 8% of the sample.

Table 8*

Professional Background of Respondents

Profession*	Responses		% Respondents
	n	%	
Artist	216	40.8	61.0
University Specialist in Creative Arts Therapies – Art therapy	12	2.3	3.4
University Specialist in Creative Arts Therapies – Music therapy	12	2.3	3.4
University Specialist in Creative Arts Therapies – Dramatherapy	2	0.4	0.6
University Specialist in Creative Arts Therapies – Dance movement therapy	2	0.4	0.6
Medical doctor (other specialties)†	4	0.8	1.1
Psychologist	17	3.2	4.8
Social worker	3	0.6	0.8
Educational rehabilitation specialist	12	2.3	3.4
Speech and language therapist	1	0.2	0.3
Social pedagogue	3	0.6	0.8
Occupational therapist	3	0.6	0.8
Nurse	6	1.1	1.7
Psychotherapist or counselling therapist†	33	6.2	9.3
Trainee psychotherapist or counselling therapist†	13	2.5	3.7
Student†	24	4.5	6.8
Other profession†	166	31.4	46.9
Total	529	100.0	149.4

† Respondents selecting these categories were invited to provide further details.

**Note. Percentages exceed 100% because respondents were able to select multiple responses. The table is reprinted from Pacek et al. (2025), Mapping Stakeholders Active in the Field of Arts and Health, and is published with the authors' permission.*

Mapping Results – Organisations

The second component of the mapping study focused on organisations active in the field of Arts and Health. According to legal status (Table 10), the largest proportion comprised non-profit organisations (50.9%), followed by public institutions (24.4%), which represent the principal institutional framework for the implementation of programmes in the fields of culture, education and healthcare, and arts organisations (14.6%). Other legal forms included commercial companies, sole proprietorships, religious communities, and local and regional government authorities.

Table 10

Legal Status of Organisations

Legal status	n	%
Civil society organisation (association)	161	50.9
Public institution	77	24.4
Art organisation	46	14.6
Sole proprietorship	8	2.5
Commercial company	8	2.5
Local or regional government authority	8	2.5
Other	6	1.9
Religious community	2	0.6
Total	316	100.0

Note. The table is reprinted from Pacek et al. (2025), Mapping Stakeholders Active in the Field of Arts and Health, and is published with the authors' permission.

With regard to organisational activities, the largest proportion operated in the performing arts (approximately 30%), including theatre, music, dance, folklore, choral singing, drama education, and amateur cultural activities. These were followed by fine, visual and multimedia arts (approximately 20%), culture and cultural heritage (approximately 15%), arts education (approximately 15%), human rights, social inclusion and health (approximately 12%), literature, publishing and library services (approximately 10%), and democratic political culture and international cooperation (approximately 8%). Less frequently represented fields included interdisciplinary and developmental practices (approximately 7%) and public and institutional activities (approximately 3%).

The geographical distribution of organisations revealed a marked concentration in the City of Zagreb (42.4%), followed by Primorje–Gorski Kotar County (6.6%), Istria County (6.3%), Split-Dalmatia County (6.3%), and Osijek-Baranja, Zadar and Zagreb Counties, each accounting for 5.1% of the sample. All remaining counties were represented to a lesser extent.

Within organisations, Arts and Health activities (Table 11) were predominantly

implemented through artistic practice (70.3%), while approximately one-third of organisations (29.7%) incorporated elements of creative arts therapies. These findings indicate the increasing integration of creative arts therapies into institutional and project-based programmes.

Table 11*

Framework for the Delivery of Arts and Health Activities

Type of practice*	Responses		% Respondents
	n	%	
Creative arts therapies (art therapy, music therapy, dance movement therapy, dramatherapy)	96	29.7	35.4
Artistic practice	227	70.3	83.8
Total	323	100.0	119.2

**Note. Percentages exceed 100% because respondents were able to select multiple responses.*

The table is reprinted from Pacek et al. (2025). Mapping Stakeholders Active in the Field of Arts and Health, and is published with the authors' permission.

Art therapy (26.4%) and dance movement therapy (23.1%) accounted for the largest proportion of creative arts therapy activities (Table 12), followed by music therapy (17.6%), while dramatherapy represented the smallest proportion (13.7%). The category "Other" (19.2%) included expressive and integrative approaches, such as bibliotherapy, storytelling, and other expressive methods.

Table 12*

Creative Arts Therapy Disciplines

Discipline*	Answers		% Respondents
	n	%	
Art Therapy	48	26.4	50.5%
Music Therapy	32	17.6	33.7%
Dance and Movement Therapy	42	23.1	44.2%
Drama Therapy	25	13.7	26.3%
Other	35	19.2	36.8%
Total	182	100.0	191.6%

**Note: For survey items allowing multiple responses, percentage totals may exceed 100%.*

Table reprinted from Pacek et al. (2025), "Mapping of the Stakeholders Active in Arts and Health," and used with the permission of the authors.

The distribution of service providers indicates that 46.5% of activities are delivered by permanently employed staff, whereas 85.7% involve external collaborators. This finding suggests a substantial reliance on both internal and external human resources. At the same time, the high proportion of external collaborators may point to limited employment capacities within organizations. This pattern may be partially attributed to the absence of formally recognized creative therapy positions within institutional employment classifications and stafing structures.

From a creative arts therapies perspective, this finding is particularly noteworthy, as it highlights continuing challenges related to the professional integration of creative therapists within public systems. Although creative therapy approaches are increasingly represented across cultural, educational, healthcare, and social welfare contexts, their implementation continues to rely largely on project-based funding, external expertise, and temporary forms of engagement. Such conditions may limit continuity of service provision, professional development opportunities, and long-term sustainability of programmes.

Organizational Support Needs

The final section of the mapping study examined organizational perceptions of the forms of support required for the implementation and development of activities in the field of Arts and Health. More than 300 responses were collected and analysed through qualitative coding and thematic analysis, resulting in the identification of 15 categories of organizational support needs.

Financial support emerged as the most frequently reported need (78%), reflecting the sector's substantial dependence on project-based funding and limited access to sustainable financial resources. This was followed by infrastructural and stafing needs (44%), collaborations with external experts (42%), education and professional development opportunities (40%), and networking and partnership-building (38%).

Additional support needs included promotion and visibility (29%), material and technical resources (27%), programme implementation support (26%), and improved access to target populations and service users (22%). Less frequently reported, though still noteworthy, were needs related to administrative and organizational support (19%), research and evaluation (16%), policy development and system-level measures (15%), logistical support (10%), digital tools and platforms (8%), and support for work with specific user groups (7%).

The identified support needs suggest a sector that is simultaneously expanding and consolidating. On the one hand, organizations demonstrate substantial engagement and an increasing capacity for programme delivery across diverse settings. On the other hand, the predominance of identified needs for financial resources, professional education, stafing support, and stronger institutional partnerships suggests that the field remains in a relatively early phase of structural development.

Particularly noteworthy is the identified need for research and evaluation, which may reflect growing awareness among practitioners and organizations of the importance of evidence-informed practice. This finding is consistent with broa-

der European developments in the arts and health field, where increasing emphasis is placed on outcome evaluation, impact measurement, and strengthening the evidence base for policy and practice.

Taken together, these findings suggest that the future development of the Croatian arts and health sector will require not only increased financial investment but also coordinated policy measures supporting professional recognition, workforce development, cross-sector collaboration, and the establishment of sustainable institutional frameworks. Such measures could facilitate the integration of arts-based and arts therapy interventions into healthcare, educational, social welfare, and community settings, thereby enhancing accessibility, sustainability, and long-term impact.

Recommendations

The findings of the mapping study provide important and practically relevant evidence for informing future efforts toward the institutional recognition and development of the Arts and Health field in Croatia. Overall, the results demonstrate that professionals working in Arts and Health constitute a highly educated professional workforce operating within an interdisciplinary domain situated at the intersection of the arts, psychotherapy, education, rehabilitation, and social engagement.

The sample of 356 professionals active in the field consisted predominantly of artists and practitioners from the fields of creative therapies, psychotherapy, educational rehabilitation, and hybrid professions that integrate artistic, therapeutic, pedagogical, and counselling competencies. A substantial proportion of respondents (62.4%) had obtained a full qualification as a University Specialist in Creative Arts Therapies, while 12.6% were enrolled in formal education programmes leading toward professional qualification. Nevertheless, one-quarter of respondents (25.0%) reported practicing without a formal qualification in creative therapies.

The educational pathways further illustrate both the strengths and challenges of the current professional landscape. While 33.1% obtained their qualifications in Croatia and 7.7% completed professional training abroad, as many as 34.6% reported participation in non-formal education programmes and short-term training courses. This high proportion of non-formal education reflects both considerable professional interest in the field and the existence of opportunities for continuing professional development. However, it also points to a degree of fragmentation within the educational system and highlights the need for clearer competency frameworks and professional standards.

The findings indicate that arts and health activities are most commonly implemented within cultural and educational institutions and civil society organizations, often spanning multiple sectors simultaneously. Professionals reported working with diverse populations, including children, adolescents, individuals with developmental disabilities, military veterans, and older adults, and on average served five different target groups. Such diversity illustrates the adaptability and broad applicability of arts-based and creative therapeutic approaches across the lifespan and within a variety of community and institutional settings.

Importantly, approximately 40% of respondents reported more than 10 years of professional experience in the field. This finding suggests the existence of an established professional base characterized by continuity of practice, accumulated expertise, and sustained sector development. It also further challenges the perception that arts and health represents a newly emerging field, instead indicating that significant professional activity has been taking place for more than a decade despite limited institutional recognition.

Overall, the results suggest that professionals working in arts and health are highly skilled, transdisciplinary, collaborative, and committed to lifelong learning. At the same time, the system within which they operate remains only partially standardized and only partially integrated into existing institutional frameworks. The substantial development achieved thus far, together with the field's considerable developmental potential, underscores the need for systematic coordination of existing educational pathways, the establishment of shared professional standards, the strengthening of professional networks, and the formal recognition of creative therapies within public institutions.

The need for stronger institutional support emerged as a central finding of the study. Respondents consistently emphasized the importance of sustainable funding mechanisms, cross-sectoral and interdisciplinary collaboration, continuing professional development opportunities, and the development of long-term support structures for programme implementation. These findings indicate that despite significant professional commitment and innovation, the sector continues to operate under conditions of limited structural support.

Based on the findings, the HART Working Group formulated a series of recommendations aimed at strengthening collaboration among stakeholders and advancing the strategic development of the field.

The first recommendation concerns the establishment of a national digital registry of professionals and organizations active in arts and health, together with a mechanism for the continuous inclusion of new stakeholders. Such a registry would enhance visibility, facilitate networking, support evidence-based policy development, and provide an important foundation for future research and sector monitoring.

The second recommendation concerns the development of a National Arts and Health Programme. According to the HART Working Group, such a programme should establish funding mechanisms and institutional coordination among relevant ministries, including the Ministry of Culture and Media, the Ministry of Health, the Ministry of Science and Education, the Ministry of Labour, Pension System, Family and Social Policy, and the Ministry of Croatian Veterans. According to HART Working Group, "the programme should facilitate cross-sectoral collaboration while ensuring systematic evaluation of outcomes for individuals and communities." Also, it should „include provisions for sustainable institutional funding mechanisms and dedicated public funding calls", and "envisages the creation of targeted pro-grammes and dedicatead funding opportunities specifically designed to support activities that connect Arts and Health, (....) relevant ministries and European Union funding instruments. (Pacek et al., 2025, p. 55).

From an Arts and Health policy perspective, these recommendations are closely aligned with current European strategic directions outlined in Culture and Health: Time to Act (2025). They reflect a shift from isolated project-based initiatives toward the development of sustainable structures capable of integrating arts-based and creative therapeutic practices into healthcare, education, social welfare, community development, and preventive public health strategies.

Overall, the findings of the national mapping study indicate that Croatia possesses a substantial professional and organizational foundation upon which a coherent national arts and health ecosystem can be built. The challenge ahead lies not in establishing the field itself, but in creating the policy frameworks, institutional recognition, and sustainable support systems necessary for its continued growth and long-term societal impact.

Examples of Good Practice

Examples of good practice drawn from the fields of higher education, healthcare, culture, social welfare, and civil society illustrated the breadth of applications of arts and health practices in Croatia and demonstrated the potential value of interdisciplinary collaboration in promoting health, well-being, social inclusion, and community engagement.

Assoc. Prof. Tihana Škojo, univ. spec. art. therap., Head of the Postgraduate Specialist Programme in Creative Arts Therapies, presented the role of the Academy of Arts and Culture in Osijek as a pioneer in formal creative therapy education in Croatia. Her presentation outlined the development of the programme, its interdisciplinary structure, and its contribution to the professionalization of the creative therapy. The programme was

presented as an example of sustainable collaboration between the Arts and Health sectors, providing a framework for training future practitioners and supporting the development of evidence-informed practice.

A healthcare-sector example was presented by Assoc. Prof. Ivana Haršanji Drenjančević, MD, PhD, from the University Hospital Centre Osijek and the Faculty of Medicine in Osijek. In collaboration with collegues from the Academy of Arts and Culture, a multidisciplinary team developed an illustrated picture book designed to support the preoperative preparation of children and their parents. Using a simple narrative and age-appropriate visual content, the publication aims to reduce anxiety and uncertainty experienced during the period preceding anaesthesiological assessment or surgical procedures. Preliminary observations suggest anxiety levels among both children and parents and improved preparedness for the perioperative experience. Children demonstrated lower levels of fear on the day of surgery, which may partly be attributed to their prior familiarity with the hospital procedures presented in the picture book. This project illustrates how visual communication and artistic design can contribute to patient-centred healthcare and emotional support.

Assoc. Prof. Ana Kurtović, PhD, presented a higher education initiative through the Young Theatre Festival, organized annually since 2017 by Josip Juraj Strossmayer University of Osijek in collaboration with numerous partners. Since 2022, the festival has expanded its programme to include themes of mental health, well-being, and self-care. Professionals from diverse disciplinary and therapeutic backgrounds have contributed to the programme, with particular emphasis on creative therapies as accessible and participatory approaches to promoting psychological well-being through artistic engagement.

The festival has hosted workshops in dance movement therapy, art therapy, music therapy, photo art therapy, dramatherapy, Gestalt therapy, and integrative therapeutic approaches, facilitated by internationally recognized practitioners and educators. The festival demonstrates how higher education institutions can serve as important platforms for promoting mental health literacy, interdisciplinary learning, and public engagement with creative therapeutic practices.

Representing the Museum of Fine Arts in Osijek, Kristina Delalić Vetengl, MA in Art Education, presented several examples of cultural programmes that integrate artistic engagement and well-being. Among these was the Small Art Therapy Festival, originally conceived in 2018 by Assist. Prof. Mia Janković Shentser, univ. spec. art. therap., and developed in collaboration with the Museum. The festival involved students from the

Creative Arts Therapies programme in Osijek and students from the Art Therapy Programme at George Washington University. Art therapy workshops were developed in response to the museum's exhibition of portraits of local aristocratic families, creating opportunities for visitors to explore identity and self-representation through creative processes.

The festival also included an art therapy research project exploring the phenomenon of the selfie and a public lecture on art therapy delivered by Assoc. Prof. Heidi Bardot, ATR-BC, LPAT, then Director of the Art Therapy Programme at George Washington University. Following its successful implementation, the festival was repeated in 2019 at both the Museum of Fine Arts in Osijek and the Museum of Đakovština.

Additional museum initiatives included the project *Come, Let Me Show You*, implemented in partnership with the Centre for Education and Rehabilitation "Ivan Štark" and the Vijuga Association. The project aimed to facilitate the social inclusion of children with developmental disabilities while fostering awareness of the value of personal expression through creative arts workshops.

The project *Osijek Through the Eyes of Ukrainians* showcased artworks created by Ukrainian artists who had settled in Osijek following displacement. Through artistic dialogue, participants explored themes of belonging, cultural identity, adaptation, and intercultural exchange, demonstrating the role of the arts in supporting integration and community cohesion.

Another example, the workshop programme You Matter, You Are Strong, implemented through collaboration between the Museum of Fine Arts and the Marko Babić Secondary School in Vukovar, illustrated how creative visual arts practices can support the development of socio-emotional, cognitive, and creative competencies among young people. Participants actively contributed to the transformation of their school environment by reproducing and exhibiting their own artworks within the school space, fostering self-esteem, collaboration, ownership, and a stronger sense of belonging to the school community. These initiatives reflect the Museum's broader commitment to accessibility and community engagement through a diverse range of programmes, including adult workshops, drawing and literature sessions, and summer art studios for children.

An example from the social welfare sector was presented by Suzana Vargović, educational pedagogue, representing the Breza Social-Therapeutic Community. Drawing on more than 25 years of experience in providing social services to children and young people without adequate parental care, as well as individuals with complex diagnoses and histories of trauma, abuse, neglect, self-harm, suicidal behavior, eating disorders, addiction, aggression, borderline presentations, ADHD, and other psychosocial dificulties, she demonstrated the multifaceted role of the arts within therapeutic and supportive care.

Four levels of application were identified. The first involves the use of artistic activities as therapeutic tools within everyday creative and occupational programmes. The second encompasses the application of creative psychotherapy modalities, particularly with individuals for whom verbal communication may be dificult or limited. These approaches focus on strengthening internal resources, fostering resilience, and facilitating constructive engagement with traumatic experiences. The third level relates to the education of helping professionals, including psychologists, social workers, social pedagogues, and residential care staff, through programmes delivered in collaboration with educators from the Creative Therapies programme throughout Croatia. The fourth level concerns investment in workforce development through financial support for staff members undertaking formal education in creative therapies, thereby strengthening organizational capacity for therapeutic work.

The final example of good practice was presented by Sanela Ravlić, PhD, from the Community Development Association Kreaktiva. In response to the growing concerns surrounding youth mental health, the organization has implemented a range of Erasmus+ projects, including *Kinesthetic Learning, KreARTivity, Creative Therapies in Youth Work, Sheroes, Developing Skills through Art Therapy, Walk the Talk, Ready, Steady, ART*, and *heART beat*. Over the past several years, the organization has collaborated with 20 partner organizations across the European Union, provided training for more than 120 professionals working with young people, and engaged over 2,000 young participants through thirteen international projects.

These initiatives have created safe and supportive spaces for creative expression, peer connection, personal growth, and emotional well-being. They further demonstrate the capacity of civil society organizations to act as innovators within the arts and health field, developing flexible and responsive programmes that address emerging social and mental health needs.

Collectively, the examples presented at the event demonstrate that Arts and Health practices in Croatia are already being successfully implemented across a wide range of sectors and institutional contexts. Although differing in scale, target populations, and methodologies, all examples share a commitment to using artistic engagement to support health, well-being, social participation, and community development. As such, they offer valuable models for future policy development and further integration of arts and health approaches within Croatian society.

Conclusion

The public presentation of the stakeholder mapping study findings, at Josip Juraj Strossmayer University of Osijek in December 2025, marked an important milestone in strengthening the relationship between cultural policy and the emerging field of arts and health in Croatia. By bringing together representatives of the Ministry of Culture and Media, university leadership, researchers, practitioners, and organizations active in the sector, the event provided a platform for demonstrating the interconnected roles of culture and the arts, education, social welfare, psychotherapy, and scientific research in promoting health and well-being. In doing so, it highlighted the inherently interdisciplinary nature of creative therapies and their potential contribution to contemporary healthcare and social care systems.

The stakeholder mapping study represents the first systematic effort to examine the structure, scope, and characteristics of the arts and health field at the national level in Croatia. and active network of professionals and organizations operating across multiple sectors and serving a wide range of populations. At the same time, the results reveal a field that is still evolving and characterized by varying levels of institutional recognition, professional regulation, and resource availability.

A particularly significant finding is the evidence of ongoing professionalization within the sector, especially in relation to creative therapies. The substantial proportion of formally educated practitioners, together with the existence of specialized postgraduate education programmes and growing professional networks, suggests that Croatia has established a solid foundation for the further development of Arts and Health practices. Nevertheless, the findings also point to challenges associated with fragmented educational pathways, uneven professional standards, limited employment opportunities within public institutions, and a continued reliance on project-based funding mechanisms.

Within the broader European context, the Croatian mapping initiative represents an important step toward alignment with the strategic recommendations outlined in the report Culture and Health: Time to Act (European Commission, 2025). The study reflects a growing recognition that health and well-being are shaped not only by medical interventions but also by cultural participation, creative engagement, social connectedness, and opportunities for personal expression. In this regard, cross-sectoral collaboration emerges as a fundamental prerequisite for future development. Sustainable progress will require stronger partnerships among the cultural, healthcare, educational, and social welfare sectors, supported by coherent policy frameworks and shared strategic objectives.

An important advancement in the professional recognition of creative therapies occurred in 2023 with the inclusion of the occupational category "Arts Therapists" within the National Classification of Occupations of the Republic of Croatia (Code 2269). This classification encompasses all creative therapy disciplines and formally positions arts therapists within the broader category of highly qulified health-related professions. The introduction of this occupational category represents a significant step toward strengthening professional identity, increasing visibility, and creating opportunities for employment and integration within healthcare, educational, cultural, and social welfare institutions.

While this institutional recognition provides an important foundation, further efforts are needed to strengthen professional standards, expand educational opportunities, and support the development of research and evaluation frameworks. As demonstrated by the mapping findings, practitioners and organizations increasingly recognize the importance of evidence-informed practice and outcome evaluation. Continued investment in research and evaluation will therefore be essential for demonstrating effectiveness, informing policy development, and supporting the long-term sustainability of the sector.

The future development of Arts and Health in Croatia will depend on the establishment of a coherent national strategy capable of coordinating the activities of multiple governmental sectors, securing sustainable funding mechanisms, and ensuring systematic monitoring and evaluation of outcomes. The recommendations emerging from the mapping study — including the creation of a national digital registry, the development of a National Arts and Health Programme, and the strengthening of institutional partnerships — provide a practical framework for achieving these objectives.

Ultimately, the findings presented in this study afirm that the arts constitute a valuable resource for enhancing health, well-being, and social inclusion at both individual and community levels. Furthermore, art therapy and other creative therapy disciplines have significant potential to play a more prominent role within integrated models of care, prevention, rehabilitation, and community development. As European cultural and health policies increasingly recognize the contribution of artistic and creative engagement to public health, Croatia is well positioned to build upon its existing professional expertise and establish a sustainable and internationally relevant Arts and Health ecosystem.

The mapping study therefore represents not only a documentation of the current

state of the field but also a strategic foundation for its future growth. By making visible the professionals, organizations, practices, and partnerships that already exist, it creates the conditions for more coordinated action, stronger institutional recognition, and the development of policies that fully acknowledge the contribution of arts and creative therapies to health and well-being in contemporary society.

References

Academy of Arts and Culture in Osijek. (2025). *The Young Theatre Festival* [Brochure]. https://www.uaos.unios.hr/wp-content/uploads/2020/04/2025_Festival-mladog-teatra.hr_.pdf

European Commission. (2025). *Culture and Health: Time to Act*. Publications Ofice of the European Union. europa.eu

European Commission. (n.d.). *Open method of coordination*. https://eur-lex.europa.eu/EN/legal-content/glossary/open-method-of-coordination.html

Korpoš, D. (2025, April 10). Art as a tool for development through workshops [Article in Croatian]. *Glas Slavonije*. https://www.glas-slavonije.hr/regija/2025/04/10/umjetnost-kao-alat-za-razvoj-kroz-radionice-687771/

Pacek, J., Stojanovski, K., Janković, S., Rubeša, M., Škojo, T., & Forjan, J. (2025). *Mapping stakeholders active in the field of arts and health* [Report in Croatian]. Ministry of Culture and Media of the Republic of Croatia & Croatian Association for Art Therapy (HART). https://min-kulture.gov.hr/UserDocsImages/dokumenti/Publikacije/Mapiranje%20dionika%20aktivnih%20u%20podru%C4%8Dju%20umjetnosti%20i%20zdravlja/Mapiranje%20dionika%20aktivnih%20u%20podru%C4%8Dju%20umjetnosti%20 i%20zdravlja.pdf