

Cultural engagement as a health behaviour: longitudinal associations with mental health and multidimensional wellbeing in older age.

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Introduction and Purpose: 1 in 4 older adults in the UK is affected by depression, which is associated with a range of physical health outcomes. So there is a recognised need to identify behavioural interventions that can support mental health and wellbeing in older age. There is a large body of literature linking *participatory* arts and cultural engagement with mental health and wellbeing. However, there is much less research into the effects of *receptive* cultural engagement (such as visiting museums, galleries, the theatre and concerts) and mental health. Given that these cultural sites engage people in meaningful activities and help them to form relationships (both of which are protective factors for mental health), it is possible they are being underutilised as sites for public health interventions. Consequently, this study explored whether receptive cultural engagement in older age is associated with better mental health and wellbeing.

Methods: This study used data from the English Longitudinal Study of Ageing assessed between 2004/5 and 2014/15. We selected individuals who had no indication of depression at baseline using the Centre for Epidemiologic Studies Depression Scale (CES-D) and used logistic regression models to explore the odds of developing depression over the following 10 years in relation to how often people visited museums/galleries or attended the theatre/concerts. We also used OLS regression models to explore associations between cultural engagement and changes in wellbeing across the 10 year period using CASP-15. For all analyses, we controlled for all identified demographic confounders, health confounders (including sensory impairment, chronic conditions and pain) and social confounders (including other forms of social/civic engagement).

Results: Independent of confounders, visiting museums/galleries every few months or more was associated with a lower risk of developing depression over the following 10 years (OR=0.50 SE=0.11, CI 0.32-0.78). However, results for attending the theatre/concerts were attenuated when considering social confounders. Both attending museums/galleries and attending the theatre/concerts once or twice a year or more were associated with higher wellbeing 10 years later (B=1.10, SE=0.37, CI 0.37-1.83 & B=0.86, SE=0.37, CI 0.14-1.58). Sensitivity analyses confirmed effects were unaffected by considerations of mobility, attrition or pre-clinical symptoms of baseline depression.

Conclusions: In light of the results presented here, it is suggested that further behavioural intervention studies are designed to test further whether cultural engagement can decrease the risk of developing mental health conditions and improve quality of life in older adults.