

Introduction

Cultural activities are important as potentially health promoting because they may increase cohesiveness and also stimulate regenerative bodily processes individually. Previous studies in our group have pointed in this direction. One study showed increased blood concentration of oxytocin when singing (Grape et al. 2003). Two previous studies were made on the elderly. These studies were designed as "controlled evaluations" with an experimental and a control group followed during cultural intervention. They showed that elderly can benefit considerably both biologically and psychologically from cultural activities (Arnetz et al 1983 and Wikström et al 1993). Studies in which cultural activities were added to other components in rehabilitation illustrated possible benefits of such supplementary interventions (Theorell et al 1998 and Bojner Horwitz 2006).



Can cultural activities at work be health promoting for employees?

Results

VAS (Visual Analogue Scales) changes indicated increase in energy, joy and relaxation. Activities that could be classified as more "interactive" induced more increase in energy than others.

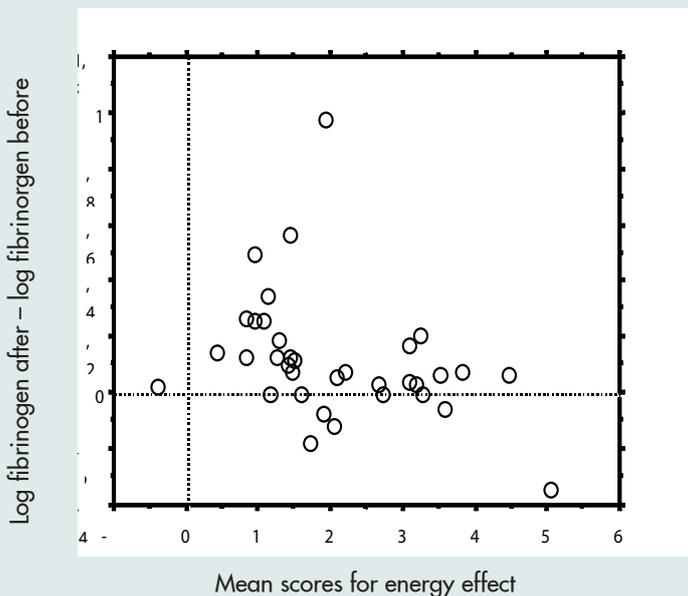


Figure 1. Change in mean scores for energy effects of the cultural activity and development of plasma fibrinogen.

Since there was no control group no conclusions could be drawn regarding group effects on health. However subjects who had the highest mean scores for primitiv energy effects

of the activities had a significantly better development of plasma fibrinogen than the others. Similar findings were made for sleep disturbances.

Those who rated the highest mean elevation in energy, joy and relaxation also had the worst development of social support at work – probably a jealousy effect. The findings indicate the importance of engaging all employees in the cultural activities.

Methods

During three months employees at four work sites in Västernorrland were offered a cultural activity – a different one each time – once a week at the worksite during working hours. Ten subjects in each worksite were asked to participate in all the twelve occasions. They were asked to fill out VAS on every occasion (before and after).

Before and after the three-month-period of intervention (September - November 2006) health, psychosocial situations and experiences of the culture activities were assessed by interviews, self-completion questionnaires and analyses' of blood samples.

References

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