

LAYING THE FOUNDATION: GROUNDING PERSPECTIVES OF LEADERSHIP AT THE INCEPTION OF A NATIONAL ARTS AND HEALTH INITIATIVE

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Abstract

As the field of public health continues to shift toward a health paradigm that emphasizes cultural-level change, interdisciplinary strategies to advance health equity should be at the forefront. The arts sector offers rich perspectives for this form of innovation. As cross-sector interdisciplinary initiatives that employ the arts continue to rise in prominence to address national public health issues, there is an emerging need to understand how diverse teams envision and coalesce around shared goals. This study aimed to delve into the lived experiences, prior beliefs, and project visions of the leadership of the One Nation, One Project (ONOP) initiative - a national research and civic collaboration - to offer insight and guidance for future arts-based interdisciplinary work of scale. Semi-structured interviews were conducted with 12 project leaders. After transcription, a thematic analysis process was utilized to code the data as the research questions focused on lived experiences, perspectives, and social constructions. Seven themes, and twenty-eight subthemes were identified. Across interviews, the leaders spoke of their belief in the power of art to transform and heal, and the need to uphold equity and community partnership throughout the project. This study adds to a growing body of research exemplifying the need for and value of arts integration across disciplines and showcases the power of cross-disciplinary action to catalyze social change. Learnings from this study and the broader ONOP initiative can spark further interdisciplinary civic imagination as they provide a framework to understand the advantages of alignment with personal purviews and overall project goals, regardless of disciplinary background.

Keywords: Arts in public health, arts-based research, inter-organizational ethnography, ethnographic research, civic imagination, cross-sector collaboration.

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Introduction

As the field of public health continues to prioritize interventions addressing social determinants of health and upstream drivers of health disparities, it is essential to adopt interdisciplinary, collaborative strategies to advance health equity. The literature has exemplified how cross-sector collaboration is essential for innovation as it offers a means by which inequitable systems and policies can be approached from multiple vantage points (Moirano et al., 2020). Further, this form of collaboration aligns with the "fifth wave" of public health (Chandra, et al., 2017; Hanlon, et al., 2011) – a health paradigm that emphasizes the need for cultural level change. Notably, collaboration with the arts sector offers rich perspectives for this form of centering and innovation, given its propensity to amplify root issues, connect people, center disenfranchised voices, and shift collective behaviors and sociocultural norms (Fancourt & Finn, 2019; Jensen, 2020; Magsamen et al., 2021; Sonke et al., 2019, p.6). This form of cross-sector collaboration can promote strategies that are adept in centering lived experiences, shared beliefs, and cultures (Golden, 2019).

One Nation/One Project (ONOP), a national arts and wellness initiative, intends to build on the evidence for this form of cross-sector collaboration by bringing together artists, local governments, and community health providers across eighteen communities to address local public health concerns longitudinally (ONOP, 2023). Through this form of collaboration, ONOP intends to activate local collaboration, amplify local narratives, and advance health equity, to achieve local and national transformation (ONOP, 2023). Much like the interdisciplinary teams that ONOP is cultivating across the cohort sites, the initiative's founding team is similarly diverse (ONOP, 2023). Relative to ONOP, this

study sought to understand how perspectives from ONOP's leadership team shaped the vision for this national project.

Theoretical Framework

As an interdisciplinary initiative, ONOP draws theoretical inspiration from the We-Making Theory of Change (Engh et al., 2021) and structural inspiration from the Federal Theatre Project (Library of Congress, 2005/2024). The We-Making Theory of Change (Engh et al., 2021) proposes that place-based arts-and-culture strategies amplify and can in turn act as drivers of social cohesion, to increase equitable wellbeing within communities. Further, the Federal Theatre Project, a component of the New Deal, provided funding for live arts and entertainment performances across the United States (US) between 1935-1939 (Library of Congress, 2005/2024). A key goal of the Federal Theatre Project was to support and train out-of-work artists and arts administrators during the Great Depression as relief workers who could in turn provide theatre performances to communities across the US that did not always have access to live arts performances. Through its efforts to fuse a national scope with a hyper-local focus, ONOP seeks to re-engage the model of the Federal Theatre Project, and focuses on key constructs of the We-Making Theory of Change by examining the impact that this model can have on social cohesion and wellbeing within and across partnered communities.

In addition, the framework of civic imagination (Rohd, 2024) offers a conceptual approach to arts-based cross sector collaboration that includes but reaches beyond public health as a field and incorporates a way to bridge the health focus of We-making and the arts impulse at the center of the Federal Theatre Project. Civic imagination is the capacity for residents of a place and local leaders to collectively, creatively envision just, healthy, and equitable futures. Civic imagination posits that when complemented by the methodologies of publicly engaged artistic practice, local government is uniquely positioned to act not only as a site of function but as a hub of connectivity and potential, enhancing the lives of all community members by envisioning policies and systems centered in care. Therefore, civic Imagination can be

a useful reframe for the collaborations between artists and municipal governments in public health, but also within planning, housing, transit, community development, equity, education and other public good realms (Rhod, 2024).

Research Questions

Given the novelty of this initiative, the national scope, the hyper-localized foci, and interdisciplinary leadership team, this paper serves to offer guidance on strategies by which similar projects may develop. As such, we sought to investigate:

RQ1. What lived experiences have informed One Nation, One Project leaders' participation in the initiative?

RQ2. What relationships do One Nation, One Project leaders have with the arts?

RQ3. What beliefs do One Nation, One Project leaders have regarding the arts as being health promoting?

RQ4. How do One Nation, One Project leaders envision the impact of the initiative, following the culminating events in the summer of 2024?

Methods

Sample

Twelve participants were recruited to participate in the ONOP Origins project. Purposive sampling was employed given the intent to focus on specific characteristics as it pertained to the unique population centered in the study. All seven principles of the purposive sampling method were adhered to in design and recruitment (Palinkas et al., 2015). However, the principle relating to “the sampling strategy [stemming] logically from the conceptual framework as well as the research questions being addressed by the study” was not as strongly adhered to as the others, given that this study aligned with a central theory rather than a tailored conceptual framework (Palinkas et al., 2015, p. 542). The sample size of twelve is appropriate, as purposive sampling refers to strategies “in which the researcher exercises his or her judgment about who will provide the best perspective on the phenomenon of interest, and then

intentionally invites those specific perspectives into the study” (Abrams, 2010, p.538; Staller, 2021). Further, all participants held formative design and/or implementation roles within the ONOP initiative and were recruited via email outreach. This approach was deemed most appropriate, as email is an efficient means of outreach that affords an easily traceable chain of communication, and email correspondence was already established between participants and the interviewer, as all potential interviewees had existing relationships with the research team, either directly as coworkers or indirectly through affiliation with ONOP.

Study Participants

Participants all held active leadership roles within the ONOP initiative and/or had been instrumental in contributing to the project’s design and implementation. At the time of their interviews, all but two participants held active roles within the project (these two were involved solely in the design phase of the project). Participants with active roles included two Co-Artistic Directors, two Assistant Artistic Directors, the Research Team Director, the Research Team Coordinator, the Civic Collaborations Director, and an Artistic and Communications Lead. One participant was a representative of the National League of Cities, an organization comprising municipal leaders dedicated to advancing the quality of life in their communities (National League of Cities, 2023), which had partnered with ONOP to support the first nine communities engaged in the project.

Data Collection

Semi-structured interviews were conducted via video conference with each of the twelve participants. One-on-one interviews were determined to be the most appropriate form of data collection as individual perspectives, rather than group consensus, were prioritized in the research questions (Gill & Baillie, 2018). Additionally, the semi-structured approach allowed each participant to individually engage and reflect on the interview questions in a conversational manner, allowing for a deeper level of contemplation and exploration (Gill & Baillie, 2018). The design of the interview guide was informed by the work of Sonke et al. (2019) and Engh et al. (2021),

both of which expand on constructs linking the arts and health sectors through cross-sector collaboration. With these papers as a grounding perspective, the interviewer guide included ten open-ended questions intended to assess participants' backgrounds, beliefs surrounding art and health, contributions to the project, and hopes for its impact. Interviews lasted between 25 and 50 minutes and were transcribed verbatim by the lead research team member and reviewed by another research team member and the research director. After transcription, each interview was de-identified and stored on a secure, university-affiliated drive.

List of interview Questions

- Can you tell me a little bit about your background and what's bringing you to this work?
- Can you speak briefly to your primary roles within ONOP, and your goals for the project?
- Can you tell me a little bit about how you see art as a social determinant of health?
- How is community-engaged art important to health?
- What opportunities or barriers do you see to ONOP being able to increase recognition of art as a SDOH on both local and national levels?
- In what ways do you see or personally experience art as being capable of facilitating social cohesion?
- How do you see art as being something capable of fostering equity?
- How can ONOP center, as equitably as possible, the voices of community members across these 18 cities?
- As an artist yourself, how do you create a sense of awe and engagement in art spaces? How is that essential to this project?
- Paint me a picture, following the conclusion of ONOP, what are your dreams?

Coding Methods

Thematic analysis was utilized to code the data, as the research questions focused on lived experiences, perspectives, and social constructions (Clarke et al., 2015). In vivo

coding, concept coding, and process coding were the primarily used code forms across the methods of coding. These approaches align with both the research questions and the thematic analysis process as they center on maintaining exact language and perspectives from the participants (Miles et al., 2014). First, two researchers independently employed elemental coding to iteratively generate themes from transcripts of the interviews (Miles et al., 2014), using NVivo 12 Plus software, which provided a systematic way to code, annotate, and generate visual representations of the data (Zamawe, 2015).

The process of pattern coding allowed for both the re-organization and condensing of initial codes so that the units of analysis were in a more meaningful and concise state. Given that thematic analysis was utilized for this study, this process was not only iterative, but also occurred in conjunction with the first cycle coding process (Braun & Clarke, 2006). Further, the constant comparative method was employed to strengthen the trustworthiness of the study (Fram, 2013). Coding was done at two time points during the coding process - after half of the transcripts were coded and after all were coded; the two coders had negotiation periods in which they further utilized pattern coding to condense and re-organize all the codes and themes identified. Following this process, definitions of the final themes and subthemes were created by reflexively observing the data.

Trustworthiness

To ensure the trustworthiness of the study, several measures were taken in the design of the project. The two coders each completed reflexivity statements about how they individually related to the project – see Appendix A. Reflexivity emphasizes the significance of self-awareness and cultural consciousness within qualitative research (Jamieson et al., 2023). Additionally, confirmability was supported as the procedures were described in enough detail for replicability. The dependability of the study was supported by the clear research questions and study design, the use of multiple coders, the utilization of an intercoder agreement, and a peer review by a qualitative research expert who provided oversight for the project (Lincoln & Guba, 1985). Transferability

was supported by the clearly articulated participant demographics (Lincoln & Guba, 1985).

Results

Seven participants identified as female and five as male. Regarding ethnicity, three participants identified as Hispanic and one identified as Jewish, and pertaining to race, eight identified as white and four as Black. Participants were located in geographically diverse areas across the United States, including on the east and west coasts, the mountain region, and the South, and in rural, urban, and suburban communities. Notably, six participants were located within New York City.

The themes identified through thematic analysis of the twelve interviews illustrated the purview of ONOP leaders at the start of the project relative to both their prior perspectives and visions for the project. Seven themes with twenty-eight subthemes were identified across the twelve interviews. The themes were Hopes and Aims for the Project; Belief in What the Arts Can Do; Roles, Responsibilities, and Project Development; Prior Engagement with and Understanding of the Health Sector; Barriers to the Project; Foundational Views of the Project; and Prior Relationships to Art. Table 1 contains the themes, subthemes, and operational definitions for both.

Notable trends were present across the themes and their related subthemes. Themes that considered prior perceptions and their impact on current perspectives included Belief in What the Arts Can Do, Prior Engagement and Understanding of Health Sector, and Prior Relationships to the Arts. Another set of themes related to projections for the project and included both Hopes and Aims for the Project and Barriers to the Project. Finally, both Foundational Views of the Project and Roles, Responsibilities and Project Development centered on a current view rather than a reflection or projection.

Table 1. Themes, Subthemes, and Operational Definitions

Theme	Subtheme	Definition
Hopes and Aims for the Project		Perspectives and desires regarding the effects of the project on partnered communities and broader cross-sector audiences.
	ONOP as a spark for cultural/political transformation	Momentum from the project to inspire public activation and transformation through leveraging the arts
	Shifting perceptions of art as healing	Increasing awareness of the capacity of arts participation as a protective and rehabilitative health behavior
	Opportunities for increasing awareness of art as a SDOH	Hopes that the project will lead to a broader recognition of the connection between arts engagement and participation and socio-structural health outcomes.
	Desire for people to feel connected [following the project].	Hopes that the project will foster social cohesion and the development and maintenance of cross-sector relationships.
	ONOP as inspiration for future projects	Goal of catalyzing future iterative projects.
	Fostering long-term cross-sector relationships [during and after the project]	Maintain and strengthen partnerships across sectors
Belief in What the Arts Can Do		Belief in the capability of the arts to activate different forms of thinking, doing, and being
	Art as disruption	Conviction that the arts can dismantle and transform cultural paradigms and/or hierarchies of oppression
	Art as inspiration	Statements regarding the ability of the arts to activate communities and individuals toward social and personal change
	Art as healing	Personal understanding that the arts and health are inextricably linked
	Art as community building	Perception of arts engagement as inspiring community connection and social cohesion
	Art as meaning making	Ability of art to make sense of lived or observed experiences
Roles, Responsibilities, And Project Development		Individual's professional involvement in the project
	Position extends beyond traditional departmental lines	Individuals' duties are fluid and interactive across multiple domains of the project
	Position is contained within clearly defined parameters	Individuals' duties are finite and consistent in their involvement with the project.

Prior Engagement and Understanding of the Health Sector		Statements regarding experiences, involvement, and beliefs surrounding the health sector
	Primary experience within the health sector	Interviewees had prior experience working in a health care setting
	Tangential experience with the health sector	Interviewees had prior experience working in collaboration with, or adjacent to the health sector
	No experience with the health sector.	Interviewees based their understandings of the health sector on personal views and experiences as they did not have prior experience working within the health sector
Barriers to the Project		Obstacles to achieving project goals
	Time constraints	Challenges posed by availability and capacity of ONOP team and collaborators
	Financial constraints	Limitations due to funding/scope of financial resources
	Need for case-making arts and health	Need to justify the relationship between arts engagement and individual/community health outcomes
	Challenges with cross-sector collaboration	Difficulties in navigating relationships across disciplines
	Organizational/leadership turnover	Challenges posed by turnover of decision-makers who were champions for arts in health
Foundational Views of the Project		Personal perceptions surrounding the project's values
	Importance of centering communities	Belief in the need to position communities as equitable partners and experts in the project
	Art as a SDOH	Engagement with the arts as a protective or rehabilitative health behavior
	Importance of access to the arts	Critical value of access and ability to participate in the arts
	Importance of equity throughout the project	Significance of prioritizing equity through all project engagement
Prior Relationships to Art		Individual's backgrounds in arts engagement and beliefs regarding the arts and how they manifest
	Professional Experience	Individuals had professional roles working in the arts and culture sector
	Personal Creative Practice	Individuals engaged in personal artistic practice as separate from professional appointments or endeavors
	No Practice or Regular Engagement	Individuals did not regularly practice or engage in artistic forms of expression for either personal or professional purposes

Overall, the three themes that appeared most often in the narrative data were Hopes and Aims for the Project, Belief in What the Arts Can Do, and Foundational Views of the Project. Further, there was a through line through these three themes as well as through their subthemes. Notably, Foundational Views of the Project and Hopes and Aims for the Project had a bi-directional relationship in their relationship with one another.

Additionally, the interviewees' reported beliefs about what the arts can do aligned closely in content with both their foundational views of and hopes and aims for the project. Individuals' pre-held beliefs about what the arts can do - that art can inspire, heal, and foster community building, were recognized as intersecting with their foundational views of art as a social determinant of health, and the importance of access to the arts.

Hopes and Aims for the Project

All the interviewees expressed their hopes and aims for the project, its development, and impact. During the thematic analysis, six distinct subthemes emerged. Interviewees expressed their hopes that the project would shift individual and collective understandings of art and arts participation as something that can heal, and desires that this project would in turn increase awareness of art, and the ability of individuals and communities to access and participate in arts activities as a social determinant of health. Interviewees expressed desires that ONOP could inspire future initiatives at the intersections of arts and health, and that the relationships formed during this project would be maintained following its completion date. Further, interviewees conveyed hopes that the project could inspire political and cultural transformation, including elevating artists across disciplines and educational backgrounds, and that it would bring groups together across ideological divides. Lastly, interviewees emphasized their desires that the project would foster cross-sector collaborations - between artists, health-care professionals, municipal government, and policy makers - and that these cross-sector collaborations would endure following the project.

Belief in What the Arts Can Do

Interviewees expressed their beliefs as to what the arts and engagement with the arts can do, including a recurrent discussion pertaining to the concept that the arts can both inspire and heal as well as that they can act as a source-point of and inspire action towards community building and development. Additionally, the capacity of art to both disrupt, through the dismantling and transformation of hierarchies of oppression, and help individuals make meaning of their lives and the world around them emerged as prominent subthemes across the interviews.

Foundational Views of the Project

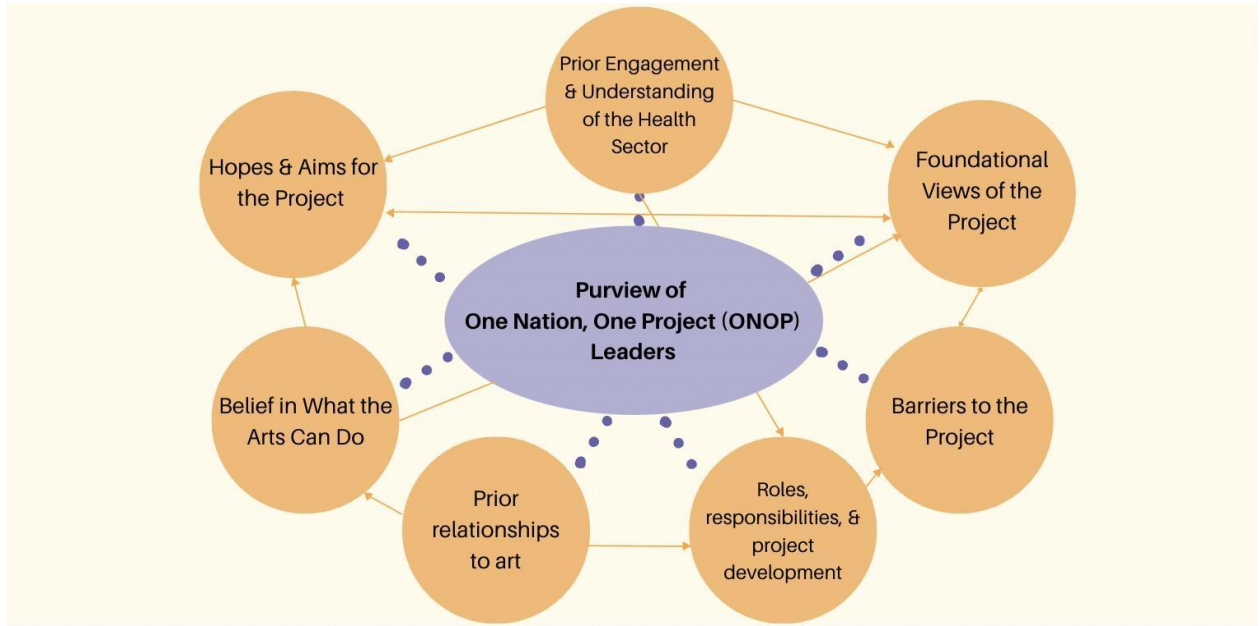
Interviewee's foundational views – their perceptions and understandings of the project's values – were grouped into four distinct subthemes. Interviewees stressed the importance of centering communities and recognized that uplifting and celebrating community's voices was a central component of the project. Access to the arts was also noted as a critical value and as core to the project's partnerships with communities.

Furthermore, interviewees expressed views that arts engagement was itself, a social determinant of health, and could have a protective and/or rehabilitative effect on individual and community health. Lastly, interviewees spoke of the need to imbue equity throughout the project, both internally, and in partnership with communities.

To further expand on the relationships between the emergent themes and related subthemes from this study, a network display was utilized - see Figure 1. This form of display was chosen as networks allow for relationships amongst multiple variables to be considered at once in a readily analyzable manner (Miles et al., 2014). As such, the directionality of each of the relationships as well as how each theme and subtheme relate back to the purview of ONOP leadership is easily comprehensible. Relating to Figure 1, the dotted lines represent the connection between the ONOP leadership and each of the themes. The solid lines represent direct relationships observed during the data analysis process. The arrows express the directional relationship.

Notably, Figure 1 includes unidirectional arrows as well as one bidirectional arrow connecting the themes Foundational Views of the Project with Hopes and Aims for Project.

Figure 1. Thematic Network Display



Source: Authors

Discussion

The literature has exemplified how cross-sector collaboration can promote strategies that are more adept in centering lived experiences, shared beliefs, and culture (Golden, 2019). As an initiative, ONOP intends to coalesce artists, local governments, and community health providers across eighteen communities to address local, public health concerns longitudinally (ONOP, 2023). As such, the initiative plans to activate local collaboration, amplify local narratives, advance health equity, and achieve both local and national transformation as it pertains to arts in health (ONOP, 2023). With that, this project examined the backgrounds, identities, and experiences that key figures involved in the design, implementation, and execution of the One Nation, One Project initiative carried into their involvement with the project. As such, the project

employed four research questions: 1) What lived experiences have informed One Nation, One Project leaders' participation in the initiative? 2) What relationships do One Nation, One Project leaders have with the arts? 3) What beliefs do One Nation, One Project leaders have regarding the arts as being health promoting? 4) How do One Nation, One Project leaders envision the impact of the initiative, following the culminating events in the summer of 2024?

Notably, the first three research questions were informed by similar themes and subthemes. Themes such as Prior Engagement and Understanding of the Health Sector, and Prior Relationships to Art directly inform RQ1-RQ3 while the theme Foundational Views of the Project was directly informed by the aforementioned themes. Within these themes notable trends arose, such as prior understanding of the link between arts and health, the importance of centering communities, and that equity is important to health, art, and the project - both distinctly and across all three.

These conceptualizations by ONOP leadership align with the Creating Healthy Communities White Paper (Sonke et al., 2019) which asserts that cross-sector collaboration amongst health, art, and municipalities should prioritize the advancement of equity in order to foster transformative social change. As it pertains to RQ2 and RQ3, a majority of the ONOP leadership had found the arts to be health promoting prior to engagement in the project, and some even noted that their relationship with the arts is intrinsically linked to a focus on arts in health. Notably, the subthemes within the theme Belief in What the Arts Can Do informed these research questions as it encompassed subthemes of Art as Disruption, Art as Inspiration, Art as Healing, Art as Community Building, and Art as Meaning-Making. The notions of art as both healing and community building present in the data are central to the theory upon which the research for the project was based - the WE-Making theory of change (Engh et al., 2021). This framework links the constructs of social cohesion, well-being, and arts participation to strategize how to create and foster healthy, equitable communities (Engh et al., 2021). These parallels highlight alignment between the positionality of ONOP leadership with the foundational theory behind the project.

One Nation, One Project is, at its core, a civic collaboration intended to uplift the power of the arts across sectors and strengthen the social fabric of the nation (ONOP, 2023). As it pertains to RQ4, the theme of Hopes and Aims for the Project was further distinguished by several subthemes which informed how the ONOP leaders envision the impact of ONOP after the summer of 2024 culminating events. Notably, subthemes included ONOP as a Spark for Cultural/Political Transformation, Opportunities for Increasing Awareness of Art as a Social Determinant of Health, Shifting Perceptions of Art as Healing, Desire for People to Feel Connected Following the Project, ONOP as Inspiration for Future Projects, and Fostering Long-Term Cross-Sector Relationships During and After the Project. Of note was the alignment of overall project goals, regardless of disciplinary background.

Collectively bringing over two centuries of experience in cross-sector collaboration into their roles, the insights of ONOP leaders can provide invaluable perspectives to a variety of burgeoning disciplines and fields- these leaders are at the forefront of innovation in civic imagination, here seen as the intersection of inclusive civic problem-solving and local coalition-building, both of which are urgent requirements for healthy communities and a healthy democracy. In the conceptualization and development of ONOP, the project's leadership recognized that an equitable approach to the question – what constitutes basic needs? – must extend beyond the physical, and that access and ability to engage with the arts contributes to a more holistic and whole-bodied experience of health. This innovative approach models how cross-sector collaboration alongside civic imagination can move our society closer to, as the Robert Wood Johnson Foundation (RWJF) has advocated for, a culture of health (Chandra et al., 2017).

Strengths and Limitations of the Study

Within the study, there were notable strengths as well as limitations.

Strengths. Several measures of trustworthiness were included within the design of the research. Namely, as discussed in the Methods section, confirmability was supported through reflexivity statements as well as by the degree of detail provided within the

procedure (Jamieson et al., 2023). The dependability of the study was supported by the clear research questions and study design, the use of multiple research assistant codes, the utilization of an intercoder agreement, and through a peer review by a qualitative research expert who provided oversight for the project (Lincoln & Guba, 1985). The connection of the data to theory as well as investigator triangulation acted to support the credibility. Further, transferability was supported as the study clearly articulated participant demographics (Lincoln & Guba, 1985).

Limitations. Given the unique population of this study, the transferability to other populations and contexts is limited in nature (Lincoln & Guba, 1985). Because this study employed purposive sampling, selection and response bias may have been present. A limitation of this design was that it did not permit saturation across all the research questions. Additionally, while strategies such as member checking and multiple forms of triangulation were not utilized due to the limited capacity for this study, the credibility would have been stronger if these strategies had been engaged.

Suggestions for Further Research

Future research should build upon the foundational concepts set forth within this paper – especially as large-scale collaboration between the arts and health sectors expands. Notably, studies should consider expanding to a wider data set by attending to the interdisciplinary leadership of multiple projects within one study. This would have the potential to expand on the findings within this study as it would likely have a greater propensity for reaching saturation and therefore bolstering the transferability and overall trustworthiness of the data. In another regard, future work should seek to secure resources to employ member checking and multiple forms of triangulation. Doing so would strengthen the credibility and general trustworthiness of the findings. Finally, researchers should consider directly building on this work by engaging in qualitative analysis that has both inductive and deductive components so as to utilize themes and subthemes identified within this work as a foundational codebook.

Conclusion

This study explored the backgrounds, identities, and experiences that the leadership team of the ONOP initiative carried with them into the first year of the project, and how these in turn shaped the values, goals and cross-sector collaborations that continue to define the initiative. Learnings from this study and the broader ONOP initiative can spark further interdisciplinary civic imagination as they provide a framework to understand the advantages of alignment with personal purviews and overall project goals, regardless of disciplinary background. Across interviews, ONOP leaders spoke of their belief in the power of art to transform and heal as well as the need to uphold equity and community partnership throughout the project. This study adds to a growing body of research exemplifying the need for and value of arts integration across disciplines and showcases the power of cross disciplinary action to catalyze social change. Additionally, it further exemplifies the benefit of aligned foundational beliefs amongst leaders in interdisciplinary work. Future research should draw from this study, and the continued work of the ONOP initiative, to inform the design and implementation of multi-sector initiatives to activate communities and galvanize systems-level change.

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References

- Abrams, L. S. (2010). Sampling 'hard to reach' populations in qualitative research: The case of incarcerated youth. *Qualitative Social Work*, 9(4), 536-550.
<https://doi.org/10.1177/147332501036782.1>
- Clarke, V., Braun, V., & Hayfield, N. (2015) Thematic Analysis. In: J. A. Smith (Ed.), *Qualitative psychology: A practical guide to research methods* (4th ed., pp. 22-248). SAGE Publications.
- Chandra, A., Acosta, J., Carman, K. G., Dubowitz, T., Leviton, L., Martin, L. T., Miller, C., Nelson, C., Orleans, T., Tait, M., Trujillo, M. D., Towe, V. L., Yeung, D., & Plough, A. L. (2017). Building a national culture of health: Background, action framework, measures, and next steps. *Rand Health Quarterly*, 6(2), 3. PMID: 28845341. PMCID: PMC5568157
- Engh, R., Martin, B., Laramée Kidd, S., & Gadwa Nicodemus, A. (2021). WE-Making: How arts & culture unite people to work toward community well-being. *Metris Arts Consulting*, 33.
https://metrisarts.com/wp-content/uploads/2021/04/we-making_conceptual-framework.pdf.
- Fancourt, D., & Finn, S. (2019). What is the evidence on the role of the arts in improving health and well-being?: A scoping review. *Health Evidence Network Synthesis Report*, 67, 1-146. World Health Organization. <https://www.ncbi.nlm.nih.gov/books/NBK553773/>
- Fram, S. M. (2013). The constant comparative analysis method outside of grounded theory. *Qualitative Report*, 18(1). <https://eric.ed.gov/?id=EJ1004995>
- Gill, P., & Baillie, J. (2018). Interviews and focus groups in qualitative research: An update for the digital age. *British Dental Journal*, 225, 668-672. <https://doi.org/10.1038/sj.bdj.2018.815>
- Golden, T. (2019). Innovation and equity in public health research: Testing arts-based methods for trauma-informed, culturally-responsive inquiry [Doctoral Dissertation, University of Louisville].
<https://ir.library.louisville.edu/cgi/viewcontent.cgi?article=4326&context=etd>.
- Hanlon, P., Carlisle, S., Hannah, M., Reilly, D., & Lyon, A. (2011). Making the case for a 'fifth wave' in public health. *Public health*, 125(1), 30-36. <https://doi.org/10.1016/j.puhe.2010.09.004>
- Jamieson, M. K., Govaert, G. H., & Pownall, M. (2023). Reflexivity in quantitative research: A rationale and beginner's guide. *Social and Personality Psychology Compass*, 17(4), e12735.
<https://doi.org/10.1111/spc3.12735>
- Jensen, A. (2020). Developing an evaluation guide for arts & health projects. *Nordic Journal of Arts, Culture and Health*, 2(2), 154-157. <https://doi.org/10.18261/issn.2535-7913-2020-02-07>
- Library of Congress, Washington, D.C. (2005/2024). *Federal Theatre Project Collection*, Music Division.
https://findingaids.loc.gov/exist_collections/ead3pdf/music/1995/mu995001.pdf
- Lincoln, Y.S., & Guba, E.G. (1985). *Naturalistic inquiry*. Sage.
- Magsamen, S., Katz, R., Camp, A., Feiden, K., Garrett, S., Tucker, R., & Wanzer, K. (2021). *NeuroArts blueprint: Advancing the science of arts, health, and wellbeing* (No. 21/003; pp. 1-148). Aspen Institute and Johns Hopkins University.
<https://www.aspeninstitute.org/publications/neuroarts-blueprint-advancing-the-science-of->

[arts-health-and-wellbeing/](#)

- Miles, M. B., Huberman, A. M., & Saldana, J. (2014). *Qualitative data analysis: A methods sourcebook, 3rd edition*. SAGE.
- Moirano, R., Sánchez, M. A., & Štěpánek, L. (2020). Creative interdisciplinary collaboration: A systematic literature review. *Thinking Skills and Creativity*, 35, 100626. <https://doi.org/10.1016/j.tsc.2019.100626>
- National League of Cities. (2023). About national league of cities. National League of Cities. <https://www.nlc.org/about/>
- One Nation/One Project [ONOP]. (2023, July 30). Arts for everybody. <https://www.artsforeverybody.org>
- Palinkas, L. A., Horwitz, S. M., Green, C. A., Wisdom, J. P., Duan, N., & Hoagwood, K. (2015). Purposeful sampling for qualitative data collection and analysis in mixed method implementation research. *Administration and Policy in Mental Health and Mental Health Services Research*, 42, 533-544. <https://doi.org/10.1007/s10488-013-0528-y>
- Rohd., M. (2024). Civic imagination: 12 proposals on artist/municipal government collaborations (*In preparation*).
- Sonke, J., Golden, T., Francois, S., Hand, J., Chandra, A., Clemmons, L., Fakunle, D., Jackson, M.R., Magsamen, S., Rubin, V., Sams, K., & Springs, S. (2019). *Creating healthy communities through cross-sector collaboration* [White paper].
- University of Florida Center for Arts in Medicine / ArtPlace America.
- Staller, K. M. (2021). Big enough? Sampling in qualitative inquiry. *Qualitative Social Work*, 20(4), 897-904. <https://doi.org/10.1177/14733250211024516>
- Zamawe F. C. (2015). The implication of using NVivo software in qualitative data analysis: Evidence-based reflections. *Malawi Medical Journal: The Journal of Medical Association of Malawi*, 27(1), 13-15. <https://doi.org/10.4314/mmj.v27i1.4>

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Alexandra Rodriguez, MPH, values and practices research at the intersection of arts and public health. As a current Robert Wood Johnson Foundation Health Policy Research Scholar and Public Health PhD student in the Social and Behavioral Sciences concentration at the University of Florida (UF), Alex primarily pursues research with UF Center for Arts in Medicine's Interdisciplinary Lab. Alex has previously developed and led a grant funded, mural-based vaccine confidence project which was selected for a Cam Busch Award (Honorable Mention) by the National Organization of Arts in Health. Further, she has had the opportunity to contribute to arts in public health research such as CDC field guides on how to utilize the arts to promote vaccine confidence as well as the Oxford Bibliography for the field of Arts in Health. Alongside her continued research at the University of Florida, Alex is working with One Nation/One Project – a national arts and health project across 18 cities in the United States – as a National Research and Impact Associate. Additionally, Alex developed a UF Honors course titled Leveraging the Arts to Promote Public Health which is currently being offered as an honors course at UF.

Jill Sonke, PhD, is Director of Research Initiatives in the Center for Arts in Medicine at the University of Florida (UF), Director of National Research and Impact for the One Nation/One Project initiative, and Co-director of the EpiArts Lab, a National Endowment for the Arts Research Lab in partnership with University College London. She serves on the steering committee for the Jameel Arts & Health Lab and served during the COVID-19 pandemic as a senior advisor to the Center for Disease Control and Prevention (CDC). She is an affiliated faculty member in the UF School of Theatre & Dance, the Fixel Institute for Neurological Diseases, and the Center for African Studies, as well as an editorial board member for Health Promotion Practice journal. Dr. Sonke is a mixed methods researcher with over 70 publications, and has 28+ years of leadership in the field of arts in health. She is the recipient of numerous awards and over 350 grants for her programs and research in the arts and health.

Appendix A

Reflexivity Statement by GDC, AKR and JSK

We enter this work holding simultaneous identities as artists, researchers, and artist-researchers engaged as members of the research team on the One Nation/One Project Initiative. We recognize that our proximity to the initiative may have introduced unintended bias into this study, and too, that it afforded us a unique positionality in understanding the relevant concepts and relationship dynamics at play.

Appendix B.

Table 2. Exemplar Quotes for Themes and Subthemes

Hopes and Aims for Project Impact	
ONOP as a Spark for Cultural/Political Transformation	It is not going to be finished in 2024, and I don't mean that there won't be this beautiful celebration of artistic practice and health engagement in 2024, and then a beautiful and informative research output in 2024 and 2025, I think those things are all true, but I think, we're starting the spark that hopefully grows and starts to build on itself.
Shifting Perceptions of Art as Healing	I think first right now art is not something that is seen as a public good, so when we look at the first things to be cut within educational programs is the arts program. So how can you shift this perspective, especially at the municipal level, that art is a public good, and accessible, and can be for all, and made by anyone? So how do we shift that mentality? The disconnect is there and I think that's also what this project is trying to do.
Desire for People to Feel Connected Following the Project	First of all that people within these three sectors, within their local town or city will now have relationships across local art workers and health workers and city workers, and residents of these cities, that there will be a deeper interconnectedness and that people will have a practice of actually collaborating, being in conversation with one another and being able to make things with one another and being able to set goals and achieve them, and so there's that goal, and I think we also hope that this lights a fire.
ONOP as Inspiration for Future Projects	I think this is an opportunity for bringing health centers together in those given communities and to really showcase the effect that art can have in those communities through those health centers and hopefully set up a model for health centers and the integration of art and health.
Fostering Long-Term Cross-Sector Relationships	So when I close my eyes and I think of this day in July, I hope we have 18 projects that are large in scale, that are spectacles, that are obviously multi-disciplinary, but that are all imaginative, that these works of art could have only been created with these people, with these sector collaborations, and that it's truly united in celebration of who they are, in the past, in the present, but also in the future, so having this true vision proposal of where they want their city to go.
Belief in What the Arts Can Do	
Art as Disruption	I think about the artist's role in bringing people together around a very particular detail, and the detail I tend to be most interested in is the macro detail of how we're living and the story that we're all in and the way we can shift that because I feel the culture piece of that is always very important. That art is cultural, that art is actually a cultural language that can invite people to look at culture and look at the paradigms we're in and actually shift them.

Art as Inspiration	Yes, as a director my work is very much about wanting to create communal experiences, shared experiences and moments of marveling at our common humanity and pulling in music and dance and color and the visual story, the emotional story of the events that I make is absolutely intended to be an invitation to awe.
Art as Healing	I think for many people it is an avenue to healing, personal healing, whether it's through music or an expression of their art, especially in the mental health field, there's tremendous opportunities there, so I see it as a low-cost intervention that a healthcare organization can build into its toolkit to be able to engage the community, but also at a patient-level, engage individuals and help to bridge some of that gap on the social determinants.
Art as Community Building	I think part of what is needed for healthy society is one in which essentially both difference and commonality is cherished, one in which we find ways in which we can connect, we find our common humanity and we notice it and we enjoy it together, and then also we can notice the things that are really distinct, that are particular to the individual's walk that people have had on this planet, including all of their demographic reality, their age, their race, their religion, their culture, all of these things that are very particular and I feel like in order to have a cohesive society ideally you want both, right? You want both the people to appreciate and honor their differences, and to have things in common, and I really think art is the perfect vehicle for doing both of those things, it's, you know, art is very much about our common humanity.

Roles, Responsibilities, and Project Development	
Position Extends Beyond Traditional Departmental Lines	My primary roles, role of founder, co-founder, co-steering the ship, ensuring that our work adheres to our vision in the broadest senses, knowing that there is a lot iteration and change, every day as we work together, continuing to build that tent, if you will, because I do feel like, I know that there's a lot more people left to join us, so the role of founder, the role of builder, in terms of our infrastructure, our ways moving forward, aggregators, in terms of teams and talent.
Position is Contained Within Clearly Defined Parameters	My role is Director of National Research and Impact, so my job is to figure out what the outcomes and impacts of all of this are.

Prior Engagement and Understanding of the Health Sector	
Primary Experience Within the Health Sector	I run a healthcare consulting firm. We are focused on the improvement and innovation space in healthcare, so helping healthcare organizations adjust to the environment, transform, invent new models, kind of push the envelope in healthcare. I have done a lot of work with the FQHC environment, I was involved originally in helping to set a FQHC in Washington, DC, and then FQHC Medicaid health plan, and then have been providing consulting services to the federal government, to the agency that supports all the FQHCs, and then directly to FQHCs and primary care associations and so on.
Tangential Experience with the Health Sector	I was born in New Orleans, LA, first generation, my father's from Santiago de Cuba, and my mother is from Wauke, Ecuador. They're both physicians so, some of my favorite times were around the dinner table when they would, (I guess HIPAA violation) but they would always talk about cases that they had. I was at a young age. That was the conversation at dinner, which in some ways relates to the power of arts, and health, and arts participation, and starting with that as a foundation of artmaking.
No Experience with the Health Sector	I realized that the arts had the opportunity to not only be this incredibly fun and joyful and participatory, and community-building vehicle, but it also had the power to motivate people to take care of themselves, which is huge, and I'd never put those two things together, and I'd never thought of myself as someone that was part of the health field in that way, but I immediately saw the direct correlation between wanting to do the choreography well and therefore needing to move well and therefore needing to go to the doctor to get the right medication for the arthritis in order to really, fully participate. And I also saw the incredible power that being cast in a particular role, or in a particular character, it gave some people a great deal of pride in themselves.

Barriers to the Project	
Time Constraints	One challenge I see is a lack of time, and a lack of full time capacity from a lot of the folks at ONOP.
Financial Constraints	Funding is always an issue.
Need for Case-Making Arts in Health	One of the reasons that we want it to have scale and visibility, and that we want the narrative component of it to be really strong is that we need a paradigm shift, we need an awareness shift, both to appreciate the creative practice that is already present in people’s lives, and also to acknowledge that more opportunities, providing opportunities for creative practice and artistic engagement, that that would directly lead to the kind of physical and emotional thriving that we know we want. We all want that, and I think the case needs to be made.
Challenges with Cross-Sector Collaboration	There are a lot of barriers to all of this. So the competing priorities of the participating stakeholders is always going to be an issue, and how to minimize that from having an impact on the group.
Organizational/Leadership Turnover	Turnover of key champions, I think, is something that needs to be anticipated and planned for. If [Identifier], as a lead champion for example, decided to suddenly retire or had poor health for some reason and no longer was a champion, if there are not people in line to jump into her role, that could then end up hurting the initiative long-term, so always anticipating that, I think is a big issue.
Foundational Views of the Project	
Importance of Centering Communities	We have these local community members who are essentially an advisory board, and if we are able to ensure that they are representative of the population we are trying to serve, then that expands what equity can look like, because now we’ve got folks, and let’s be clear, eight to twelve people is not going to represent everyone, there’s not going to be an ability to have every single person’s view or need addressed, because that’s unrealistic. But I do think the community mapmakers groups serve as a key component to our ability to equitably serve a community.
Art as a Social Determinant of Health	The arts affect the systems which affect the Social Determinants of Health, and that they can affect them be creating more equitable engagement between publics and institutions, and the arts affect the Social Determinants of Health by helping to transform systems into more equitable deliverers, of public good outcomes, and that those effects happen when artists collaborate in process around some of those social determinant sectors. And that can be in creative problem solving, that can be in coalition building, that can be an equitable local engagement, that can be in vision healthy, just, positive futures, but that’s how in particular, I think about how the arts affect the Social Determinants of Health, and I think the arts are a social determinant for health.
Importance of Access to the Arts	So it’s just kind of common sense, logical to me that if we know that we are healthier when we engage in the arts, the level to which we

	have access to the arts and the ability to participate in the arts or creative activity is obviously a determinant of health. There are many different determinants of health, and they all could be ranked differently in terms of their importance and I don't know where arts and culture would fall, in that quantitative arena, but we have the evidence now, and we understand that when we don't have access to the arts we're limiting access to health-building resources"
Importance of equity throughout the project	We had a process that we called radical inclusion, and our goal was not, people talk about community engagement in cities, and our motto was, "Three minutes on the microphone does not equal community engagement." How are we going to folks who are not engaged in the process, and being intentional about how to include them, and to make sure that their voices are heard as a part of that process? I think that there's an opportunity for us to work with communities in ways that are really focused on radical inclusiveness, and to be intentional about trying to help cities find ways to seek out those that have not historically been engaged, and find meaningful ways for them to be a part of the work.
Prior Relationships to Art	
Professional Experience	In real life, I'm an orchestra conductor. So the first part of my career was conducting professional orchestras and performing in different parts of the world, and so I actually came to Jackson playing Principal in the symphony and conducting Opera South, which is an opera company there, and running the orchestra program and the opera program for the university. So that's what I do in real life and then the rest of this stuff is all trying to scaffold on top of it.
Personal Creative Practice	This is something I kind of know in my bones, just from my own experiences growing up, in and around hip-hop culture. At twelve, thirteen I didn't have this language, but I knew I'd rather pop and lock on a sidewalk, and battle people, than throw punches or beat each other with led pipes. So from a practical sense, I saw those things growing up, a lot, and again, timing is everything, so I was lucky that there is this nascent culture that began to emerge around me, that had everything to do with creative expression.
No Practice or Regular Engagement	I would consider myself an outlier in my relationship with this group, and I have virtually no artistic ability, talent whatsoever.