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The creativity-spirituality construct and its role in transformative coping

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Background

- Koenig (2008) emphasised the direct effect stress and negative emotions have on medical problems like **heart disease and cancer**.

- The World Health Organisation (2001) stressed that mental illness is often **the result of ineffective coping with stress**. One in four adults are affected by mental ill health during their lifetime.

- Ineffective coping negatively affects health by changing the body's neurochemistry. **Effective coping** is an essential skill to prevent mental ill-health, promote health, and aid recovery.

- **Managing emotions is a key element in coping** with challenging situations and significant life changes (Lazarus, 1999).

- **Emotional suppression** can be detrimental to our wellbeing, therefore, attempts to become more aware of our emotions are important (Mayer & Salovey, 1993; Mayer et al., 2001, 2004).

- **Positive responses to stress, and building personal strengths** is invaluable (Monat & Lazarus, 1985; Gillham & Seligman, 1999).

Overview and aims of study

- Both **spirituality** (e.g., Bray, 2010; Faul & Hills, 2006) and **creativity** (e.g., Braverman Schmidt, 2006; Madden & Bloom, 2004) have been shown to have a multitude of **mental health benefits**. Applying a combination of both as a positive and **pro-active coping strategy** could provide individuals with the collective and amplified mental health benefits of both concepts, thereby leading to **positive transformation**, increased **resilience** and more effective long-term coping.

- This study empirically examined whether a) creativity is used in coping; b) spirituality is used in coping; c) **whether the conceptually distinct concepts of creative and spiritual coping are positively correlated**; and d) whether these phenomena occur irrespective of demographic variables.

- **Two newly constructed measures** were employed to facilitate the investigation, assisting their validation in the process: The *Creative Coping Scale* (CCS) and the *Spiritual Coping Scale* (SCS).
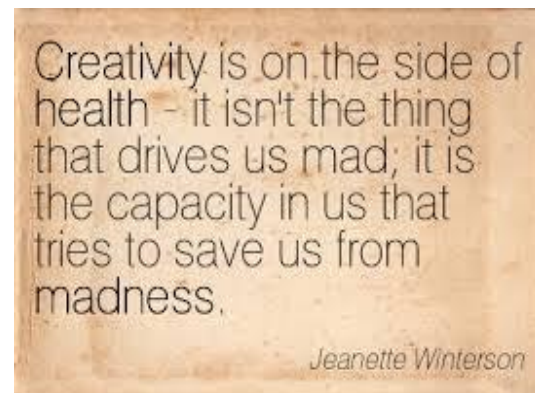
Health benefits of creativity

- *Improved expression and communication*
- *Integration of emotional, physical, cognitive, and social functioning*
- *Enhanced self-awareness*
- *Facilitating transformation*

(Madden & Bloom, 2004)

- *Obtaining meaning and purpose in life*
- *Increased self expression*
- *Relaxing and focussing*
- *Increased hope*
- *Increased self-esteem*
- *Reduction in self-harm*

(Spandler, Secker, Kent, Hacking, & Shenton , 2007)

- *These benefits have been found to extend to those with physical illness, particularly cancer patients* (e.g., Classen, Koopman, Angell, & Spiegel, 1996; Reynolds, Lim, & Prior, 2008; Visser & Op't Hoog, 2008)**.**

Health benefits of spirituality

- Attaining a different **perspective** of a situation, **transcending** adverse circumstances, (re-)**connecting** with self, others, nature, and God or a Higher Power (e.g., Coyle, 2001; Mayers & Johnston, 2008);

- **Connectedness and belonging** are core aspects (e.g., Emmett, 2008; Iwasaki, Bartlett, Gottlieb, & Hall, 2009; Shih et al., 2009);

- Regaining **hope** and **self esteem, positive transformation and personal growth** (e.g., Keating, 2008);

- Finding **meaning in life** (e.g., Danesh, 1997; O'Murchu, 1999);

- **Spiritual theory of self** (Faull & Hills, 2006): transformation of self and **building resilience** are fundamental processes in coping with major life changes.

- Spirituality's **benefits**, albeit influenced by culture and society, are **universal** (Bray, 2010; Chiu et al., 2004; Coyle, 2001; Krok, 2008; Rajakumar, Jillings, Osborne, & Tognazzini, 2008).

Linking creativity and spirituality

- To date, there have been no empirical studies concerning an association between creativity and spirituality.

- An increasing number of publications discusses a theoretical link between creativity and spirituality. (e.g., Coleman, 1998; Miller & Cook-Greuter, 2000; Mooney & Timmins, 2007; Moritz et al, 2007; Raab-Mayo, 2009; Shaw, 2005; Winnicott, 1971).

- ***Creativity is most often regarded as an aspect of spirituality*** (e.g., Bray, 2010; Coleman, 1998; Edwards, 2000; Jacobs, 1996; Maslow, 1963; Rockwood Lane, 2005).

- Creativity is part of the spiritual journey, the "*via creativa*" (Edwards, 2000, p. 5).

- Spirituality and creativity are linked through the **subjective meaning** (Belzen, 2009; Frankl, 1959; Zohar & Marshall, 2000) of the creative process and product to the individual. The more meaningful something is to someone, the more spiritual, or "sacred" it becomes.

"What lies behind us and what lies before us are tiny matters compared to what lies within us."
Walt Emerson

The theory of transformative coping (TTC)

- The TTC is rooted in Lazarus and Folkman's (1984) *stress and coping model*, and Fredrickson's (2004) *broaden-and-build theory of positive emotions*.

- ***Emotion-focused and problem-focused coping strategies are combined.***

- ***Negative emotions are transformed into positive ones***, which are cultivated to permanently increase **resilience**.

- The TTC proposes that through the combined application of creativity and spirituality as a positive, pro-active coping strategy positive transformation and personal growth take place, and the combined and amplified mental health benefits of both concepts lead to more effective long-term coping, and subsequent promotion of health and wellbeing.

- Spirituality encourages reflection and fosters increased self-awareness, while creativity affords the opportunity for emotional expression .

- *In particular,* ***hope, self-esteem, and meaning-in-life*** are increased, boosting wellbeing and **resilience**.

The rationale for constructing the Creative Coping Scale (CCS) and the Spiritual Coping Scale (SCS)

- Exploration of the creativity-, spirituality-, and coping literature yielded no comparable measures.

- There are numerous measures available to measure creativity, spirituality , and coping.

- These were unsuitable for the study which set out to specifically investigate the constructs of **creative coping** and **spiritual coping**, as well as their proposed **association**.

- CCS and SCS, two newly developed self-report measures were designed to encompass aspects of creative coping and spiritual coping, respectively.

The SCS is conceptually distinct from existing scales measuring aspects of religious and spiritual coping:

- **Religious Coping Scale** by Pargament, Koenig, and Perez (2000):
  - There are some similarities between this and SCS , though only in that both include items referring to God or faith. Belief, or faith in God is a dimension of both religion and spirituality (O'Murchu, 1999; Paloutzian & Park, 2005; Pargament, 2007).

- **Spiritual Coping Strategies Scale** (Baldacchino & Buhagiar, 2003)
  - Consists of religious (prayer) and non-religious (relationships with family and friends) coping strategy items, and is entirely distinct from the SCS.

- **Importance of Spirituality** measure (Maton, 1989)
  - Investigates the stress-buffering role of spiritual support and focuses "on the perceived, personally supportive components of an individual's relationship with God (Maton, 1989, p. 310) which he defines as *spiritual support*. Other aspects of the multidimensional concept of spirituality are not explored. As such, the scale is conceptually different from the SCS.

- **Spiritual and Religious Attitudes in Dealing with Illness** (Buessing, Ostermann, & Matthiessen, 2005)
  - Designed to specifically investigate how chronic disease patients living in a secular society regard the influence of spirituality on their illness, their lives, and their coping efforts.

- **Receptivity Scale** (Pieper & Van Uden, 2005)
  - This scale does not include items pertaining to a personal God or to spirituality.

Method: Participants

- 610 students completed the questionnaires.

- Most were between 18 and 30 years (563, 92.3%), with only one respondent aged over 51.

- 235 (38.5%) were male and 375 (61.5%) female.

- The majority of the sample was Kuwaiti (54%), 21% were Irish, 10% British, 11% American, and 4% of other nationality.

- The predominant faith in the sample was Muslim (54%). 38% were Christian, and the remaining 8% were from other, or no denominations, agnostic, or did not supply their faith orientation.

Method: Measures

A questionnaire booklet contained:

Demographic questions, the initial Creative Coping Scale, consisting of 31 items (CCS-31), and the initial Spiritual Coping Scale, comprising 45 items (SCS-45).

CCS-31: 31 items assessed the use of creativity as a coping strategy. Creative coping being a complex, multidimensional construct, a range of questions aimed at accessing the various dimensions of emotion, cognition, and perception, including perspective, self-expression, focus, problem solving, distraction, and relaxation. Items were assessed on a 7-point Likert scale (1=disgree strongly to 7 = agree strongly). Higher scores indicated a higher degree of creative coping. Typical item: *"Creativity helps me express my thoughts and feelings."*

Method: Measures cont'd.

SCS-45: 45 items assessed the use of spirituality as a coping strategy. Spiritual coping being a complex, multidimensional construct, it was necessary to include a range of questions in order to access the various dimensions, e.g. Transcendence, belonging, connectedness / unity, relationship with self, others, the world and a higher being, meaning and purpose, hope, and self-awareness. Items were assessed on a 7-point Likert scale (1=disgree strongly to 7 = agree strongly). Higher scores indicated a higher degree of spiritual coping. Typical item: *"Spirituality gives my life meaning."*

Method: Procedure

- A questionnaire booklet with both scales and demographic questions, participant information sheet and brief requesting informed consent, was distributed to student populations in Northern Ireland, Republic of Ireland, USA, and Kuwait during their psychology lectures.

- No identifying information was required. Participants were given a short introduction to the research aims. Participation was voluntary and no incentives were offered.

Results: Principal components analysis (PCA) and endorsement of CCS

- Results of PCA showed that **all 19 remaining items loaded well (above .547) on a single factor model**, confirming a good conceptual fit.

- Cronbach's alpha coefficient for the CCS-19 was computed at .947, **indicating good internal consistency**.

- **Frequency calculations showed that 73% of the participants applied creative coping to some extent**, i.e. scoring between "*moderately agree*" and "*strongly agree*".

Results: PCA and endorsement of SCS

- PCA specified a **single factor solution. All 30 remaining items loaded well (above .831)** on the model, confirming a good conceptual fit.

- Cronbach's alpha coefficient for the SCS-30 was computed at .990, indicating **good internal consistency**.

- Frequency calculations showed that **51% of the participants applied spiritual coping to some extent**, i.e. scoring between "*moderately agree*" and "*strongly agree".*

Results
Association between CCS-19 and SCS-30, and gender differences

- **For the whole sample the correlation was a moderate, positive one** (r=.378, n=534, p<.01). The correlation was **significant for females; and for age group 1** (18-30 years). The correlation was **strongest within the Kuwaiti, Muslim** (r=.698, n=274, p<.01) **subsample**.

- Males scored significantly lower (M = 4.67, SD = .82) than females (M = 5.13, SD = 1.06) on the CCS-19, and on the SCS-30 (M = 4.87, SD = 1.25) than females (M = 5.33, SD = 1.61. **Gender accounted for 6%** in the variance of the total mean scores on the CCS-19, **and for 2%** of the variance in the total means scores on the SCS-30.
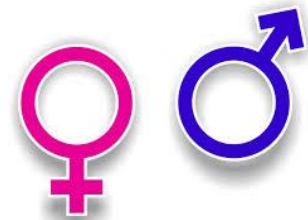
Results:
Age differences between CCS-19 and SCS-30

- There was **no significant difference** in total mean scores **on the CCS-19 for age** group one (18-30 years) (M = 4.97, SD = .99) and age group two (31+ years) (M = 4.80, SD = 1.17). The magnitude of the mean differences was very small (eta squared = .001).

- **A significant difference** in the total mean scores was found **on the SCS-30 for age** group one (M = 5.20, SD = 1.47) and age group two (M = 4.417, SD = 1.99) though the magnitude of the mean differences was very **small** (eta squared .007).

Results
Nationality and religious differences

- Results for **CCS-19** revealed a significant main effect for **religion**, with moderate effect size (eta squared: .06). Least significant difference ('LSD') post-hoc tests showed that **Muslims scored significantly higher** than Christians and other religions.

- **Nationality** also produced a significant main effect on the CCS-19, with a moderate (eta squared: .06) effect size. LSD post-hoc tests showed that **Kuwaitis scored significantly higher** than Europeans and USA nationals.

- ANOVA results on the **SCS-30** revealed a significant main effect for **religion**, with a large effect size of .4. LSD post-hoc tests showed that **Muslims scored significantly higher** than Christians and other religions. Christians, in turn, scored significantly higher than other religions.

- **Nationality** showed a main effect on the SCS-30 with a large effect size of eta squared .3. LSD Post-hoc tests demonstrated that **Kuwaitis scored significantly higher** than Europeans. No significant difference, however, was found between Europeans and USA nationals.
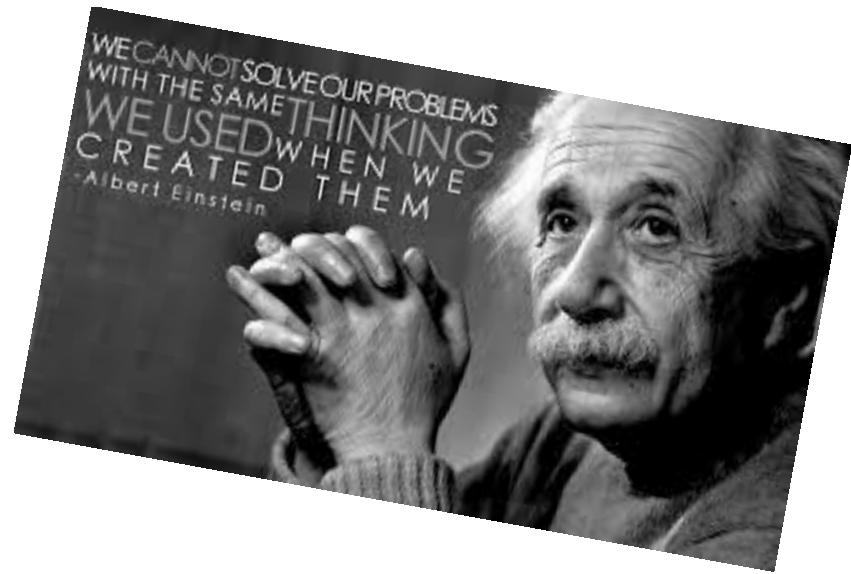
Summary

- Both scales showed promising psychometric properties. Having demonstrated satisfactory levels of both content and construct validity, they displayed good internal consistency (.941 for the CCS-19; .990 for the SCS-30).

- The majority of participants applied both creativity (72.98%), and spirituality (51.28%) in coping.

- The positive, moderate association between the CCS-19 and the SCS-30 indicated that the constructs of creative and spiritual coping are, indeed, positively correlated. This result supports the theoretical propositions of a link between creativity and spirituality.

- Since the strength of the correlation varied considerably between demographic groups, further studies ought to investigate the differences in populations with regard to the strength of the relationship between creative and spiritual coping.

Summary cont'd.

- Both religion and nationality influenced the results, as did gender, with females scoring higher on both scales than males, and age, with younger participants scoring higher than the older ones. Since the sample was skewed in favour of young (92.70%), female (65.36%) Kuwaiti (53.4%) Muslims (53.6%), results cannot be generalised, but may emphasise the influence of cultural differences on *transformative coping*. It is hoped that further, mixed method cross-cultural studies will clarify the extent and nature of these differences.

- These results, despite the skewed sample, indicate that demographic differences do influence the extent to which creative and spiritual coping are applied. It is important to gain an understanding, and raise awareness, of these differences, in order to be able to adapt potential interventions , as discussed in Corry, Lewis, & Mallett, 2014, accordingly.

WE CANNOT SOLVE OUR PROBLEMS WITH THE SAME THINKING WE USED WHEN WE CREATED THEM
-Albert Einstein

Recommendations

- It is suggested that a spiritual attitude and creative expression **can be cultivated**.

- The application of transformative coping can be **fostered and encouraged**.

- Transformative coping can find application in mental health **promotion, prevention, therapy, and recovery.**

- The principles of the TTC can be incorporated into existing therapy approaches as an **empowering**, individually tailored opportunity for **problem solving and emotion management**.

- **Personal resources** are actively cultivated and strengthened; deficiencies are reduced.

- **More research is required to test the TTC and its propositions**, e.g., transformative coping builds resilience, which buffers against stress, helping to improve and maintain mental health and wellbeing.

Thank you for listening.

For references and further information please see handouts.