

Art in the Corporate Workplace:
Understanding the Benefit of Art Therapy to Promote Self-Care and Reduce Stress
in Corporate Wellness Programs

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ABSTRACT

Providing a foundation for the inclusion of art in corporate wellness programs to address self-care and stress reduction, this study presented data regarding the use of wellness programs in the corporate setting, highlighted benefits of art therapy on stress reduction, and evaluated the stress experienced by corporate employees. Considering their current stress levels, self-care practices, and use of art to decrease stress, participants from two corporate companies completed an online survey using both quantitative and free response questions. Results indicated that that 88.88% of participants experienced average to very high levels of work-related stress, 21.95% reported participation in self-care practices at work often to extremely often, and 58.82% had ever used art to decrease stress. The data paired with the presented literature supports a need for the inclusion of art therapy in existing wellness programs as well as a need for future research on the specific benefits of such inclusion.

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CHAPTER I

Introduction

In the last year, a lot of focus has been placed on the boundaries and limitations of the American Art Therapy Association's (AATA) current definition of art therapy. This was, in part, the result of a call for papers in *Art Therapy: Journal of the American Art Therapy Association* (AATA, 2015). Those who answered the call identified ways in which art therapy's strong focus on mental health was potentially narrow, restrictive, and did not fully convey the far-reaching benefits of the field (Bucciarelli, 2016; Moon, 2016; Spooner, 2016).

Since its inception, there has been a debate on the definition of art therapy between those using art as therapy and those using art in therapy as evidenced by Ulman's (1961) outline of dichotomous views between Naumburg and Kramer. Today, the definition dilemma has stretched further as art therapists work not only with individuals in a mental health capacity, but also with organizations and society through consultation, promoting wellness, and engaging in research (Spooner, 2016). These broadening roles underscore the need for a more encompassing definition. As the definition of art therapy continues to evolve, this research serves as a foundation for future research associated with art therapy in a wellness model for corporate based working adults.

Problem Statement

According to the American Psychological Association (APA; 2015), stress levels of adults (which was rated on a scale of one to ten, with ten being the highest) increased from 4.9 out of 10 in 2014, to 5.1 out of 10 in 2015, with 22% of adults not believing they were doing everything they could to manage their stress. This researcher found several studies related to stress, burnout, and art therapy's impact on these experiences with hospital health care workers, caretakers, other mental health care professionals, and hospice staff as outlined by Huet (2015).

What was missing, however, was research related to the stress experience and art therapy's role, specifically with employees in corporate and other non-caregiving settings. Without such research, support for efficacious art therapy for nearly 70% of working adults experiencing increased stress was not accessible (United States Department of Labor, 2017).

Research Questions

The questions which this research aimed to address were: *To what degree do corporate employees experience stress, and what self-care practices do they engage in at home and at work for reducing stress?* Additionally, this research addressed the question of whether employees had used art-based activities to reduce stress. Based on corporate employee experiences paired with existing literature, the research also intended to illuminate art therapy's potential role in reducing stress in the corporate workplace.

Basic Assumptions

In conducting this study, basic assumptions were made. The researcher assumed, based on assurances of confidentiality, anonymity, and the volunteer nature of the study, that all participants responded truthfully. Additionally, the study was conducted with the assumption that the groups surveyed were representative of typical corporate environments in the United States. Regarding the concepts of stress and wellness, it was also presumed that one goal of wellness programs was to improve the overall health of employees to include both mental health and the reduction of stress. The final assumption was that excessive amounts of stress hold negative connotations, but that not all stress is intrinsically negative or detrimental.

Statement of Purpose

The purpose of this study was to identify perceived stress levels and self-care practices of corporate employees to develop a foundation for future art therapy interventions focused on improving wellness and increasing job satisfaction and productivity in a corporate environment.

The study provided data on which the creation of future art therapy programs may be based and evaluated for effectiveness.

Hypothesis

This study hypothesized that most corporate employees would experience high levels of stress, that a majority would report engaging in some self-care aimed at relieving stress at home, but not at work, and that a majority of employees have not utilized art-related activities for stress relief. It was also hypothesized that these survey results along with a review of existing literature highlighting the benefits of art therapy on stress reduction, its positive impact for direct care workers, and the overall benefits of workplace wellness programs would indicate a need for art therapy in existing and upcoming corporate wellness programs.

Definition of Terms

Health. For the purposes of this study, health has been defined as well-being on physical, mental, and social levels (World Health Organization [WHO], 1948).

Wellness. Wellness has been defined as a state of having good health and vitality (Bishop & Yardley, 2010).

Corporate setting. This work environment referred to a work setting most notably in an office where daily tasks are removed from direct care of others.

Stress. For the purposes of this study, stress has been defined as a mental or emotional state of being resulting from the perception of control over demanding circumstances (American Institute of Stress [AIS], 2017).

Self-care activities. Self-care activities have been defined as those engaged in to care for one's self on a mental, emotional, physical, and spiritual level.

Justification of the Study

As previously stated, the existing definition of art therapy was questioned for its lack of

broad-spectrum coverage of all that the field entails. This study investigated the feelings of corporate employees as they related to stress, self-care, and what part art can play. In doing so, the findings aimed to add to the body of art therapy literature to expand the reach of art therapy as a profession. Further research will not only assist in the opportunities corporate employees have to experience art, but also the opportunities for art therapists to work with a wider variety of populations and organizations. Finally, the foundation that this study purported to lay might enhance corporate wellness models and support a more encompassing definition of art therapy.

CHAPTER II

Literature Review**Stress in the Workplace**

The concept of stress has often been associated with feelings of being overwhelmed or worried (APA, 2017). According to the literature, causes of stress were numerous ranging from the impact of daily responsibilities, to family, work, or traumatic experiences (National Institute of Mental Health [NIH], n.d.). The Centers for Disease Control and Prevention (CDC, n.d.), defined job stress or workplace stress as the “harmful physical and emotional responses that occur when the requirements of the job do not match the capabilities, resources, or needs of the worker” (p. 6). Additional causes of workplace stress included role ambiguity, unclear management, working long hours, monotonous work, interpersonal tension, general pressures associated with work, and perceived lack of control (Gatchel, 2012; Nixon, Mazzola, Bauer, Krueger, & Spector, 2011; Wright, 2007). Critical to note was the difference between legitimate workplace stress and daily challenges. Challenges within the workplace often motivated and energized employees psychologically, playing a significant role in encouraging mastery and productivity, whereas workplace stress was psychologically and sometimes physically draining, leading to decreased productivity, health, and mood (CDC, n.d.; Wright, 2007). Workplace stress also occurred due to what Arthur (2004) described as the requirement employees feel to publicly manage their emotions in the workplace.

According to the American Psychological Association’s (2016) yearly *Stress in America* survey, money and work were the top two sources of stress, with millennials rather than the older generations indicating that work was a significant source of stress. In 2015, more than one third of adults reported an increase in stress levels from the previous year. Additionally, adults indicated an awareness of the negative impact that stress had on their mental and physical health,

however, twenty-one percent indicated that they were not doing enough to manage their stress and one in five adults reported never having engaged in activities related to stress relief (APA, 2016).

The impact of work related stress was far reaching, affecting individuals, their families, their coworkers and departments, as well as entire organizations. For individuals experiencing workplace stress, there was an increased risk of adverse health conditions including workplace injuries, musculoskeletal disorders, headaches, gastrointestinal problems, fatigue, and sleep disturbances as well as psychological disorders (Nixon et al., 2011; Wright, 2007). Through a meta-analysis of 79 studies, Nixon et al. (2011) found that cross-sectionally and over time there was a relationship between workplace stressors and multiple physical symptoms. On a broader scale, the focus on workplace wellness and decreased stress had increased as there were also financial implications of workplace stress for organizations and nations worldwide. The financial cost of employee stress in the United States was \$250-300 billion, \$64.8-66.1 billion in the United Kingdom, and \$232 billion in Japan (Nixon et al., 2011). For organizations, the impact was great with increased absenteeism, increased health-care reliance, and decreased productivity (Van der Klink, Blonk, Schene, & van Dijk, 2001).

Wellness in the Corporate Workplace

Given the impact on employees, departments, organizations, and national economies, heightened focus has been placed on ways to address the causes and symptoms of workplace stress. This is often through occupational-level interventions or employee-based wellness programs (DeVries, 2010; Roach, 2016). There has been debate over which interventions within the workplace were the most effective in reducing workplace stress; either those aimed at prevention at the administrative and organizational levels or those which serve to address and reduce employees' experiences of daily workplace stress (Arthur, 2004; Cox, Karanika,

Griffiths, & Houdmont, 2007; Treven, Treven, & Zizek, 2011; Wright, 2007). Treven et al. (2011) argued that organizational level stress prevention such as good management and work organization were most effective, while Cox et al. (2007) indicated that this was the least common type of intervention, and that much research was still needed. In the meantime, recent literature has supported organizational wellness programs geared toward assisting employees with existing levels of work-related stress (Bright et al., 2012; Buruck, Dorfel, Kugler, & Brom, 2016; DeVries, 2010; Dhobale, 2009; Jarman et al., 2016; Milch, Vaag, Glaever, & Saksvik, 2013; Page & Vella-Brodrick, 2013; Roach, 2016; Thogersen-Ntoumani & Fox, 2005). Dhobale (2009) outlined specific benefits of such programs to include reduced absenteeism and overall costs associated with employee health care needs, increased productivity and loyalty along with positive mental and physical health, and improved work environments.

While employee wellness programs have become increasingly common in workplaces with almost two thirds of companies in the United States offering wellness initiatives, it has been imperative to the success and expansion of such offerings to consider employee preferences (Bright et al., 2012; Roach, 2016). In a survey conducted by Bright et al. (2012) of employees from one self-insured employer, it was expressed that “the majority of respondents indicated a desire to participate in a work site-based health and wellness clinic” (p. 530). Also noted was the importance of on-site wellness programs taking into consideration the amount of time an employee spends at their place of employment. However, employees did indicate a few barriers to participation despite interest, specifying work schedule and feeling “too busy” as major concerns.

Employee wellness programs can address a variety of concerns and have included multiple approaches to wellness including nutrition, physical fitness, mental and physical health education and practice, and specified stress management interventions (Dhobale, 2009).

Dhobale proposed stress management training as a component of workplace wellness programs, incorporating it into existing trainings for both employees and management. This model focused on increasing employee awareness related to stress and its impact on work and the workplace, as well as including various stress management techniques like yoga, massage, dance classes, and medical camps (Dhobale, 2009). Similarly, Wright (2007) proposed coaching, or employee development fostered by conversations with managers, as a model for workplace stress management. The benefit of instilling a coaching culture within organizations comprised of training and wellness education was promoted to enable employees to better utilize information related to wellness and apply it to their individual lives.

Page and Vella-Brodrick (2013) investigated the use of an employee well-being program based in positive psychology, which highlighted the effectiveness of focusing on strengths as opposed to stressors (p. 1007). Their Working for Wellness program, geared toward using strengths to foster well-being, highlighted how a positive-psychology approach in the workplace would impact increased positive feelings and positive functioning. This was conducted through a mixed method randomized control trial with government employees. Employees who participated in the positive psychology-based intervention expressed significant improvement in subjective well-being, psychological well-being, and work-related affective well-being (Page & Vella-Brodrick, 2013).

Jarman et al. (2016) investigated the effectiveness of a multi-component health program called Health@Work, which specifically addressed stress and unhealthy lifestyles with public service workers over a three-year period. This broad program included mental health and lifestyle themed interventions. Researchers found that those with poorer mental health attended offered interventions more frequently, and that mental health offerings through the program did not significantly improve distress. Buruck et al. (2016) examined how reduced well-being in

employees may have been the result of a lack of personal resources or skills needed to address emotional demands, citing these demands as predictors of well-being. To address this, researchers evaluated the effectiveness of Affect Regulation Training (ART) on improved emotion regulation skills and therefore well-being. Their findings found that training employees in emotional regulation skills such as muscle and breathing relaxation, acceptance and tolerance of emotions, self-support, and modification of affective states, was effective in improving well-being, and that these improvements were sustained up to six months post-training (Buruck et al., 2016).

Many wellness programs have focused on physical activity to promote health and well-being. Thogersen-Ntoumani and Fox (2005) found, however, that employees with reported low levels of well-being were more in need of such interventions, and yet they were often those who were less likely to participate. According to the researchers, this was potentially due to existing programs not being tailored to inactive or poorly motivated employee needs along with a lack of research indicating specific factors that may have influenced positive well-being in the workplace. Other wellness programs have explored less typical techniques for promoting well-being among employees. Milch et al. (2013), for example, examined how incorporating musical performances in the workplace could facilitate “the positive aspects of the work situation and through this counteract the effects of negative situations and events” (p. 291). Like Page and Vella-Brodrick (2013), Milch et al. (2013) relied on positive psychology theory to advocate for the fostering and development of resources and positive aspects of the workplace to handle stressors as opposed to having focused simply on reducing negative factors. Their research found that for the purposes of promoting positive work environments and resources, and for contributions to increased positive health outcomes, musical interventions to include choir formation, could be beneficial (Milch et al., 2013). These positive resources, increased

organizational commitment, and increased level of engagement thus may impact stress and stress reduction.

A second example of a less common well-being model was the implementation of theater and performance techniques within the workplace to manage stress and improve occupational performance (Roach, 2016). Roach (2016) implemented a ten-week on-site theater program with employees from two varying companies which emphasized techniques such as improvisation, play-based learning, clowning, physical acting, and voice work. Research indicated that participation in the program positively impacted employee creativity and problem solving, teambuilding and communication, as well as self-awareness. The interpersonal communication and team dynamic improvements that were seen can be applied to those causes of stress such as interpersonal differences and tensions.

As workplace wellness programs have worked to address employee needs in response to existing stress, DeVries (2010) offered multiple comprehensive and evolving tools that will continue to develop toward that end. Wireless technology, integrated instead of siloed wellness solutions, telephone health coaching, robust participation enhancing programs, meaningful incentives, and expanded wellness programs will guide the focus of wellness providers and organizations (DeVries, 2010). These tools paired with research and a thorough understanding of the complexities of work-related stress and its need for interdisciplinary approaches will hopefully fulfill the demand for wellness solutions and account for individual needs.

Art Therapy's Impact

Slayton, D'Archer, and Kaplan (2010) conducted a literature review to explore outcome studies related to the efficacy of art therapy. In doing so, through both quantitative and qualitative research, art therapy's impact on various populations across both clinical and non-clinical settings were argued. Slayton et al. (2010) presented several studies that showed how art

therapy has been statistically significant in improving a variety of symptoms for individuals within various populations. Scarce in the literature review, however, was research related specifically to adults lacking physical or psychological impairment as well as studies related to the impact of art and art therapy on well-being and stress.

Thankfully since Slayton et al.'s (2010) review, additional research has been conducted to explore art therapy's impact on well-being, mood, and stress reduction with adults in non-clinical settings. Jensen (2013) examined two case studies in Britain and Denmark that compared the promotion of well-being through art activities. While implementation varied, they both found positive outcomes of identity finding, increased sense of well-being, and increased self-confidence. Art participation influenced trust, openness, cooperation, and respect – attributes necessary in addressing previously mentioned interpersonal causes of workplace stress. Bell and Robbins (2007) found that creating art had a dramatic impact on the reduction of negative mood. This was in comparison to the act of sorting and viewing works of art as tasked to a control group which ultimately supported the notion that “the production of art has general mood-enhancing properties” (p. 73).

Consistent with Bell and Robbins (2007), additional research has been conducted supporting art therapy's positive impact on mood (Dalebroux, Goldstein, & Winner, 2008; De Petrillo & Winner, 2005; Northcott & Frein, 2017). Dalebroux et al. (2008) examined the impact of making art on short-term mood repair. They found that participants who made art related to something happy found greater mood improvement than those who were distracted by images or asked to create a drawing based on their current negative mood. De Petrillo and Winner (2005) highlighted the use of art as not only a diagnostic tool, but as a means for both decreasing stress and improving mood. Through their two-experiment research they concluded that art increased mood both for those with an interest and ability in art as well as for those with no artistic

experience or interest. While art making may serve as a distraction and therefore increase positive mood, they also found that art's facilitation of meaning and expression of feelings ultimately improved mood. In a recent study focused on drawing, Northcott and Frein (2017) discovered that drawing measurably lowered negative mood in instances where participants were not provided a negative stimulus. This highlighted the benefits art making and drawing could potentially have in a general population setting.

Using a telephone survey to determine the relationship between reported arts engagement and subjective well-being, Davies, Knuiman, and Rosenberg (2016) found a positive correlation between 100 or more hours of arts engagement per year and mental well-being. This correlation was indicative of the ability to cope with stress and be productive. Additionally, Crone et al. (2013) conducted research related to a ten-week art intervention as it impacted individuals with physical or psychological impairments in a primary care setting, finding that similar interventions contributed to current policy priorities related to the improvement of mental health and well-being within the general population. Through their program, they found that patients who attended and completed 10 weeks of art offered displayed improved well-being scores on the Warwick-Edinburgh Mental Well-being Scale.

Titus and Sinacore (2013) conducted a data analysis to explore how both the process and product of art making impacted the well-being of young adult women. They found that participants felt capable, productive, and useful having received positive responses from peers through making art. Furthermore, these feelings helped foster an overall positive self-image. Additionally, results indicated that well-being was promoted by art creation and product, and that art making had the potential to be an effective tool for the managing of everyday stress among individuals without physical or mental health issues (Titus & Sinacore, 2013).

To isolate the impact of art making on stress, Abbot, Shanahan, and Nuefeld (2013)

conducted research with university students and found that “an artistic focus for a stress-reducing task can be more effective than a non-artistic task matched for mental and physical activity and time” (p. 75). Furthermore, they found that the benefits of artistic tasks were more significant than simply physical release of energy, thus implying that the cathartic release of emotions was central to observed decreases in stress. Babouchkina and Robbins (2015) then delved further into the specifics of art tasks and their impact on mood by determining which specific drawing techniques were most effective in reducing negative mood. They found that drawing within a circular boundary, as with a mandala, improved mood more so than within a square.

Furthermore, they found that when asked to consider their feelings as participants drew within a circle, the improvement of mood was most pronounced (Babouchkina & Robbins, 2015).

Through a review of the literature, Sholt and Gavron (2006) also found that clay as a medium was also effective in the release of emotions for those who were less verbal or defensive. Clay served as a metaphor whereby those interacting with it could transform negative feelings or emotions such as stress into more positive meaningful expressions (Sholt & Gavron, 2006).

Another realm of art therapy that has been linked to both creativity and increased well-being is that of flow, or a “state of optimal attention and engagement” (Chilton, 2013, p. 64). Often flow has been associated with a feeling of being engrossed in an activity with little to no sense of time passing and can be related to an increased sense of control. This sense of control may be useful in combating the lack of occupational control that has been indicated as a main cause of stress among workplace employees. According to Chilton (2013), art allows for flow by offering an experience that is adequately challenging to the participant while aligning technique with the participant’s skills, resulting in “positive affect and satisfaction” (Page & Vella-Brodrick, 2013, p. 1009).

Returning to the theory of positive psychology, Wilkinson and Chilton (2013) linked this

concept with art therapy in their research. They found that positively focused art making impacted mood beneficially and assisted in the repair of negative emotions. This positive focused art making served to elicit joy, hope, and love while promoting meaning-making, which were central to well-being. Dalebroux et al. (2008) introduced similar findings in their study which determined that art making related to something happy for participants was more effective in increasing positive mood than was art making used to express negative emotion. Furthermore, Wilkinson and Chilton (2013) suggested that producing such positive focused art alongside an art therapist enhanced the meaning-making process as participants could enter the relationship between artist and artwork to mine for purpose and positive meaning.

Also notable in the research was the increased popularity and exposure to adult coloring books geared toward stress reduction (Blackburn & Chamley, 2016). While many of these coloring books have purported to reduce stress and anxiety, it was important to note the differences between these books and the field of art therapy (Wilde & Chapman, 2015; Davies, Merritt, & Wilde, 2015; Mucklow & Porter, 2015). According to the AATA (2015), coloring books themselves are not art therapy, however they may be used for self-care and the AATA has distinguished between utilizing these products and accessing art therapy services by a credentialed professional.

Art Therapy in the Workplace

Art therapy with helping professionals. In addition to research linking art therapy to stress reduction, increased mood, and well-being throughout the general population, there were also several studies which explored art therapy's impact specifically on employees within the helping professions (e.g., health care, hospice, mental health fields). In a review of eleven publications describing art therapy interventions for employees within the general mental health field as well as in palliative and oncology care, Huet (2015) found that art therapy seemed to

have a beneficial impact on work-related stress often increasingly caused by organizational and team dynamics. Her review made clear that art therapy interventions allowed for needed creativity in the workplace to address work stress and well-being.

Among health service workers, studies have been conducted worldwide (Huss & Sarid, 2014; Karpaviciute & Parkinson, 2015; Visnola, Sprudza, Bake, & Pike, 2010). Karpaviciute et al. (2015) purported that a focus on well-being at work presented opportunities to benefit society through promoting feelings of happiness, competence, and satisfaction of individuals in their workplace. In their eight-week study in which health care workers participated in silk painting activities, the results suggested that participants experienced reduced stress at work and improved general health and well-being. Participants described a sense of community along with altered perceptions of their work environment and increased productivity.

In a study conducted by Huss and Sarid (2014), health care workers were placed into either an art therapy or guided imagery group in which they either physically transformed a stressful image related to their work (art therapy group) or transformed the image in their mind (guided imagery group). The results showed that those in the art therapy group displayed a greater reduction in subjective stress, perhaps due to the amount of control participants had in changing their distressing image (Huss & Sarid, 2014). Visnola, et al. (2010) also explored the impact of creativity on health care workers in Latvia, finding that creativity through art therapy acted as a preventative measure used to understand stress and adequately respond to stressful situations. Specifically, art therapy led to a stronger self-concept, which in turn allowed for greater stability against stress. Additionally, due to the group format of the study, participants indicated feeling a greater sense of belonging within the organization and many expressed that art therapy was a way to foster an encouraging atmosphere and build acquaintances with colleagues (Visnola et al., 2010).

In the oncology field, art therapy with employees has been studied by Italia, Favara-Scacco, Di Cataldo, and Russo (2008), and Nainis (2005). Italia et al. (2008) explored the impact that art therapy has had on burnout with 65 doctors and nurses. In their work, they highlighted that burnout and stress were not the same, but that stress often was a catalyst for burnout. Nainis (2005) found that art therapy had worked to make the oncology staff at a Midwest academic hospital more aware of their stressful emotions and provided an opportunity for them to express these emotions in a safe environment, citing the creative process and psychotherapy methods as beneficial. In the hospital, art therapy was provided to nurses upon orientation to expose them to how it could address both their patient's needs as well as their own. Overtime, this Midwest hospital had reported less turnover since the inception of the use of art therapy with the oncology staff (Nainis, 2005).

Meijer-Degen (2014) explored the use of art therapy with mental health workers exposed to violence. The research purported that art therapy with employees working in traumatic settings led to awareness, acceptance, and an increased ability to cope with work-related stressors. Salzano and Lindemann (2013), and Potash, Hi, Chan, Wang, and Cheng (2014) discussed how art making can impact hospice and end of life caregivers. Salzano and Lindemann (2013) found that stress was reduced for caregivers during art making through report of participants who described the process as therapeutic and relaxing. Comparing the use of a staff meeting to time spent making art, the research found that art making was more effective in decreasing exhaustion and burnout levels. Potash et al.'s (2014) research supported these findings and found that art making with the inclusion of an art therapist allowed for a professional relationship in which the understandings of one's emotions and stress could be further explored. Finally, Huet (2011) studied the use of art with health care workers working with individuals with learning disabilities. While benefits were cited, Huet (2011) indicated that

there was need for additional research to examine the use of art therapy within organizations not necessarily geared toward physical and mental health, as staff in these settings were intrinsically more attuned to needing support.

Art therapy with non-helping professionals. While several studies supported the benefits of art therapy with employees in helping professions, far less have been investigated regarding the benefits to non-helping professionals. Huet (2012) conducted a study with middle managers at the UK National Health Service evaluating what she called “art therapy-based consultancy” (p. 3). She found through participant feedback and discussion that this consultancy, based on art making and exploring themes in the art, aided in the increase of well-being during times of stress (Huet, 2012). Upitis, Smithrim, Garbati, and Ogden (2008) set out to understand the impact of art making in a university workplace by using semi-structured interviews following participation in art making. They found that participants experienced deeper relationships because of the experience. Furthermore, they also noted that participants described a temporary reprieve from work stress as they lost track of time creating art – a concept previously described as flow. Finally, Upitis et al. (2008) discovered that participants understood that art-making had a transcendent quality and calming influence, having helped them to deal with professional stressors. Eschleman, Madsen, Alarcon, and Barelka (2014) conducted two studies that aimed to understand the impact of creativity on both recovery experiences and job performance for employees in education, managerial positions, accounting, administration support, and within the United States military. They found that creative activity correlated positively with relaxation experiences, control, mastery, and productivity. Eschleman et al. (2014) called for more research to further understand specifically how creative activity influenced both recovery from work and productivity.

Summary

Wright (2007) noted that societally, workplace stress has been normalized and overlooked. With the increased number of wellness initiatives and programs having taken shape, there was a shift in the prevalence and impact of workplace stress. According to Page and Vella-Brodrick (2013), focus on employee strengths in these initiatives was highly important and yet often unexplored. Using positive psychology and art therapy as proposed by Chilton (2013), along with occupational health psychology, it is possible to promote health for employees in non-helping professions (Milch et al., 2013). While there is ample evidence supporting the benefits of incorporating art therapy and art creation into professions beyond those in caregiving, much is left to be put into practice.

CHAPTER III

Methodology

Participants

Corporate employees from the Marketing and Family Services department of an online public education company, and from an independent benefits firm were selected for this study based on their interest in participating. These companies were chosen for participation due to their accessibility to the researcher and their varied corporate sectors. Three hundred eighty employees of the online public education company were provided access to the survey (see Appendix A) through a hyperlink provided in an email sent directly from the researcher while 55 employees of the benefits firm were provided access to the survey through the same hyperlink provided in an email from the assistant to the director of the organization. Participation was voluntary. Survey respondents were not asked to provide any identifiable information and only basic demographic information was collected to ensure confidentiality. Participants were informed that participation was voluntary and that they could withdraw at any time, for any reason, with no fear of reprisals. Any respondent who did not complete consent as part of the survey completion was disqualified from inclusion in the research data.

Of those provided the link to the survey, a total of 90 individuals responded. The survey was completed fully by 85 of these participants. Five participants skipped questions seven through ten related to general engagement in self-care activities, the use of art to decrease stress, and activities specific to in-office and out-of-office self-care practices. In total, 70 of the respondents were Caucasian, 13 were Black or African American, 2 identified as Hispanic or Latino, 1 was American Indian or Alaskan Native, 1 was Asian/Pacific Islander, and 2 identified as multiple ethnicity or 'other'. Seventy-six of the respondents were female, 11 were male and 3 identified as transgender, variant/non-conforming, or other. Most survey respondents fell within

the 30-49 age range with 57.58%. Those age 18-29 years old made up 32.22% and the remaining 10% were 50-64 years old.

Research Design

This research utilized a survey design using an online survey through SurveyMonkey to establish perceived employee stress levels and involvement in self-care and stress reduction activities. A survey design was chosen for this research to conveniently gather both quantitative and qualitative data and to quickly analyze received data related to a sample of corporate employees (Creswell, 2014). SurveyMonkey was used for this research as it has been established as reliable through its use for multiple published studies related to stress and psychological distress (Campbell & Riggs, 2015; Samad, Reaburn, & Ahmed, 2015; Chipas et al., 2012; Chipas & McKenna, 2011). Per the nature of their respective companies, employees were assumed to be well versed in technology and able to access an online survey with ease.

Research Instruments

For the purposes of the research, the hyperlink to a survey of ten questions (Appendix A) was provided in and disseminated via e-mail by the researcher and through the Human Resource departments of the online public education company and independent benefits firm respectively. Questions were chosen based on the literature reviewed and on the information related to perceived stress in the workplace and relationships with art engagement (Abbot et al, 2013; Davies et al., 2016; Eschleman et al., 2014; Roach, 2016; Treven et al., 2011). Survey questions specifically related to stress perception were adapted from Cohen's (1983) Perceived Stress Scale to increase validity. Validity and reliability of this scale was established through multiple studies utilizing the scale to determine predictors of professional behavior and wellbeing as well as those specifically evaluating the scale's validity and reliability among college students and premenopausal women (Mihaila, 2015; Nelson, 2008; Roberti, Harrington, & Storch, 2006). The

survey also requested information regarding gender, age, race/ethnicity, and job type. Answers requested varied between 5-point Likert scale and open-ended free-response options. Prior to survey completion, employees at both corporations were required to sign an electronic consent form agreeing to anonymous participation.

Data Collection

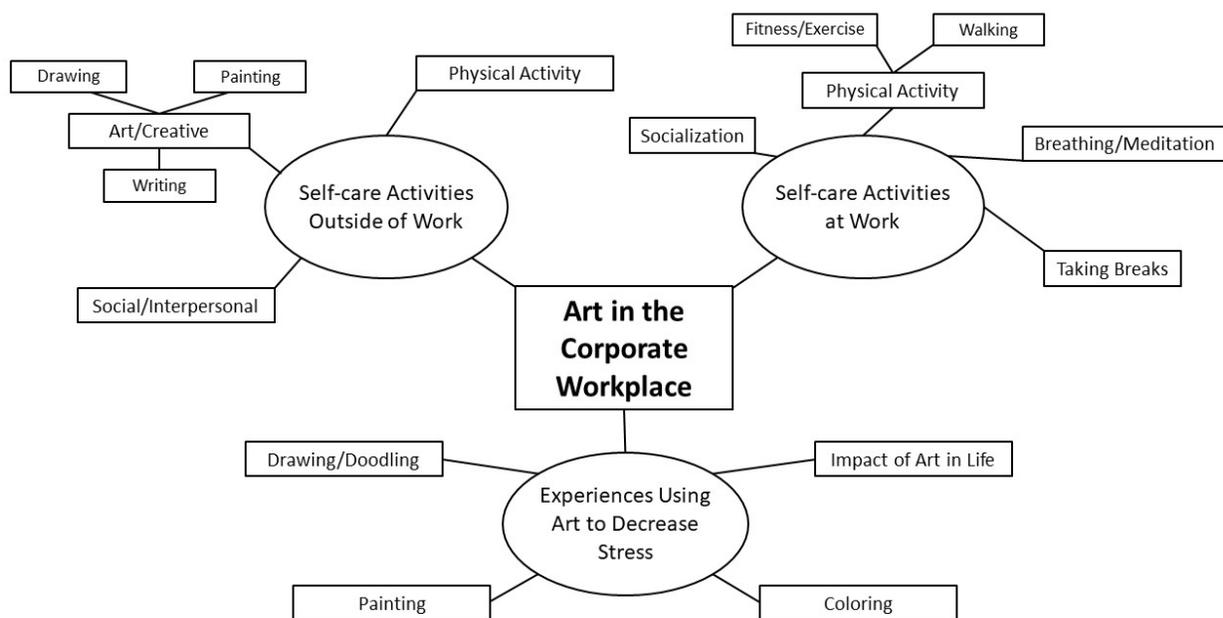
Survey data was collected using SurveyMonkey. This online survey collection method provided the researcher with convenience, speed, and maximized flexibility regarding time required of participants. Additionally, to increase validity, since the researcher was not required to survey participants in person, the use of the online platform served to decrease potential interviewer bias as well as respondent answers based on social desirability. These are more common phenomena during in-person and telephone surveys as compared to those provided online (Chang & Vowels, 2013; Sue & Ritter, 2011). The emails to employees of both companies provided a synopsis of the study being conducted. Participants who did not consent to the survey were not able to continue and complete any further questions. All survey respondents who completed the consent were included in the data collection.

Data Analysis

All responses to the questions following consent were included in the data collection process, including incomplete surveys. Aggregate data was provided by SurveyMonkey for quantitative questions. Included in the survey were three qualitative open-ended questions. Combining both quantitative and qualitative questions within the survey allowed the researcher to comprehensively analyze the proposed research question (Creswell, 2014). Additionally, the inclusion of qualitative questions for this survey enabled the investigation of behavior and experience as described freely by participants. According to Fischer (2006), validity was established through participation and question selection, as well as careful examination of data

through analysis. Qualitative questions were analyzed and coded by both SurveyMonkey and the researcher. Based on the open-ended questions and participants answers, a thematic analysis was conducted. Themes from SurveyMonkey's analysis of answers to qualitative questions and those of the researcher were combined for this study. Figure 1 highlights specific themes and codes derived from thematic analysis.

Figure 1. Thematic analysis of participant answers to qualitative survey questions



Validity and Reliability

To enhance data validity, this study triangulated data using themes found from survey respondents in conjunction with those reviewed in the applicable literature. Additionally, researcher bias was explored to establish the study's validity (Creswell, 2014). Questions were reviewed by the researcher's co-investigator and Likert scale questions were used to increase reliability by eliminating vagueness and ambiguity (Fowler, 2009). Questions for this survey were created based on a review of the existing literature related to stress, wellness, the corporate setting, and art therapy. As these questions were used solely for this study, test-retest reliability

could not be established (Creswell, 2014).

Ethical Implications and Researcher Bias

Upholding the AATA's (2013) ethical principles geared toward protecting and respecting the dignity and welfare of research participants, the survey collected no identifiable information and maintained anonymity for participants. Demographic information related to age, gender, race/ethnicity, and job type were included in addition to the questions related to perceived workplace stress and self-care practices. Because the data used was dependent on responses received, and those provided the study were located predominantly on the Eastern coast of the United States, the results may not reflect a more generalized experience. The researcher recognizes her bias toward the benefit of art engagement in the corporate workplace as a student of art therapy and corporate employee. Additionally, the researcher, as an employee of the online public education company and a family member of an employee of the independent benefits firm recognizes the potential for participation bias of those provided the survey link.

CHAPTER IV

Results

An analysis of the qualitative data along with data from quantitative questions indicated three overarching themes. These included (a) perceived work stress, (b) self-care practices, and (c) experiences with art and stress.

Perceived Work Stress

Ninety participants answered the question asking how they would rate their stress level at work. Of these, 52.22% indicated an average amount of stress experienced and 32.22% indicated above average levels. Only one individual indicated a very low level of stress.

Table 1

Perceived Stress Level at Work

| | | Very Low (1) | Below Average (2) | Average (3) | Above Average (4) | Very High (5) | Total Number of Responses | Weighted Average |
|----------------------|---------------------|--------------|-------------------|-------------|-------------------|---------------|---------------------------|------------------|
| Stress level at work | Percentages | 1.11% | 10.00% | 52.22% | 32.22% | 4.44% | | 3.29 |
| | Number of Responses | 1 | 9 | 47 | 29 | 4 | 90 | |

Of the individuals who identified as being a senior manager or above, 72.72% expressed having experienced above average to very high levels of stress at work. Of the participants identified as managers or supervisors, 93.33% had average to above average stress levels at work with an even split between the two, and one person reported below average stress levels. Nearly 60% staff-level employees reported average levels of stress at work. Just over 12% reported below average levels, while 26.56% indicated above average levels, and one staff-level employee expressed having very high levels of stress at work.

Regarding age and levels of stress at work, of the 29 participants between the ages of 18 and 29, 52% reported average levels of stress while 31.03% indicated above average levels of stress. Five participants in this age range reported below average levels. Most participants fell

within the 30 to 49 age range with 52 individuals, of which 52% expressed having average levels of stress at work, while 35% indicated above average stress levels. Below average levels of stress were indicated for 7.70% of participants, while very high levels were reported by 3.85%. The fewest number of participants fell within the 50-64 age range with 9 participants. Of these, all experienced average to very high stress levels.

Self-Care Practices

Of the 90 total participants for the survey, 67% answered how often they engage in self-care activities to combat stress outside of work. Those who indicated that they often engage in self-care outside of work made up the highest percentage (33.3%). Those that indicated that they sometimes engage in self-care activities made up 31.67%, while 26.67% indicated that they do so extremely often.

Of the participants who answered the question related to how often they engage in self-care activities while at work, 41.46% indicated that they do so rarely. Those who expressed having sometimes participated in these types of activities made up 30.49%, and 17.07% stated that they often do.

Table 2

Engagement in Self-Care Activities

| | | Never (1) | Rarely (2) | Some- times (3) | Often (4) | Extremely Often (5) | N/A | Total | Weighted Average |
|---|---------------------|--------------|---------------|--------------------|-----------|------------------------|-------|-------|---------------------|
| How often do you engage in self-care activities to combat stress outside of work? (Self-care activities refer to those engaged in to promote well-being along with physical, mental, emotional, and spiritual health) | Percentages | 0.00% | 8.33% | 31.67% | 33.33% | 26.67% | 0.00% | | 3.78 |
| | Number of Responses | 0 | 5 | 19 | 20 | 16 | 0 | 60 | |
| How often do you engage in self-care activities to combat stress | Percentages | 6.10% | 41.46% | 30.49% | 17.07% | 4.88% | 0.00% | | 2.73 |
| | Number of Responses | 5 | 34 | 25 | 14 | 4 | 0 | 82 | |

while at work?
(Self-care
activities refer to
those engaged in
to promote well-
being along with
physical, mental,
emotional, and
spiritual health)

Considering just participation in self-care activities while at work, 65.52% of individuals who reported above average levels of stress at work indicated that they rarely engage in self-care activities. Indications of sometimes and never had the next highest of participants with 13.79% and 10.34% indicated that they often engaged in self-care activities at work. No one with above average stress levels expressed having engaged in self-care activities at work extremely often. Of the 47 participants that indicated experiencing average stress levels at work, 31.91% expressed that they sometimes engage in self-care activities at work, 23.40% stated that they rarely participate in these activities, and 19.15% indicated participating often. Of the 47, only 8.51% engaged in self-care at work extremely often and 6.38% never participated. Finally, of those that indicated below average stress levels through the survey, 77.78% indicated that they sometimes participate in self-care activities at work, while 22.22% indicated that they rarely do.

When asked to identify types of self-care activities respondents engaged in while at work, the survey allowed for up to five open-ended responses per respondent. The total number of responses was 191. Through coding and thematic analysis of this qualitative question, it was found that those self-care activities participated in the most at work to decrease stress included physical activity to include fitness, exercise, and walking (32.98%), socializing (15.18%), taking breaks (14.14%), and breathing or meditation (6.81%).

Physical activities engaged in for self-care while at work primarily consisted of taking walks and stretching. Those who indicated socializing as engaging in self-care expressed partaking in conversations with co-workers as well as sharing experiences with co-workers, and

participating in social activities when offered. While few, some respondents indicated that they did not participate in self-care activities, expressing that there is “not a lot of opportunity to step away while at work or disengage” or that there were “not exactly opportunities to engage in self-care in-office”.

The same format as outlined above was used when asking respondents what self-care activities they engaged in outside of work. The total number of responses for this question was 261. Of these, those activities participated in the most for self-care outside of work were physical activities (36.02%), social or interpersonal activities (14.56%), and artistic or creative activities such as painting, drawing, or writing (13.01%).

Physical activities engaged in outside of work for self-care included more activities than those while at work, to include yoga, exercise classes, running, and going to the gym. While artistic or creative activities were not a priority for in-office self-care, they were mentioned as activities for employees outside of work. Respondents described drawing, painting, crafting and writing. Respondents also included creative activities such as painting miniatures, fixing up furniture, putting together silk flower arrangements, and ceramics.

Experiences with Art and Stress

Participants were also asked if they had ever used art to decrease stress. The survey asked those who indicated that they had to describe their experience. Of the 85 participants who answered this question, 58.82% responded that they had used art to decrease stress. Through coding and thematic analysis, multiple themes were established from those who provided an affirmative response. Fifty-four percent of those who had used art to decrease stress recorded information about the impact of art in life, often discussing its ability to calm. One respondent stated, “I also like to doodle on scraps of paper as a way to re-center myself and calm down after stressful work calls.” Another stated, “I took up painting which I felt was interesting as I often

felt that in attempting to put an image to canvas that I was working through my thoughts or feelings about my life.” Others commented on art’s ability to distract from stresses. “I find the practice of working on something intricate and time-consuming helps remove other distractions, and allows me to focus on the task at hand...it allows me to shut out those negative or stressful thoughts.” Thirty-eight percent of those who had used art described coloring to decrease stress while 32% indicated painting and 28% indicated drawing or doodling.

CHAPTER V

Discussion

Using survey responses from corporate employees, this study suggested that corporate employees generally experience workplace stress and often do more outside of the workplace to combat this stress than they do at work. Additionally, while the study hypothesized that corporate employees did not utilize art as a means for self-care, it was found that many individuals have used art and creative activities to reduce stress and promote self-care. This information paired with current literature regarding workplace stress, existing wellness programs, and the benefits of art therapy on stress reduction suggest a potential need for the integration of art therapy in corporate wellness structures.

Perceived Work Stress

The overall stress levels reported by participants supported this study's hypothesis that most respondents would indicate between average and very high levels of stress. While the researcher expected this, it was unexpected that the majority fell within the average range. These findings were consistent with the APA's yearly *Stress in American* survey (2016) which indicated that while between the years of 2014 and 2015, there existed only a minimal increase in the average stress level of adults. The *Stress in America* survey (APA, 2016) stated that younger adults reported greater amounts of stress as compared to adults in older generations. Younger adults also reported an increase in their stress levels at a higher rate than older adults. This information was consistent with the data found in this study. Considering the causes of workplace stress including role ambiguity, unclear management, working long hours, monotonous work, interpersonal tension, general pressures associated with work, and perceived lack of control (Gatchel, 2012; Nixon et al., 2011; Wright, 2007), the results of this survey supported previous studies that indicated those in corporate positions with more responsibility

experience more stress.

Self-Care Practices

The results of the study were consistent with research indicating that wellness programs have become increasingly common in the workplace to combat stress (Bright et al., 2012; Buruck et al., 2016; DeVries, 2010; Dhobale, 2009; Jarman, et al., 2016; Milch et al., 2013; Page & Vella-Brodrick, 2013; Roach, 2016; Thogersen-Ntoumani & Fox, 2005). The data from this survey showed that employees do engage in self-care practices to combat stress at work. Also, consistent with the APA (2016), the results of this study indicated that more participants engage in self-care practices outside of the workplace with the most common stress relief activities including exercising, watching television, reading, and spending time with family (APA, 2016). Findings from this study were consistent with those found in the *Stress in America* survey (APA, 2016) wherein adults indicated that they are not doing enough to manage their stress. Correlations in this study were found showing that many individuals who experienced more stress at work engaged in self-care activities less frequently, and those that experienced less stress at work engaged more frequently in self-care activities.

While the *Stress in America* survey (APA, 2016) found that the most common stress relief activities included listening to music, physical activity, surfing the internet, watching television or movies, reading, and interpersonal activities, this study found that those most common were physical activity, art or creative activities, and interpersonal activities outside of work. This study also found that those activities most common at work were physical activity, interpersonal activities, taking breaks, and engaging in breathing and/or meditation.

Experiences with Art and Stress

As indicated in the literature, only recently has research begun to explore art's impact on stress and wellness with employees in non-helping professions (Eschleman et al., 2014; Huet,

2012; Uptis et al., 2008). Consistent with this information, it was not surprising that no respondents indicated art as a self-care practice were used at work, while several individuals did indicate using art for self-care outside of the workplace. As more research is being conducted relating to the practice of art for stress reduction (Abbot et al., 2013; Babouchkina & Robbins, 2015; Bell & Robbins, 2007; Crone et al., 2013; Davies et al., 2016; Jensen, 2013; Titus & Sinacore, 2013), it was expected that respondents indicated creative activities for self-care practice. In fact, multiple participants expressed an understanding of how engagement in art for self-care works, highlighting its ability to calm and distract.

Additionally, with the increased popularity and exposure of coloring books marketed toward stress reduction, the number of employees who indicated using art specifically for stress reduction was to be expected (Blackburn & Chamley, 2016). In fact, multiple participants who stated that they use art to reduce stress mentioned coloring or adult coloring books in their experiences. This heightened mainstream exposure to creativity, may provide individuals with some relaxation in the form of self-soothing and pleasurable experiences, however, it is important to note the difference from these experiences and those offered in the context of art therapy (AATA, 2015).

As art therapy for the purposes of stress reduction has gained more ground and individuals continue to feel stressed at work despite increased efforts of wellness programs, this small-scale study pointed toward art therapy's potential place in corporate wellness programs (APA, 2016; Arthur, 2004; Bright et al., 2012; Buruck et al., 2016; DeVries, 2010; Dhobale, 2009; Jarman et al., 2016; Milch et al., 2013; Page & Vella-Brodrick, 2013; Roach, 2016; Thogersen-Ntoumani & Fox, 2005). This research, along with the work of Milch et al. (2013), Roach (2016), and Treven et al. (2011), indicated a need for wellness programs that encompass more mindful, holistic, creative, and positive focused offerings and techniques. As Spooner

(2016) suggested, there was an alignment that has been occurring for the past two decades between art therapy and mental health counseling. According to the APA (2016), almost half of adults recognize the abilities of psychologists to assist in the management of stress. According to Wilkinson and Chilton (2013), using a positive art therapy approach where interventions focus on strengths instead of ailments, art therapy could establish a niche that is currently missing in the corporate wellness world. This would mirror existing positive psychology based wellness programs such as that investigated by Page and Vella-Brodrick (2013).

Limitations

This study was limited by the sample size and location of two corporate settings. Future studies investigating stress, art therapy, and wellness might be better served by expanding to multiple varied corporate and other non-helping profession workplace settings. This study also relied heavily on the literature to connect employee engagement with art and the impact of art therapy. Future research would serve to include more emphasis on the difference between engagement in art and specific participation in art therapy for reducing stress.

Recommendations

While limited in size, this research provides insight into the perception of stress in the corporate workplace along with outlets used for self-care and to combat stress. The use of this study as a foundation for the implementation of art therapy in these corporate settings would allow for further research into the effectiveness of such programs over time. Further research including larger sample sizes, multiple sites, and additional populations may serve to evaluate specific art interventions with varying corporate populations, furthering the growth not only of the art therapy field, but also of existing wellness programs.

Conclusions

This study aimed to provide evidence for the development of art therapy inclusive

wellness programs in corporate settings. Findings from this survey reflected the original hypotheses that most corporate employees experience high levels of stress at work, reported engaging in some self-care aimed at relieving stress at home, but not as frequently at work.

While the researcher hypothesized that respondents did not access art-related activities for self-care and stress relief, it was found that many did, pointing toward a potential need to assimilate these activities in the workplace. Ultimately, this study paired with existing research showed potential need for art therapy in corporate wellness programs.

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APPENDIX A

Stress, Self-Care, and the Workplace Survey

Stress, Self-Care, and the Workplace

Demographics

*** 2 Please provide your position title.**

*** 3 To which gender identity do you most identify?**

- Male
- Female
- Transgender
- Gender Variant/Non-Conforming
- Prefer not to answer
- Other (please specify)

*** 4 What is your age range?**

- 18-29 years old
- 30-49 years old
- 50-64 years old
- 65 years and over
- Prefer not to answer

*** 5 Which race/ethnicity best describes you? (Please choose only one.)**

- American Indian or Alaskan Native
- Asian / Pacific Islander
- Black or African American
- Hispanic or Latino
- White / Caucasian

- Prefer not to answer
- Multiple ethnicity / Other (please specify)

Stress, Self-Care, and the Workplace

Workplace Stress

* 6 How would you rate your stress level at work?

| | Very low | Below average | Average | Above average | Very high |
|----------------------|---|--|--|--|--|
| Stress level at work | <input type="radio"/> Stress level at work Very low | <input type="radio"/> Stress level at work Below average | <input type="radio"/> Stress level at work Average | <input type="radio"/> Stress level at work Above average | <input type="radio"/> Stress level at work Very high |

Stress, Self-Care, and the Workplace

Self-Care Engagement

* 7 Engagement in Self-Care Activities

| | Never | Rarely | Sometimes | Often | Extremely often | N/A |
|--|-----------------------------|------------------------------|---------------------------------|-----------------------------|---------------------------------------|---------------------------|
| How often do you engage in self-care activities to combat stress outside of work? <i>(Self-care activities refer to those</i> | <input type="radio"/> Never | <input type="radio"/> Rarely | <input type="radio"/> Sometimes | <input type="radio"/> Often | <input type="radio"/> Extremely often | <input type="radio"/> N/A |

Never Rarely Sometimes Often Extremely often N/A

engaged in to promote well-being along with physical, mental, emotional, and spiritual health)

How often do you engage in self-care activities to combat stress while at work?

(Self-care activities refer to those engaged in to promote well-being along with physical, mental, emotional, and spiritual health)

Never Rarely Sometimes Often Extremely often N/A

*** 8 Have you ever used art as a way to decrease stress? If yes, please describe your experience.**

- No, I have not used art as a way to decrease stress.
- Yes.

*** 9 Please identify what types of self-care activities you engage in while at work and how often you engage in each.**

(Self-care activities refer to those engaged in to promote well-being along with physical, mental, emotional, and spiritual health)

Activity 1:

Activity 2:

Activity 3:

Activity 4:

Activity 5:

*** 10 Please identify what types of self-care activities you engage in outside of work and how often you engage in each.**

(Self-care activities refer to those engaged in to promote well-being along with physical, mental, emotional, and spiritual health)

Activity 1:

Activity 2:

Activity 3:

Activity 4:

Activity 5: