

**Adapting the National Standard for Psychological Health and Safety and  
Psychological Health and Safety Principals to Private Voice Studios:  
Opportunities and Challenges**

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## Portfolio

### Introduction

In my undergraduate degree, I endured physical and psychological abuse from a trusted voice professor alongside my classmates. This experience not only shaped me as a young singer but also continues to influence the way I teach today. In the period following my degree, I was fortunate to secure contractor employment with the Mental Health Commission of Canada, which helped me support my finances. During this time, I observed hundreds of mental health courses being conducted, and these experiences informed my teaching style when I eventually entered the field of voice education. It was also through this work with the commission that I was introduced to the *National Standard of Canada for Psychological Health and Safety in the Workplace*, hereafter referred to as “The Standard” (CSA Group and Bureau de normalisation du Québec, 2013). The concept of standardising mental health practices and placing an emphasis on harm prevention immediately connected in my mind to the highly unregulated world of voice teaching. If physical and mental abuse was able to occur within a highly respected university, an institution where formal systems of accountability were supposed to be in place, how can private voice studios, which operate without external oversight, be expected to meet any reliable standard? This disconnect between institutional protection and private practice is at the core of my motivation for this project.

Having direct exposure to both the field of voice pedagogy and mental health education has revealed for me a strong synergy between the two. My previous research at the master’s level included projects that examined shame based versus praise based teaching, as well as comparisons between formal and informal teaching methods. These earlier studies helped shape the trajectory of the remainder of my degree, leading me toward the goal of creating a standardised method for psychologically safe teaching, and potentially an auditing program to hold teachers accountable to this standard. I hope to complete the development of this method before the end of my program.

The gaps I have encountered in both research and practice highlight the urgency of this question. Currently, there is no method or standard I have found, let alone one that is easily accessible, on which private voice teachers can base their practices for ensuring psychological health and safety. My future research aims to provide teachers with a straightforward method that establishes reasonable expectations of safety for both themselves and their students. Ideally, this method could serve as a voluntary standard that teachers may choose to implement, thereby making psychological health and safety more accessible and attainable in the private voice lesson setting. Furthermore, if a system is developed, teachers will need to be voluntarily assessed based on this system to ensure conformance.

The guiding question behind this research is: Are The Standard, and core psychological health and safety (PHS) principals able to be applied as a framework for a psychologically safe voice lesson? This question assumes that principles originally

designed for workplace contexts can be adapted for educational settings, specifically in private music instruction. Supporting literature and existing applications of the standard in other fields will be required to validate this assumption (Mental Health Commission of Canada, 2017).

### Planned Program Of Study

The timescale of the project will be carried out on this timeline.

| Week    | Task                                               | Details                                                                                                                                                                                                                 |
|---------|----------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Week 1  | Detailed rationale for topic choice draft finished | Establish why psychological health and safety matters in the private voice studio. Connect to national frameworks Like The Standard, psychosocial risks in pedagogical relationships, and gaps in arts sector research. |
| Week 2  | Planned program of study draft finished            | Outline search strategy, inclusion/exclusion criteria, justification for rapid review methodology, and plan for integrating Canadian and international literature.                                                      |
| Week 3  | Total sources from rapid review search found       | Gather peer reviewed literature and any relevant grey literature, document findings, and identify gaps.                                                                                                                 |
| Week 7  | Rough rapid review section finished                | Draft overview of Standard implementation, barriers, potential promising practices, International context, and transferability issues, highlight constraints, conceptual issues, and monitoring data.                   |
| Week 8  | Critical Reflection draft finished                 | Analyze potential future research along with challenges of rapid review, write potential ideas of what the standard might look like in the voice studio should the standard be a suitable framework.                    |
| Week 10 | Complete draft handed in + draft edits beginning   | Review alignment of all sections; ensure citations match Harvard format, refine clarity, tighten arguments.                                                                                                             |
| Week 12 | Final paper submitted                              | Fully edited submission integrating rapid review, reflection, and conclusions, ensure consistency, and implement tutor edits.                                                                                           |

## **Aims**

- To explore how far The Standard and core PHS principals can inform or guide the creation of a psychologically safe framework for voice lessons.
- To identify coaching and pedagogical perspectives that align with the principles of the National Standard and are suitable for non regulated, performance based teaching contexts such as the voice studio.
- To assess the feasibility and ethical considerations of applying aspects of the National Standard within voice pedagogy, including potential training, licensing, or auditing implications for teachers.
- To analyse how psychological safety within voice lessons might support or enhance the experience of flow and optimal performance states in singers both youth and adult.
- To explore the current state of PHS in music and voice settings to find if there is a need for Standard and core PHS principals to be implemented.

## **Objectives**

- Develop a research informed understanding of how the National Standard's components (e.g., organizational culture, leadership, communication, workload management) can translate into practical strategies for creating a psychologically safe learning environment in voice lessons.
- Generate a comparison of where the PHS has been put into law, and where it is a voluntary standard, and examine the differences between both.
- Define key principles of PHS and link how they may be relevant to the voice teacher and studio.
- Analyze case studies to inform the potential implementation of a new method of PHS informed voice teaching.
- Contribute to the advancement of research and dialogue on applying psychological health frameworks to arts pedagogy, with the long term goal of sharing findings and methodologies with other voice professionals and educators.

This research seeks to investigate whether there is a way to offer structure and an applicable standard to the broad, artistic, and interpretative world of voice teaching. For me, this area of inquiry is deeply personal. My motivation lies in preventing the kinds of abuse that were inflicted on myself and my classmates, while also working toward the creation of a more standardised expectation for psychological health and safety in voice education. This exploration also responds to larger field and disciplinary needs, as

music education continues to grapple with questions of safety, ethics, and mental well being (Payne, 2021; Visetchaisri, 2024; Li, Sakata, and Donn, 2025).

The importance of safety can be understood through occupational health and safety measures that we see every day. Similar to a worker in a commercial kitchen, an oil rig, or a carpentry job site requires personal protective equipment, people engaging in vulnerable experiences such as voice exploration need tools to mitigate psychological risk. The process of learning and experimenting with the voice can expose deep emotions and vulnerabilities (Monti et al., 2017, Slavikova and Kralova, 2021). Also, the inherently unequal power dynamic in one on one private lessons, particularly with underage students, must be recognised as a significant factor when considering risks and protective practices (Gowdy et al., 2024).

Understanding the current state of psychological health and safety in private voice lessons presents several challenges. Gathering accurate information depends largely on self reports from both teachers and students, and these reports may be influenced by hesitancy or fear of repercussions, leading to underreporting (Figueiredo, Soares, & Schambeck, 2015). Additionally, the National Standard framework itself is broad and detailed, which could make it difficult to synthesize into a smaller scale context such as private instruction. This research must then deal with questions of translation, adaptation, and feasibility, while also acknowledging the variations in teaching styles, student needs, and cultural contexts.

Developing and implementing a PHS informed framework in voice education may carry both direct and indirect benefits. For students, it could provide a layer of protection that has not previously existed in such an unregulated industry. For teachers, it may set clear expectations and boundaries that can help prevent accidental professional misconduct and foster healthier teaching relationships. At a societal level, it could contribute to reducing long term costs associated with mental health interventions, such as psychotherapy or medication (Lim, et. al, 2008) By addressing harm prevention at the educational stage, there is potential for broad positive impact across interpersonal, intrapersonal, and institutional levels.

To strengthen the feasibility of this work, it is important to reference case studies or success stories where PHS frameworks, or similar mental health initiatives, have been effectively implemented (Klein et. al, 2016)(Klein, 2018). Examples such as workplace PHS audits or pilot programs could serve as useful parallels. Identifying and analyzing one or more of these cases could provide insight on how implementation to a voice studio could be adopted.

The easier and more accessible a formula can be made for teachers, the more likely it might be implemented. Beyond the immediate practical applications, the broader implications include reducing strain on mental health resources and promoting healthier, more sustainable relationships between individuals and their voices. Ultimately, this work aspires to contribute to a more inclusive, ethical, and protective vision for voice education.

## Critical Reflection

Engaging in this literature review of PHS frameworks and The Standard, has clarified both the potential value and the significant challenges of adapting national workplace standards, to the small scale intimate environment of private voice studios. Personally, It was discouraging to see the lack of information in Australian literature about integrating this policy change into law. I was hoping to see more real world applications of the Standard and PHS principles, but it seems as though the work is still in its infancy. One of the strongest impressions I had from this work is how clearly the Standard, though designed to be universally applicable, is implemented primarily within medium or large organisations. Implementation studies show that its uptake is low even among workplaces with considerable resources (Klein et al., 2018), and the MHCC case study project highlights that successful use of The Standard depends heavily on dedicated resources, sustained leadership engagement, and structured organisational processes (Mental Health Commission of Canada, 2017). These are characteristics typically not present in micro studios or sole proprietor teaching environments. Despite this structural issues, the underlying concepts, specifically the 14 psychosocial factors and the implementation method of the Psychological Health and Safety Management System (PHSMS), I believe offer a strong conceptual foundation for imagining what an evidence informed, safety oriented pedagogy could look like in the voice studio.

The idea that surfaced repeatedly throughout the review, is the Standard is intentionally broad and inclusive, but its real world use remains concentrated among large employers. The Canadian Centre for Occupational Health and Safety tools, including Guarding Minds at Work, similarly speak to adaptability but are still designed around systems that assume committees, data sets, multilevel communication structures, and ongoing performance monitoring (Canadian Centre for Occupational Health and Safety, 2018). For a private voice teacher, many of these mechanisms are impractical or irrelevant. However, when examined not as a system template and more as a conceptual framework, the Standard becomes more usable. The 14 factors could provide categories for reflecting on the relational, pedagogical, and emotional landscape of voice teaching. The PHSMS provides a process for thinking systematically about identifying risks, planning improvements, documenting practice, and evaluating outcomes.

At the same time, this review reveals a disappointing gap in the Australian literature, especially given that psychosocial risk management is written into Australian workplace health and safety law. The few relevant studies located (Rigby et al. (2024), Hallam et al. (2023), Loh et al. (2024), and Wentzel (2024)), offer insight into conceptual clarity, psychosocial safety climate, and the importance of cultural change, but lack detail on how organisations are putting into action their legal obligations. In contrast, Canada's implementation has been widespread enough to produce multiple reports, case studies, and surveys, even if uptake has been inconsistent or challenging. This imbalance suggests that although Australia's regulatory approach is firmer, the research

documenting practical implementation is lagging behind. For the purposes of this project, this lack of detail leaves open questions about how legal mandates shape practice, and how compliance expectations differ between voluntary frameworks (such as in Canada) and legislated obligations (as in Australia). The contrast also raises questions about whether future iterations of PHS informed voice pedagogy frameworks might need to account for jurisdictional differences especially if psychological health and safety becomes a regulation in Canada.

A key reflection arising from this review is the question of what motivation would be needed if psychological health and safety were to be integrated into a voice teaching method or auditing system. The Canadian studies highlight that organisational motivation often stems not from regulatory pressure but from the moral belief that fostering psychological health is “the right thing to do” (Klein et al., 2016). Yet, in small independent teaching contexts, relying solely on ethical motivation may not be sufficient for widespread change. Some voice teachers may believe they are already effective, supportive educators. From their perspective, adopting a new safety informed framework may feel unnecessary or a burden without clear incentives. Education becomes a central barrier, and without clear training, accessible tools, and concrete examples of application, implementation could risk being superficial or performative. The case study findings emphasise that successful implementation requires visible leadership, structured processes, and frequent communication (Mental Health Commission of Canada, 2017). This all must be considered when forming a PHS informed method.

This raises an important conceptual challenge, if the student teacher dynamic is to be understood similarly to the employer/employee relationship, then the teacher must accept responsibility for creating and maintaining psychological safety (Canadian Standards Association / BNQ, 2013). This reframing has significant implications for accountability. If a PHS informed pedagogy were to exist, an audit or monitoring system would be essential. This would be not only as proof of implementation, but as a mechanism to ensure teachers remain consistent in behaviours that promote psychological safety. Large organisational systems collect data over months or years; private studios might need simplified approaches. Micro audits or self auditing, reflective logs, student feedback mechanisms, or simplified tools based on the 14 psychosocial factors could support accountability without overwhelming capacity.

In future work it is not my objective to reiterate what the standard dictates, but to shape what it actually looks like working well in the studio. A lone set of policy requirements can be difficult to translate into meaningful action with no examples. Teachers may need to know what psychological safety looks like when it is embodied in pedagogical acts. The questions for future research become, how does repertoire selection function in a PHS informed way? How should postural correction, and potential physical touch in doing so, be delivered to avoid shame or threat responses? What does raising a concern about the teachers methodology look like when guided by the principles of civility, clarity, autonomy, and protection from psychological harm? The Standard prioritises prevention, promotion, and continuous improvement (Government of Canada,

2015). Translating these priorities into the voice studio could mean developing real examples: scripts, scenarios, language templates, and micro case studies. This could show not only how harm can be avoided but also what emotionally safe, empowering teaching looks like.

In this sense, the next stage of research is clearer. Future projects should focus on making The Standard voice specific. What matters now is putting things into example and operation. The same lesson emerges repeatedly from the MHCC case studies, and the principles of psychological health and safety only make a difference when they are contextualised, simplified, and integrated into the daily life of an organisation (Mental Health Commission of Canada, 2017). For voice teaching, this means translation into accessible, concrete tools designed for real lessons, real students, and the fluid, emotionally nuanced nature of music pedagogy.

Therefore, a future voice teaching standard might begin with a roadmap that adapts the 14 factors to the studio environment:

- Workload management becomes scheduling transparency.
- Psychological protection becomes emotionally safe correction.
- Recognition becomes affirmation of progress.
- Clear leadership becomes consistent communication of expectations.

Such a roadmap would need to include not only principles but workflows. For example, how to communicate expectations, how to track interactions, how to check in with students, or how to identify hazards such as shame, fear, or emotional overwhelm and how to implement corrective adjustments. PHS informed examples could make the abstract concrete. This could demonstrate, in one case, how to correct tension without triggering embarrassment, or how to select repertoire collaboratively so that the student retains autonomy while the teacher meets their pedagogical responsibilities.

Reflecting on conformance raises important ethical considerations. If psychological health and safety were to become a legal requirement in Canada, its implications for voice teaching would depend on whether the legislation applied to sole proprietors or small staff studios. Even if it did not, the legal status of psychosocial obligations could shape expectations among students, parents, and the broader music community, making safety oriented pedagogy a marker of professionalism. This review suggests that true change comes not through obligation but through cultural transformation (Hallam et al., 2023; Loh et al., 2024). A PHS informed voice teaching standard would need to draw upon both the ethical commitment identified by employers in Klein et al. (2016), and the structural expectations embedded within Australian WHS legislation. This dual awareness could help create a method that both has principle and is practical, rooted in pedagogical integrity, while aligned with evolving understandings of workplace safety.

Overall, the reflection reveals that adapting The Standard to the private voice studio is both challenging and promising. The Standard's implementation history shows that psychological safety work requires structure, commitment, and adaptation. These are qualities that can be cultivated even in small teaching environments. The Australian literature reinforces the importance of conceptual clarity and daily enactment. The performing arts evidence underscores the urgency of developing safer pedagogical practices. Ultimately, this project points not toward a finished model but toward a trajectory. Reckoning this PHS informed style of teaching with the instruction I was given, offers much to consider. As an educator, I want to leave my students better than I found them, and the idea of being able to create a meaningful, and pedagogically correct way of teaching is a very exciting prospect. The research concluded that although perhaps not suitable to be applied verbatim, The Standard's principals when viewed through a lens of voice offer many useful takeaways, and next on the path of study will be finding the most optimum ways to translate policy to real studio examples of PHS in motion.

## Research Section

This literature review explores how the National Standard of Canada for Psychological Health and Safety in the Workplace (CSA Group and Bureau de normalisation du Québec, 2013) and other Psychological Health and Safety policies and reports might hold relevance for small scale, private voice studios. The literature review will be conducted with only literature published after 2010, and adhering to these search terms:

“The Canadian national standard for psychological health and safety in the workplace”  
“Psychological health and safety in the workplace” “Implementing health and safety in the workplace” “Psychological health and safety in music” “Psychological health and safety in singing” “small scale implementation of Psychological Health and Safety”  
“Implementation of psychological health and safety Australia” “Psychological health and safety Australia”

The rationale for the date criteria, is the implementation of The Standard in Canada in 2013, and any relevant concurrent documentation that could have been used in its formation. PHS as a workplace principal was introduced earlier, in the 1990's by William Kahn who published *Psychological Conditions of Personal Engagement and Disengagement at Work* (Kahn, 1990), one of the founding studies of modern PHS. As well as Amy Edmonson, who published *Psychological Safety and Learning Behavior in Work Teams* (Edmonson, 1999), An article that began her notoriety as a key figure in modern PHS. However, the need is to examine the state of PHS post standard, and see how putting these principals into a specific framework have been implemented.

The key terms are to keep the review scaled and focused, the rationale being a focus on keywords found in the standard itself, while allowing music specific results to populate as well. The choice to add the search term of Australia, is due to the inclusion of specific PHS language, that was recently adopted into national law.

Beginning with the focus on Canada, The Standard was designed for universal applicability across workplaces, its implementation research and supporting tools have primarily focused on larger organizations. By drawing on current research, case studies, and some grey literature, this review considers what elements of The Standard and Psychological Health and Safety law may translate effectively into the realities of a voice studio.

Several key terms are central to this project and require clear definition:

- PHS (Psychological Health and Safety):
- Principals of PHS:
- The 14 Factors

Amy Edmonson, A leader in the field of PHS is believed to have first publicly stated the term Psychological Health and Safety. She states that it is a held belief that a person

will not face punishment or humiliation, for things like speaking up with questions, ideas or even concerns (Edmondson, 2018). Psychological health and safety has more specific requirements for the workplace than the concept of supporting mental wellness (CSA Group and Bureau de normalisation du Québec, 2013).

The strategic principles of PHS are prevention of harm, promotion of health, and resolution of incidents or concerns. The prevention of harm holds particular relevance in the context of the private voice studio. In a one on one instructional setting, the inherent power dynamic between teacher and student places a heightened ethical responsibility on the teacher to safeguard the learner's psychological and physical well being. For example, applying The Standard's principle of harm prevention requires that any form of physical adjustment, demonstration, or touch be conducted with explicit, informed consent, clear communication, and ongoing sensitivity to the student's comfort and autonomy. The Standard emphasizes the need for environments that are respectful, fair, and psychologically safe, which in this context translates to fostering a studio culture of trust, empathy, and mutual respect. All these things could be considered when voicing student feedback, for example.

The Standard offers the promotion of health as a proactive complement to harm prevention. While prevention seeks to minimize risks and protect against psychological injury, promotion emphasizes the cultivation of positive mental, emotional, and social well being within the learning or working environment. In the context of a voice lesson, this could mean not only avoiding harmful teaching practices but actively creating conditions that enable the singer to grow.

Resolution of incidents or concerns are a core element in maintaining psychological safety and trust within any professional environment. This principle emphasizes the importance of having clear, fair, and respectful processes through which individuals can raise and address issues that affect their psychological well being. In the voice studio, this could translate to ensuring that students feel safe to voice discomfort, disagreement, or confusion without fear of reprisal, humiliation, or negative consequences for their progress or relationship with the teacher.

"The 14 factors", is sometimes referred to by the mental health commission of Canada in their courses, and in general in the workplace as "The 13 Factors". The one sometimes omitted is "other chronic stressors as defined by workers" (CSA Group and Bureau de normalisation du Québec, 2013) as it is difficult to synthesize and it is specific to each workplace, while the others could be considered as more universal. The Standard describes 14 main psychosocial factors that influence mental well being, safety, and performance. These factors describe the social, emotional, and organizational conditions that allow people to feel secure, and supported in their work. The factors are:

1. Psychological Support
2. Organizational Culture

3. Clear Leadership and Expectations
4. Civility and Respect
5. Psychological Demands
6. Growth and Development
7. Recognition and Reward
8. Involvement and Influence
9. Workload Management
10. Engagement
11. Balance
12. Psychological Protection
13. Protection of Physical Safety
14. Other Chronic Stressors as Defined by Workers

Some examples as to how they could be relevant to the voice lesson include “Clear Leadership and Expectations”. The teacher, as the “leader” in the lesson, could communicate expectations for practice, behaviour, and progress clearly to reduce confusion and promote confidence. “Growth and Development” could encourage ongoing learning. In the studio, this could translate to setting achievable goals, celebrating progress, and encouraging curiosity beyond technical skill. Or “Psychological Protection” could indicate students are not exposed to bullying, shaming, or undue stress. Together, these factors form a comprehensive framework that supports both performance excellence and psychological well being. In the context of the voice lesson, they could encourage teachers to see technical instruction and mental health as interconnected rather than separate domains.

Exploring the National Standard through the lens of a voice teacher provides an opportunity to consider how its principles, such as leadership commitment, open communication, and proactive support for mental well being, might enhance teaching environments that rely on elements like trust, and feedback.

The Standard, formalizes the idea that organizations have a responsibility to prevent psychological harm and to promote psychological well being through a systematic management approach (CSA Group and Bureau de normalisation du Québec, 2013). This Standard requires a Psychological Health & Safety Management System (PHSMS), a set of organisational practices that includes policy and commitment, planning, implementation, measurement, corrective action, and management review, which mirrors traditional occupational health and safety systems but targets

psychosocial hazards and organisational activities to promote mental health. The Standard is supported by federal guidance and practical toolkits intended to make those system elements usable by employers (Government of Canada, 2015; Canadian Centre for Occupational Health and Safety, 2018). Taken together, these documents create a clear, evidence informed policy structure that is intended to be applicable to organizations of all sizes and sectors (Standards Council of Canada, 2024). The identified psychosocial factors are not just specific to workers, but the identified basic human needs are universally applicable. Making it particularly relevant to the voice studio, where students are not employees and the teachers are not employers.

Long form and case study work offer evidence that staged, committed implementation can produce measurable organisational change. The Mental Health Commission of Canada's Case Study Research Project (2014–2017) followed approximately 40 organisations through staged implementation and documented average improvements across the PHSMS elements. Participating organisations also reported practical “promising practices,” such as building a clear business use case, ensuring visible leadership commitment, dedicating at least modest resources, communicating widely, and tailoring actions to fit organisational size and sector (Mental Health Commission of Canada, 2017). While these findings show that a structured, step by step approach can lead to real improvements in organisations, they also reveal some challenges when trying to apply this model to a one teacher or very small studio setting. The Standard is built on the idea that workplaces have separate roles: leaders, managers, and workers. This may not translate to private voice teaching where the teacher is responsible for every role. This raises the question, in a studio setting, is the Standard truly a full framework, or is it more of a set of ideas that needs to be adapted considerably? The focus on visible leadership and dedicated resources also comes from assumptions about larger workplaces that don't match the day to day realities of teaching voice. These differences show potential limitations of using a preexisting PHS framework in a teaching environment.

There is a striking lack of peer reviewed literature that examines implementation or outcomes of the Standard specifically within arts and performing arts settings. Most of what exists for the music sector appears as grey literature, sector specific surveys and industry reports rather than controlled intervention studies. Recent sector reporting indicates substantial gaps in psychosocial need in music work. Pulse surveys and industry reports show high proportions of music industry workers reporting inadequate workplace mental health supports, stigma, and workplace practices that amplify risk (Revelios, 2025). This sectoral evidence, aligns with national workforce surveys that report elevated burnout and low organisational readiness in many workplaces (Mental Health Research Canada, 2022). Together, this data suggests that the music and performing arts realm is both a high need and under researched context for psychological health and safety work.

The PHSMS framework offers conceptual tools that could be relevant for the voice studio and small music organisations. Its emphasis on a documented, systemic approach to identifying psychosocial hazards, preventing harm, promoting mental

health, and measuring outcomes maps onto pedagogical priorities and practices. In particular, the promising practices emerging from the Mental Health Commission case studies, building visible leadership, communication, resource allocation, and tailoring.

There are however, important limitations and gaps to be acknowledged. Most national implementation studies focus on organisational adoption and process metrics rather than on longer term employee outcomes. Outcome oriented controlled evaluations remain rare (Klein et al., 2018; Mental Health Commission of Canada, 2017). Perhaps due to The Standard being voluntary rather than encoded into law, making importance of PHS possibly being undervalued and optional as opposed to essential. While the Standard is explicitly designed to be scalable, small businesses (potentially music centres) lack time, expertise, and budget to implement even simplified PHSMS elements without external support (Standards Council of Canada, 2024, Canadian Centre for Occupational Health and Safety, 2018).

There are many instances of putting the theories and standard into practice. In the Mental Health Commission of Canada's Case Study Research Project (2017) followed forty Canadian organizations across public, private, and non profit sectors over three years to examine the real world implementation of The Standard. Organizations from diverse industries including healthcare, education, finance, and government, voluntarily adopted the Standard and reported on progress through structured assessments, employee surveys, and qualitative feedback. Using the MHCC implementation audit tool, organizational compliance was measured across seventy two indicators covering the 14 identified psychosocial factors. While the audit tool is designed for larger organizations (100+ employees) and is less directly applicable to small scale workplaces, the findings remain instructive for scaled adaptations. Results demonstrated both measurable and cultural impact. Average compliance increased from 55% at baseline to 72% after three years, reflecting improved integration of psychological health and safety principles. Organisations reported greater openness in discussing mental health, increased trust between leadership and staff, and reduced stigma. Modest reductions in absenteeism and turnover were noted, though not uniformly across sectors. The study highlighted nine promising practices for successful implementation: visible leadership commitment, active employee participation, transparent communication, integration with existing health and safety systems, contextual adaptation, focus on continuous improvement, progress tracking, access to external expertise, and organization wide training. Barriers included limited resources, lack of expertise, perceived complexity, and challenges in quantifying psychological outcomes. Smaller organizations faced particular difficulties sustaining implementation due to competing priorities and fewer dedicated personnel. Nonetheless, even partial implementation yielded cultural benefits when leadership was engaged and employees shared ownership PHS responsibility. The MHCC concluded that implementing The Standard is feasible and beneficial when adapted to organizational size and resources. For smaller settings, which could include a music school or private studios, the study's emphasis on leadership, and communication, could be attainable to adopt. However, the voluntary nature of participation introduces a possible bias. Organizations that chose to opt in were already motivated, resourced, or aligned with psychological health

and safety, meaning they may not represent the broader range of workplaces especially those that under resourced, or unaware of the Standard. As a result, the positive outcomes observed may reflect the characteristics of early adopters rather than the typical barriers faced by average or reluctant employers. Also, what it may look like if a version of the standard becomes Canadian law. This bias is particularly relevant when considering applicability to small studios or music schools, where capacity, and awareness vary widely.

In a further exploration, Klein et al. (2018) conducted a cross sectional survey of 1,010 Canadian organizations between 2015 and 2017 to examine awareness and implementation of The Standard. The study aimed to identify the extent to which Canadian employers knew about the Standard, had implemented its principles, and perceived barriers to adoption. Findings revealed strikingly low levels of awareness and uptake: only 17% of respondents reported being aware of the Standard, while a mere 1.7% had fully implemented it, and 20.3% had partially implemented its guidelines. The survey highlighted significant challenges to adoption, including limited organizational resources, insufficient expertise, competing operational priorities, and a perception that psychological health and safety was less relevant than traditional occupational health and safety concerns. Smaller organizations in particular faced difficulties translating the Standard into practical, actionable steps, underscoring the need for scalable tools and guidance tailored to different organizational sizes. Despite these barriers, the study emphasized the potential of the Standard to improve employee well being and workplace culture if awareness and implementation could be increased. Overall, Klein et al.'s findings suggest a substantial gap between the Standard's existence as a policy instrument and its actual application across Canadian workplaces, pointing to a critical need for targeted support and education to promote broader adoption. Due the structure of small scale music instruction, the educational barrier could be present because the responsibility is now on one person to be completely informed, not an entire organization. Although, as a cross sectional survey, this study may not have established causation. It captures perceptions and reported behaviours at a single point in time, meaning it cannot determine whether awareness leads to implementation, or whether organizational characteristics drive both. The associations identified reflect correlations rather than causal paths, limiting the extent to which conclusions about the Standard's impact can be drawn in this case. For pedagogical theory, these limitations matter because they mirror similar challenges in teaching research, where correlations between teacher behaviour and student outcomes do not necessarily indicate causation. Just as organisational implementation of The Standard cannot be assumed to directly improve psychological safety, adopting PHS informed practices in the voice studio will require more than awareness or good intentions. Meaningful implementation requires intentional, theoretically grounded application. This highlights the need for pedagogical frameworks that focus on how teacher behaviours, and instructional choices, actively shape psychological outcomes for students.

In the lens of government policy, The Government of Canada's Psychological Health in the Workplace guideline (Employment and Social Development Canada, 2015) provides a national overview of the scope, causes, and economic impact of psychological health

issues in Canadian workplaces. The report identifies that approximately one in five Canadians experiences a mental health problem each year, with work related psychological health issues contributing an estimated \$20 billion annually in lost productivity, absenteeism, and disability claims. It outlines key workplace risk factors, including high job demands, lack of role clarity, insufficient supervisor support, and poor organizational culture, emphasizing that these factors contribute directly to employee stress, burnout, and diminished engagement. The guideline encourages employers to move beyond reactive approaches and adopt proactive strategies for fostering psychological well being, such as implementing comprehensive mental health policies, leadership training, and open communication about mental health. It also highlights the role of national frameworks like The Standard in helping organizations integrate mental health considerations into occupational health and safety systems. Overall, the document positions psychological health as a shared responsibility between employers, employees, and policymakers, framing it as both a moral and economic imperative for sustaining a healthy and productive Canadian workforce.

In the voice studio, there is no HR department to clarify role expectations, this creates practical and theoretical limits. For example, open communication might mean proactively inviting students to express discomfort about repertoire, feedback style, or physical adjustment techniques. These adaptations require pedagogical skill rather than administrative infrastructure, highlighting that the barriers identified in the guideline. For example, education, role clarity, and leadership, manifest differently and often more acutely in small studios than in 100+ employee organizations. As a result, implementing PHS informed practices in voice teaching is less about policy compliance and more about re examining core pedagogical behaviours through the lens of psychological safety.

In more policy, The Canadian Centre for Occupational Health and Safety's (CCOHS) 2018 resource, Tools to Assess and Address Psychological Health and Safety in Canadian Workplaces, introduces practical supports designed to help organizations evaluate and improve their psychological health and safety practices. Central to this resource is Guarding Minds at Work, an eight step audit and planning tool that assists employers in identifying psychosocial risk factors and implementing evidence based strategies to address them. The tool aligns closely with the National Standard of Canada for Psychological Health and Safety in the Workplace, offering a structured yet flexible framework that can be tailored to various organizational sizes and sectors. The CCOHS emphasizes accessibility and scalability, highlighting that psychological health and safety initiatives should not be limited to large corporations with extensive resources. Instead, the guideline encourages smaller organizations, such as community based or private enterprises, to engage in stepwise implementation using free, user friendly resources. The report also underscores the importance of leadership engagement, employee participation, and continuous evaluation in maintaining healthy workplace environments. Overall, this tool represents a practical entry point for organizations seeking to operationalize the principles of the National Standard, particularly for small and medium sized workplaces aiming to integrate psychological well being into their daily operations.

The Standards Council of Canada's (2024) Notice of Intent for the Second Edition of CSA Z1003: *Psychological Health and Safety in the Workplace* outlines upcoming revisions to the National Standard to ensure it remains relevant and applicable across Canada's evolving work environments. Importantly, the 2024 update emphasizes broad applicability. This inclusivity is particularly significant for smaller workplaces, such as private studios or arts based organizations, which often lack formal occupational health structures. The proposed revisions aim to strengthen accessibility, scalability, and integration with existing occupational health and safety systems. Additionally, the notice indicates an intent to expand guidance on implementation practices, leadership engagement, and measurement of outcomes to better support organizations with limited resources. By reaffirming the universality of the Standard and committing to an updated, more flexible edition, the Standards Council underscores the growing recognition that psychological health and safety is essential for every workplace, regardless of size, industry, or structure.

There are barriers and benefits to The Standard, and getting an insight as to why employers believe the standard is necessary is useful for organizational motivation in adoption. Klein et al. (2016) conducted a qualitative study exploring Canadian employers' perspectives on The Standard to better understand motivations and barriers to implementation. Drawing on survey and interview data from multiple organizations across sectors, the study found that the majority of employers who adopted or supported The Standard were motivated primarily by ethical considerations rather than legal or financial incentives. Specifically, 91% of respondents cited the belief that promoting psychological health was "the right thing to do," reflecting a growing recognition of mental well being as a moral and social responsibility within organizational culture. However, the research also revealed several persistent barriers to widespread adoption. Many employers perceived psychological health and safety as less relevant to their operational priorities or as an intangible aspect of workplace management that was difficult to measure or justify in practical terms. Overall, the study highlights the gap between awareness of the Standard's ethical importance and its practical application, emphasizing the need for clearer tools, education, and leadership engagement to transform awareness into sustained action.

While relevant peer reviewed literature in the constraints of the literature review were difficult to find, The grey literature report *Beyond the Stage: New Pulse Report Reveals Mental Health Crisis Among Canadian Music Industry Workers* (Revelios, 2025) presents a concerning picture of psychological well being within Canada's music and performing arts sectors. Drawing on responses from approximately 450 industry workers, including performers, educators, technicians, and administrators, the report reveals that 84% of participants felt their workplace environments did not adequately support mental health, while 69% reported experiencing or witnessing stigma related to psychological challenges. Many respondents indicated that the competitive and often precarious nature of creative work fosters burnout, anxiety, and feelings of isolation, compounded by limited access to formal supports or benefits. The report underscores a significant sector specific gap in psychological health and safety awareness and resources, suggesting that the arts and music fields lag behind other industries in

adopting structured approaches like the Standard and specifically attention to the PHS principal of harm reduction. Overall, it calls for targeted interventions, policy attention, and culture change to better support the well being of creative professionals across Canada. Studies of the one on one private voice lesson were also difficult to find given the restraints of the review. This could be because of the ethical considerations of including children in research, or the onus being on the student to report difficulties in the studio. This scarcity of peer reviewed research highlights an urgent need for systematic, academically rigorous studies that document psychological health and safety conditions within music education, particularly in one on one private instruction. Grey literature can identify trends and signal areas of concern, but it lacks the methodological consistency, theoretical framing, and evaluative depth required to guide evidence based pedagogy.

The literature that has emerged from Australia on psychological health and safety demonstrates that implementation practices are shaped not only by organisational culture and capability, but also by the legal status of psychosocial hazard management under national workplace health and safety (WHS) legislation. Although not as detailed as The Standard, managing psychological risk has been written into Australian law. The research collectively shows that execution requires sustained organisational learning, precise conceptual understanding, and alignment between legislative expectations and practical strategies.

Rigby et al. (2024) illustrate how legal and regulatory structures influence organisational implementation through their analysis of safety and quality standards in the digital mental health sector. While not exclusively focused on WHS law, their discussion of staged implementation and accreditation shows that the presence of national standards creates both structure and pressure, pushing organisations to convert broad legislative concepts into workable, context specific practices. This dynamic mirrors how PHS obligations operate under Australian WHS legislation. Compliance with law requires translation into real systems, not static documents.

This legal grounding becomes particularly relevant when considering Hallam et al.'s (2023) exploration of healthcare workers perceptions of psychological safety. Their study emphasizes that policy compliance alone cannot fulfil an organisation's WHS obligations. In their case, psychological safety is experienced and managed in daily interactions, and not in manuals. Workers identified open communication, supportive supervision, and safe reporting environments as central to feeling psychologically protected. These findings underline the reality that meeting psychosocial duties under WHS law requires cultural as well as procedural action. Legislation can mandate the creation of psychologically safe systems, but execution depends on how those systems are lived and modelled by supervisors and leaders. Hallam et al. therefore reveal the gap between formal compliance and meaningful implementation, this gap organisations must close to satisfy both legal and ethical expectations. In the context of creating a framework for the voice, examples of language, action, and procedure could be useful to clearly show every day use.

Loh et al. (2024) add further clarity through their case studies on improving Psychosocial Safety Climate (PSC). Because psychosocial hazard management is part of WHS compliance, PSC becomes a practical tool for meeting legal duties while also improving workplace well being. Their case studies demonstrate that organisations can successfully raise PSC when they commit to structured interventions, ongoing monitoring, and leadership supported change. The implication for execution under WHS law is significant. Improving PSC offers a measurable pathway for organisations to demonstrate due diligence and risk management, which is a PHS principal. Wentzel's (2024) conceptual overview similarly emphasizes that effective implementation under WHS law requires clear definitions. In this case the differentiation between psychological safety, psychosocial hazards, and mental health. Because psychosocial risks now fall within the scope of legally mandated hazard management, organisations must understand what each concept means, how it manifests in practice, and what constitutes a reasonable step toward compliance. This could be very relevant to addressing the potential education barrier of voice teachers. Wentzel highlights that confusion in terminology can undermine implementation, making it difficult for organisations to meet their legal obligations or design interventions that adequately address risks. If The Standard is ever legally mandated in Canada, voice studios could face new obligations. Teachers might need to formally identify and manage psychosocial risks, such as performance anxiety, student stress, or power dynamics, and document strategies to prevent harm. However, in the case of legislation, the teacher would then have the responsibility to integrate these principals for themselves and any teaching staff as the employees of the studio, creating a totally new lens for the standard to be applied to.

Psychological health and safety frameworks, whether it be Canada's voluntary Standard or Australia's legally mandated psychosocial hazard requirements, could hold substantial promise for informing safer, healthier teaching settings. The Canadian evidence shows that structured approaches to psychological health and safety can create measurable cultural and organisational benefits when adapted to context, supported by leadership, and embedded within day to day practice. At the same time, the review highlights persistent barriers in large and small organizations alike: limited resources, the perceived complexity of psychosocial systems, and uncertainty about how interpreting principles in relation to arts based environments will be executed.

Findings from the music and arts sector further reinforce the need for tailored approaches. Reports indicating widespread stigma, insufficient mental health support, and heightened psychosocial risk illustrate that performing arts environments carry distinct pressures that traditional workplace tools do not fully address. The absence of implementation studies in private studio settings, combined with the ethical complexities of researching child students, the informality of private arts instruction, and unclear reporting pathways, creates a significant gap in the literature. This gap strengthens the argument for developing scaled, context appropriate tools derived from the principles of the Standard rather than attempting to replicate the entire framework.

Where Canada currently relies on voluntary adoption, Australia embeds psychosocial risk management within national WHS law. This legal status shifts psychological health and safety from an optional enhancement to a regulated requirement, underscoring that psychosocial hazards must be identified, controlled, monitored, and reviewed alongside physical hazards. Across both national contexts, the principle that emerges is not to adopt the entire Standard verbatim, but to identify which components meaningfully translate to the one on one instructional setting.

Ultimately, this rapid review shows that the National Standard could serve as a valuable conceptual framework for informing psychological health and safety in private voice teaching. The key task is determining which elements hold the greatest relevance, how the teacher/student relationship should be positioned, and how to model the way PHS looks in a voice lesson. By approaching the Standard as an adaptable set of guiding principles rather than a rigid template, voice studios may begin to cultivate environments where emotional safety, vocal development, and pedagogical integrity support one another in sustainable and measurable ways.

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