

December 2025

Mental Health in Get SET Agencies

Survey Results and Resources



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INTRODUCTION

This report presents the findings of a sector-wide survey about mental health, self-care, and available supports in Get SET (formerly LBS - Literacy and Basic Skills) programs. Adult learning practitioners from across the sector completed the survey. They described the mental health challenges learners experience, how these challenges affect participation and learning outcomes, and the ways programs respond to learner needs.

The survey also looks at practitioners' own experiences, including workplace stress, access to mental health supports, and organizational approaches to staff well-being.

The survey responses provide deeper insight into both challenges and successes in Get SET programs. Together, these findings show how mental health affects attendance, engagement, teaching approaches, and program design in adult learning settings. They also highlight the significant emotional labour carried by Get SET practitioners, which is often unseen.

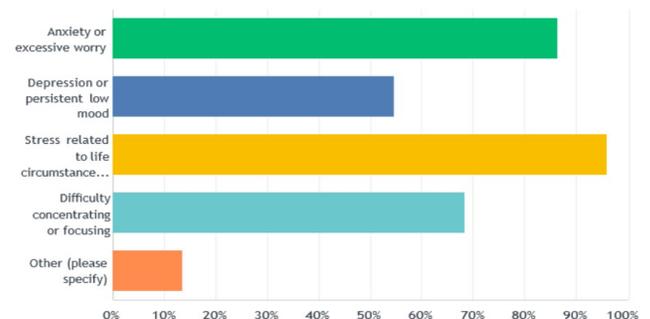
By documenting both challenges and successes, this report demonstrates the important role Get SET programs play as supportive and stabilizing spaces, while also identifying barriers that affect both learners and staff.

The findings are intended to support program planning, professional development, and broader conversations about mental health supports in adult education. To further support practitioners and learners, a list of mental health resources is included at the end of the report.

CHALLENGES FOR LEARNERS

Most common mental health challenges observed among learners

Q1 What are the most common mental health challenges you see among learners in your program? (Select all that apply)



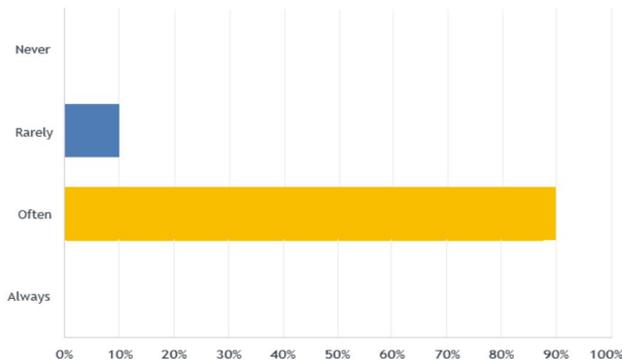
Survey respondents reported that learners in Get SET programs commonly experience anxiety, depression, high stress related to life circumstances, and difficulty with concentration and focus. Anxiety and excessive worry were the most frequently identified challenges, followed closely by ongoing low mood and stress linked to housing, employment, finances, and health. These challenges are often connected to one another rather than occurring on their own, reflecting the complex situations many learners face outside the classroom.

The responses show that mental health challenges are often made worse by past experiences with education, caregiving responsibilities, chronic health conditions, substance use, and social anxiety.

Practitioners noted that many learners arrive with long histories of discouraging educational experiences. These experiences can increase fear of failure and lead learners to avoid or disengage from learning activities and classroom environments.

Impact of mental health needs on attendance and participation

Q2 How often do learners' mental health needs affect their attendance or participation?



Survey findings reveal that mental health needs frequently affect learner attendance and participation. Most respondents indicated that these impacts occur often or consistently.

Learners may miss classes, have difficulty maintaining regular schedules, or temporarily disengage from learning when symptoms worsen, especially during periods of high stress or crisis.

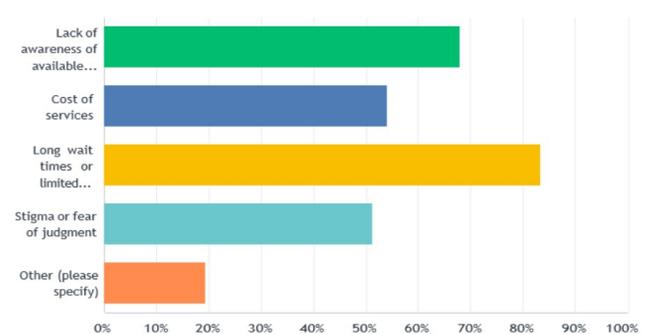
Practitioners emphasized that these attendance patterns do not reflect a lack of motivation. Instead, they described them as reasonable responses to challenging circumstances.

Fluctuating participation was often understood as part of learners' efforts to manage anxiety, depression, health issues, or unstable living conditions while still working toward their learning goals.

“When living with mental health issues for a long time, the effects of anxiety and depression can become routine or habitual for our clients.”

Barriers learners face when accessing mental health support

Q3 What barriers do learners face when accessing mental health support? (Select all that apply)



Respondents identified several system-level barriers that limit learners' access to mental health supports. The most commonly reported barriers include:

- long wait times
- limited availability of services
- cost
- a lack of awareness of existing supports

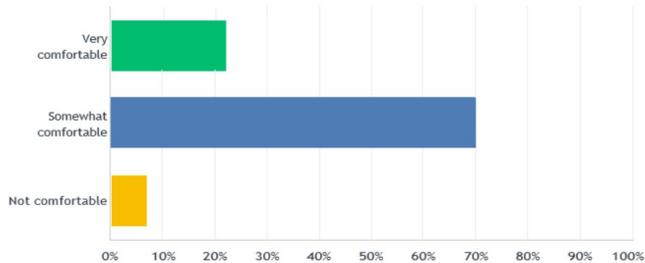
These challenges were especially significant for learners in rural or remote areas and for those without reliable transportation.

Practitioners also identified additional barriers such as stigma, fear of judgment, language barriers, and difficulty navigating complex service systems. Learners were sometimes described as hesitant to seek help due to past negative experiences, limited awareness of their own mental health needs, or a belief that they should manage challenges on their own, even when support would be helpful.

“LBS classes reduce isolation and get people out of their environments.”

Learner comfort discussing mental health with program staff

Q4 In your experience, how comfortable are learners with discussing mental health concerns with you or other staff?



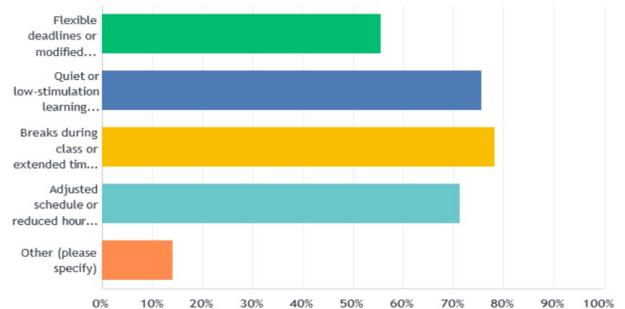
A majority of respondents identified that learners are somewhat comfortable discussing mental health concerns with staff. Fewer indicated that learners are very comfortable or not comfortable at all. This suggests that trust and openness tend to develop over time rather than being present at intake.

The data shows that learners' comfort levels are strongly influenced by relationship-building, consistency, and non-judgmental communication. While some learners are willing to share concerns early on, others need longer periods of engagement before disclosing mental health challenges, especially if they have previously experienced stigma or negative responses from institutions.



Mental health-related accommodations requested by learners

Q5 Have learners ever requested any of the following mental health-related accommodations? (Select all that apply)



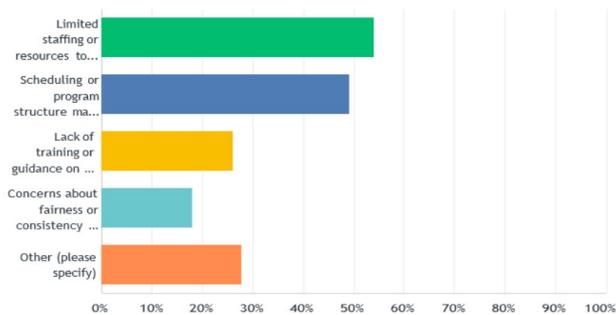
Learners frequently request accommodations that reduce stress and support continued participation in learning. Practitioners described these accommodations as essential supports rather than special requests, helping learners stay engaged during periods of increased mental health difficulty. Survey responses also highlighted accommodations such as:

- one-on-one instruction
- virtual or hybrid learning options
- extended learning breaks
- flexibility around group participation or camera use in online classes
- flexible deadlines
- adjusted schedules
- in-class breaks
- reduced hours
- quiet or low-stimulation learning environments

Practitioners noted that many learners need encouragement to recognize their needs and to request accommodations.

Challenges in accommodating mental health-related requests

Q6 Are these types of requests challenging to accommodate for any of the following reasons: (Select all that apply)



While accommodations are widely seen as essential, respondents reported that putting them into practice consistently can be difficult.

Common challenges included limited staffing, restricted resources, scheduling pressures, and rigid program structures. A lack of physical space, particularly for quiet or private learning, was also identified as a significant barrier.

Practitioners raised concerns about balancing individual learner needs with fairness, consistency, and external accountability requirements.

Some described tension between learner-centred approaches and system expectations related to attendance targets, progress measures, and funding requirements.

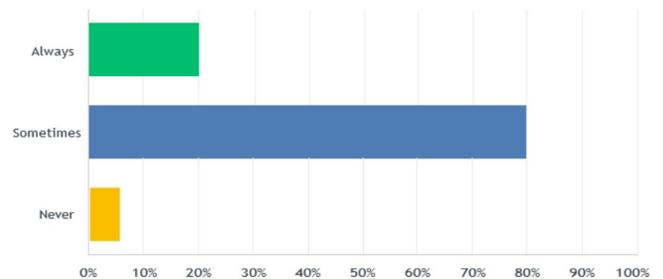
These responses highlight the complexity of supporting mental health needs within current program frameworks.

“It’s very difficult to meet the needs of clients who request work hours in the evening, due to limited staffing.”

CHALLENGES FOR PRACTITIONERS

Workplace factors and practitioner mental health

Q7 How often do workplace factors (e.g., workload, administrative demands, program changes) contribute to mental health issues (e.g., stress or burnout)?



Survey responses show that workplace factors often contribute to practitioner stress and burnout.

Most respondents reported that workload, administrative tasks, and ongoing program or system changes sometimes or always affect their mental well-being.

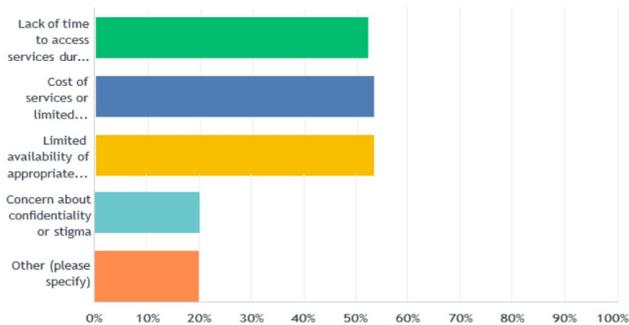
These pressures were described as cumulative, increasing over time as responsibilities continue to grow.

Practitioners noted that mental health strain is closely connected to the emotional demands of the work. This includes supporting learners with complex needs while also managing reporting requirements, funding expectations, and changing program priorities.

The findings suggest that practitioner stress is not simply an individual issue, but is strongly influenced by organizational and system-level conditions.

Barriers practitioners face in accessing mental health support

Q8 What barriers do you face in accessing mental health support as a practitioner? (Select all that apply)



Respondents identified several barriers that limit their access to mental health supports. Common challenges included:

- limited time during work hours
- the cost of services
- limited or no employee benefits
- long wait times for appropriate care

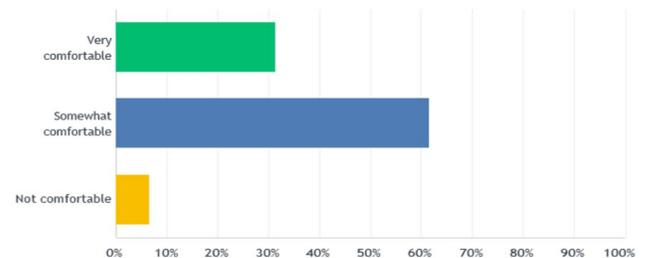
Many practitioners noted that while supports may exist in theory, they are often difficult to access in practice due to heavy workloads and scheduling constraints.

Additional barriers included difficulty finding providers with relevant cultural or sector understanding, concerns about confidentiality, and uncertainty about where or how to seek support. Practitioners in rural communities described added challenges related to limited service availability, further reducing access to meaningful mental health supports.

“There is a lack of resources to help staff develop healthy boundaries with learners, especially in small communities.”

Comfort raising personal mental health concerns

Q9 How comfortable do you feel raising concerns about your own mental health within your organization?



Most practitioners reported feeling somewhat comfortable raising concerns about their own mental health within their organization. Many indicated that they were very comfortable while some respondents reported not feeling comfortable at all.

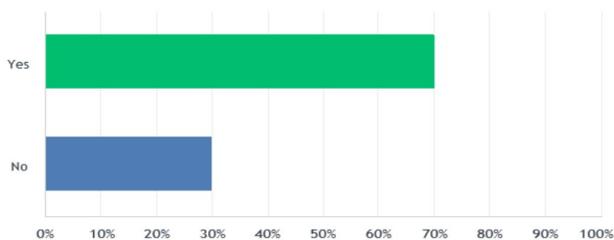
Responses suggest that comfort levels are shaped by organizational culture, leadership practices, and perceived consequences of disclosure.

While some practitioners expressed uncertainty about whether raising mental health concerns could affect their workload, job security, or professional reputation, most reported confidence that their concerns would be met with understanding and support.



Organizational responses to identified stress points

Q10 Are changes to lesson plans, workload, or communication made in response to identified stress points?



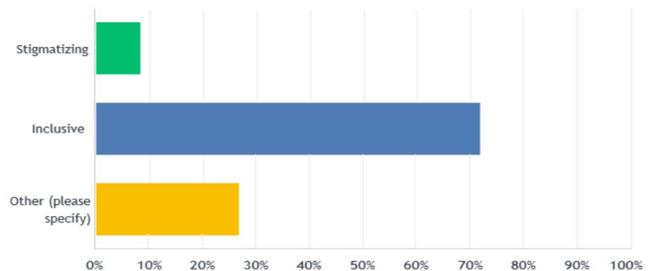
Most respondents reported that adjustments are made to lesson plans, workloads, or communication when stress points are identified. These changes help reduce pressure, increase flexibility, and respond to the immediate needs of staff or learners.

Responses also point to opportunities to strengthen consistency in how these adjustments are applied. In some cases, accommodations rely on individual managers or informal practices rather than formal policies; however, this also highlights a strong foundation on which organizations can build clearer, more consistent approaches that support positive experiences across teams and roles.



Mental health-related accommodations within organizations

Q11 In your experience, are mental health-related accommodations in your organization perceived as:



Mental health-related accommodations were most often viewed as inclusive and appropriate, reflecting broad recognition of their importance. Many respondents described these accommodations as increasingly normalized and built into everyday planning and practice.

At the same time, some practitioners reported that accommodations are occasionally seen as inconvenient, unfair, or difficult to maintain due to staffing and funding pressures. Others noted that attitudes can vary widely across departments and supervisors, leading to uneven implementation and, in some cases, the continued presence of stigma.

While the previous sections highlight significant mental health-related challenges faced by both learners and practitioners, survey responses also show the ability of Get SET programs to support stability, confidence, and progress despite these challenges.

The next section focuses on observed successes and highlights the practices that help learners stay engaged, build resilience, and achieve meaningful outcomes.

SUCCESSES FOR LEARNERS

Overcoming mental health barriers to participate in programs



Respondents shared many examples of learners engaging successfully in Get SET programs despite significant mental health challenges.

Success was most often described as gradual and relationship-based. Learners frequently began in one-on-one or highly supported settings and, over time, moved into small group or classroom environments. Increased attendance, greater willingness to participate, and sustained engagement were commonly identified as signs of progress.

Rather than removing mental health challenges altogether, success often involved learners learning to participate while managing ongoing difficulties. This progress was supported by patience, predictable routines, and trusting relationships with staff. Practitioners emphasized that meaningful progress typically unfolded over long periods and was closely linked to learners' sense of safety and belonging within the program.

The following are some of the success stories that were shared in the survey:

“We have had learners who were too nervous to attend in person but eventually overcame fear. Also, had people overcome fear to the point where we become a safe space for them.”

“One particular learner had very bad anxiety, all staff took the time to reassure them and build their confidence. They have recently found a job which would not have been an option when they first started.”

“We had a learner who lived with an eating disorder. She had a very strict meal plan and schedule that we needed to help accommodate in the classroom. She has been able to adjust her schedule and come for the start of class each day. She has successfully moved on to completing her OSSD.”

“Witnessing learners with extreme anxiety who couldn't make eye contact when they first came to becoming talkative, and bounding through the door eager to learn with our team.”

“We had a learner with domestic issues and we were able to provide her with resources and a space to listen to her concerns. The learner was also given a leave of absence. Last week she returned after 2 months and has made necessary changes in her life and is ready to continue her studies.”

“I feel that most of my learners overcome mental health barriers on a regular basis. You can see them constantly working to overcome mental health challenges.”

“When we had Skills for Success funding, we ran a mental wellness through creativity program that was run by an art therapist, and this was a wonderful program to offer our learners.”

Program strategies that positively impact the mental health of learners

Practitioners identified a wide range of strategies that support learners' mental health. The most commonly cited included flexible programming, individualized support, small class sizes, and non-judgmental learning environments. Regular check-ins, positive reinforcement, and opportunities for learners to work at their own pace were described as core practices.

Additional strategies included providing access to food or refreshments, offering blended or online learning options, using culturally responsive activities, and connecting learners to community supports. Respondents consistently emphasized that feeling respected, listened to, and supported was just as important as any specific strategy in promoting learner well-being.

The following include some of the strategies practitioners shared in the survey:

"We had a learner return to us after being unsuccessful in their studies 10 years previously. Before that, they had spent their entire high school years in an alternative classroom and had no credits on their transcript. They had also already tried two other LBS programs. Over the next two years in our program, we focused on helping them build self-confidence, manage their anxiety, and strengthen their literacy skills."

"This past June, their determination paid off and they proudly graduated with their Ontario Secondary School Diploma (OSSD) and celebrated another milestone: starting their very first job."

"We have delivered a self-esteem workshop for many years that has been very successful. The foundation of the program empowers the participant to take control and responsibility for their life decisions."

"Our programming offers light snacks to the learners while they are at the program, and I feel like when learners are fed and hydrated, it allows them to focus on the tasks at hand. Our program has an outreach worker who is able to implement fun and Indigenous culture-based activities that allow the learners to have a break from their LBS work."

"We provide resources for learners to engage in mental health coping & improvement activities. For example, meditation, facing anxiety and creating community connections by learning a new craft/hobby, communication skills (how to navigate difficult conversations), training partnerships with local health units (nutritional/physical health), and community gardening."

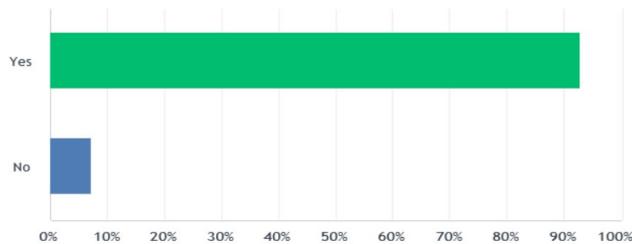
"I usually have a chat with the learners before class begins. They are very open-minded when it comes to discussing their struggles."

"Individual rooms where learners can work independently away from others in a quiet, self-contained space. Patience and willingness to hear them when they need to talk. Taking things slow, offering an ear and a kind heart, referring to supports helps."

"We started using a less structured approach in the classroom; discontinued lessons, extended classroom times and work with learners and their goals on a more individual basis."

Improvements in the mental health of learners as a result of Get SET participation

Q14 Have you seen learners' mental health improve as a result of LBS participation?



The vast majority of respondents reported seeing improvements in learners' mental health through participation in Get SET programs. These improvements were most often described as increased confidence, reduced isolation, improved self-esteem, and a stronger sense of purpose or routine.

Practitioners noted that gains in skills such as literacy, digital skills, and communication often led to greater independence and self-efficacy, which in turn supported better mental well-being. Participation in Get SET programs was frequently described as stabilizing, offering structure, connection, and a sense of accomplishment during challenging periods in learners' lives.

"Most learners who participate in classes that find a connection with their instructor and teammates will discuss the improvement of their mental health connected to their confidence and ability to be motivated and act on their goals. They feel better about themselves as they move forward. This is why Literacy programs are essential in our community, because we help provide a space where people can find personal successes organically."

"LBS participation gave learners the chance to develop their confidence as well as their mental health."

"I strongly believe that the consistency of the LBS program in their lives is often one of the few, or only, things they can count on. Class is always open Sept-June, and they know exactly where and how to connect with us. They know if they are struggling, they will be met with patience and not judged. Having established this, many learners can be vulnerable and open about their struggles and still come to class, even if they are having a bad day. They know it is a safe space."

"For us, we generally see increased self-confidence and, after being told for much of their lives that they are not at all capable, many of our learners go on to surprise themselves and begin to live happy, successful lives."

"Achieving the goal paths is uplifting for their mental health, such as obtaining employment, learning digital tech, Grade 12, and joining a trade. Win-Win situation!"

"Learners who have some anxiety and fear about our programs when they arrive, come out of their shell and become engaged and actively participate with excellent results. It's somewhere safe to go, somewhere where they feel heard, somewhere where someone cares for them."

"They have a goal and a schedule and they commit to small pieces daily. They feel that they can stick to each piece and are accountable for their learning. They know that we are proud of them every day for every small or big step. We have open communication and lead with heart."

Role of clear direction and supportive communication in overcoming barriers

“I’ve seen LBS be a turning point for numerous learners who appear to be struggling with depression and anxiety. Coming to class, following a schedule, and seeing success in the classroom have had a significant beneficial impact on learners’ mental health.”

“People who didn’t shower or leave the house much learned and blossomed. They eventually got jobs or returned to school and got their diplomas. I’ve seen many people regain their confidence.”

“A large part of regular LBS participation creates a consistent community, a place of belonging, a safe and brave space to learn skills that build confidence and self-esteem.”

“Some learners will stop in to update us on the positive outcomes as a result of being in our program, and how they are involved in the next step to reach their end goal.”

“A student facing various mental health challenges worked through the daycare curriculum, a program that aligned with her interests. She especially enjoyed creating her final project, dedicating great effort and care to it. Completing the training and receiving a certificate was a source of pride and accomplishment for her.”



Respondents shared many examples of how clear expectations, reassurance, and supportive communication helped learners overcome emotional or mental barriers to learning. Normalizing challenges, breaking tasks into manageable steps, and providing calm, consistent guidance were commonly identified as effective practices.

Supportive communication was especially effective when paired with encouragement and validation. Practitioners noted that these approaches helped learners reframe past negative educational experiences and rebuild confidence in their ability to succeed. Feeling understood and believed in was often described as key to helping learners persist through periods of anxiety or frustration.

“One of my students last year had tremendous anxiety about anything to do with math. He told me he had awful experiences with high school, and he’s been unemployed for some time. I normalized his struggles with math and worked hard with him to build up his basic skills before tackling more challenging concepts. He has made significant progress and is very proud of his success.”

“We had a learner that could not look or speak to anyone. Over time, she gained enough confidence to do both and then to offer her opinion and engage in group conversation. She went on to earn her Grade 12 equivalency and got a job in customer service. She was later elevated to store management of a very busy Tim Horton’s franchise.”

“We encourage learners with ADHD to take frequent breaks, short walks and set short, timed sessions for learning tasks. Variety is the spice of life, and we encourage learners to change tasks if frustrated.”

“I had a learner who had not finished high school due to severe anxiety. She came to the program to participate in our ACE partnership and earn the prerequisites required to apply to an RPN program. She initially struggled with the math and indicated she was not going to continue; however, we were able to place her with a volunteer tutor in one of our other learning programs, which provided her with the emotional and learning support she needed to overcome her anxiety and be successful. She is now a registered practical nurse.”

“We have a learner who was struggling with attending a job interview. He felt he wasn’t going to get the job because he would not do well in the interview. We practiced interview skills, did some mock interviews, discussed what to do at home to prepare for the interview and provided clear direction for a positive mindset. He successfully completed the interview with more confidence than when he scheduled the interview.”

“Offering support groups to a person who was dealing with grief, allowing them to feel supported, and sharing success stories of others who have experienced similar circumstances. The person was able to feel more confident as the learning went on.”

“One student came in with papers from the Government and wasn’t able to understand what they wanted from her. I was able to explain to her what she needed to do and was able to assist her with the process.”

“A learner came to us who was going through a separation from her partner. She had to move in with her parents, and she lost everything. She came to us to upgrade her skills so she could go to college. She was a mature student. She could only stay in class for about 1/2 hour at first and would leave in tears.”

“Eventually, she managed to stay for her whole lesson. She was successful and moved on to college. She graduated and continues to attend our AGM every year.”

“We had a student who was homeless. Although this student came every day, and was incredibly bright and a leader, he had no idea where to live, even temporarily. His stress and anxiety were extremely high at the beginning of the program, and he didn’t know how to get homework done without a computer.”

“We were able to support him and find him safe housing, and lend him a laptop for homework. He graduated at the top of his class.”

“We employ a part-time mental health practitioner. This has become an absolute necessity, even though it reduces funding for other programs and staffing needs. Learners can self-refer to the counsellor and access a limited number of sessions, with a referral to community supports being the goal (if the learner needs more long-term support).”

“This has been a game changer for us in terms of providing mental health support for our learners, though it has affected our ability to direct funding to other needed aspects of the program as noted above.”

“We have had learners that come in and you can see right away that they are struggling that day. We praise them for coming in; we know it wasn’t easy. If they can’t collect themselves we offer them the option to talk to us about what is going on if they are comfortable doing so (in a room away from learners, for confidentiality purposes), and assure them that it’s okay to not take the class today. We always make our services client-centred.”

“One student had undiagnosed ADHD; after working with them for a while, I was able to connect them with a professional who could get them a diagnosis; that diagnosis changed everything for them in a positive way, and the student ended up getting their grade 12 equivalency and a college diploma and is now employed in the social services field.”

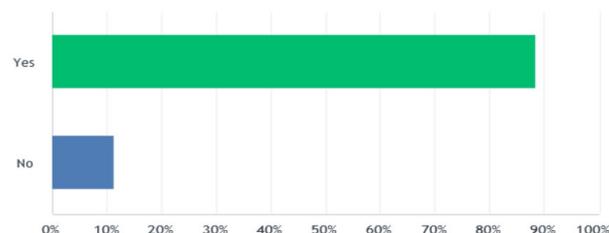
“Many clients I work with have minimal high school education and feel disheartened at the thought of learning again. Communicating with them and explaining that it is individualized and at their own pace helps.”

“We use a formal safety plan that is documented and shared. It is generated by the learner rather than the organization. It outlines specific steps and what to do in specific scenarios.”

“There are times when you can see an individual demonstrating signs of struggle. During the break, I will attempt to draw them aside for a brief conversation. If it seems prudent, I will ask them if they want to wrap up early that day or if they would like to shift to a different task for the remainder of class. Oftentimes, they want to talk and have somebody listen.”

Observations of learner resilience and coping within programs

Q17 Have you observed learners building personal resilience such as coping with setbacks or managing stress within the program?



Practitioners frequently observed learners building personal resilience over time. This included improved coping with setbacks, stronger emotional regulation, and a greater willingness to ask for help. Resilience was often reflected in learners returning after absences, continuing despite slow progress, or re-engaging after personal crises.

These observations suggest that Get SET programs support resilience not by removing challenges, but by creating flexible and compassionate learning environments.

Within these settings, learners are able to practice persistence, self-advocacy, and problem-solving. For many learners, staying connected to learning during difficult periods was itself an important indicator of success.

“Getting over the fear of looking at a page and not understanding how to decipher the words, lines, etc. When they reach milestones, it’s rewarding for them.”

“We often tell people about breathing techniques, meditation, and self-care. By informing the client, they often seek out whatever solution works best for them.”

“Many of our learners, when entering the program, can often feel defeated and have negative thoughts and feelings towards learning. Through determination and patience, many of our learners are able to build resilience in the classroom/ tutoring sessions that can be expanded through their personal lives.”

“Many students are recovering from a substance use disorder. Some start and stop. We are non-judgmental, and when students are ready to return, they will. And when they open up about their recovery, we celebrate every step.”

“When learners gain comfort that failure is an essential part of learning, stress is reduced, and they cope better with setbacks as they know that failure is one step closer to success.”

“We had a learner doing the Skills for Success, she did very well in building personal resilience, setting boundaries and learning how to cope with the setbacks in life and learned to manage stress better. They learned several types of coping mechanisms in that program.”

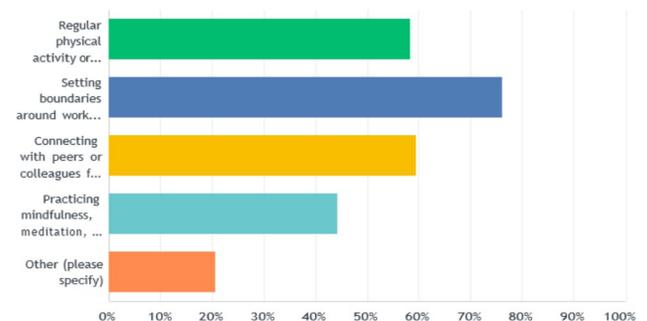
“We work with students to help them find coping mechanisms. We offer courses and workshops on a variety of topics, including resilience and stress management.”

“We have a young woman who needed to upgrade her math skills to go back and finish grade 12. At first, she wanted just 1-to-1 tutoring due to high anxiety in a classroom setting. Eventually she joined the class and was very uncomfortable at first, but overcame her anxiety and persevered. She is very proud of herself.”

SUCCESSSES FOR PRACTITIONERS

Personal strategies used by practitioners to maintain their mental health

Q19 What personal strategies (e.g., self-care) have you found effective in maintaining your own mental health while working in LBS?



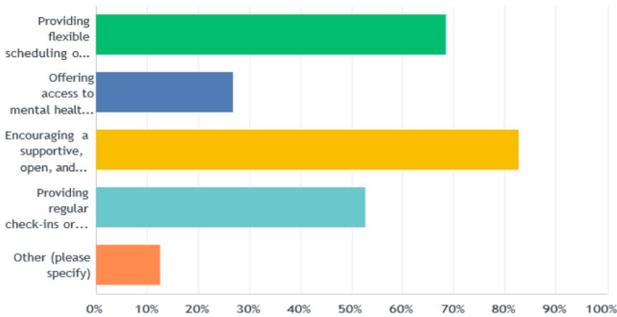
Practitioners described a range of personal strategies they use to support their own mental health while working in Get SET programs. The most common strategies included setting personal boundaries, pacing workload, seeking informal peer support, and engaging in reflective practices such as self-awareness and reframing expectations. Many respondents also emphasized the importance of:

- therapy
- getting enough sleep
- taking time off
- hobbies such as gardening
- mindfulness or meditation
- regular exercise

These strategies were most often described as self-developed. Several respondents also highlighted the importance of finding meaning in their work, noting that learner progress is a source of professional fulfillment that helps offset workplace stress.

Organizational supports that have positively impacted practitioner mental health

Q20 How has your LBS organization supported your mental health in a way that you found especially effective? (Select all that apply)



Respondents identified several practices that support their mental health, including supportive leadership, flexible scheduling, and open communication.

Many practitioners emphasized the value of workplace cultures that normalize conversations about mental health. Informal check-ins, understanding during periods of high stress, the option to work from home when possible, and autonomy in instructional decision-making were also described as helpful.

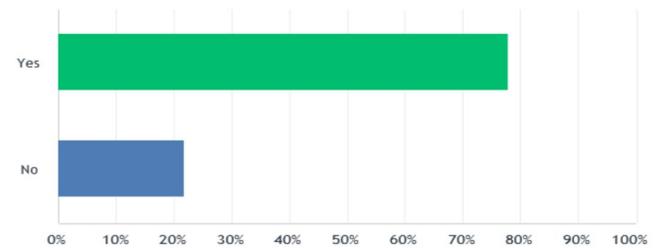
Practitioners reported feeling more valued and supported when organizations acknowledge emotional labour and clearly encourage staff to prioritize well-being and to attend counselling appointments even if they occur during work hours.

“Family first perspective at the agency where flexibility is granted when needed for appointments.”

“Open door policy to talk out any concerns or issues causing stress. Management ensures we stop working at the end of the day and reinforces the idea of leaving work at work.”

Impact of boundary-setting and peer debriefing on practitioner resilience

Q21 Have organizational strategies like boundary-setting or peer debriefing improved your resilience?



Many practitioners reported that setting boundaries and debriefing with peers has strengthened their resilience, especially when managing emotionally demanding situations. Informal conversations with colleagues, shared problem-solving, and mutual validation were frequently identified as important supports that help practitioners process difficult experiences and reduce feelings of isolation.

These strategies were most effective when they were part of regular team practices rather than treated as optional or exceptional. Practitioners noted that when boundary-setting and peer debriefing are respected and encouraged at the organizational level, they support sustained engagement and help reduce burnout.

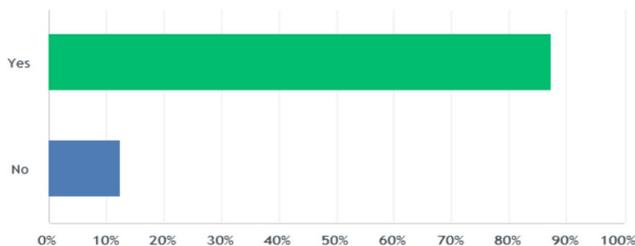
“Our mental health committee strives to improve services and supports in the agency. Debriefing is used often, and I have trusted people I can speak with.”

“Regular check-ins with staff, and being able to be open and honest about mental health is really helpful.”

AVAILABLE SUPPORTS FOR LEARNERS

Identification and accommodation of invisible barriers

Q22 Do you feel that “invisible barriers” (for example: discrimination, learning disabilities) are successfully identified and accommodated in a respectful and supportive way?



Respondents generally reported that invisible barriers, such as neurodivergence and undocumented mental health challenges, are often recognized and accommodated in respectful and supportive ways.

Many practitioners described taking proactive steps to notice signs of distress and adjust expectations, even when learners have not formally disclosed their needs. At the same time, responses showed variation in how consistently invisible barriers are acknowledged across organizations.

While some practitioners felt confident that accommodations were applied fairly, others noted that recognition and support can depend on individual judgment, experience, or supervisory support. These differences point to the need for clearer guidance and more shared approaches across programs.

“Neurodivergence and learning differences are recognized and accommodated for as best suits the individual.”

Additional examples of successful mental health supports

Practitioners shared additional examples of effective mental health–related supports such as creating safe and welcoming learning spaces, prioritizing relationship-building, building flexibility into program design, and maintaining strong referral connections with community services.

Many emphasized the importance of meeting learners where they are and allowing space for pauses, returns, and re-engagement without penalty.

These examples reinforce the view that effective mental health practices in Get SET programs are shaped by trust, responsiveness, and sustained commitment rather than one-time interventions.

“We also have Indigenous-based PD opportunities (sweat lodge, nature walks, cultural/educational sessions) that encourage good mental health practices.”

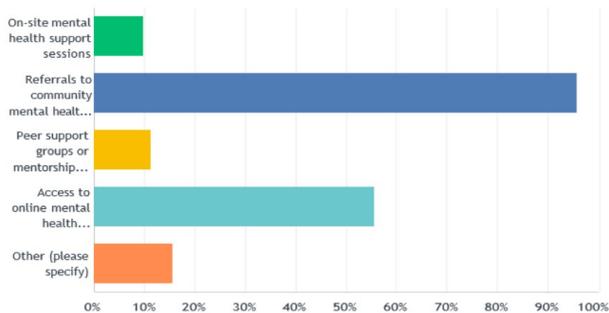
“Staff have attended webinars and training on mental health including dealing with psychosis and SAFEtalk (Suicide Alertness for Everyone).”

“Respectful group discussions, community resources shared weekly through flyers, posters, brochures etc., health related workbooks, parenting skill improvement workbooks.”

“We have some journals we give out for learners to help write their thoughts down, or art materials for them to be creative with.”

Mental health supports and resources currently available to learners

Q24 What mental health supports or resources are currently available to learners in your program?



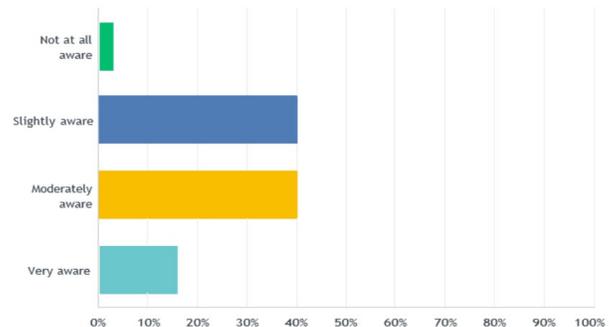
Respondents noted that learners have access to a range of mental health supports within Get SET programs, though availability varies by organization and community context. Common supports include referrals to community mental health services, informal emotional support from staff, flexible learning arrangements, and accommodations within the learning environment. Some programs also provide access to on-site or nearby services, wellness-related activities, or connections to social supports such as food programs and transportation assistance.

In many cases, practitioners described Get SET programs themselves as an important source of support. Programs were seen as providing safe and consistent spaces where learners can share challenges and receive guidance. These relational supports were viewed as especially important for learners who face barriers to accessing formal mental health services.

“We partner with the local CMHA and provide a quarterly virtual workshop for all learners.”

Learner awareness of available mental health supports

Q25 How aware are learners of these supports?



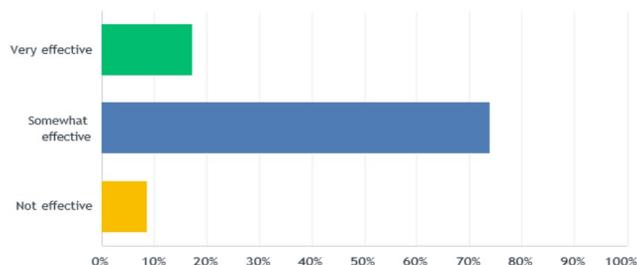
Practitioners identified mixed levels of learner awareness about available mental health supports. While some learners are well informed about referral options and accommodations, others are only partially aware or do not learn about supports until a crisis occurs. Awareness often increases over time as trust develops and learners feel more comfortable engaging with staff.

Respondents shared that awareness is shaped by factors such as how information is shared, intake processes, literacy and language barriers, and learners' past experiences with support systems. Informal, relationship-based conversations were frequently described as more effective than formal information-sharing on its own.



Effectiveness of existing mental health supports

Q26 How effective do you believe these supports are in meeting learners' needs?



Overall, respondents viewed existing mental health supports as helpful but not sufficient to fully meet learners' needs. Supports were described as most effective when they were timely, accessible, and responsive to individual circumstances. Within programs, supports such as flexibility, encouragement, and consistent staff presence were frequently identified as having a positive impact.

At the same time, practitioners noted that external mental health services often involve long wait times, limited availability, or eligibility restrictions, which reduce their usefulness for learners facing immediate or ongoing challenges. As a result, Get SET programs often serve as an interim source of mental health support within their communities.



Additional mental health supports that would benefit learners

Respondents highlighted several additional supports that would better meet learners' needs. These included improved access to affordable and timely mental health services, on-site or embedded supports, culturally and linguistically appropriate care, and transportation assistance. Many practitioners also expressed a need for stronger partnerships with mental health providers and more seamless referral pathways.

Additional suggestions included increased funding for wellness-related programming, expanded hybrid or flexible learning options, and clearer system-level recognition of the mental health needs within adult learning populations. Together, these responses point to a shared call for structural improvements that go beyond individual programs and address broader service gaps affecting learners.

"We live in an isolated rural area. More supports in general would be good. Many people don't even have a family doctor."

"More funding overall so we can hire an on-site counsellor or social worker for our learners."

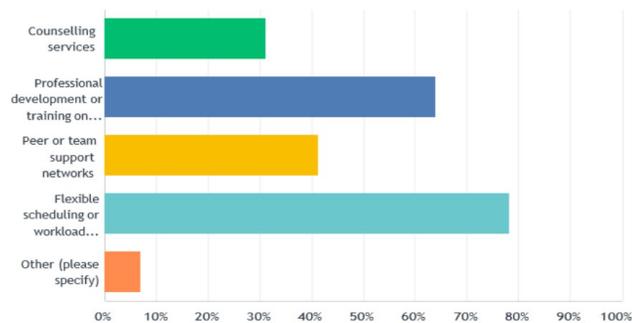
"There needs to be funding for proper supportive care for long term mental health challenges. My learners are dealing with trauma, difficult family responsibilities, learning disabilities (most often undiagnosed), and poorly understood mental health challenges."

"More free programs in the community. We are desperate for more supports."

AVAILABLE SUPPORTS FOR PRACTITIONERS

Mental health supports and resources currently available to practitioners

Q28 What mental health supports or resources are currently available to you as an LBS practitioner? (Select all that apply)



Respondents described that mental health supports for practitioners vary widely across Get SET organizations.

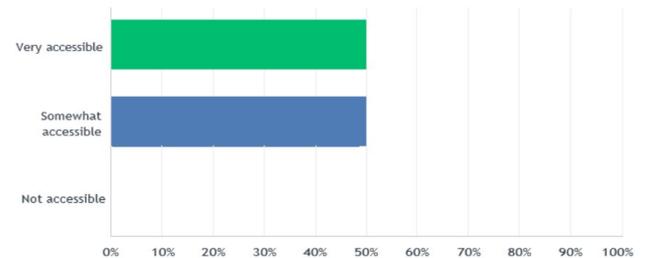
In many cases, supports are limited or informal and depend on collegial relationships, supportive supervisors, or personal coping strategies rather than structured organizational resources. Some practitioners reported access to employee assistance programs or community services, but these supports were not consistently available across organizations.

Many responses also pointed to the absence of formal benefits or dedicated mental health resources for staff, particularly in community-based Get SET settings. As a result, practitioners often rely on personal networks or self-funded services to meet their mental health needs.

“Status quo funding means no raises, which is hard on morale. It increases stress and burnout because of the lack of job security.”

Accessibility of practitioner mental health supports

Q29 How accessible are these supports when you need them?



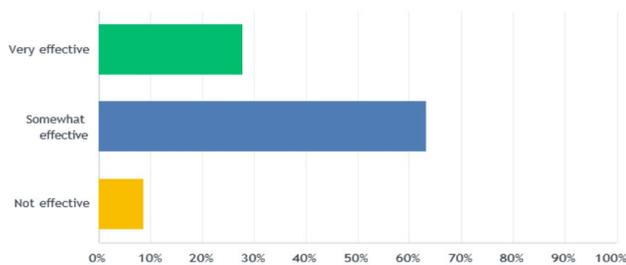
While many practitioners describe supports as being very accessible, others described them as somewhat difficult to access when they are needed, even when those supports technically exist. Common barriers included limited time during work hours, heavy workloads, scheduling constraints, and long wait times for external services. Some respondents also noted confidentiality concerns, particularly in small or rural communities, which further limited access.

Several practitioners expressed uncertainty about how to access supports or when it would be appropriate to do so. Overall, these responses suggest that access is influenced not only by whether supports exist, but also by workload expectations.



Effectiveness of existing supports for managing stress and well-being

Q30 How effective have these supports been in helping you manage stress or maintain mental well-being?



When supports were accessible, practitioners described them as somewhat effective in helping manage stress and support mental well-being.

Informal supports, such as understanding supervisors, peer check-ins, and flexible scheduling, were often seen as more immediately helpful than formal services.

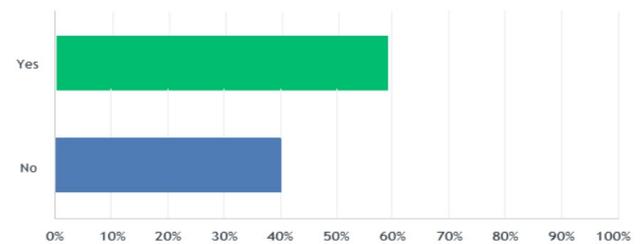
Limited staffing, high caseloads, and administrative pressures were frequently identified as factors that limit the long-term effectiveness of available supports.

“It is helpful to schedule a check-in once a month just to be sure everyone is doing well mentally.”



Training in soft skills provided by organizations

Q31 Have you received training in soft skills provided by your organization (e.g., emotional intelligence, inclusive communication)?



The data indicated mixed experiences with training in soft skills such as communication, boundary-setting, trauma-informed practice, and emotional regulation.

Some practitioners reported access to relevant training through their organization, while others indicated limited or no opportunities for this type of professional development. When training was available, it was often described as helpful but limited in scope or frequency. Practitioners emphasized that soft skills training is especially important given the emotional demands of Get SET work, yet it is not always prioritized.

“We would like to have more training and resources about soft skills.”

“Although I have not received Soft Skills training from my organization, I have taken a soft skills course myself and actually teach Soft Skills.”

“It would help to have a speaker twice a year to focus on a soft skills topic such as stress management, effective communication, and emotional intelligence.”

Additional reflections on mental health in Get SET programs

In their closing reflections, respondents emphasized that mental health should be treated as a shared responsibility within Get SET agencies. While individual coping strategies were seen as important, practitioners stressed that long-term well-being depends on supportive organizational practices, adequate resources, and enabling policy environments.

The same needs for mental health support were mentioned repeatedly, reinforcing the broader survey findings that practitioner mental health is closely connected to program quality, learner outcomes, and staff retention.

“I think if we had access to funding to access regular mental health supports (like insurance) it would be helpful as many people have to pay out of pocket for these expenses.”

“Additional ministry funding to hire more staff and provide relief from crushing work loads would certainly help to reduce stress.”

“A significant increase to LBS operating budget to increase staffing numbers to reduce the employee burnout. Our program largely serves individuals with mental health and neuro-diverse challenges who are in need of one-to-one employee/ learner support.”

“Offering a mental health day that wouldn’t count as a sick day.”

“A ‘time-out’ room to rest and take breaks.”

“Free non-violence crisis intervention training to all employees and regular re-certification, and also training in listening skills and how to respond to others when they mention stress or anxiety.”

“Flex time to mental health days, meditation, and yoga breaks for all staff, health walks, not just a coffee break.”

“We need benefits to access private counselling and therapy.”

“We need more offerings for all. As LBS workers, we are seeing an increase in mental health, crime, and addictions. What we are asked to take on is sometimes above what we are trained to do and offer.”

“Having resources containing strategies on how to unload social issues from learners in a healthy way. Too often, educators hold on to the burdens of learners so finding healthy ways to manage that would help tremendously.”

“More funding to hire more staff is most needed and a common issue at most agencies. Most stress comes from the high workload of having to multi-task. The practitioner may have to complete intake, assessment, develop the learner plan, develop the lessons, train, complete ongoing assessment, manage databases and information, provide case management, complete exit and follow-up, complete personal training, have knowledge of a large resource base to support all goal paths, attend meetings and public events; and do this for many learners all at the same time, who are on different goal paths with individualized training and goals.”

KEY FINDINGS

The survey findings highlight the close connection between mental health and adult learning in Get SET programs. Many learners experience anxiety, depression, high levels of stress related to life circumstances, and difficulties with focus and concentration. These challenges often affect attendance, participation, and persistence in learning. Mental health is not separate from education; it directly shapes how and when learners are able to engage in programs.

Get SET programs are consistently described as stabilizing and supportive environments. Flexible programming, individualized accommodations, trusting relationships, and non-judgmental communication were identified as key factors that help learners stay connected to learning during difficult periods. Practitioners widely observed improvements in learners' confidence, self-esteem, resilience, and sense of belonging, even when mental health challenges continued.

The findings also highlight the significant demands placed on practitioners. Heavy workloads, administrative pressures, limited staffing, and inconsistent access to formal mental health supports contribute to ongoing stress and burnout.

While many practitioners rely on personal coping strategies and informal support from colleagues or supervisors, access to consistent and structured mental health supports remains uneven. As a result, practitioners often absorb gaps in the broader system while continuing to provide high levels of emotional and relational support to learners.

CONCLUSION

This survey provides strong evidence of the essential role Get SET programs play at the intersection of education, mental health, and community support. The findings show that learners with complex mental health needs can succeed when programs are flexible, responsive, and grounded in trust and relationship-building. At the same time, the survey makes clear that these successes are often sustained through the dedication and resilience of practitioners working within constrained systems.

To strengthen both learner outcomes and practitioner well-being, mental health supports must be treated as foundational to effective adult learning, not optional or additional. This includes improving access to timely and appropriate mental health services for learners, expanding formal supports and benefits for practitioners, and aligning program expectations with the realities of mental health-related barriers.

By documenting both challenges and successes, this report offers a clearer understanding of how mental health shapes participation in Get SET programs and where targeted investments, policy alignment, and organizational practices can make a meaningful difference.

The findings affirm that supporting mental health within adult education is not only a matter of care, but a core issue of equity, access, and long-term success in learning and employment pathways.

Explore the resources below to support the mental health and well-being of learners and Get SET practitioners.

Resources

ABC Life Literacy Canada – The Relationship Between Adult Learning and Mental Health:

An accessible article showing how adult learning and literacy programs support mental health: <https://abclifeliteracy.ca/news/the-relationship-between-adult-learning-and-mental-health/>

AccessMHA – Mental Health, Substance Use & Addictions Navigation Services: A free, coordinated access service for people aged 16 + in eastern Ontario that simplifies mental health support by pairing clients with trained specialists who listen, assess needs, and connect them to appropriate counselling, psychiatric care, peer support, and other services through a single referral process: <https://www.accessmha.ca/>

Affordable Therapy Network: A free online directory of independent therapists across Canada who offer low-cost and sliding-scale counselling options (with fees set by individual practitioners) to help people access more affordable mental health support: <https://affordabletherapynetwork.com/>

Agriculture Wellness Ontario: A sector-specific wellness hub offering mental health and wellbeing supports tailored to Ontario's agricultural community, including coaching, peer support, and practical resources to help farmers, workers, and their families manage stress, build resilience, and access care: <https://agriculturewellnessontario.ca/>

BounceBack Ontario – Adults Program: A free, evidence-based mental health skill-building program that helps adults in Ontario learn practical tools through workbooks, online videos, and optional telephone coaching to manage low mood, mild to moderate anxiety, depression, stress, and worry as part of their mental wellness journey: <https://bouncebackontario.ca/>

CAMH Mental Health Toolkit: A free, plain-language online resource hub from the Centre for Addiction and Mental Health that offers evidence-informed information, tools, and guidance on understanding mental health, navigating care, supporting others, and building wellbeing for individuals, families, and care providers: <https://toolkit.camh.ca/>

CMHA Ontario – Provincial Mental Health Supports: A free directory of Ontario-wide mental health resources and crisis lines offered or connected through the Canadian Mental Health Association that helps people quickly find supports such as crisis counselling, youth helplines, peer support services, and community programs to improve mental wellbeing and access care without referral: <https://ontario.cmha.ca/provincial-mental-health-supports/>

Canadian Red Cross – Psychological First Aid Training: Fee-based training courses that teach practical skills to recognize emotional distress, provide compassionate support, and help connect individuals to further resources: <https://www.redcross.ca/training-and-certification/course-descriptions/psychological-first-aid>

CCOHS – Mental Health and Wellness at Work: A free, practical resource section from the Canadian Centre for Occupational Health and Safety that provides plain-language information and tools to help employers and workers understand mental health, identify workplace stressors, and promote overall well-being on the job. Includes podcasts, courses, factsheets, and posters: <https://www.ccohs.ca/topics/wellness/mentalhealth>

CharityVillage – Mental Health Guide: A plain-language guide for nonprofit and charity staff that explains why workplace mental health matters and provides practical tips: <https://charityvillage.com/charityvillage-mental-health-guide/>

CharityVillage – Fostering Personal and Collective Wellbeing: A Workbook and Guide for Social Service Providers: A practical workbook that supports social service workers in reflecting on stress, preventing burnout, and strengthening both personal and collective mental wellbeing in their organizations: <https://resources.charityvillage.com/fostering-personal-and-collective-wellbeing-a-workbook-and-guide-for-social-service-providers/>

CharityVillage – I Can't Sustain This Pace Any Longer — Now What? Nonprofit Leadership Burnout: When Women Leaders Hit the Wall: An article that examines the mental health impacts of burnout on nonprofit leaders, particularly women, and discusses how recognizing limits and systemic pressures can support recovery and sustainability: <https://resources.charityvillage.com/i-cant-sustain-this-pace-any-longer-now-what-nonprofit-leadership-burnout-when-women-leaders-hit-the-wall/>

CharityVillage – Modelling Wellness: Leading by Example with the FLOW Framework: A guide that connects leadership behaviour and mental health, showing how modelling healthy habits and balance can improve wellbeing for individuals and teams: <https://resources.charityvillage.com/modelling-wellness-leading-by-example-with-the-flow-framework/>

CharityVillage Podcasts: A podcast series for nonprofit and social service professionals that explores workplace mental health, burnout, leadership pressures, and practical strategies for sustaining wellbeing in the sector: https://resources.charityvillage.com/learning-centre/podcasts/?utm_source=newsletter&utm_medium=eblast&utm_campaign=CharityVillage%2BPodcast%2BEpisode%2B33&utm_id=0101

ConnexOntario: A free, confidential, 24/7 information and referral service that helps people in Ontario who are experiencing mental health concerns (or supporting someone who is) navigate the mental health, addiction and problem-gambling system by offering compassionate support and connecting them with appropriate local services by phone, text, email, or live chat: <https://connexontario.ca/our-services/>

Mindset Strategy – A Manager’s Guide to Mental Health Accommodation: A straightforward resource explaining how mental health accommodations work and how managers can respond flexibly and collaboratively to support employee wellbeing and participation at work: <https://mindsetstrategy.ca/insight-mental-health-accommodation>

Not Myself Today: A fee-based workplace mental health platform that provides tools, training, and campaigns to help employers and teams increase awareness, reduce stigma, track wellbeing, and create psychologically safer work environments: <https://notmyselftoday.ca/>

Ontario.ca – Find Mental Health Support: A plain-language provincial resource page that helps people in Ontario locate a wide range of mental health supports, including crisis help, helplines, community services, counselling programs, and region-specific resources to get timely support and referrals: <https://www.ontario.ca/page/find-mental-health-support>

Ontario.ca – Mental Health in the Workplace: A government resource page that links to tools and guidance to help employers and workers understand and improve workplace mental health, prevent work-related psychological harm, and access training and supports such as stress and stigma resources, mental health toolkits, and related occupational health and safety information: <https://www.ontario.ca/page/mental-health-workplace>

Ontario Human Rights Commission – List of Supports: A plain-language fact sheet listing a variety of free and accessible mental health and wellbeing resources across Ontario and Canada, including crisis lines, community programs, self-help supports, and directories to help people find appropriate care and assistance: <https://www3.ohrc.on.ca/en/list-supports>

Ontario Shores – Mental Health First Aid (MHFA) Training: A fee-based, two-day certified training program that builds mental health literacy and practical skills so participants can recognize signs of mental distress or crisis, respond supportively, reduce stigma, and help connect someone to appropriate supports: <https://www.ontarioshores.ca/mentalhealthfirstaid>

Opening Minds – Mental Health First Aid (MHFA) Training: A fee-based, evidence-informed training program that teaches people how to recognize signs of mental health challenges and provide initial support to someone in mental distress or crisis through practical skills and frameworks: <https://openingminds.org/training/mhfa/>

Project Read Literacy Network – A Mental Health Guide for Adult Literacy Facilitators: A literacy-specific guide that helps adult education practitioners understand common mental health challenges, recognize how mental health affects learning, and use practical, trauma-informed strategies to support adult learners in literacy programs: <https://projectread.ca/pdf/MentalHealthGuide2017.pdf>

St. John Ambulance – Stress, Mental Health and Resilience Course: A fee-based, self-paced online course that helps people understand how stress affects mental health, learn skills to build resilience, reframe stress responses, and reduce stigma while strengthening overall wellbeing: <https://sja.ca/en/training/mental-health/stress-mental-health-and-resilience>

Workplace Strategies for Mental Health – Approaches for People Leaders: A free online collection of evidence-informed tools and guides that helps managers and people leaders understand how to support psychological health and safety at work, including strategies for recognizing stress and burnout, communicating about mental health, building team resilience, and leading in ways that protect employee wellbeing: <https://www.workplacestrategiesformentalhealth.com/topic/Approaches-for-people-leaders>

This report was researched and written by Community Literacy of Ontario (CLO). CLO is a provincial support organization that serves English-language, community-based Get SET agencies (formerly LBS - Literacy and Basic Skills) in communities large and small across the province of Ontario.

To learn more about our organization, [visit our website here](#).

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