



# Soundcheck:

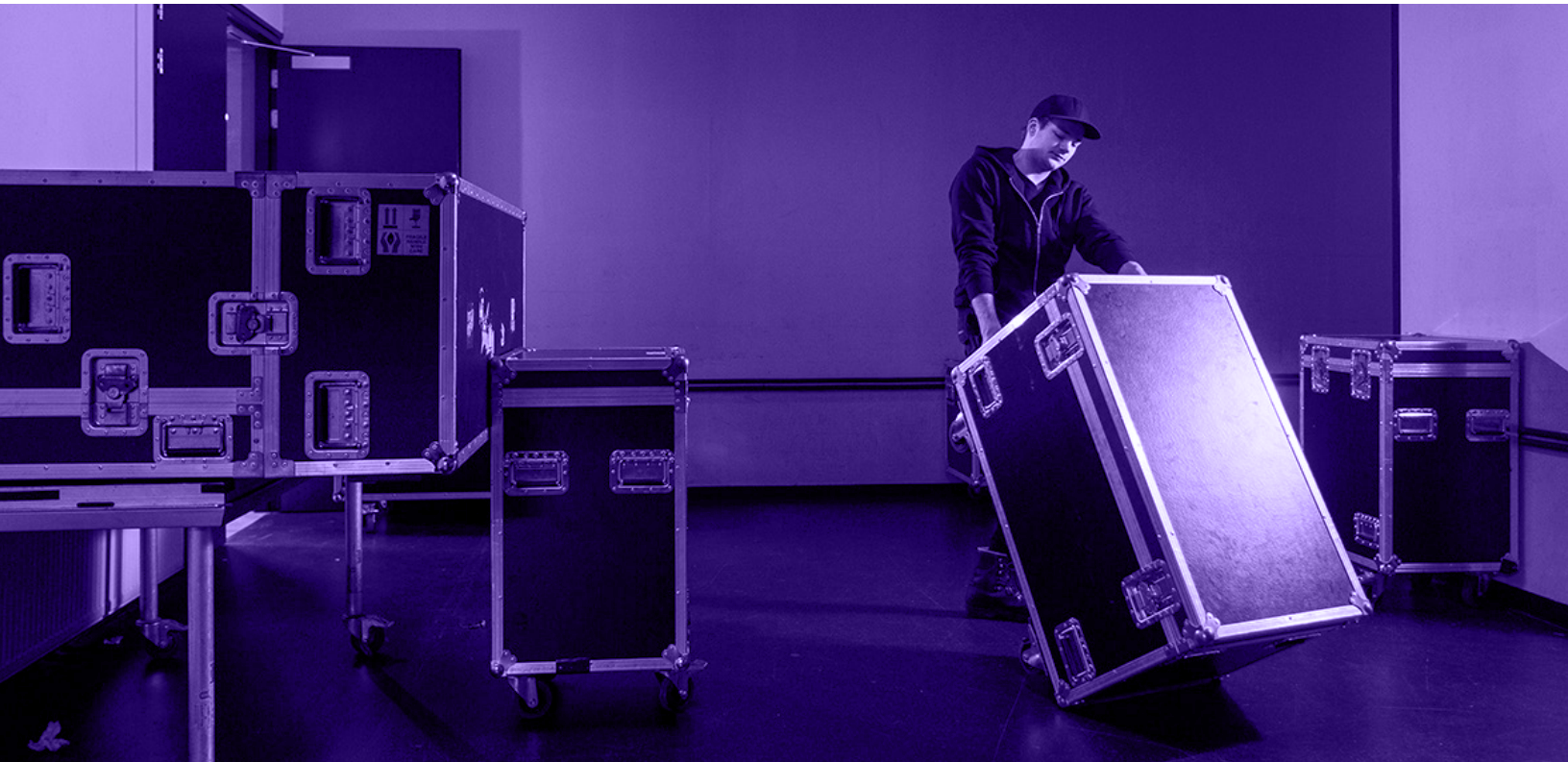
## Mental Health in the Canadian Music Industry – National Report

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Revelios



## Soundcheck:

Mental Health in the Canadian Music Industry – National Report



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# Executive Summary

Despite its cultural and economic importance, the Canadian music industry has lacked national, Canada-specific mental health data, leaving a critical evidence gap as workers face rising pressure from precarious work, industry demands, and broader societal instability. The *Soundcheck Study* addresses this gap through a large-scale, mixed-methods national effort, culminating in a final report that integrates survey data from 1,216 participants with focus groups, interviews, and longitudinal field observations to inform actionable, sector-wide change. More than 1,250 music workers participated.

## Methodology Overview

This mixed-methods approach used a bilingual national survey (n=1,216) with a margin of error of  $\pm 3.46\%$  at 95% confidence, followed by qualitative focus groups and interviews (n=35) to provide contextual depth. The survey consisted of multiple-choice questions and open text comment sections. Focus groups and individual interviews were virtual video format, using a designed interview guide. Each session was recorded, transcribed, and analyzed. The research captures diverse perspectives across demographics, roles, and regions within the Canadian music industry.



## Key Findings

Mental health challenges are pervasive across the industry (50-86%), with significantly elevated rates compared to the general Canadian workforce (~12%)

- Financial precarity (84%), irregular work schedules, and performance pressures emerge as primary stressors
- Systemic barriers including stigma (72%), limited resources, and inadequate workplace support (84%) prevent many from accessing needed care and maintaining good mental health
- Demographic factors including gender, age, and race intersect with industry-specific challenges to create compounded vulnerabilities
- The COVID-19 pandemic and ongoing economic volatility have intensified pre-existing mental health challenges

## Significance

This research establishes an empirical foundation for understanding and addressing mental health in Canada's music industry. By documenting the scope and nature of mental health challenges, identifying contributing factors, and centring worker experiences, the *Soundcheck* study provides evidence to guide policy development, resource allocation, and cultural transformation within the sector.

## Primary Recommendations

- Establish a national mental health support framework with accessible, industry-specific resources by coordinating resource lists from federal, provincial and industrial (for-and-non-profit) assets
- Co-create and implement workplace health and safety standards with government, employers, industry associations, educational institutions and community members
- Address financial precarity through policy interventions and sustainable business model development
- Reduce stigma through education, leadership engagement, and cultural change initiatives
- Invest in ongoing research to monitor trends and evaluate intervention effectiveness

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# Introduction

## Background

The Canadian music industry is a dynamic cultural force that shapes our collective identity. Yet many music workers face significant mental health challenges driven by performance pressures, industry demands, and precarious working conditions. The *Soundcheck Study on Mental Health in the Canadian Music Industry* was designed to gather national data at scale, generating insights to drive positive change and promote well-being across the sector.

While the Canadian music industry holds immense cultural and economic significance, topical research has been sparse. Most mental health studies have been conducted in the US (MusiCares, 2021, 2023), UK (Help Musicians, 2014+), Australia (Support Act, 2022), and France (CURA, 2019, 2022), leaving a critical gap in Canadian-focused data. This initiative addresses that void. Beyond legacy industry challenges and shifting market dynamics, the ongoing “polycrisis” (Morin, 1993; Tooze, 2023)—including lingering COVID-19 effects alongside political, economic, and environmental upheaval—has intensified stress in an already vulnerable sector.

Preliminary *Soundcheck* reports were published as milestones were reached: a *Preliminary Survey Report* in May 2025 and a *Non-Artists Pulse Report* in summer 2025. The national survey closed September 30, 2025, with 1,216 validated participants. Focus groups and interviews with survey respondents were conducted in October 2025 (n=35), supplemented by field observations from 2018-2025. This final report presents findings, insights, and recommendations based on all quantitative and qualitative data collected.

## Literature Review

Prior Canadian research on music industry mental health has been limited. Studies like ECMA (2018), *Crowded Out* (2020), *Closing the Gap* (2022), and *Enablers and Barriers* (2023) touched on the issue peripherally, with only ECMA addressing it directly. Internationally, research has evolved from early work on healthcare access for blues musicians to recent studies examining work stress, systemic vulnerabilities, and racial inequality (Shenton, 2023).

A 2019 UK study found significantly higher mental health concerns among technical backstage workers compared to the general population, citing stigma, limited resources, and poor access to support as key barriers. These findings were echoed by Truman’s 2021 pandemic research on backstage crews. Global studies consistently show musicians and touring professionals experience elevated rates of anxiety, depression, burnout, and suicidality. Denmark’s *When Music Speaks* (2023) found significantly lower well-being among musicians compared to the general population, with alarmingly high anxiety and emotional strain. As journalist Nicole Frehsée reported in *Rolling Stone* (2020), the global music industry faces a full-scale mental health crisis.

*Soundcheck* contributes to this literature by examining the Canadian music industry as a workplace, considering diverse roles and factors affecting mental health, including demographics, leadership, and workplace health and safety.

## Research Methodology

### Phase 1: Survey Design and Data Collection

The *Soundcheck* study used a multiple-choice survey to test anecdotal statements about mental health and related factors in the Canadian music industry. This approach maximized participation while keeping the survey brief enough to ensure strong completion rates. Data were collected anonymously via surveys distributed electronically (newsletter, email) and through social media. The experience management platform, Qualtrics, was used to collect, analyze, and organize the data. Python and Excel were also used during analysis.

The bilingual survey (English and French) used Likert-scale questions, binary Yes/No items, checkboxes, and optional open-text fields. It was divided into two parts: Part 1 covered demographics, mental health, work environment, biopsychosocial factors, and financial stress; Part 2 focused on leadership and workplace dynamics. Respondents could exit after Part 1 or continue, a design intended to balance data breadth with dropout prevention.

Survey links were distributed anonymously via newsletters, email, and social media. No personal identifiers were collected unless voluntarily provided (e.g., email addresses for follow-up participation). Analysis employed causal-comparative and correlation methods using Python and Excel. With 1,216 respondents and stratified sampling across demographic and job role groups, the margin of error at 95% confidence is approximately  $\pm 3.46\%$ .

**Limitations:** Self-reported data introduces social desirability bias, recall errors, and subjective interpretation, affecting reliability and generalizability. Statistical methods were applied to strengthen validity, though further investigation is recommended.

### Phase 2: Qualitative Follow-Up

Through October 2025, 25 survey respondents participated in virtual focus groups, and ten participated in one-on-one interviews. Additional ad hoc interviews (n=10) were conducted at industry events. Recordings and facilitator notes were analyzed using iterative thematic coding: transcripts were reviewed in full, coded for recurring concepts, then refined into higher-order themes through repeated comparison. This approach allowed patterns and insights to emerge directly from participant narratives.

This report will include significant findings, insights, observations, quotes, and recommendations based on the research in its entirety.

# Phase 1 Survey

## (September 2024 – September 2025)

### Demographics

Demographics refer to statistical characteristics of a population, including age, gender, ethnicity, education, and income. This information helps identify potential biopsychosocial factors affecting mental health. The survey was designed for maximum inclusivity, incorporating input from subject matter experts, organizations, research, and community feedback. Answer options for gender, sexual orientation, race, genre, and role were developed to be robust, inclusive, and concise.

The data below present the demographic characteristics of survey participants. Note that not all participants answered every question.

#### Were you born in Canada?

Yes	88%
No	12%

#### Primary language

English	95%
French	4%
Other	1%

#### Primarily, I am based in:

Alberta	18%
British Columbia	14%
Manitoba	3%
New Brunswick	1%
Newfoundland and Labrador	2%
Nova Scotia	8%
Northwest Territories	0%
Ontario	46%
Prince Edward Island	1%
Quebec	5%
Saskatchewan	2%
Yukon	0%

#### Age

Under 18	0%
18-25	5%
26-35	26%
36-45	24%
46-55	19%
56-65	15%
66+	11%

#### Race

Black	4%
East asian	2%
Indigenous	3%
Latino	2%
Middle east	1%
South Asian	2%
Southeast Asian	1%
White	82%
Prefer to self-describe	7%

#### Gender

Cis woman	43%
Cis man	37%
Trans woman	1%
Trans man	0%
Non-binary/Gender queer	4%
Two spirit	0%
Prefer to self-describe	8%
Prefer not to say	6%

#### Sexual orientation

Heterosexual	68%
Lesbian	3%
Gay	2%
Bi	9%
Queer	6%
Pan	3%
Asexual	1%
Prefer to self-describe	3%
Prefer not to say	6%

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### Primary role

Artist/performer	55%
Technical	4%
Independent/freelance	9%
Teacher	4%
Salaried non-profit	8%
Salaried for-profit	8%
Venue mgmt	1%
Media	2%
Festival	2%
Other	7%

### What best describes your work?

Full-time paid	41%
Part-time paid	14%
Freelance	31%
Full-time unpaid	4%
Part-time unpaid	5%
Freelance unpaid	5%

### Tenure

0-5 years	15%
6-10 years	18%
11-20 years	24%
21-29 years	16%
30+ years	27%

### Schooling

None	0%
Some high school	2%
Completed high school	5%
Some technical, community college, CEGEP, diploma	6%
Completed technical, community college, CEGEP, diploma	21%
Some university (unfinished)	14%
BA	34%
MA	13%
Doctorate	5%

### Income

<\$9,999	6%
\$10,000-24,999	19%
\$25,000-49,999	29%
\$50,000-74,999	21%
\$75,000-99,999	10%
\$100,000-149,999	5%
\$150,000+	4%
Prefer not to answer	5%

### % Annual income

<10%	21%
11-25%	10%
26-50%	7%
51-75%	9%
76-100%	53%

### Total household

<\$19,999	6%
\$20,000-49,999	25%
\$50,000-89,999	24%
\$90,000-129,999	15%
\$130,000-149,999	5%
\$150,000+	13%
Prefer not to answer	10%

### Primary caregiver

Young kids	13%
Mature kids	7%
Aging family	9%
Adults with disabilities	3%
No	72%

Compared to other studies within and outside Canada, this is among the few—if not the only—study to invite all music industry members, regardless of role, to participate. This approach provides a holistic perspective of the industry ecosystem. We also collected demographic data on sociocultural determinants of health, that is, the non-medical factors and conditions—such as economic stability, education, social relationships, and access to resources—that shape how people experience, maintain, and recover their mental well-being.

## Demographic Summary

- 50% of respondents were between 26-45 years old
- 27% reported more than 30 years of industry tenure; the remainder were evenly distributed across 6-25 years
- 54% reported annual income below \$50,000; 21% between \$50,000-\$75,000; 19% above \$75,000
- 48% reported some level of university education
- 72% reported no primary caregiving responsibilities
- Only 4% cited French as their primary language, signaling a need for more inclusive outreach; 1% cited other languages
- 82% of respondents identified racially as white, indicating notable underrepresentation of minority groups. This gap may reflect limited trust in survey sponsors, survey fatigue, or insufficient outreach to specific communities
- Ontario has the largest participation (46%), followed by Alberta (18%) and British Columbia (14%), Maritime provinces (12%), Quebec (5%), while the three territories combined account for less than 1% of the total
- 8% selected “Prefer to self-describe” for gender identity. Several wrote descriptions corresponding to predefined options (e.g., “man,” “woman,” “normal man,” “female”), suggesting unfamiliarity with terminology (such as “cis”), preference for alternative phrasing, or intentional rejection of provided categories
- Sexual orientation was reported as primarily heteronormative (68%). 24% identified as lesbian, gay, bi, queer, pan or asexual. 3% selected “Prefer to self-describe” for sexual orientation. Several wrote comments suggesting intentional rejection of provided categories and inclusion of this question in the survey
- Roles included artists/performers (55%), technical crew (4%), salaried employees (16%), independent entrepreneurs (9%), teachers (4%), and other self-described roles (12%)
- 1,029 respondents identified a primary music genre, with strongest representation from pop, rock, folk, indie, alternative, country, classical, R&B, and jazz

**Note on Representation:** Until we achieve greater participation from marginalized communities, we cannot claim a fully accurate cross-sectional view of mental health in the Canadian music industry. This researcher includes small-sample data from insights and discussion, as opposed to excluding for statistical significance calculations. We observed increased participation when targeted communications (focus groups, media outreach) were deployed throughout the study, establishing enhanced trust, context, and relationship with underrepresented groups. Having more representation from all provinces and communities will improve our understanding of the mental health experience of all Canadian music workers.

## Mental Health Outcomes

Mental health and well-being encompass emotional, psychological, and social balance, enabling individuals to cope with stress, build meaningful relationships, and contribute effectively to their communities.

### Key Findings

#### Prevalence:

- 94% agreed that mental health issues are prevalent in the Canadian music industry
- 86% personally experienced challenges
- 95% witnessing challenges in others

#### Education and Tools:

- 73% believed they had tools to support their mental health
- 85% wanted to learn more about managing their own well-being
- 93% wanted to learn more about supporting peers

#### Suicidal Ideation: Three questions assessed lifetime suicidal thoughts:

1. Have you ever felt that life wasn't worth living? (53% yes)
2. Have you ever wished you were dead? (42% yes)
3. Have you ever thought about taking your own life? (43% yes)

#### Important considerations:

- Questions about suicide planning, attempts, or thoughts in the past year were not included and are subject to follow-up research
- Lifetime thoughts of suicide in the general Canadian population: 12%
- Comparative Canadian music industry data:
  - MusiCares (2024): 8% reported suicidal thoughts in the past year
  - ECMA (2018, n=50): 20% reported suicidal thoughts in the past month versus the Canadian average of 3.3% in the past year (Statistics Canada, 2012); 26% reported lifetime suicide attempts, sharply contrasting with Atlantic Canada's rates (PEI: 5.8 per 100,000; New Brunswick: 13.9 per 100,000; Statistics Canada & Health Canada, 2016)
- International context (Musgrave, March 2025): In England (2011-2015), musicians, actors, and entertainers were among the highest-risk occupational groups, with suicide rates 20% higher than average for males and 69% higher for females in culture, media, and sport occupations. US data similarly shows that Arts, Design, Entertainment, Sports, and Media had the highest female suicide rate across occupations, with male musicians holding the third-highest rate among major occupation groups.

## Mental Health Symptoms and Diagnoses

Half of respondents reported a diagnosed mental health condition:

- Diagnosed, not treated: 7%
- Diagnosed, unsuccessfully treated: 12%
- Diagnosed, effectively treated: 31%
- No diagnosis: 50%

Despite 50% reporting no formal diagnosis, most respondents experienced mental health symptoms.

### Top Mental Health Symptoms (with or without formal diagnosis)

- Anxiety: 86%
- Fatigue: 75%
- Sleep disturbances: 73%
- Persistent sadness: 70%
- Worthlessness or guilt: 67%

These findings signal widespread subclinical mental distress or undiagnosed anxiety and depression.

### Comparative Data

Canadian music workers experience mental health challenges at rates meeting or exceeding those documented internationally. While the landmark UK study by Gross and Musgrave (2016, 2020) found 71% of professional musicians reported anxiety and 68% reported depression, *Soundcheck* data shows equal or higher prevalence: 86% reported anxiety, 70% persistent sadness, and 67% feelings of worthlessness or guilt.

Beyond mood and anxiety symptoms, Canadian music workers reported high rates of physical stress manifestations: 75% experienced fatigue and 73% sleep disturbances. These rates substantially exceed the 18.3% of the general Canadian population who met criteria for mood, anxiety, or substance use disorder in the previous year (Stephenson, 2023)—representing approximately 3.7 to 4.7 times higher prevalence. The convergence of findings across multiple countries—including the UK, Norway, and Canada—provides compelling evidence that mental health challenges are endemic to the music industry internationally, rather than reflecting solely regional or cultural variations.

**Stigma remains a significant barrier to well-being.** 72% said stigma remains associated with seeking mental health support. Stigma is a known barrier to prevention and treatment of mental health challenges.

*“Music is mental wellness in and of itself. Therefore, there is no need to direct resources towards mental health support for artists, composers, creators, and performers that work on film/tv productions as principal talent and gig-based work as a sole proprietor.”*

– Respondent

## Substance Use

Mental health and substance use health are inseparable, a principle central to understanding the music industry's workplace challenges. The industry's work environment normalizes substance use through both cultural mythology and structural conditions. The romanticized narrative of "sex, drugs, and rock and roll" frames substance use as integral to creative authenticity, while work routinely takes place in bars, nightclubs, parties, and other non-regulated environments where alcohol and other substances are pervasive, often serving as compensation, expected stress relief, and normalized ways of working. Additionally, alcohol sponsorship is a foundational financial pillar of the music industry, manifesting through billion-dollar festival and conference activations, pervasive lyrical brand placements, and high-profile artist endorsements (Hassan, 2024). These overlapping conditions create a workplace where mental health struggles and substance use patterns become deeply intertwined and mutually reinforcing.

Notably, this research examined substance use within work settings, focusing on how work-related stress, the industry's traditionally alcohol-centric environments, and cultural norms may contribute to substance use patterns

**Stigma:** 86% percent agreed there is stigma associated with having a substance use challenge (addiction, dependency, etc.), while 58% agreed there is stigma associated with not consuming substances—whether through abstinence, sobriety, recovery, or a substance-free lifestyle. This dual stigma makes it harder to discuss substance use, seek help, and foster healthier workplace relationships with substances (Government of Canada, 2020).

*"I don't drink alcohol for health reasons but have been pressured on gigs to drink by musicians I admire and feel pressure to do so to be 'cool' or fun to hang with, hoping I'll get to gig with them again. I've been mocked for not drinking." – Respondent*

## Reasons for substance use in the context of work

- Socializing/networking: 42%
- Coping with stress: 40%
- Enhancing creativity: 18%
- Other: 13%
- Peer pressure: 7%
- N/A—don't use substances in the context of work: 35%

These findings suggest social, emotional, and personal factors collectively drive substance use.

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### Age-Related Substance Use Patterns in the Context of Work

Substance use for stress management and networking peaked among workers aged 26–35, indicating heightened vulnerability during this career phase. While substance use disorders typically peak in the early-to-mid-twenties in the general population (Stephenson, 2023), music workers maintain elevated rates into their mid-thirties. This aligns partially with Markert’s (2001) finding that younger musicians show evolving attitudes toward substance use.

Non-use rates climbed steadily with age, from 21.8% among 18–25-year-olds to nearly 60% among those 56–65. This may reflect maturation or recovery but could also represent survivor bias if workers with severe substance issues leave the industry earlier or abstain in recovery. Significantly, young music workers’ low non-use rates contrast with general Gen Z trends of declining alcohol use and increasing cannabis consumption (National Institute on Drug Abuse, 2023), suggesting industry pressures override broader generational patterns.



## Contributing Biopsychosocial Factors to Mental Health

Mental health emerges from the dynamic interplay of biological factors (genetics, neurochemistry), physical factors (health, environment), and social factors (relationships, culture, socioeconomic conditions). These factors do not exist in isolation (Engel, 1977; Bolton, 2023), and changes in one area affect the others.

### Biological Needs/Physical Factors Impacting Mental Health

- Only 10% strongly agreed they get enough sleep to perform at their best
- 62% agreed they get enough exercise, social interaction, and good nutrition to perform at their best
- Overall, respondents were evenly split on meeting basic biological needs (rest, physical activity, nutrition, positive social interactions)—all significant factors in maintaining mental health regardless of diagnosis

### Chronic Health Conditions

Living with chronic health conditions can significantly impact mental health, as individuals may experience increased stress, anxiety, depression, and social isolation due to pain management challenges, limitations in daily functioning, and the ongoing emotional burden of managing their conditions. Many respondents (n=520) identified chronic health conditions affecting daily activities.

- 42% reported neurodiversity (autism, ADHD, dyslexia)
- 22% reported arthritis
- 23% reported “Other” conditions
- 19% reported mobility challenges (difficulty walking, standing, climbing stairs)
- 17% reported auto-immune conditions
- 14% reported asthma and COPD
- 13% reported hearing impairments
- 12% reported cognitive or intellectual impairments
- 11% reported visual impairments
- 9% reported diabetes
- 3% reported speech or communication difficulties

Less than 1% reported sickle cell anemia, the least commonly reported condition, likely due to low survey response rate from the Black community (CDC, 2024)

#### **Important considerations:**

- These are self-reported, not clinically validated
- Autoimmune conditions were notably lower among cisgender men, aligning with broader research (Goulmamine et al., 2024)
- Neurodiversity likely includes both clinical diagnoses and self-identification (Foster & Ellis, 2024; Lewis, 2016)
- ADHD commonly co-occurs with anxiety and depression (Katzman et al., 2017)
- Self-reported ADHD approached 35%, compared to approximately 2.9% clinically diagnosed prevalence in the general Canadian adult population (Espinete et al., 2022)
- Self-report scales can result in 40-70% higher ADHD diagnosis rates compared to comprehensive diagnostic evaluations (Harrison & Edwards, 2023)
- International literature suggests higher prevalence in creative industries (AFEM, 2023); further research would clarify whether individuals predisposed to these conditions gravitate toward the music industry

## **Social Factors: Discrimination, Harassment, and Economic Stability**

### **Discrimination and Harassment**

Social factors are primary contributors to mental health outcomes. While responses regarding sexism, racism, ageism, bullying, and harassment were generally distributed evenly across the disagree/agree spectrum, notable differences emerged across demographic groups. *Soundcheck* uniquely examines the intersection of multiple forms of discrimination (ageism, sexism, racism, harassment, bullying) with mental health across detailed demographic breakdowns. Most other research focuses on single types of discrimination or doesn't capture compounding effects as comprehensively. The music industry appears particularly vulnerable due to job insecurity, lack of HR infrastructure, performance pressure, and social media toxicity—factors that may intensify discrimination's mental health impact compared to more regulated sectors.

*“Sexism, racism and ageism are still a subversive force in music. There is also an insider nepotism that feeds off it” – Respondent*

**Note on sample sizes:** Response numbers from non-white and non-cisgender/heteronormative individuals were too small for standard statistical analysis. However, research suggests these smaller datasets often represent the experiences of marginalized groups (Welles, 2014). Including these outliers is crucial for driving meaningful change.

### Sexism

- Women and non-binary individuals largely agreed (76% strongly or somewhat) that sexism directly impacts their mental health
- Men largely disagreed (73% strongly or somewhat)
- Cisgender women showed the strongest agreement across the entire dataset, suggesting sexism is a major mental health concern for this group
- Cisgender men showed more split responses, possibly reflecting different experiences of sexism or less recognition of its mental health impact
- Trans women, trans men, non-binary individuals, and other gender identities had lower response numbers but generally agreed where they responded

The results reveal a significant gender gap: cisgender women were far more likely to respond and to strongly agree with the survey statements than any other group, pointing to gender-based inequities in the industry.

### Racism

- White respondents overwhelmingly strongly disagreed that racism affects their mental health (expected, as they are less likely to experience racism)
- Racialized respondents (Black, Indigenous, East Asian, South Asian, Southeast Asian, Latino/a/Latinx, Middle Eastern) tended to agree or strongly agree, though response numbers were much smaller
- Lower response rates from racialized groups may reflect both survey demographics and industry composition

The findings show a stark difference in perspective: people who have personally experienced racism understand how it affects mental health, but those who haven't experienced it fail to see this connection.

### Ageism

- 72% somewhat or strongly agreed that ageism impacts mental health
- Cisgender men appeared more likely to “somewhat agree” rather than “strongly agree”
- Cisgender women showed a more even split between agreement levels

Few respondents across all demographic groups disagreed with the statement, suggesting broad consensus that ageism negatively impacts mental health. Despite this consensus, the perceived severity of ageism's mental health impact differed across gender identity groups.

## Harassment

- Strong agreement across all demographics (race, gender, age) that harassment affects mental health
- *By race:* White respondents showed highest response volume with mixed perspectives; racialized groups had lower numbers but generally agreed
- *By gender:* Cisgender women and men both showed substantial agreement, with women slightly more likely to agree; trans and non-binary individuals had lower response rates but similar agreement patterns
- *By age:* Ages 26-35 and 36-45 showed strongest agreement; younger respondents (under 25) had lower response numbers; older groups (56+) showed more varied responses, suggesting harassment is experienced or recognized differently across career stages

Harassment emerged as a widely recognized mental health concern across all demographics, with particularly strong agreement among respondents aged 26-45. While consensus was evident across racial and gender groups, response patterns suggest that career stage may influence how harassment's mental health impact is experienced or understood. Open text commentary revealed perceived harassment as widespread in the industry.

*"...while I was employed by a Canadian music organization and had a stable salary, I had to quit my job because of harassment. I've been freelance since quitting because I had a burnout that really hurt my physical and mental health, I have not been able to go back to a regular type of job. There was absolutely not support for my mental health and I cannot speak up because it will hurt my career." – Respondent*

## Bullying

- *By gender:* Cisgender women and men showed strong agreement; trans, non-binary, and other gender identities had lower response numbers but generally agreed
- *By age:* Ages 36-45 showed strongest agreement, followed by 26-35 and 46-55; ages 26-35 showed the highest "strongly disagree" response, suggesting more polarized experiences; those 66+ showed the weakest connection between bullying and mental health
- Mid-career professionals (ages 26-55) appear most likely to report bullying impacts their mental health, possibly reflecting competitive industry dynamics during peak career years

While bullying's mental health impact achieved broad recognition across gender groups, career stage emerged as a critical factor in how this issue is perceived. Mid-career professionals (ages 26-55) demonstrated the strongest agreement that bullying affects mental health, possibly reflecting competitive industry pressures during peak career years. Notably, younger professionals (ages 26-35) showed more polarized views, and those aged 66+ were least likely to recognize this connection, suggesting that workplace dynamics and generational attitudes shape perceptions of bullying's psychological consequences.

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The findings reveal that while harassment and bullying are universally recognized as mental health factors across all demographics, significant awareness gaps persist around other forms of discrimination—particularly racism and gender bias. Personal experience fundamentally shapes perception: those who face discrimination directly understand its psychological toll, while those who do not often remain unaware. Cisgender women and mid-career professionals (ages 26-55) demonstrated the highest recognition of discrimination-related mental health impacts, likely reflecting both greater exposure to workplace mistreatment and accumulated career experience. Notably, younger professionals showed more polarized perspectives on bullying, and older respondents were least likely to recognize these connections, suggesting generational and career-stage differences in how workplace dynamics are experienced. Despite broad consensus that ageism affects mental health, perceptions of its severity varied by gender identity. These patterns highlight a critical empathy gap that prevents those in positions of relative privilege from recognizing discrimination's far-reaching mental health consequences, underscoring the need for industry-wide education and systemic reforms that center the experiences of those most affected.

Studies document that sexism, misogyny, racism, bullying, and discrimination are experienced across music industries internationally (Newman et al., 2022), with similar patterns in the UK, US, and European contexts.

## Cross-Sector Comparisons

The discrimination-related mental health challenges identified in this survey are part of a larger pattern affecting workers across multiple industries. However, each sector exhibits unique characteristics in how discrimination manifests and impacts employee wellbeing, shaped by industry-specific cultures, power dynamics, and demographic compositions.

**Technology:** 41% of tech workers report age discrimination versus 27% in other industries, often starting as early as age 29 (Elinext, 2025). 63% of women in STEM workplaces experience sexual harassment, and 52% of highly qualified women quit due to hostile environments (Economic Policy Institute, n.d.).

**Finance:** 70% of financial sector employees experienced discrimination in the past year, and 80% experienced unwelcome comments based on racial background (*Culture Shift*, 2024).

**Healthcare:** Workplace discrimination in healthcare is linked to depressive symptoms, with African Americans and Latinos more likely to occupy subordinate positions and experience discrimination (Okechukwu et al., 2013). Almost half of women in academic medicine report encountering intimidation, threats, sexist remarks, and sexual approaches (Prakash et al., 2024).

## Economic Instability and Financial Stress

The financial precarity of the music industry has been documented for decades and has intensified in recent years. Musicians face what researchers call ‘precarious labour’—characterized by irregular income, lack of benefits, and minimal job security (Gross & Musgrave, 2020). This condition has worsened with the shift to streaming, which dramatically reduced artist revenues to only \$0.003 to \$0.005 per stream on major platforms (Hesmondhalgh & Meier, 2018), while the COVID-19 pandemic eliminated or drastically reduced live performance income—historically musicians’ primary revenue source—further exacerbating economic instability (Spilker et al., 2022). Other roles within the Canadian industry also report sub-optimal financial well-being. Although this section of the report is short, financial stress cannot be underestimated as a factor in the current mental health crisis.

- 83% reported financial stress directly impacting their mental health
- Only 5% strongly agreed they felt a sense of job security
- 54% reported annual income below \$50,000
- Research establishes a clear relationship between financial stress and compromised mental health (Ruy & Fan, 2023)

*“On top of cultural barriers, the financial strain is enormous. Many artists are forced to rely on grants to tour, record, or showcase their work. While grants can offer some support, they are not enough to cover all the costs. In most cases, the artist ends up paying out of pocket for essentials like travel, accommodations, and promotional materials, even to perform at showcases, which are supposed to be opportunities for growth and exposure. To add insult to injury, artists are sometimes required to pay for their own tickets to attend the very events where they are performing, which is demoralizing and frankly shameful. It puts the onus entirely on the artist to take financial risks, often with no guarantee that it will pay off, which is an impossible burden for many.” – Respondent*



## Mental Health Literacy, Core Capabilities, and Resources

Survey participants were asked several questions about access to mental health support, resources, education, literacy, and care capability, and most expressed a strong desire to learn

- 43% were satisfied with the mental health support available to them
- 80% were not aware of mental health resources specifically tailored to the music industry
- 85% cited strong desire for better tools to manage their own mental health
- 93% of respondents stated strong interest in learning how to support peers' mental health

Open text comments from 123 participants point to uneven access to mental health resources. Some reported positive experiences with therapy through SPACQ, artist health clinics, and peer support groups. However, many indicated they had not used any resources or were unaware of what was available. CAMH and the Unison Fund were mentioned, though concerns about accessibility and responsiveness were common. Limited mental health coverage through benefits plans emerged as a key frustration. Overall, the findings signal clear gaps in awareness, access, and funding for mental health supports within the arts sector.

Despite its cultural and economic importance, the Canadian music industry has lacked national, Canada-specific mental health data, leaving a critical evidence gap as workers face rising pressure from precarious work, industry demands, and broader societal instability. The *Soundcheck Study* addresses this gap through a large scale, mixed-methods national effort. The survey yielded 1,216 validated responses. These findings were then complemented by additional qualitative input through focus groups, one-to-one interviews, and longitudinal field research. The frequent appearance of “N/A” and related responses like “None” or “I don’t know” indicates that a portion of respondents may not have had formal mental health training or were unsure how to interpret the question.

While responses vary in how training is defined, they point to a broad and diverse base of experience. Cognitive Behavioural Therapy (CBT) is most cited, followed by Dialectical Behaviour Therapy (DBT), alongside formal education in psychology. Respondents also reference a range of non-clinical approaches, including meditation, yoga, somatic therapy, and mindfulness. More specialized programs—such as action-based cognitive remediation, EMDR, and stress-management training—appear as well. Many also draw on lived experience, including participation in AA or CoDA groups, or professional work in mental health settings. It’s important to note that many responses seem to focus on therapeutic approaches that have been personally beneficial, rather than formal training programs. This suggests that individuals may be drawing on a variety of resources and experiences to support their mental well-being, highlighting the importance of personalized approaches to mental health

When asked about prior or current training, many respondents cited national programs like mental health first aid. Beyond this, responses reflect a wide mix of formal and informal capabilities. Some have education in psychology or related coursework, while others bring specialized training such as expressive arts therapy, sound therapy, or suicide prevention. Many also draw on lived experience—personal mental health journeys, peer support roles, and self-directed learning—to support others. Adjacent skills like coaching, personal training, and musical training are often used to promote well-being. Overall, respondents interpret “training” broadly, encompassing formal credentials, practical experience, and ongoing self-education.

## Music Industry Working Environment

The music industry must be recognized as a cohesive, multi-faceted work ecosystem. Findings reveal systemic issues in workplace practices and culture:

- 95% believed the industry could do more to address mental health challenges
- 83% reported the general work environment does not support mental health and well-being
- Only 10% strongly agreed that leaders implement measures to support mental health and well-being
- 72% cited stigma around seeking mental health support
- 96% agreed mental health education is critical, yet 81% had no training

The modern music industry has transformed through digital streaming, social media, independent production technology, diverse revenue streams, data analytics, rapidly developing AI, and expanded global reach. Music professionals are also navigating a polycrisis: lingering COVID-19 effects and concurrent political, economic, and environmental crises, layered onto pre-existing industry stress and tenuous mental health (Shenton, 2023).

- 84% said the all-on/all-off nature of work negatively impacts mental health
- 81% found modern music industry changes stressful and overwhelming
- 85% don't believe Canadians can break into international markets easily
- Only 3% strongly agreed Canadian radio effectively represents Canadian musicians
- 65% agreed Canadian music festivals effectively include Canadian music professionals (with variation by race)

The *Crowded Out* study (Music Canada, 2020) revealed that while most professional Canadian musicians primarily perform locally or provincially, significant proportions also perform internationally: approximately 43% in the United States, 28% in Europe, and 19% in the United Kingdom. The current geopolitical climate will likely further limit international work opportunities (Mullen, 2025).

That study also indicated the critical importance of live performance, with 85% stating their ability to earn a livelihood would be severely compromised without it. This precarious situation is exacerbated by closures of small-to-medium venues and broader economic challenges affecting the entire music ecosystem, including peripheral sectors like restaurants and bars.

*“I was subjected to bullying and harassment in my workplace. I was not alone in feeling it was a toxic workplace. We complained but it was ignored. The bosses of that workplace had a lot of power in the industry and even though they behaved terribly, people did not act or complain out of fear of retribution. There is no arbiter or anywhere else to go to get the behaviour changed.” – Respondent*

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*“The industry as a whole is largely reliant on « image » therefore the need to appear unfettered by any issues of substance exists. So much is based on appearances. As a self-employed business person, the lack of regulation or enforceable contracts is problematic.”*  
– Respondent

*“The questions were straightforward until we reached the section about radio, foreign opportunities and streaming. This is where the industry has really changed. There is no money in streaming (unless you’re getting millions of plays) and radio tends to only put two or three Canadian songs into rotation, so radio royalties have been reduced. CD sales have fallen off, vinyl sales are increasing, but still limited, no one buys USB sticks, so it’s become harder to get your music out to your audience. The new generation is used to getting their content for free and this impacts artists ability to make a decent living. I can see where that all leads to mental health issues. I still receive SOCAN royalties, but the bulk of my income comes from live gigs. I’m lucky, I got into the business back when things were better, but I wonder if I would still go in if I was starting out today...?”* – Respondent

## Leadership

Some survey respondents asked why we were asking questions about leadership in a mental health study. Research in other sectors confirms leadership plays a critical role in mental health and well-being (Wu et al., 2021; Coates & Howe, 2015). Without exploring daily power dynamics (functional or symbolic) in the workplace, we cannot have an accurate account. Viewing the music industry as a workplace and applying proven theories of human-centred leadership, workplace health and safety (including psychological safety), and organizational culture is essential (Harrison, 2022). Literature review reveals this aspect of the music industry working environment has not been investigated; this study begins to fill that gap. We used the term “leader” or “person in power” as many music professionals work with functional leaders, but the power dynamics and leadership behaviour impact are the same.

## Key Findings

- 82% agreed interactions with leaders or persons in power impact well-being
- Only 26% had participated in any leadership training (across their career, any sector)
- Social factors previously cited (sexism, racism, ageism, harassment, bullying) are workplace factors proven to detract from mental health and well-being (Okechukwu et al., 2013)

*“I’ve dealt with a toxic manager within the industry that has absolutely destroyed my self worth. The ideology that young people in the industry have to ‘earn their keep’ in the sense of putting up with verbal harassment, sexual harassment, low income, etc. has been drilled into me since I began working in this industry and at times makes it feel like this industry isn’t worth the amount of stuff that you have to endure.”* – Respondent

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### What Supports Well-Being

Based on lifetime work experiences, respondents identified **five critical ways** leaders can support well-being (selected from 11 possible attributes):

1. Promoting healthy culture: 68%
2. Providing recognition and appreciation: 68%
3. Implementing flexible work policies: 68%
4. Leading by example: 63%
5. Ensuring communication and transparency: 60%

### What Harms Well-Being

Based on lifetime work experiences, respondents identified **five critical ways** leaders can harm well-being (selected from 13 possible attributes):

1. Poor communication: 66%
2. Micromanagement: 58%
3. Lack of recognition: 57%
4. Ignoring workload: 57%
5. Unclear expectations: 55%

These patterns align with cross-sector research confirming that leadership behaviours predict psychological safety both directly and through team climate, with team leaders having the strongest influence (Frazier et al., 2017). Studies across healthcare, technology, and business consistently show supportive leadership associates with lower burnout, higher work engagement, life satisfaction, self-esteem, and overall mental health. Conversely, workers – employees, contractors, freelancers – led by someone who lacks consideration for well-being, micromanages, or creates unpredictability are significantly more likely to experience burnout and physical health issues like insomnia, headaches, and digestive problems.



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### Top Five Most Valued Leadership Characteristics

(selected from 10 possible characteristics):

1. Effective communication: 91%
2. Empathy: 82%
3. Integrity: 71%
4. Accountability: 64%
5. Adaptability: 53%

### Top Five Most Harmful Leadership Characteristics

(selected from 10 possible characteristics):

1. Lack of/poor communication: 75%
2. Unethical behaviour: 75%
3. Blame-shifting: 71%
4. Lack of empathy: 60%
5. Micromanagement: 57%

These findings underscore the importance of interpersonal competencies. Research demonstrates workplace mental health policies cannot be implemented without leadership support at all organizational levels, as leaders' emphasis on mental health shapes employee perceptions of organizational commitment (Wu et al., 2021). Educating leaders to tailor management styles to employee needs is key to bridging gaps between mental health needs and available resources.

Cross-sector research reveals that employers encouraging transparent communication and developing fair, supportive managers strongly correlate with overall work health scores (Mental Health America, 2024). Organizations viewed as unempathetic experience three times higher toxicity and 1.3 times more mental health issues, affecting absenteeism and productivity (Businessolver, 2025). The consistency between music industry data and cross-sector research validates the need for evidence-based leadership development in creative industries, particularly as investing in leadership programs equips leaders to embody these behaviours and cultivate psychological safety (De Smet et al., 2021).

## Phase 2:

# Focus Groups and Key Informant Interviews

Building on Phase 1 survey findings, Phase 2 explored mental health challenges facing Canadian musicians in greater depth. Conducted in October 2025, this phase included five focus group sessions with 25 participants and ten one-on-one key informant interviews.

### Key Findings

Financial instability emerged as the primary driver of stress, depression, and suicidal ideation among respondents. Economic precarity is rooted in low pay, minimal streaming revenue, and the expectation that musicians independently manage all aspects of their careers—including booking, promotion, and merchandise sales. Although the industry is slowly moving away from a culture of self-medication toward more open mental health dialogue, persistent stigma and fear of losing work continue to deter many from seeking support. Compounding these pressures, ongoing workplace issues—such as gender-based discrimination, harassment, and poor leadership practices—further undermine mental well-being. Across roles, respondents expressed clear consensus that the industry has reached a critical tipping point, necessitating systemic change to ensure long-term career viability and sustainability. These conversations echoed the survey data:

- 84% say financial instability is a leading cause of stress, depression, and suicidal ideation.
- 72% say ongoing stigma and fear of losing work continue to prevent people from seeking mental health support, despite more open conversations in the industry.
- 60% report gender-based discrimination as a factor negatively affecting mental well-being.
- 56% report harassment as an ongoing workplace stressor.
- 54% identify poor leadership practices as contributing to mental health risk.
- 95% agree the industry has reached a critical tipping point requiring systemic change to ensure long-term career viability and sustainability.

*“I feel that as a freelance classical musician it is very difficult to feel valued and my opinions matter (or will be heard at all) when every gig is an audition and a vast majority of the established members of an orchestra aren’t always welcoming. Even as a sub or extra, it can feel like pretty toxic work environments. Where if you haven’t proved yourself for years and years or won the position you aren’t worth much. ‘You better be perfect or we won’t call you back’ is the overall vibe. It’s intimidating.” – Respondent*

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### Canadian Context

The Canadian context presents unique challenges that compound these issues. The cultural tendency toward self-deprecation can undermine musicians' confidence and sense of self-worth. Canada's vast geography makes touring prohibitively expensive and logistically complex, creating isolated markets outside major urban centers. Unlike the UK, Canada lacks coherent professional infrastructure for musicians, reinforcing the perception of music as a hobby rather than a legitimate career. The proximity to the larger US market creates additional pressure, as ongoing consolidation with American entities further threatens the viability and sustainability of Canadian musicians' work and well-being. Despite these challenges, participants noted that local arts investment has demonstrated economic value, with smaller communities showing returns that exceed investment in sports or recreation.

*"The general Canadian Population does not get very much exposure to Canadian Artists."*  
– Respondent

*"Canadian Radio barely supports Canadian artists, and even less support for emerging artists."* – Respondent

*"These types of solutions—whether it's guaranteed basic income for artists or industry-wide standards for fair pay—should absolutely be considered in Canada. We need organizations that truly advocate for musicians and their right to a livable wage. Without this, the career of a musician will remain precarious, and we'll continue to lose talented voices who can no longer afford to pursue their career. The Canadian music industry needs to evolve to reflect the realities of modern life, where artists deserve not only recognition but the financial stability to thrive."* – Respondent

### Perceptions by Identity:

Perceptions of sexism, racism, harassment, ageism, and ableism vary significantly by gender and race. Most women report ongoing systemic sexism and harassment impacting their mental health, while many men perceive the industry as vastly improved. Similarly, racialized groups continue experiencing minority-related challenges, whereas white participants often view these issues as less severe in Canada. This perception gap can lead to performative or insufficient actions, perpetuating conditions that undermine mental health, and furthering polarized viewpoints in the workplace.

*"Having leaders or managers undermine me for my race, gender or age has been damaging to mental health, self-esteem and advancement in the industry, even when they talk about being supportive of people's growth and mental health despite acting the opposite."*  
– Respondent

*"Your questions are very leading, and I fear the outcome of this survey is slanted in one direction no matter the answers given. Racism with relation to mental health is not a thing I or anyone I know has dealt with. Now, being pressured and coerced to go along with the trans movement or you lose your label, brand and are effectively 'canceled' is the real mental*

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*health issue piercing Canadian Country Music right now. It's becoming too pervasive within the country music culture where the culture itself is not about that. Yet, it's being forced on us at festivals on the CCMAs etc.” – Respondent*

## Needs and Solutions

Participants highlighted urgent needs for:

- Accessible industry tailored mental health services (online counseling, peer support groups, therapy)
- Financial literacy training to support sustainable careers
- Professional development focused on workplace health and well-being
- Greater community peer connection and organic mentoring opportunities

Long-term solutions require a cultural shift that revalues music as a legitimate and essential career, providing musicians with purpose and stability that directly addresses root causes of mental health struggles.

*“I know what resources are available, but they are not easy to access or sign up for. Long waiting lists or hours that don't work with my schedule to seek help.” – Respondent*



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## Section Summary

Insights from Phase 2 reinforce Phase 1 findings, demonstrating clear links between financial precarity, mental health challenges, and the need for both systemic and community-based support structures.



## Discussion

The Canadian music industry is distinguished by cultural diversity, creative collaboration, and robust support systems. Canada’s multicultural landscape infuses its music with rich influences—from Indigenous traditions to global sounds—creating a unique and inclusive artistic identity. Government-backed initiatives like FACTOR and arts councils enable artists to push creative boundaries, fostering an ecosystem where experimentation and innovation thrive.

However, significant challenges persist. Canada’s proximity to the United States, the largest and most influential music market, creates both opportunities and obstacles. While breaking into this market is appealing, 85% of respondents don’t believe Canadians can access international markets easily, highlighting substantial barriers. Work visa restrictions and intense competition compound these challenges.

Domestically, Canada’s vast geography complicates touring, and the relatively small local market drives many artists to seek international opportunities. Only 3% of respondents strongly agreed Canadian radio effectively represents Canadian musicians, underscoring weak domestic support in key promotional channels. More positively, 65% agreed Canadian music festivals effectively include Canadian music professionals, though with notable variations by race.

## Mental Health Landscape

The findings reveal pervasive mental health challenges driven by systemic, cultural, and demographic factors. While 94% acknowledged the prevalence of mental health issues, alarming distress rates—including 53% feeling life was not worth living—highlight the urgent need for targeted interventions. Marginalized groups face disproportionately higher challenges, emphasizing the need for inclusive outreach and support. Financial stress (84%) and job insecurity (74%) further exacerbate mental health risks, reflecting the precarious nature of industry work. The stigma surrounding both substance use (86%) and abstinence (58%) reveals a polarized environment requiring education and cultural shifts to promote healthier coping mechanisms.

## Workplace Culture and Leadership

Workplace culture and leadership emerged as critical areas for reform. With 83% perceiving their work environments as detrimental to mental health and only 10% citing strong leadership support, systemic change is imperative. Supportive leadership behaviours, like effective communication and empathy, are essential, while harmful practices such as poor communication, micromanagement, and unethical behaviour remain barriers to well-being.

Addressing foundational needs (better sleep, nutrition, social connection) alongside systemic reforms (promoting equity, representation, enhanced leadership capability, job stability) will be key to fostering a healthier, more sustainable music industry.

## Key Insights from SOUNDCHECK

### 1. Stigma and low mental health understanding remain major barriers

Across the music industry, many people still don't have the language or confidence to talk about mental health in a clear, informed way. Stigma and silence lead to misunderstanding and "othering," making it harder to speak up, ask for help, or support one another early. When leaders and workplaces lack basic mental health know-how, problems often go unnoticed until they become crises.

### 2. Work environments, not personal resilience, drive mental health risk

In the music industry, mental health challenges are far more often shaped by how work is structured than by individual strength or coping skills. Insecure income, unclear roles, constant pressure, and unhealthy or poorly led workplaces create ongoing stress that wears people down over time. When work environments don't support basic stability and respect, even the most resilient people are put at risk.

### 3. The industry has changed faster than its support systems

Music work has evolved quickly, but the systems meant to support people haven't kept up. Many workers are navigating new pressures without clear guidance, strong leadership, or easy access to preventative mental health supports. As a result, people across the industry are often left without reliable ways to protect their wellbeing before problems escalate.

### What this Means

To date, the industry remains resilient, with creators and stakeholders collaborating to amplify Canadian talent on the global stage. Yet the data presented in this report documents a mental health crisis that cannot be addressed through resilience alone. The research identifies clear pathways for intervention and support. Leaders and decision-makers now have the evidence base, strategic recommendations, and opportunity to build an industry infrastructure that sustains both creative excellence and human well-being. The continued vitality of Canada's music sector depends on translating these findings into action.

Improving mental health outcomes in the Canadian music industry requires system-level action—strengthening leadership capability, normalizing mental health literacy, and embedding psychological safety into how music work is organized, led, and sustained.

# Recommendations

These recommendations are designed to work in concert, addressing individual capacity (literacy, leadership), structural accountability (Code of Conduct, workplace standards), systemic infrastructure (accessible supports, policy change), and environmental factors (work structures, income stability). Implementation should prioritize collaboration across stakeholder groups and phased rollout with clear accountability measures.

Based on the findings of *Soundcheck*, the following recommendations are proposed to address the mental health crisis in Canada’s music industry:

## 1. Implement Industry-Wide Mental Health Literacy Training

Raise awareness and scale accessible mental health literacy programs for all industry stakeholders—including artists, managers, venue operators, label executives, and support staff. These programs should equip participants with the language, knowledge, and confidence to recognize mental health challenges, initiate supportive conversations, and reduce stigma. Training should be tailored to the unique contexts of music work and made available through multiple formats (online, in-person, micro-learning modules) to accommodate the industry’s diverse and mobile workforce.

## 2. Establish Standards for Psychologically Safe Work Environments

Develop and implement a *National Code of Conduct* for Canada’s music industry establishing minimum behavioural standards and best practices for psychologically safe workplaces. The *Code* should address workplace harassment, discrimination, bullying, power imbalances, and exploitation, while promoting role clarity, fair compensation, respectful communication, proactive conflict resolution, and supportive organizational cultures. Development should include industry-wide consultation to ensure relevance across diverse workplaces, with practical assessment tools tailored to different organizational sizes. The *Code* should be adopted by major industry organizations and integrated into funding agreements, professional certifications, and industry memberships, with industry associations and funding bodies incentivizing compliance by linking grants, awards, and certifications to demonstrated commitment through transparent reporting and clear consequences for violations.

## 3. Develop Leadership Development Programs Focused on Mental Health and Well-Being

Invest in leadership training that equips managers, artistic directors, label heads, and other decision-makers with the skills to create supportive work cultures. Programs should focus on consultative and supportive leadership behaviours, trauma-informed management practices, and strategies for building trust and psychological safety within teams. Leadership development should be positioned as essential professional development, not optional, and should be integrated into existing industry training infrastructures.

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### 4. Create Accessible, Preventative Mental Health Support Systems

Establish low-barrier, proactive mental health resources specifically designed for music industry workers. This includes peer support networks, confidential counseling services with industry-informed therapists, digital mental health tools, and embedded wellness supports at major industry events and workplaces. Resources should be prevention-focused, addressing challenges before they escalate into crises, and should be promoted widely to normalize help-seeking behaviours.

### 5. Redesign Work Structures to Support Income Stability and Role Clarity

Advocate for policy and industry practice changes that address the root causes of workplace stress, including income insecurity and precarious employment conditions. This may include developing portable benefits models, establishing minimum fee standards, creating clearer contractual frameworks, and promoting more equitable revenue-sharing models. Industry associations, unions, and government bodies should collaborate to pilot and scale solutions that provide greater financial predictability and professional stability for music workers.



# Call to Action

## If you work in the Canadian music industry, actions for right now:

Share these findings with government officials, industry leaders, and community groups—write, call, email, or post on social media. Change requires a tipping point.

For more information or to continue the conversation:

[www.revelios.com](http://www.revelios.com)

[@reveliosmentalhealth](https://twitter.com/reveliosmentalhealth)

[catherine@revelios.com](mailto:catherine@revelios.com)

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## Limitations and Considerations

The self-reported nature of the data introduces potential biases, including social desirability bias, recall bias, and incomplete or distorted memories. These factors affect the reliability and generalizability of findings, as individual interpretations and incomplete responses may compromise data validity and consistency.

Survey response rates varied considerably across questions, ranging from n=1,066 to n=117. Focus group and interview participants were given the option to skip questions or provide additional information beyond the structured prompts, resulting in variability in the depth and scope of responses.

These findings should be interpreted as contributing signals to the existing and emerging literature on musician mental health, with follow-up research needed to validate and extend these preliminary insights.

## Declaration of conflicting interest

The lead researcher declares a conflict of interest as President of Revelios, the funding organization. This positionality may influence research design and interpretation. To mitigate bias, an independent research team provided oversight and advisory support to ensure objectivity in the design, analysis, and reporting of the project. This included review of survey instruments, data collection procedures, analytical frameworks, and interpretation of results. Readers are encouraged to critically evaluate findings considering this relationship.

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## **Soundcheck:**

Mental Health in the Canadian Music Industry – National Report

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