

## **A Collective Exhale: Mindfulness, Connection, and Staff Well-being A Reflection on mindfulness groups specifically for Direct Support Professionals**

### **Author Information**

Sue Hutton, Gwen Jones, Roberta Caputo

### **Introduction**

#### **As Authors, our connection to this work**

This paper is grounded in connection with both lived and current professional experience within the developmental services sector. Sue Hutton brings over 30 years of experience working with people with neurodevelopmental disabilities. She has also played roles in advocacy work, human rights education in disability settings and an equal amount of time in formal mindfulness training. While no longer working on the front line, Sue is currently based at the Centre for Addiction and Mental Health Azrieli Adult Neurodevelopmental Centre. At the Centre Sue is engaged in co-developing and leading mindfulness programs for caregivers, (including DSPs) and autistic adults, as part of ongoing research work over the last decade with Dr. Yona Lunsky's team. Sue's positioning for this paper creates a dual perspective: an enduring relational connection to the frontline workforce, alongside a current role, still situated within the sector and supporting staff with mindfulness groups and other projects, in a research and program development capacity.

Gwen Jones and Roberta Caputo are long-time highly experienced frontline DSPs. Their ongoing, day-to-day engagement in direct support work brings a voice that is grounded in the current-day realities and pressures of this essential workforce providing care for people with intellectual and developmental disabilities and their support networks. Together, this authorship reflects both continuity and contrast, with past and present frontline experience shining a light on the needs of this workforce.

We write with a shared recognition that mindfulness and DSP support have existed in parallel, but rarely, if ever before, in direct relationship. Mental health and well-being services specifically designed for DSPs are exceedingly rare. DSPs are typically positioned as providers of care rather than recipients of it, with few spaces dedicated solely to their own emotional and psychological well-being.

The mindfulness groups described in this paper represent a significant departure from this norm. They offered a space intentionally created *just for DSPs*. This is a rare and needed intervention within a workforce that is chronically under-supported. Our aim is to highlight not only how urgently such spaces are needed, but also how mindfulness, when adapted in a neuro-affirming and relational way, can offer a powerful and accessible pathway for mutual support, belonging, and sustainability within this important workforce.

### **Description of the Mindfulness Groups for DSPs**

Bringing mindfulness “off the cushion” into daily life has been central to our family caregiver curriculum, and we recognized its relevance for DSPs. During the pandemic, we adapted our six-week virtual program for family caregivers for DSPs. Our 6-week program developed through research at the CAMH Azrieli Adult Neurodevelopmental Centre is an adapted version of Mindfulness-Based Stress Reduction (MBSR) specifically to better meet the needs of family caregivers needing flexibility and this “off the cushion” practice of utilizing moments in the busy daily life as opportunities to meditate. The curriculum includes sensory awareness practices, breath and body practices, observing thoughts, mindful movement, and compassion techniques. Iterative adaptations were informed by DSP voices: Gwen Jones contributed as an advisor during sessions, and Roberta Caputo supported post-program refinements, ensuring the content and language reflected DSP experience and needs.

### **Our perspective: The experience of Sue, Gwen and Roberta**

When we began offering mindfulness groups specifically for DSPs during the COVID-19 pandemic, we witnessed something beautiful: not only individual stress reduction, but the development of mutual support that may not have had an opportunity to be nurtured elsewhere. What unfolded was not simply a well-being group of mindfulness skill building, but a shared space of recognition, validation, and connection among a workforce that is too often unseen.

### **A Community in Crisis**

Recent research from the Azrieli Adult Neurodevelopmental Centre at CAMH reflects what we have observed across our different roles: over one-third of DSPs continued to experience moderate to severe psychological distress as the pandemic was slowing down, with rates remaining persistently high across multiple years (Bobbette et al., 2024). DSPs have also reported significant exposure to grief, illness, and loss, often with little to no formal mental health or bereavement support. These findings reinforce that what we witnessed during the pandemic was not an anomaly, but part of broader systemic patterns within the workforce.

We highlight this now, as what we witness is that the issue is not going away; six years later, and DSPs tell us they continue to struggle with poor morale, low wages, shortage of staff, lack of recognition and resources to do their jobs.

During the early months of the pandemic, we saw DSPs working in extraordinarily difficult conditions. From the perspective of Gwen and Roberta on the front lines, and from Sue's position facilitating and supporting from CAMH, a shared picture emerged: both congregate and community care settings became sites of fear and uncertainty where morale was already low. Staff navigated constant risk, and many worked extended hours while coping with grief, anxiety, and exhaustion. Worsening well-being that was already burdened.

We worry about that well-being today.

### **The Power of a Space Just for DSPs**

When these mindfulness groups were offered, something shifted. DSPs entered a space intentionally designed for them, without expectation of productivity or caregiving.

From Sue's perspective as facilitator, and affirmed by Gwen and Roberta's ongoing frontline experience, this shift was significant. DSPs are rarely offered spaces where they themselves are centered.

As Gwen shared:

"So, when this mindfulness group just for DSPs came up, we finally had a chance to come together..." Gwen goes on to describe the experience as one of genuine connection and belonging, noting a "safe space, a sense of mutual support and community and genuine connection," where they felt "seen, appreciated, supported and understood."

Across our perspectives, what stands out is how powerful it was for DSPs to be with others who understood the work from the inside. The space allowed for something rarely available in this field: time to pause, to be heard, and to be supported by peers.

### **Mindfulness as Collective Care**

We have come to understand that what made these groups impactful was not mindfulness alone, but mindfulness practiced within a space of mutual support.

Research supports this. DSPs face significant barriers in accessing mental health supports, even when experiencing high levels of distress, and services specifically designed for this workforce remain limited (Carter et al., 2025). This aligns with what participants expressed repeatedly: that opportunities like this were rare; and deeply needed.

Roberta captured a central shift within herself that we often see in participants across the groups: "Mindfulness helped me realize that in order to help my clients better, I need to help myself."

Participants consistently described mindfulness in these groups not as an abstract concept, but as a practical, lived experience integrated into daily life. Simple practices, pausing for three breaths, engaging in a mindful walk, or noticing bodily sensations, became accessible tools during challenging moments.

One participant shared that mindfulness helped them “begin again” in moments of distress, increasing their capacity to be “more calm, less reactive and more present.” Over time, this translated into both personal and professional transformation.

### **From Individual Practice to Shared Practice**

We also observed how these practices extended beyond the individual. Participants began bringing mindfulness into their workplaces, showing up “more calm, more present and more prepared to hold space for others,” and sharing resources with colleagues and families and clients. When mindfulness is offered for DSPs, the ripple effect can be significant.

Roberta shares how she brought the mindfulness tools she was learning in the groups for her own well-being to work with her, sharing them with clients. Each week that the mindfulness group would meet virtually, Roberta shared more about the practices she was now practicing with her clients. “I started practicing the lotus breath with groups of clients. It was such a practical way of engaging with the breath that it was easy for me to show my clients. They loved it and started asking for more mindfulness whenever I would come in!”

While Roberta carried the mindfulness forward in sharing with people she supports, Gwen also speaks of the ripple effects of carrying the practices forward in her work today.

Gwen reflects that, even now, the peer support she discovered through practicing mindfulness with other DSPs continues to sustain her. Within her workplace, colleagues still offer one another small but meaningful reminders; a mindful word, a brief lovingkindness practice, or simply a shared conversation about mindfulness. Beautifully keeping this culture of support alive. The sense of connection that comes from practicing and encouraging mindfulness together has proven both powerful and enduring.

During the mindfulness groups, Gwen described a grounding practice she developed in her workday. She would walk alongside a beautiful stone wall in her workplace, gently resting her hand on its surface, noticing its texture, and pausing to breathe. This simple, sensory-based practice became a reliable way for her to reconnect with herself in the midst of the day. Finding those moments of weaving her mindfulness practice right into the space of a brief moment during a busy at work is an example of bringing mindfulness *to* the work, embedding it in what we do.

Over time, the stone wall became a mindful cue for Gwen; an invitation to turn inward, take a breath, and attune to her senses. She would notice the temperature, appreciate the natural beauty of the stone, and allow herself to settle. Years later, these mindfulness “ripples” continue: Gwen still walks the hallway with intention, and the stonework remains a steady source of grounding in her day. By practicing this awareness within herself throughout the day, Gwen’s ability to be present and attentive to the families and individuals she works with is refreshed.

### **Love for the Work, Cost to the Worker**

Across all three of our perspectives, a consistent theme is the deep love DSPs have for the people they support. This love sustains this work, but it can also contribute to burnout when systems rely on that commitment without adequate support.

Mindfulness, in this context, creates space to hold both realities; dedication to others and the need for self-compassion.

### **One Piece of a Larger Response**

Taken together, both research and our combined experiences point to an urgent need for accessible, workforce-specific mental health support like mindfulness for DSPs. Despite high levels of distress, DSPs continue to be rarely positioned as recipients of care.

The mindfulness groups described here represent one response to this gap. By creating a space grounded in mutual support where DSPs could connect, reflect, and be heard, we began to address a longstanding need within the field.

While mindfulness alone cannot resolve systemic challenges, we have seen how it can support sustainability within the workforce. More importantly, we have seen how creating space for DSPs to come together to breathe, to share, and to feel understood, can shift something fundamental.

## **Conclusion**

### **A Call to Breathe Together Again**

What emerged in these groups was more than individual well-being. It was a shared experience of breathing together. It was a much needed and long overdue collective exhale.

DSPs benefit from a space to collectively nurture themselves.

Mindfulness adapted for DSPs offers a powerful and accessible pathway to address this need. At its core, mindfulness cultivates awareness within oneself in order to extend compassion outward into our communities. For DSPs, coming together and strengthening identity as a workforce while collectively “putting the oxygen mask on oneself” builds intrinsic meaningful supports for this community.

A collective exhale should not be a rare moment in a time of crisis. It should be built into the ongoing conditions of this work. Caring for those who care for others is not optional. It is essential.

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