Volume 1, Issue 1, pp 43-52 Article history:

Received 25 July 2024 Revised 13 August 2024 Accepted 17 August 2024 Published online 01 October 2024



© 2024 the authors. This is an open access article under the terms of the Creative Commons Attribution-NonCommercial 4.0 International (CC BY-NC 4.0) License.

# The Role of Psychological Safety in Promoting Mental Well-Being in Dental Clinics

- 1. Kamdin Parsakia
- 2. Seyed Hadi Seyed Alitabar \*\*

Department of Psychology and Counseling, KMAN Research Institute, Richmond Hill, Ontario, Canada & Master's Student, Counseling Department, University of Tehran, Tehran, Iran Department of Psychology and Counseling, KMAN Research Institute, Richmond Hill, Ontario, Canada

Corresponding author email address: h.alitabar@kmanresce.ca

#### **ABSTRACT**

This study aimed to explore the role of psychological safety in promoting mental well-being among dental professionals. A qualitative research design was employed, utilizing semi-structured interviews with 34 dental professionals from diverse countries. Participants were recruited through online announcements, and interviews were conducted via video calls. Thematic analysis was performed using NVivo software, with theoretical saturation guiding data collection. Key themes were identified, including supportive leadership, collegial relationships, workplace culture, mental well-being strategies, and patient interaction dynamics. The results revealed that supportive leadership, characterized by open communication and emotional support, significantly enhanced psychological safety. Collegial relationships, particularly peer support and team cohesion, played a crucial role in reducing workplace stress. A positive workplace culture that prioritized respect, inclusivity, and ethical conduct fostered a sense of security and belonging. Access to mental health resources and structured well-being programs further contributed to practitioners' psychological resilience. Managing emotional labor in patient interactions was identified as a key challenge, with participants emphasizing the need for training on coping strategies. These findings align with existing literature on psychological safety in healthcare, reinforcing the importance of organizational interventions to support mental well-being. Psychological safety is a fundamental component of workplace well-being in dental clinics, influencing both professional satisfaction and patient care quality. Dental organizations should implement leadership training, peer support programs, and mental health initiatives to create psychologically safe environments. Addressing emotional labor challenges and promoting a culture of respect and inclusivity can further enhance the well-being of dental professionals. Future research should explore the long-term impact of psychological safe

**Keywords:** Psychological safety, mental well-being, dental professionals, workplace culture, leadership, patient interaction, burnout, peer support.

How to cite this article:

Parsakia, K., & Seyed Alitabar, S. H. (2024). The Role of Psychological Safety in Promoting Mental Well-Being in Dental Clinics. *Journal of Oral and Dental Health Nexus*, 1(1), 43-52. https://doi.org/10.61838/jodhn.1.1.4

# Introduction

The concept of psychological safety has gained increasing attention in healthcare settings due to its critical role in fostering mental well-being among professionals. Psychological safety refers to an environment where individuals feel secure in expressing their thoughts, concerns, and emotions without fear of punishment or humiliation (1). This concept is particularly relevant in dental clinics, where

practitioners face significant occupational stress, high patient expectations, and an environment requiring precision and efficiency. The psychological well-being of dental professionals is directly linked to patient safety, clinical performance, and overall workplace satisfaction. However, research on psychological safety in dental settings remains limited, necessitating further exploration of how workplace dynamics contribute to or hinder mental well-being in these environments (2, 3).

Dental practitioners, including dentists, hygienists, assistants, and administrative staff, encounter multiple stressors that impact their psychological health. Studies have documented high levels of anxiety, burnout, and psychological distress among dental professionals due to demanding work conditions, long working hours, and patient-related stressors (4). Foo et al. (2024) highlighted that dental surgery assistants often experience heightened stress levels due to the fast-paced nature of their work, exposure to patient discomfort, and stringent procedural expectations. The prevalence of psychological distress among dental professionals necessitates a work culture that prioritizes mental wellbeing, with psychological safety playing a fundamental role in mitigating occupational stress and fostering resilience (5).

Psychological safety is closely associated with workplace culture, leadership, and team dynamics. Studies have shown that environments fostering open communication, mutual respect, and emotional support contribute significantly to employees' mental well-being (6). Coventry (2022) emphasized that organizational receptivity to mental health initiatives, such as hypnotherapy and anxiety-reduction programs, can enhance psychological safety by reducing workplace stressors and encouraging a proactive approach to mental health. Within dental clinics, where errors can have serious implications, a blame-free culture is essential to ensure that professionals feel comfortable reporting concerns, discussing mistakes, and seeking support when needed (7).

Mental health challenges in dental settings are not only limited to stress and burnout but also extend to psychological resilience and coping strategies. McKenzie et al. (2022) found that resilience-building interventions are crucial for pre-doctoral dental students, as they prepare to enter high-stress clinical environments (8). Similarly, Han (2024) explored the role of personality and behavioral tendencies in mental health outcomes among dental hygiene students, indicating that certain DISC behavioral types are more prone to stress and anxiety (9). These findings suggest that individual psychological characteristics interact with workplace culture, highlighting the importance of fostering an inclusive and supportive professional environment.

The connection between psychological safety and broader mental health frameworks is well-documented in various healthcare disciplines. Hunt et al. (2021) explored strategies for enhancing psychological safety in mental health services, emphasizing the role of leadership and team collaboration in creating safe spaces for healthcare providers (10). Similarly, Solomon (2023) examined the application of psychological safety principles in nursing education, illustrating how training in recovery-oriented practices can support mental health professionals in high-pressure environments (3). Given the similarities in patient-centered care models, these insights are valuable for dental professionals, who also require structured support systems to navigate the emotional demands of their profession.

A key factor influencing psychological safety is the availability of mental health resources and organizational commitment to well-being initiatives. Kim and Han (2021) highlighted the importance of psychological first aid in crisis situations, suggesting that structured guidelines can improve mental resilience among healthcare workers. In dental settings, access to mental health resources, such as counseling services, peer support programs, and wellness initiatives, can significantly enhance practitioners' psychological safety (11).

Workplace culture and leadership styles are central to fostering psychological safety in dental clinics. Morton et al. (2024) developed the Neuroception of Psychological Safety Scale (NPSS) to measure the perception of psychological safety across different professional settings. Their findings indicate that a culture of trust and inclusivity correlates strongly with reduced anxiety and improved workplace satisfaction (12). Similarly, Vogt et al. (2024) found that psychological safety is often secondary to physical safety in inpatient mental health settings, emphasizing the need for a paradigm shift where both aspects are equally prioritized (13). Within dental clinics, where physical safety is already a primary concern, the integration of psychological safety measures can lead to holistic improvements in workplace well-being.

Moreover, the interplay between psychological safety and professional performance cannot be overlooked. Rajaram et al. (2023) discussed the impact of psychosomatic disorders in the orofacial region, suggesting that chronic stress and psychological distress among dental professionals may contribute to physical symptoms affecting clinical performance (14). Stress-

related conditions such as temporomandibular disorders (TMD) and bruxism are commonly reported among dentists, highlighting the necessity of addressing mental health concerns proactively. Similarly, Taheri et al. (2023) examined the relationship between dental pain perception and mental health variables, reinforcing the connection between psychological well-being and professional competency (15).

An additional aspect of psychological safety is its influence patient care and interactions. Wangsathaporn et al. (2024) investigated the effects of online learning on dental students' mental health during the COVID-19 pandemic, revealing that increased stress and anxiety impacted their confidence in clinical decision-making (16). These findings align with broader research indicating that psychological safety is essential for maintaining high standards of patient care. Ojio et al. (2024) further explored psychological safety in the context of mental toughness among athletes, suggesting that environments fostering resilience and confidence contribute to overall performance (17). By applying these insights to dental clinics, it becomes evident that a psychologically safe work environment not only benefits practitioners but also enhances patient outcomes.

The relationship between psychological safety and broader health policy is also noteworthy. Xu et al. (2023) examined the application of intelligent mental health management systems, suggesting that technology-driven solutions can support psychological well-being in various professional settings (18). Pindobilowo et al. (2022) emphasized the importance of mental health considerations in dental and oral health promotion programs, advocating for integrated strategies that address both physical and psychological aspects of patient care (19). Similarly, Torrado (2023) called for an integrative approach to hospital psychology, highlighting the need for interdisciplinary collaboration in fostering workplace mental well-being (20). These perspectives underscore the necessity of systemic changes in dental clinic management to prioritize psychological safety as an essential component of occupational health.

Overall, the existing literature highlights the critical role of psychological safety in promoting mental well-being among dental professionals. By fostering an environment where practitioners feel supported, valued, and secure in expressing their concerns, dental clinics can improve both workplace morale and patient care

quality. However, gaps remain in understanding the specific mechanisms through which psychological safety operates in dental settings. This study aims to address these gaps by exploring the lived experiences of dental professionals, examining how leadership, team dynamics, workplace culture, and mental health initiatives contribute to psychological safety in dental clinics. By gaining deeper insights into these dynamics, this research seeks to inform best practices for creating supportive and resilient dental work environments.

#### Methods and Materials

This study employed a qualitative research design to explore the role of psychological safety in promoting mental well-being in dental clinics. The research utilized a phenomenological approach to capture the lived experiences and perceptions of dental professionals regarding psychological safety in their workplace. A total of 34 participants were recruited through online announcements, ensuring a diverse representation of dental professionals from multiple countries. Participants included dentists, dental hygienists, dental assistants, and administrative staff, reflecting a range of professional roles within dental clinics. The inclusion criteria required participants to have at least two years of experience in dental settings, ensuring their familiarity with workplace dynamics and psychological safety concerns. The study adhered to ethical guidelines, ensuring informed consent and confidentiality throughout the research process.

Semi-structured interviews were the primary data collection method, allowing for in-depth exploration of participants' experiences and perspectives. Interview questions were designed to elicit responses related to psychological safety, workplace culture, and mental wellbeing. The interviews were conducted via video calls to accommodate participants from different geographical locations and lasted approximately 40 to 60 minutes. Theoretical saturation was the guiding principle for data collection, and interviews continued until no new themes emerged. All interviews were recorded with participants' consent and transcribed verbatim for analysis.

Data analysis followed a thematic approach using NVivo software to facilitate systematic coding and theme development. The initial stage involved familiarization

with the data through repeated readings of the transcripts. Open coding was then conducted to identify key concepts, which were subsequently grouped into broader themes. Axial coding was applied to refine categories and establish relationships between themes, comprehensive understanding ensuring a psychological safety's impact on mental well-being in dental clinics. Throughout the analysis, researcher triangulation was employed to enhance credibility, with multiple researchers reviewing and discussing emerging themes to minimize bias. The final themes were validated through member checking, where select participants reviewed the findings to ensure accuracy and alignment with their experiences.

#### **Findings**

Of the 34 participants in this study, 20 (59%) were female and 14 (41%) were male, with ages ranging from 25 to 58 years (M = 36.2, SD = 8.7). Participants represented 10 different countries, including the United States (n = 9), Canada (n = 6), the United Kingdom (n = 5), Australia (n = 4), and various Asian and European countries (n = 10). Professional roles encompassed dentists (n = 12), dental hygienists (n = 8), dental assistants (n = 6), and administrative staff (n = 8). On average, participants had 7.5 years of experience (SD = 4.1) working in dental clinics, indicating a broad spectrum of professional backgrounds and levels of expertise.

Table 1. The Results of Qualitative Coding

| Categories (Themes)     | Subcategories (Subthemes)    | Concepts (Open Codes)   |
|-------------------------|------------------------------|---|
| Supportive Leadership   | Open Communication           | Encouraging feedback, Non-judgmental atmosphere, Active listening, Managerial transparency,                 |
|                         |                              | Open-door policy  |
|                         | Emotional Support            | $Empathetic \ leadership, Recognition \ of \ stress, Supportive \ discussions, Mental \ health \ awareness$ |
|                         | Conflict Resolution          | Mediation strategies, Fairness in disputes, Encouraging dialogue, Addressing concerns early                 |
|                         | Encouraging Growth           | Professional development, Constructive feedback, Mentorship, Opportunities for skill                        |
|                         |                              | enhancement   |
|                         | Workload Management          | Realistic expectations, Delegation of tasks, Preventing burnout, Flexible scheduling                        |
| Collegial Relationships | Team Cohesion                | Mutual respect, Positive work environment, Trust among colleagues, Encouraging teamwork                     |
|                         | Peer Support                 | Emotional encouragement, Guidance from colleagues, Willingness to help, Informal counseling                 |
|                         | Psychological Comfort        | Safe to express opinions, No fear of ridicule, Support during mistakes, Valued contributions                |
|                         | Collaboration in Decision-   | Shared decision-making, Input from staff, Inclusive discussions, Equal voice in meetings                    |
|                         | Making                       |   |
| Workplace Culture       | Respectful Work Environment  | Inclusivity, Professional courtesy, Addressing discrimination, Positive reinforcement                       |
|                         | Fear-Free Communication      | Speaking without fear, Reporting issues openly, Transparency in interactions, No retaliation                |
|                         | Recognition and Appreciation | Acknowledging efforts, Rewarding good performance, Celebrating team achievements, Verbal                    |
|                         |                              | encouragement   |
|                         | Ethical Conduct              | Fairness, Integrity, Honesty in workplace relations, Upholding moral values                                 |
|                         | Diversity and Inclusion      | Cultural sensitivity, Gender inclusivity, Equal opportunities, Acceptance of different perspectives         |
| Mental Well-Being       | Stress Reduction Initiatives | Wellness programs, Meditation sessions, Psychological counseling, Work-life balance initiatives             |
| Strategies              |                              |   |
|                         | Access to Mental Health      | Availability of therapy, Confidential support systems, Counseling referrals, Peer mental health             |
|                         | Resources                    | training  |
|                         | Work-Life Balance            | Flexible work hours, Family-friendly policies, Paid mental health leave, Supportive management              |
| Patient Interaction and | Emotional Labor Management   | Handling difficult patients, Emotional regulation training, Coping mechanisms, Psychological                |
| Safety                  |                              | preparedness  |
|                         | Safety in Patient Care       | Support in error management, Reducing blame culture, Learning from mistakes, Encouraging                    |
|                         |                              | reporting   |

Professional Boundaries

Preventing emotional exhaustion, Managing patient expectations, Ethical professionalism,

Avoiding burnout

# **Supportive Leadership**

Open Communication: This subcategory emerged from concepts such as *encouraging feedback, non-judgmental atmosphere, active listening, managerial transparency,* and *open-door policy.* Participants emphasized the importance of leaders who foster open dialogue and welcome input. For example, one participant stated, "I feel comfortable talking about any issues with my supervisor because they genuinely listen to my concerns and encourage me to speak up" (Participant 3).

**Emotional Support:** Codes in this subtheme included *empathetic leadership, recognition of stress, supportive discussions,* and *mental health awareness.* Participants described leaders who check in regularly on staff wellbeing and promote mental health resources. As one participant noted, "When I was overwhelmed, my manager was the first to ask if I needed help or just someone to talk to. It made a huge difference in my stress level" (Participant 12).

Conflict Resolution: Key concepts here encompassed mediation strategies, fairness in disputes, encouraging dialogue, and addressing concerns early. Effective conflict resolution was described as a cornerstone of psychological safety, with participants reporting higher trust when leaders intervened fairly and promptly. A participant explained, "Conflicts happen in any workplace, but our manager ensures issues are resolved quickly and without blame" (Participant 8).

Encouraging Growth: Subcategory codes included professional development, constructive feedback, mentorship, and opportunities for skill enhancement. Many participants noted that having leaders who invest in their professional growth boosts confidence and reduces work-related anxiety. One interviewee commented, "Knowing my supervisor wants me to develop professionally motivates me and makes me feel valued" (Participant 15).

**Workload Management:** Concepts such as *realistic expectations, delegation of tasks, preventing burnout,* and *flexible scheduling* underscored the significance of fair workload distribution. Participants highlighted that balanced assignments and recognition of personal limits contribute to a supportive atmosphere. "Our head dentist"

is mindful of how many patients we see in a day, ensuring no one is overloaded. It reduces stress immensely" (Participant 23).

# **Collegial Relationships**

**Team Cohesion:** This subcategory includes *mutual* respect, positive work environment, trust among colleagues, and encouraging teamwork. Participants credited a sense of unity for fostering psychological safety, noting that shared responsibility and camaraderie help alleviate individual stress. A participant reflected, "We rely on one another, and that teamwork mentality makes it easier to handle busy days" (Participant 6).

**Peer Support:** Codes under this subtheme were *emotional encouragement, guidance from colleagues, willingness to help,* and *informal counseling.* Informal conversations among colleagues emerged as an important coping mechanism. One interviewee shared, "I can always count on my coworkers to help if I'm stuck with a procedure or just feeling stressed" (Participant 19).

Psychological Comfort: Open codes included safe to express opinions, no fear of ridicule, support during mistakes, and valued contributions. Participants indicated that feeling comfortable raising concerns or admitting errors without judgment was essential for maintaining mental well-being. As one stated, "Knowing I won't be shamed if I make an error actually helps me learn faster and feel safer at work" (Participant 21).

Collaboration in Decision-Making: Shared decision-making, input from staff, inclusive discussions, and equal voice in meetings were the primary concepts in this subcategory. Many felt that participating in decisions, especially those affecting daily tasks, strengthened team spirit. "When the entire team is involved in important decisions, we all feel more committed and responsible" (Participant 5).

# **Workplace Culture**

**Respectful Work Environment:** This subtheme captured concepts of *inclusivity, professional courtesy, addressing discrimination,* and *positive reinforcement.* Participants underscored that a culture rooted in mutual respect fosters a sense of belonging and reduces stressors. As one participant said, "Our clinic's emphasis on respect goes beyond just polite conversation; it's about

truly valuing each team member's background and ideas" (Participant 14).

**Fear-Free Communication:** Open codes included speaking without fear, reporting issues openly, transparency in interactions, and no retaliation. Participants highlighted the critical role of an environment where staff can share opinions or report concerns without anxiety. A participant described, "I've never felt scared to speak up here, even if what I say might not be what the managers want to hear" (Participant 27).

**Recognition and Appreciation:** Concepts were acknowledging efforts, rewarding good performance, celebrating team achievements, and verbal encouragement. Demonstrating appreciation, participants said, cultivates positive morale and fosters loyalty. One participant remarked, "Even a small 'thank you' or a quick shout-out in a meeting keeps me motivated" (Participant 10).

**Ethical Conduct:** Codes encompassed *fairness, integrity, honesty in workplace relations,* and *upholding moral values.* Dental professionals stressed that an ethical climate is fundamental to trust and psychological well-being. "I know my team will handle situations with honesty, and it's comforting to work in a place where ethics come first" (Participant 29).

**Diversity and Inclusion:** This subcategory derived from *cultural sensitivity, gender inclusivity, equal opportunities,* and *acceptance of different perspectives.* Participants believed that inclusive practices enhance team collaboration and mental well-being by acknowledging varied backgrounds and needs. "I love that in our clinic everyone, regardless of their background, gets an equal chance to shine" (Participant 2).

# **Mental Well-Being Strategies**

Stress Reduction Initiatives: Wellness programs, meditation sessions, psychological counseling, and worklife balance initiatives emerged as key concepts. Many highlighted workplace-offered programs that help alleviate stress. According to one interviewee, "Attending the weekly mindfulness session has helped me handle daily stress better" (Participant 11).

Access to Mental Health Resources: Codes for this subtheme included availability of therapy, confidential support systems, counseling referrals, and peer mental health training. Having resources readily available and openly advertised was seen as crucial in normalizing help-seeking behavior. "Just knowing I can talk to a

professional if I need to helps me focus better at work" (Participant 20).

Work-Life Balance: Subcategory concepts were flexible work hours, family-friendly policies, paid mental health leave, and supportive management. Participants emphasized how balanced personal and professional commitments reduce burnout and improve morale. "My clinic allows me to adjust my schedule around family needs, which definitely lowers my stress" (Participant 4).

# **Patient Interaction and Safety**

**Emotional Labor Management:** This subtheme included handling difficult patients, emotional regulation training, coping mechanisms, and psychological preparedness. Participants reported that managing emotional labor is a constant challenge, underscoring the value of training and support. "We deal with anxious patients daily, so having techniques to keep myself calm helps me be a better caregiver" (Participant 9).

Safety in Patient Care: Support in error management, reducing blame culture, learning from mistakes, and encouraging reporting were identified as central concepts. Many indicated that a non-punitive approach to errors not only enhances patient safety but also preserves staff well-being. "If I make a mistake, I know we'll address it as a learning opportunity, not a reason to punish me" (Participant 26).

**Professional Boundaries:** Codes here were preventing emotional exhaustion, managing patient expectations, ethical professionalism, and avoiding burnout. Maintaining clear boundaries was seen as essential for protecting mental health and ensuring consistent patient care quality. One participant remarked, "Understanding how to separate patients' anxieties from my own mental space has helped me stay healthy and empathetic" (Participant 1).

#### Discussion and Conclusion

The findings of this study underscore the significant role of psychological safety in promoting mental well-being among dental professionals. Participants highlighted the importance of supportive leadership, collegial relationships, workplace culture, mental well-being strategies, and patient interaction dynamics in fostering a psychologically safe work environment. Open communication, emotional support, and workload management were particularly emphasized as key

components of supportive leadership. Team cohesion and peer support emerged as essential factors in reducing stress and preventing burnout. Additionally, a workplace culture rooted in respect, inclusivity, and ethical conduct was perceived as a fundamental element in enhancing psychological safety. Access to mental health resources and strategies to manage emotional labor were also reported as vital for maintaining wellbeing. These findings align with existing literature on the importance of psychological safety in healthcare settings, particularly in high-stress environments such as dental clinics.

A major theme in this study was the role of supportive leadership in creating an environment where employees feel psychologically safe. Participants reported that open communication and emotional support from supervisors reduced stress and enhanced job satisfaction. These findings are consistent with previous studies indicating that leadership plays a pivotal role in workplace mental health. Mizuno et al. (2023) found that organizational climate significantly affects psychological safety in nursing environments, with supportive leadership being a crucial determinant of employee well-being (6). Similarly, Mehta et al. (2024) emphasized that fostering psychological safety among healthcare workers requires leaders to cultivate trust and provide avenues for open dialogue (1). In dental settings, where professionals often work in high-pressure conditions, effective leadership that prioritizes mental well-being can mitigate the negative effects of occupational stress.

The importance of collegial relationships was another key finding. Participants described strong team cohesion and peer support as protective factors against stress and burnout. Many stated that having trustworthy colleagues who offer emotional and professional support contributes to a more positive work environment. These results align with research conducted by Foo et al. (2024), who found that dental surgery assistants experiencing strong team support reported lower levels of stress and greater job satisfaction (5). Similarly, McKenzie et al. (2022) emphasized that social support among pre-doctoral dental students significantly enhances resilience, preparing them for the challenges of clinical practice (8). Coventry (2022) further noted that healthcare professionals who engage in collaborative workplace cultures are more likely to participate in mental health programs and adopt coping strategies (7).

In this study, participants echoed these findings, stating that peer relationships create a buffer against job-related stressors and help build psychological resilience.

The workplace culture in dental clinics was reported as a major determinant of psychological safety. A culture that values respect, inclusivity, and fairness was found to enhance employees' sense of belonging and reduce anxiety related to workplace interactions. The current study's findings align with research by Morton et al. (2024),who developed the Neuroception Psychological Safety Scale (NPSS) and found that employees who perceive their workplace as inclusive and respectful report lower levels of workplace-related anxiety (12). Similarly, Vogt et al. (2024) emphasized that workplace safety should not only focus on physical safety but also on psychological safety, as fear and intimidation can contribute to stress and job dissatisfaction (13). Participants in this study highlighted the need for dental clinics to implement policies that promote a culture of trust and transparency, allowing employees to voice concerns without fear of retaliation.

Another major theme identified in this study was the role of mental well-being strategies, including access to mental health resources, stress reduction initiatives, and work-life balance. Participants expressed that having structured wellness programs, counseling services, and flexible scheduling options significantly improved their overall well-being. This finding is supported by Kim and Han (2021), who developed psychological first aid guidelines for healthcare workers, emphasizing the importance of immediate mental health support in highenvironments (11). Han (2024) further highlighted that dental hygiene students with access to mental health programs exhibited better coping mechanisms and lower stress levels than those without such resources (9). Additionally, Hunt et al. (2021) found that enhancing psychological safety in mental health services requires proactive strategies, such as regular mental health check-ins and structured interventions (10). These studies reinforce the importance of integrating mental health initiatives within dental clinics to ensure employees feel supported and valued.

Patient interaction and emotional labor management were also key concerns for participants in this study. Many reported that dealing with difficult patients, managing emotional exhaustion, and maintaining professional boundaries were significant challenges that

affected their psychological safety. These findings are consistent with research by Hopcraft et al. (2023), who found that Australian dental practitioners experiencing high levels of patient-related stress were at an increased risk of burnout (4). Similarly, Patil et al. (2021) noted that the emotional burden of handling patient anxiety and pain can contribute to psychological distress among dentists, particularly during crisis periods such as the COVID-19 pandemic (21). Furthermore, Taheri et al. (2023) found that perceptions of dental pain and anxiety are linked to practitioners' mental well-being, indicating that patient-related stress can have a reciprocal effect on clinicians (15). The results of the current study highlight the need for dental clinics to provide training on emotional regulation and coping strategies to help professionals manage patient interactions without compromising their mental health.

The findings of this study also support the growing body of literature emphasizing the need for systemic change in healthcare policies regarding psychological safety. Xu et al. (2023) explored the potential of intelligent mental health management systems in professional settings, advocating for technology-driven interventions to support psychological well-being (18). Similarly, Pindobilowo et al. (2022) called for integrating mental health considerations into dental and oral health promotion programs, suggesting that improving practitioners' mental health will also enhance patient outcomes (19). Torrado (2023) further argued for an integrative approach to hospital psychology, advocating interdisciplinary collaboration in fostering well-being (20). These perspectives workplace underscore the necessity of structural interventions in dental clinics to establish psychological safety as a core component of occupational health policies.

Despite the valuable insights gained from this study, several limitations must be acknowledged. First, as a qualitative study, the findings rely on self-reported experiences, which may be influenced by personal biases or recall limitations. While theoretical saturation was achieved, the sample size of 34 participants may not fully capture the diversity of experiences across different dental settings. Additionally, participants were recruited through online announcements, potentially leading to self-selection bias, where those with strong opinions on psychological safety may have been more likely to participate. Another limitation is that this study did not

account for regional differences in workplace policies and cultural variations that may influence perceptions of psychological safety. Future research could address these limitations by incorporating larger, more diverse samples and employing mixed-methods approaches to strengthen the validity of findings.

Future studies should explore the longitudinal impact of psychological safety interventions in dental clinics to assess their effectiveness over time. Quantitative research examining the correlation between psychological safety and mental health outcomes, such as burnout levels, job satisfaction, and patient care quality, would provide additional insights. Comparative studies across different healthcare disciplines could also enhance the understanding of how psychological safety varies across medical, dental, and nursing professions. Further research is needed to investigate the influence of cultural and regional factors on psychological safety perceptions, as workplace expectations and leadership styles may differ across global contexts. Additionally, future studies could assess the role of emerging technologies, such as artificial intelligence and virtual mental health programs, in enhancing psychological safety among dental professionals.

Dental clinics should prioritize leadership training programs that emphasize the importance psychological safety and effective communication. Creating structured peer support programs can help dental professionals share experiences and provide emotional support in challenging situations. Clinics should establish clear policies to promote an inclusive and respectful workplace culture, ensuring that employees feel comfortable reporting concerns without fear of retaliation. Integrating mental health resources, such as on-site counseling services, stress reduction initiatives, and flexible scheduling options, can enhance well-being and prevent burnout. Additionally, clinics should offer professional development programs that equip staff with skills to manage emotional labor, particularly in patient interactions. By adopting these strategies, dental organizations can foster a work environment that prioritizes both psychological safety and overall mental well-being, ultimately benefiting both practitioners and patients.

**Declaration of Interest** 

The authors of this article declared no conflict of interest.

#### **Ethical Considerations**

The study protocol adhered to the principles outlined in the Helsinki Declaration, which provides guidelines for ethical research involving human participants.

#### **Authors' Contributions**

All authors equally contributed to this study.

# Acknowledgments

We would like to express our appreciation and gratitude to all those who cooperated in carrying out this study.

# Transparency of Data

In accordance with the principles of transparency and open research, we declare that all data and materials used in this study are available upon request.

# **Funding**

This research was carried out independently with personal funding and without the financial support of any governmental or private institution or organization.

# Declaration

In order to correct and improve the academic writing of our paper, we have used the language model ChatGPT.

# References

- 1. Mehta LS, Churchwell K, Coleman DM, Davidson JE, Furie KL, Ijioma N, et al. Fostering Psychological Safety and Supporting Mental Health Among Cardiovascular Health Care Workers: A Science Advisory From the American Heart Association. Circulation. 2024;150(2). doi: 10.1161/cir.00000000000001259.
- 2. Morton L, Cogan N, Kołacz J, Calderwood C, Nikolič M, Bacon T, et al. A New Measure of Feeling Safe: Developing Psychometric Properties of the Neuroception of Psychological Safety Scale (NPSS). Psychological Trauma Theory Research Practice and Policy. 2024;16(4):701-8. doi: 10.1037/tra0001313.
- 3. Solomon B. Enhancing Psychological Safe Spaces in Mental Health: Teaching Undergraduate Nurses Recovery-Oriented Practice Skills to Support Mental Health Service Users. 2023:50-62. doi: 10.34074/proc.2301006.
- 4. Hopcraft MS, McGrath R, Stormon N, Parker G. Mental Health, Psychological Distress and Burnout in Australian Dental

- Practitioners. Australian Dental Journal. 2023;68(3):160-70. doi: 10.1111/adj.12961.
- 5. Foo LH, Suhaimi NHB, Sadimin SB, Ong MMA. Dental Surgery Assistant Trainees' Perceptions of Mental Well-Being and Working in the Dental Clinic. The Asia Pacific Scholar. 2024;9(2):81-6. doi: 10.29060/taps.2024-9-2/sc3066.
- 6. Mizuno Y, Mizuno M, Yamada Y, Hochi Y, Iwaasa T, Inaba K, et al. Organizational Climate for Health to Enhance Psychological Safety in Nursing Organizations. 2023. doi: 10.54941/ahfe1004392.
- 7. Coventry P. Occupational Health and Safety Receptivity Towards Clinical Innovations That Can Benefit Workplace Mental Health Programs: Anxiety and Hypnotherapy Trends. International Journal of Environmental Research and Public Health. 2022:19(13):7735. doi: 10.3390/ijerph19137735.
- 8. McKenzie CT, Kent MP, Volero A. A Cross-sectional Study Investigating Mental Health and Resilience Among Predoctoral Students at a US Dental School. Journal of Dental Education. 2022;86(12):1620-7. doi: 10.1002/jdd.13080.
- 9. Han S-Y. Mental Health According to DISC Behavioral Types in Dental Hygiene Students. Korean Journal of Clinical Dental Hygiene. 2024;12(2):117-27. doi: 10.12972/kjcdh.20240012.
- 10. Hunt DF, Bailey J, Lennox B, Crofts M, Vincent C. Enhancing Psychological Safety in Mental Health Services. International Journal of Mental Health Systems. 2021;15(1). doi: 10.1186/s13033-021-00439-1.
- 11. Kim E-Y, Han S-W. Development of Psychological First Aid Guidelines for People Who Have Experienced Disasters. International Journal of Environmental Research and Public Health. 2021;18(20):10752. doi: 10.3390/ijerph182010752.
- 12. Morton L, Cogan N, Kołacz J, Nikolič M, Calderwood C, Bacon T, et al. A New Measure of Feeling Safe: Developing Psychometric Properties of the Neuroception of Psychological Safety Scale (NPSS). 2021. doi: 10.31219/osf.io/tpe5j.
- 13. Vogt KS, Baker J, Morys-Edge M, Kendal S, Mizen E, Johnson J. 'I Think the First Priority Is Physically Safe First, Before You Can Actually Get Psychologically Safe': Staff Perspectives on Psychological Safety in Inpatient Mental Health Settings. Journal of Psychiatric and Mental Health Nursing. 2024. doi: 10.1111/jpm.13101.
- 14. Rajaram S, Tamilmani S, Preethy M, Deivanayagi M. Psychosomatic Disorders of Oro Facial Region An Updated Review. Pijr. 2023:225-7. doi: 10.36106/paripex/5613462.
- 15. Taheri AA, Parvizifard AA, Reisi S, Jafari M, Mohammadian Y, Heshmati K, et al. Associations Between the Perception of Dental Pain and Pain Anxiety, Mental Pain, and Dental Anxiety in Iranian Sample. The International Journal of Psychiatry in Medicine. 2023;59(1):34-49. doi: 10.1177/00912174231180855.
- 16. Wangsathaporn K, Worawichayaporn T, Kittinawawit W, Hemprachitchai Y, Kaewsutha N. The Impact of Online Learning and Health Behavior on Mental Health Among Thai Dental Students During the COVID-19 Era. Journal of International Society of Preventive and Community Dentistry. 2024;14(6):437-44. doi: 10.4103/jispcd.jispcd\_7\_24.
- 17. Ojio Y, Yamada K, Amemiya R, Kawamura S, Rice S, Purcell R. Understanding the Relationship Between Sport-Related Psychological Safety and Mental Toughness in Male Elite Athletes. 2024. doi: 10.21203/rs.3.rs-5315778/v1.
- 18. Xu Z, Dong J, Zhang Y. Construction and Application of Intelligent Mental Health Management System for Prisoners. 2023:256-65. doi: 10.2991/978-2-38476-158-6\_34.
- 19. Pindobilowo, Ariani D, Mahatidana D. Dental and Oral Health Promotion Program for People With Mental Illness. Jurnal

Multidisiplin Madani. 2022;2(11):3893-905. doi: 10.55927/mudima.v2i11.1633.

- 20. Torrado M. Towards to an Integrative and Integrated Hospital Psychology: The Department of Health and Clinical Psychology of Hospital CUF Tejo. Gazeta Médica. 2023:107-14. doi: 10.29315/gm.v1i1.701.
  21. Patil AP, Magdum D, Jadhav S, Jadhav A, Vhatkar P,
- 21. Patil AP, Magdum D, Jadhav S, Jadhav A, Vhatkar P, Kavle P. Stress and Financial Burden Faced by Dentists Amidst COVID 19 Pandemic. Journal of Pharmaceutical Research International. 2021:303-10. doi: 10.9734/jpri/2021/v33i52a33589.