Psychological safety and mental health in organizations

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Resumo

A segurança psicológica enquanto capacidade de o indivíduo se manifestar perante os outros, seja dentro de um grupo, equipa, organização ou outro ambiente, sem medo das repercussões que tal risco interpessoal implica, tem sido associada ao aumento da aprendizagem, do desempenho, da produtividade, da qualidade, da segurança, do compromisso, da coesão, da criatividade e da inovação, e do bem-estar dos trabalhadores. São, contudo, ínfimos os estudos sobre a relação entre a segurança psicológica percebida pelos indivíduos e a sua saúde mental, lacuna que este estudo pretendeu colmatar. Os instrumentos utilizados foram a Escala de Segurança Psicológica de O'Donovan et al. (2020) e o Inventário de Saúde Mental (Ribeiro, 2011), aplicados a uma amostra de 420 trabalhadores em contexto empresarial. A Escala de Segurança Psicológica foi adaptada para português, e a sua validade estrutural verificada através das análises fatoriais confirmatória (AFC) e exploratória (AFE). Entre os resultados destacaram-se: a associação positiva significativa entre a perceção de segurança psicológica por parte do trabalhador e a sua saúde mental, sendo aquela o preditor com maior impacto no *distress* psicológico; efeito significativo da segurança psicológica face aos líderes no *distress* psicológico; diferenças significativas na segurança psicológica e na saúde mental em função do nível hierárquico dos trabalhadores, com as lideranças pontuando mais em ambas as variáveis.

Palavras-chave: segurança psicológica; comportamentos de voz; saúde mental; local de trabalho; organizações

Abstract

Psychological safety, defined as an individual's capacity to express themselves before others - whether within a group, team, organization, or other environment - without fear of the repercussions entailed by interpersonal risk, has been linked to enhanced learning, performance, productivity, quality, safety, commitment, cohesion, creativity, innovation, and overall employee well-being. However, research on the relationship between individuals' perceived psychological safety and their mental health remains exceedingly scarce. This study aimed to address this gap. The Psychological Safety Scale (O'Donovan et al., 2020) and the Mental Health Inventory (Ribeiro, 2011) were administered to a sample of 420 employees in organizational settings. The Psychological Safety Scale was adapted into Portuguese, and its construct validity was examined using confirmatory and exploratory factor analyses. Key findings

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included a significant positive association between employees' perceptions of psychological safety and their mental health, with psychological safety emerging as the strongest predictor of reduced psychological distress; a significant effect of psychological safety relative to leaders on psychological distress; and significant differences in psychological safety and mental health according to hierarchical level, with leadership positions scoring higher on both variables.

Keywords: psychological safety; voice behaviors; mental health; workplace; organizations

Introduction

We have grown accustomed to the idea, often attributed to Sigmund Freud, that a mentally healthy individual is one who is capable of both loving and working, a premise that underscores the importance of both affects and productive activity for psychological well-being.

This conception is reinforced by the World Health Organization (WHO), which defines mental health as "a state of mental well-being that enables individuals to cope with the stresses of life, apply their abilities, learn and work effectively, and contribute to their community" (WHO, 2022a).

Indeed, the WHO explicitly states that decent work supports good mental health by providing a livelihood, fostering a sense of confidence, purpose, and accomplishment, creating opportunities for positive relationships and inclusion in a community, and establishing a framework for structured routines (WHO, 2024).

However, work can also entail negative consequences for both physical and mental health due to a variety of factors, ranging from the effort and responsibility it demands to values, attitudes, and behaviours related aspects, commonly referred to as psychosocial risks (Harvey et al., 2017).

The European Agency for Safety and Health at Work warns that prolonged exposure to to such risk factors can lead to physical and mental health problems, including burnout, anxiety, or depression (European Agency for Safety and Health at Work, 2022).

According to the WHO World Mental Health Report, it is estimated that nearly 15% of the global workforce will experience a mental disorder at some point in their lives (WHO, 2022b). In Portugal, the problem is similarly pronounced: in 2022, approximately 58% of workers reported experiencing symptoms of burnout (OPP, 2023).

Work, therefore, simultaneously represents a source of and a threat to mental health. Increasingly, the influence of organizational climate as a psychosocial condition on individual well-being and mental health has been recognized.

The associations between positive work environments and individual health and well-being originate from psychological climate and psychosocial safety climate theories (Baltes et al., 2009; Dollard & Bakker, 2010, cited by Weziak-Bialowolska et al., 2023), which emphasize the role that employees' perceptions of their work environment and the interactions within it play in their psychological health.

A recent APA study (2023b), surveying 2,515 U.S. employees, confirmed that toxic work environments are associated with reduced psychological well-being, stating that “there is little doubt that workplace conditions can contribute to or exacerbate mental health problems, and even less doubt that mental health issues can manifest - and do manifest - in the workplace” (Kelloway et al., 2023, p. 381).

In this context, psychological safety emerges as a variable of particular relevance. Although recent years have seen a surge in research on this topic, empirical investigation into the relationship between psychological safety and mental health remains virtually nonexistent, as acknowledged by Edmondson and Brandsby (2023) in their recent review of the past decade’s research.

It is precisely this gap that the present study sought to address.

Study Variables

Psychological Safety

Psychological safety is defined in the *Thesaurus of Psychological Index Terms* of the American Psychological Association (APA) as “the ability to share thoughts and ideas without fear of humiliation, punishment, or interpersonal risk, within a group, team, organization, or other environment” (APA, 2023a).

The concept was first introduced by Schein and Bennis in 1965, who considered it critical to organizational learning and change processes, as it reduces perceived threats and creates a context that encourages experimentation and tolerates failure without retaliation, rejection, or blame. In 1990, Kahn revisited the topic, arguing that psychological safety enables individuals to engage and express themselves physically, cognitively, and emotionally in their roles, rather than withdrawing to protect themselves.

However, the most influential work for the proliferation of research on psychological safety was that of Amy Edmondson, who defined it as “a shared belief among team members that it is safe to take interpersonal risks” (1999, p. 350), and introduced the first empirical measure of the construct. According to Edmondson, “psychological safety exists when people feel that their workplace is an environment where they can speak up, suggest ideas, and ask questions without fear of being punished or embarrassed” (2018, p. 15).

From a broad and comprehensive perspective, psychological safety can be understood as the sense of ease felt by the individual in expressing opinions, suggesting ideas, asking questions, challenging, disagreeing, critiquing, voicing concerns, doubts, or fears, pointing out others’ mistakes and acknowledging their own, requesting help, and admitting difficulties, thereby placing themselves in a potentially vulnerable position without fearing repercussions such as embarrassment, humiliation, punishment, retaliation, rejection, judgment, discrimination, or conflict.

Mental Health

According to the APA *Dictionary of Psychology*, mental health is “a state of mind characterized by emotional well-being, good behavioral adjustment, relative absence of anxiety and disabling symptoms,

and the capacity to form constructive relationships and cope with the normal stresses and demands of life" (APA, 2018).

The WHO defines mental health as "a state of complete physical, mental, and social well-being, and not merely the absence of disease or infirmity" (WHO, 1947). In other words, "mental health problems include not only all conditions that constitute mental disorders but also states of emotional distress that affect individuals' mental health, even if not clinically diagnosed as a disorder, including psychological suffering or distress" (Portuguese National Health Council [Conselho Nacional de Saúde], 2019, p. 19).

Literature Review

Psychological Safety in the Workplace

A large body of research demonstrates that workplaces characterized by toxic relationships and low social support have adverse effects on employees' mental health, contributing to stress, burnout, depression, and anxiety (Monteiro & Joseph, 2023). Within this context, the relational dimension of work emerges as a variable of critical importance for mental health outcomes.

Over the past decade, psychological safety has received increasing attention, with the number and scope of published studies growing exponentially (Edmondson & Brandsby, 2023). Google's Project Aristotle, which studied 180 teams over two years, concluded that psychological safety was the most important factor in high-performing teams (Bergman & Schaeppi, 2016, cited in Newman et al., 2017). In line with this, Frazier et al. (2017), in the first review study on the role of psychological safety at work, emphasized a unifying principle: the importance of creating a work environment in which perceptions of interpersonal risk are minimized.

Psychological Safety and Mental Health

Despite the increasing discussion of the impacts of psychological safety on mental health, empirical research in this area remains extremely limited, focusing almost exclusively on burnout.

The study most closely aligned with the objectives of the present research is that of Sasaki et al. (2022), which analysed the associations between employees' psychological safety and their mental health, finding positive associations between these variables. Sasaki et al.'s study included a sample of 400 participants, equally divided between health care professionals and professionals from other sectors. The measure used to assess psychological distress was the Japanese version of the Kessler Psychological Distress Scale (K6), a brief screening tool for symptoms related to depression and anxiety. In this study, psychological safety was negatively associated with psychological distress (and positively associated with engagement, performance, and job satisfaction), demonstrating its importance for employee mental health.

However, the sample in this study was exclusively Japanese, highlighting the need for research with more culturally and professionally diverse samples.

Objectives And Hypotheses

The primary objective of this study was to explore the relationship between employees' psychological safety in the workplace and their mental health, based on the results obtained from a validated measurement scale for each of these constructs.

Based on the literature review, several research hypotheses were formulated. The primary hypothesis is as follows:

Lower levels of psychological safety perceived by employees are associated with poorer mental health outcomes.

Methods

Participants

The study sample comprised 420 professionals from different types of organizations, sectors, and roles, aged between 21 and 79 years, of whom 75.7% were female. In terms of educational qualifications, all participants had completed at least compulsory education, with 81.9% holding a higher education degree. The most represented region was Lisbon (75.7%), followed by the North (10.5%) and Center (8.3%) regions, with 3.1% working abroad.

Concerning work-related variables, the majority of participants worked in the private sector (72.6%) in national companies (65.5%), on a full-time basis (89.3%) and in person (54.5%). Participants were distributed across all 26 occupational sectors listed in the questionnaire, with the education/teaching being the most represented (14.3%), followed by health care (11.0%).

With regard to hierarchical level, 41% of participants held middle-management positions, followed by first-line directors and intermediate supervisors (33.1%), operational staff (19.8%), and senior management (6.2%).

The sample size exceeded recommendations in the literature concerning the participant-to-item ratio in the measurement instruments used, thereby addressing the call by the developers of the Psychological Safety Scale to replicate its administration with larger samples (O'Donovan et al., 2020).

Measures

Psychological Safety Scale (PSS) — O'Donovan et al. (2020)

This instrument comprises 19 items across three dimensions:

1. **Leader** (psychological safety in relation to the team leader)
2. **Peers** (psychological safety in relation to colleagues)
3. **Team** (psychological safety within the team as a whole)

Originally developed in English, the scale was translated and adapted into Portuguese in accordance with rigorous methodological standards and best research practices described in our study

This instrument demonstrated high internal consistency in both the original sample (Irish and Dutch health care professionals) and the present Portuguese sample, confirming its reliability for assessing the construct.

Mental Health Inventory (MHI) — Ribeiro (2011)

Comprising 38 items, the MHI is organized into five subscales grouped into two main dimensions:

1. **Psychological Well-Being** (subscales: Positive Affect and Emotional Bonds)
2. **Psychological Distress** (subscales: Anxiety, Depression, and Loss of Emotional/Behavioral Control.

This questionnaire has demonstrated high internal consistency in both the Portuguese validation study and the present sample. Its reliability enables a rigorous analyis of participants' psychological well-being and psychological distress, making it suitable for exploring relationships with contextual variables such as psychological safety in the workplace.

Procedure

Participants completed an online questionnaire comprising the measurement instruments, demographic questions, and informed consent.

Data collection took place between February and April 2024, with participation requests primarily disseminated via LinkedIn.

The inclusion criteria were: being of legal age, working in an organizational context, and performing functions within a team (with at least two colleagues).

Data Analysis

The study employed a quantitative and multivariate approach, described in greater detail in the full version. Data were analyzed using descriptive and inferential statistics, and the psychological safety scale was subjected to structural analyses.

RESULTS

A significant positive association was identified between employees' psychological safety and their mental health. Psychological safety proved to be an important predictor of reduced psychological distress, thus confirming the study's primary hypothesis.

In other words, the higher the participants' psychological safety- whether in terms of overall scores, with respect to the team leader, colleagues, or perceived at the team level - the better their mental health outcomes (i.e., lower levels of anxiety, depression, and loss of control, and higher levels of positive affect and emotional bonds).

These results are consistent with those reported by Sasaki et al. (2022), in which psychological safety showed positive associations with good mental health. They are also in line with the findings of the American Psychological Association's Work in America Survey (APA, 2024), according to which 84% of employees with high psychological safety reported mental health ranging from good to excellent, compared with only 67% of those with low psychological safety

Other findings of interest include:

a) Employees at higher hierarchical levels reported significantly higher perceptions of psychological safety and better mental health indicators compared to those in lower-level positions;

b) Psychological safety in relation to leadership emerged as the strongest predictor of distress, highlighting the critical role of the leader-subordinate relationship for employees' mental health.

CONCLUSIONS

This study aimed to contribute to research on the relationship between psychological safety and mental health in organizational contexts, an area in which literature remains scarce.

The results support the hypothesis that higher levels of psychological safety are associated with better mental health and reinforce the importance of promoting psychologically safe work environments, with direct benefits for employees' mental health and well-being.

DISCUSSION

Limitations

This study is not without limitations. These include the use of a convenience sample, which limits the generalizability of the results, a notable gender imbalance, and the cross-sectional nature of the research design, which precludes the establishment of causal relationships between variables.

Future Research

Considering these findings, the following directions for future research are proposed:

a) Conducting longitudinal studies to establish causal relationships between variables;

b) Undertaking a more in-depth analysis of the psychological effects of low psychological safety;

c) Exploring typologies of organizational silence and their relationship with ethical dimensions;

d) Investigating psychological safety in specific situational contexts;

e) Examining the role of moderating and mediating variables;

f) Formally validating the O'Donovan et al. (2020) Psychological Safety Scale for the Portuguese population;

g) Analyzing the impact of different work arrangements (on-site, hybrid, and remote) on psychological safety and mental health.

Practical Implications

This study underscores the need for organizational decision-makers to adopt an integrative approach to mental health, embedding it within organizational culture. Active involvement of leadership in promoting psychological safety is recommended through practices such as continuous assessment of organizational climate, training on mental health, fostering a culture of feedback, and involving employees in decision-making. It is highlighted that managers often underestimate perceptions of insecurity within their teams, making it imperative that they develop awareness and take action.

By bringing together a concept from Organizational Psychology and a construct from Clinical Psychology, the study aspires to bridge these two fields, highlighting the benefits of greater cooperation and interdisciplinarity, as well as the role of clinical psychology interventions within organizations, whether through counselproging, psychotherapeutic support, or educational initiatives designed to develop emotional skills and reduce stigma. associated with mental health.

Author's note: The following is a transcription of the closing remarks delivered at the Congress, reflecting on the role of the group as a space of integration, protection, and collective care.

Closing Remarks from the Congress Presentation

In this work, we have set down a number of recommendations and practical suggestions for organizations, also drawing on nearly 35 years of experience in corporate settings.

Here and now, it bears remembering the importance of cultivating a relational field where mistakes can be accepted, differences welcomed, and emotional integrity protected.

I believe that psychological safety is a barometer of an organization's relational climate; the emotional fabric that either sustains or threatens the psychological health of teams.

Its absence, particularly in workplace interactions among peers, leaders, and subordinates, constitutes a form of distress associated with significant psychic vulnerability.

Perhaps, in times of social and organizational division, the greatest gesture of respect for collective mental health lies in creating spaces where we can exist together without fear of breaking the bonds that connect us to others and to the group that contains and sustains us. Within the group - that living mirror of affects and differences - we truly find ourselves and grow. Authenticity, after all, is a path towards health.

"*Where there is historical silence, find space for speech*," as Professor Emerson Du Bu [keynote speaker at the Congress] reminded us.

Amidst the malaise of our times, the responsibility of caring for one another remains ours.

In an increasingly complex organizational landscape, psychologists play a fundamental role in deciphering invisible dynamics, providing emotional support during periods of change, integrating workplace culture with mental health, and fostering safer, more humane, conscious, and ethical environments. They are attuned to existential suffering and the emotional depth underlying behaviors, attitudes, reactions, and relational dynamics; they explore silences and restore meaning

The perspective I bring here today is not a psychoanalytic one - that is not my vantage point. It is simply that of someone seeking to understand the human being within their space of belonging and relation.

I offer this humble contribution for your consideration, submitting it to your gaze and your valuable perspective, confident that you will have much to add, question, and enrich.

And in the hope that this work, modest though it may be, may serve as a meeting point between bodies of knowledge, practices, and people.

Psychology thrives in dialogue, and the human being is renewed in encounter.

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