



Depression in the Workplace: Breaking the Stigma and Fostering Mental Health

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Introduction

The workplace, often viewed as a hub of productivity, innovation, and collaboration, is also a setting where mental health can be profoundly impacted. Depression, a pervasive mental health condition, silently affects many employees, influencing not only individual well-being but also organizational dynamics. This article explores the challenges of depression in the workplace, the impact of stigma, and strategies for fostering mental health to create supportive work environments [1,2]

Understanding Post-Traumatic Stress Disorder

Depression is a prevalent global health concern, and the workplace is no exception to its reach. According to the World Health Organization, depression is a leading cause of disability worldwide. In the workplace, it manifests as decreased productivity, increased absenteeism, and strained interpersonal relationships, affecting not only the individual but also the overall organizational climate [3]. Despite its prevalence, depression in the workplace often remains shrouded in stigma. Employees may fear judgment, discrimination, or professional repercussions if they disclose their mental health struggles. This silence perpetuates a culture where mental health concerns are viewed as a weakness rather than a legitimate health issue, hindering open conversations and support systems [4]

Depression can significantly impact an employee's ability to perform effectively. Concentration difficulties, fatigue, and a pervasive sense of hopelessness can impede productivity. The quality of work may suffer, deadlines might be missed, and creativity may be stifled. Left unaddressed, depression in the workplace can contribute to a cycle of underperformance, further exacerbating the individual's mental health challenges [5]. Breaking the stigma surrounding depression in the workplace requires a multifaceted approach. Companies must foster a culture that prioritizes mental health, encouraging open conversations and ensuring that employees feel supported rather than judged. Here are key strategies to create a supportive work environment [6].

Advancements in bioengineering, stem cell research, and molecular biology are driving innovation in skin appendage regeneration. Emerging technologies like 3D bio printing, CRISPR/Cas9 gene editing, and advanced biomaterials offer unprecedented opportunities to recreate complex skin appendages with precision. The concept of personalized medicine is gaining traction in skin appendage regeneration [7, 8].

Tailoring treatments based on an individual's genetic makeup, environmental factors, and specific needs could optimize the success of regenerative therapies. Ethical considerations, including patient consent, equitable access to advanced treatments, and the potential social impact of altering physical appearance through regenerative interventions, require thoughtful examination in the context of skin appendage regeneration [9, 10].

Conclusion

Addressing depression in work place, is not just a matter of wellbeing but with the right strategies and support, individuals can cope with symptoms and embark on a path towards recovery. By seeking breaking the stigma of mental health fostering the culture of mental health, the benefit extend a support individuals employees with PTSD can improve their overall well-being and quality of life. It is important to remember that everyone's journey is unique, and recovery takes time. With patience, self-compassion, and perseverance, it is possible to live a fulfilling life.

References

1. Seaton CL, Bottorff JL, Oliffe JL. Mental Health Promotion In Male-Dominated Workplaces: Perspectives Of Male Employees And Workplace Representatives. *Psychol Men Masc.* 2019;20(4):541.
2. Edwards AM, Kotera Y. Mental Health In The UK Police Force: A Qualitative Investigation Into The Stigma With Mental Illness. *Int J Ment Health Addict.* 2021;19:1116-34.
3. Johnston MS, Ricciardelli R, McKendy L. Suffering In Silence: Work And Mental Health Experiences Among Provincial Correctional Workers In Canada. *Corrections.* 2021:1-9.
4. McCann TV, Lubman DI, Clark E. The Experience Of Young People With Depression: A Qualitative Study. *J Psychiatr Ment Health Nurs.* 2012;19(4):334-40.

5. Palpant RG, Steimnitz R, Bornemann TH. The Carter Center Mental Health Program: Addressing The Public Health Crisis In The Field Of Mental Health Through Policy Change And Stigma Reduction. *Prev Chronic Dis.* 2006;3(2).
6. Williams L, Gorman R, Hankerson S. Implementing A Mental Health Ministry Committee In Faith-Based Organizations: The Promoting Emotional Wellness And Spirituality Program. *Soc Work Health Care.* 2014;53(4):414-34.
7. Søvold LE, Naslund JA, Kousoulis AA, et al. Prioritizing The Mental Health And Well-Being Of Healthcare Workers: An Urgent Global Public Health Priority. *Front Public Health.* 2021;9:679397.
8. Kassen J. Beyond Burnout: Educators' Experiences Of Mental Health Issues, And Stigma In The Workplace.
9. Pinfold V, Toulmin H, Thornicroft G. Reducing Psychiatric Stigma And Discrimination: Evaluation Of Educational Interventions In UK Secondary Schools. *Br J Psychiatry.* 2003;182(4):342-6.
10. Hassanein AE. Promoting Mental Treatment in the Arab World