COMMENTARY

Exploring Pathways to Joy in the Workplace: Strategies for Enhancing Employee Well-being

Nandita Bhatnagar[1], Aayushi Sharma[2], Sonu Goel[3]

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Abstract

Joy in the workplace is an essential component of healthcare professionals' well-being and a critical factor in ensuring high-quality patient care. In healthcare settings, demanding workloads, long hours, limited recognition, and insufficient emotional support often contribute to burnout, stress, and job dissatisfaction. The paper highlights the concept of joy at work and its role in enhancing employee engagement, resilience, and organizational performance. Using the Institute for Healthcare Improvement (IHI)'s Joy in Work Framework, the paper identifies key strategies, including understanding what matters to staff, removing barriers to joy, fostering teamwork, engaging employees in decision-making, and promoting a culture of recognition and respect. The framework also emphasizes organizational change over individual interventions, focusing on creating environments where healthcare workers feel valued, supported, and empowered. To conceptualize this context, a hypothetical case scenario is presented from a tertiary hospital illustrating the practical application of the strategies, demonstrating how leadership-driven, collaborative actions can significantly improve workplace culture and staff morale. This manuscript concludes by emphasizing and promoting joy in the workplace for the organizational benefit and enhancing productivity and efficiency. These measures can reduce burnout, increase job satisfaction, and enhance retention, ultimately improving patient outcomes. By integrating well-being into the fabric of healthcare delivery, institutions can create thriving workplaces that benefit both staff and patients.

Keywords: Burnout prevention, Institute for Healthcare Improvement Framework, Joy at workplace, Healthcare, Well-being.

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Background

Wellness at the workplace includes emotional, intellectual, physical, spiritual, and social dimensions, expanding an individual's potential to contribute effectively to society.[1] Workplace well-being is linked to individual characteristics and the work environment.[2] It is a sense of prosperity derived from work, influenced by employees' feelings, along with the intrinsic and extrinsic value of their contributions.[3] Well-being at work encompasses positive emotions, satisfaction, and a sense of purpose, incorporating joyful aspects.[4] Joy at the workplace is increasingly being recognized as an internal factor in employee well-being, organizational performance, and resilience; it involves creating environments where employees feel valued, connected, and purposeful. Conversely, in the absence of joy, which often appears as stress, burnout, and emotional exhaustion, studies have shown a strong association with higher levels of suicidal thoughts and an increased risk of suicide among healthcare professionals.[5–7] Feeling joyful at work is related to a high level of professional well-being and correlates with effective time use, improved work quality, better interpersonal relations, and increased innovation.[8] Joy at the workplace is increasingly recognized as essential for employee well-being, organizational performance, and retention.[9] Joy at work extends beyond job satisfaction, encompassing engagement, commitment, and collective attitudes that benefit both individuals and organizations.

Traditionally, mental health in the workplace was focused on illness, but recently, there has been an increasing recognition of the importance of promoting positive mental health through feelings of joy in the workplace. The pursuit of happiness is an essential part of the framework of the United States Constitution. Likewise, the United Arab Emirates implemented a Minister of State for Happiness and Wellbeing and focuses on happiness as a national goal and a happier society. Bhutan introduced the concept of Gross National Happiness (GNH), prioritizing overall well-being over economic growth, and Venezuela has a Vice Ministry of Supreme Social Happiness. These initiatives are indications of a growing recognition of the importance of well-being and happiness as an integral component of societal progress, not solely reliant on economic growth and metrics, with an overall aim to create a more balanced and fulfilling life for their citizens.

In the Indian context, research by Dorairajan and Mala highlighted a similar shift in focus among healthcare professionals. Their study found that happiness, work engagement, and a sense of flourishing are closely linked and play a crucial role in improving both personal well-being and professional performance. They emphasized that enhancing positive mental states, rather than merely reducing distress, can lead to more resilient, engaged, and satisfied healthcare workers.[10,11] However, the growing emphasis on

[1–3]Department of Community Medicine and School of Public Health, Postgraduate Institute of Medical Education and Research, Chandigarh, India

Corresponding Author: Sonu Goel, Department of Community Medicine and School of Public Health, Postgraduate Institute of Medical Education and Research, Chandigarh, India, Phone: +91 1722755220, e-mail: sonugoel007@yahoo.co.in

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happiness often fails to translate into the healthcare sector, where professionals tasked with caring for others frequently struggle to find joy in their own work due to systemic and occupational challenges.

Barriers to Joy in the Healthcare Workplace

While most individuals seek joy and fulfillment in their work, achieving this can be difficult in the demanding environment of healthcare settings.[12] The intense physical, emotional, and social demands of the profession can compromise the personal well-being and joy of healthcare workers.[9] Research across the healthcare professions identifies the recurrent barriers to joy, such as chronic workload and staffing pressures, heavy administrative and documentation burdens, lack of recognition, inadequate material and psychological supports (including access to confidential mental health care), long working hours, and rigid organizational structure.[13–15] These barriers or stressors ultimately lead to the syndrome of "Burnout," which is manifested as emotional exhaustion, depersonalization, and diminished professional efficacy.

Globally, the studies document that between 35 and 54% of healthcare workers in the United States report significant burnout, while in China, 27.7% experience symptoms of depression, anxiety, and burnout, often exacerbated by factors such as demanding workloads, inflexible shift schedules, and high service demands.[16] Studies across Indian hospitals also highlight alarming trends: 56.7% of resident doctors in Mumbai and 39.2% in Nagpur reported burnout, while a North Indian tertiary-care institute found over 90% of doctors experiencing burnout, with 30% showing depression and 16.7% reporting suicidal thoughts. These figures emphasize how chronic stress, poor work-life balance, and negative workplace culture significantly erode the well-being and joy of healthcare professionals, impacting both workforce retention and patient care.[17–19] The consequences of eroded joy and burnout are serious and far-reaching. It has been linked to an increased risk of cardiovascular diseases, reduced life expectancy, and a greater likelihood of experiencing depression and suicidal thoughts.[9] Additionally, healthcare professionals suffering from burnout often face job dissatisfaction, increased absenteeism, and a higher likelihood of leaving their jobs, all of which contribute to higher costs for healthcare organizations.[8,15]

Strategies for Enhancing Employee Well-being in Healthcare

Given the demanding and high-stress environment inherent in healthcare, proactive strategies are essential for fostering well-being and joy in the workplace. This emphasis on well-being not only mitigates issues such as burnout and attrition but also profoundly impacts patient safety and the overall efficacy of healthcare organizations.[20] Consequently, prioritizing the mental and physical health of healthcare workers is not merely an ethical imperative but a critical component for ensuring robust healthcare delivery and organizational performance.[21] Recognizing the profound impact of burnout on the quality of care, it is critical for organizations to implement strategic interventions that promote employee well-being.[22]

This paper explores various evidence-based strategies to cultivate a positive and joyful work environment for healthcare professionals. We used the Institute for Healthcare Improvement (IHI) Joy in Work Framework (Fig. 1),[12] which provides healthcare organizations with a systematic approach to identify barriers to joy and cocreate solutions with staff. The framework emphasizes identifying what matters to staff, removing impediments to joy, using quality improvement methods, and measuring progress. These steps empower teams to codesign solutions and take ownership of their work experience. This method also encourages multifaceted improvements, including better communication, increased resources, and promoting a culture that gives healthcare workers "permission" to prioritize their well-being. Unlike traditional interventions that target individuals, the IHI framework addresses organizational culture, communication, teamwork, flexible scheduling, engaging employees in decisions, reorganizations, rewards, and leadership support. The initiatives in Australia, the United States, and the United Kingdom have demonstrated positive impacts on staff well-being through the use of this framework.[23]

The IHI framework emphasizes strategies such as flexible scheduling and effective workload management, which can significantly reduce burnout and enhance job satisfaction; for instance, Hayakawa et al.[24] reported a drop in burnout from 61 to 4% and an increase in joy from 34 to 86% when such measures were implemented, highlighting the importance of supporting time off and addressing workload redistribution to sustain well-being. Actively engaging employees in decision-making and improvement efforts fosters empowerment, resulting in lasting positive change, as seen in a UK study where enjoyment of work rose by 51% and burnout symptoms fell by 41%. Encouraging self-care, mindfulness, and resilience further helps healthcare workers maintain wellness and productivity, while recognizing staff through praise or rewards boosts motivation, satisfaction, and workplace joy. Finally, cultivating a culture of civility, respect, and safety not only prevents burnout but also enables healthcare professionals to thrive, find meaning in their roles, and contribute positively to organizational success.

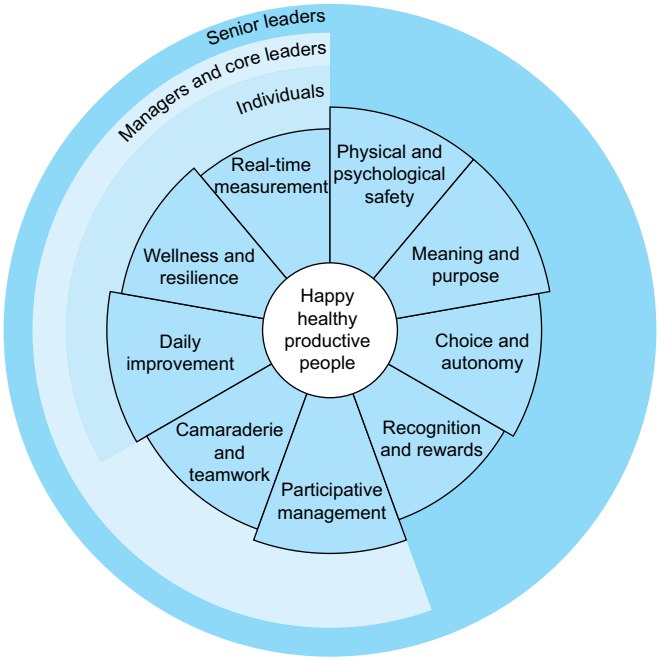

Fig. 1: Institute for healthcare improvement (IHI) joy in work framework

To demonstrate the practical application of the IHI's Joy in Work framework within a hospital context, the following case scenario is presented as a hypothetical narrative developed solely for illustrative purposes. The scenario employs fictional characters and events to provide readers with a clearer, practice-oriented understanding of how the strategies outlined in the framework can be effectively translated into workplace actions.

Case Scenario: Rekindling Joy at a Tertiary Care Hospital

A renowned tertiary care hospital, known for its clinical excellence and high patient turnover, had recently begun experiencing a troubling shift in its work environment. Over the past few months, staff absenteeism had risen noticeably, productivity had declined, and interpersonal conflicts were becoming more frequent. These challenges had started to impact the quality of patient care. Among the most affected were nurses and junior doctors, who showed visible signs of burnout, low morale, and emotional exhaustion.

The Story of Dr Meera: When Passion Meets Pressure

Among the many overburdened junior doctors was Dr Meera Sharma, a newly inducted surgical resident who had entered the medical profession with a deep passion for healing and a strong sense of purpose. However, the reality of working in the surgery department was far from what she had envisioned. She frequently worked shifts exceeding 24 hours, with minimal time for rest or meals. Over time, Dr Sharma began to experience significant emotional and physical exhaustion. Her days merged into nights as she moved continuously between operating theaters (OTs), ward rounds, and case discussions. What she found most disheartening was the absence of communication and appreciation, no debriefings after difficult surgeries, and no emotional support following the loss of a patient.

One day, Dr Meera Sharma had been involved in a series of back-to-back emergency surgeries that lasted several hours. After completing nearly 36 hours of continuous duty, she was briefly resting in the break room with a cup of cold coffee when she received another call to attend a new case. Feeling physically drained, with blurred vision and weakness in her legs, she attempted to make her way to the OT. However, upon reaching the OT hallway, she collapsed from sheer exhaustion. This incident was witnessed by fellow residents and nursing staff, which sparked immediate concern across departments. It was quickly circulated on the hospital's internal social media platform, which prompted widespread discussions about the often-overlooked mental and physical toll of working in healthcare.

The Turning Point: A Senior Steps In

Dr Aarti Mehta, the newly appointed Director of Clinical Services, was deeply moved by Meera's story. A seasoned physician herself, Dr Mehta remembered the early years of her residency and recognized that Meera's breakdown was not an isolated case; it was symptomatic of a systemic problem. Dr Mehta visited Meera during her recovery and spoke to her not just as a supervisor, but as a mentor. Through a series of open conversations, Meera shared how the constant rush, lack of emotional connection, and absence of appreciation had dimmed her once-bright enthusiasm for surgery. Dr Mehta decided that it was time for an institutional change.

Initiation of Change: Project Aanand

Within 2 weeks, Dr Mehta convened a group meeting of representatives from Human Resources, quality & safety, nursing leadership, psychiatry, occupational health, and critical frontline representatives: residents, nurses, housekeeping, and a patient-family advisor. The group was named Aanand (आनंद | joy). Their mission was to revive joy at the workplace, not just through policy, but through everyday practice (Leadership support).

The journey began with listening. Over 3 weeks, the Aanand team spoke to residents in call rooms, nurses during their shifts, and even staff grabbing a quick snack in the cafeteria. They asked a simple but profound question: *"What matters to you?"* The answers poured in: concerns about long working hours, the silence after tough surgeries, feeling unrecognized, and the lack of safe spaces for rest. These voices shaped the blueprint of Project Aanand, which aimed to weave joy back into the fabric of daily work (Identifying what matters).

The first visible change was leadership making itself present and approachable. Dr Mehta and her administrative counterpart started walking the wards every Thursday, talking to staff about what was working and what needed fixing. Meera shared that morning handover meetings between doctors often turned into quick status updates, leaving little room for collaborative discussion. In response, the senior physician suggested dedicating the last 5 minutes to jointly reviewing one challenging case from the past 24 hours, inviting input from all specialties present. Within weeks, this became a norm across departments, and the atmosphere shifted subtly but powerfully (Shared problem solving).

To address physical exhaustion, structural changes were followed. The endless 30-hour shifts were trimmed down with strict duty caps, and every staff member was guaranteed a 10-hour recovery break between shifts. Operating room timers started reminding staff to take a 5-minute break every 2 hours, which was just enough for Dr Meera to enjoy a hot cup of tea mid-shift, something she had not done in months. Unused seminar rooms were transformed into cozy recharge spaces with dim lights, reclining chairs, and healthy snacks. Staff began booking these spaces simply to breathe (Workload management).

To bring teams closer, Aanand introduced weekly "Joy Huddles," where each unit shared one patient success, appreciated one colleague, and suggested a small improvement. Dr Meera was deeply moved when theater nurses publicly thanked her for counseling a family during a tense postoperative wait. Dr Meera shared that the simple words of gratitude rekindled her sense of purpose (Recognition and praise).

Engagement was another cornerstone of Project Aanand. Mini project grants were offered to anyone with ideas to make work easier or more meaningful. A junior nurse's idea of color-coded postoperative drains not only saved time but also inspired others to submit their own innovations. Dr Meera herself joined the scheduling committee, ensuring residents' voices were finally heard when rosters were drawn up (Engaging employees).

The hospital recognized the need for dedicated spaces where staff could talk openly and nurture their emotional well-being. Peer support circles were introduced, allowing small groups to talk about moral distress and grief. Dr Meera, who had been carrying the weight of a recent pediatric loss, found relief after one such session and slept peacefully for the first time in weeks. Mindfulness exercises, mentorship programs, and confidential counseling were

made easily accessible, embedding a culture where self-care was no longer seen as a luxury (Support well-being and peer support).

Within 6 months, the ripple effects were clear. The institute witnessed a 40% increase in job satisfaction, 30% stress levels, and even the corridors felt lighter, filled with conversations and laughter. Families of patients began noticing too, often leaving notes about the kindness and teamwork they witnessed. One patient wrote in a feedback form:

"The doctors not only healed my body but also my mind. It felt like they cared—not just for me, but for each other."

For Dr Meera, the transformation was personal and profound. Her exhaustion score, once a relentless 9 out of 10, has now reduced to 4. She rekindled her old passion for sketching on weekends, something she had not touched since her school days. Most importantly, she felt part of a community that valued her presence and voice. When new interns joined, she proudly spoke about her journey in a session and also introduced them to the practices of Project Aanand.

One year later, at a hospital town hall, Dr Mehta invited Dr Meera to show the Aanand Joy Dashboard, which was an ongoing commitment to track not only clinical outcomes but also staff well-being and workplace civility. The initiative had grown beyond a project; it had become a way of life for the hospital. "*Burnout didn't vanish overnight,*" Dr Meera reflected as she addressed her colleagues. *"But it no longer defines our days. Because we listened, supported each other, and remembered why we're here: to heal and to regain joy.*"

The strategies of Project Aanand, rooted in leadership, recognition, teamwork, and emotional safety, had not just reduced Meera and other staff's burnout but also reignited her passion for her work, proving that with collective action, joy can thrive even in the busiest corridors of healthcare.

Conclusion

Joy and well-being in the workplace are essential for providing good patient care and keeping healthcare teams motivated and healthy. When joy is missing, it can lead to burnout, more mistakes, high staff turnover, and less productivity. These problems affect healthcare workers, the patients, and their caregivers.

The case scenario portrays that small and thoughtful changes, supported by good leadership and teamwork, can make a big difference. They help create a workplace where staff feel valued, supported, and connected. Promoting joy at work needs a strong commitment from the whole organization. It should not just focus on individuals but involve everyone in finding problems and creating solutions. When well-being becomes part of the culture and daily work, it improves staff morale, reduces burnout, and leads to better health outcomes for patients.

Orcid

Nandita Bhatnagar https://orcid.org/0009-0006-2715-9013
Aayushi Sharma https://orcid.org/0009-0008-4141-9170
Sonu Goel https://orcid.org/0000-0001-5231-7083

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