

WHEN CARE MEETS CAPITALISM: ORGANIZATIONAL WELLBEING IN ROMANIA

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ABSTRACT. This paper presents a descriptive qualitative study of organizational wellbeing in Romania, asking: How is the field of workplace wellbeing organized? The analysis focuses on the actors, actions, and tensions that structure this emerging space and considers its broader implications. The theoretical framework draws on Foucault (biopolitics and subjectivation), Thévenot & Boltanski (justification through translation), and Boltanski & Chiapello (The New Spirit of Capitalism), framing wellbeing as a practice of governing subjectivity at the intersection of genuine care and managerial imperatives of efficiency and productivity. Empirical data comes from 12 in-depth interviews with HR professionals, wellbeing specialists, and external service providers. Findings reveal three coexisting worlds of justification: inspired, industrial, and market-based; between which actors translate ideas. Rather than opposing each other, the actors' positions in the process mark different stages in the reform of the spirit of capitalism. Organizational wellbeing thus emerges as a space of tension and collaboration, shaping the “well” employee: high-performing, autonomous, healthy, and engaged. The paper contributes to a critical understanding of organizational wellbeing as both support for employees and a subtle mechanism of control and reproduction of capitalist norms, while mapping its specific Romanian dynamics.

Keywords: wellbeing, organizations, subjectivation, capitalism, sociology.

Setting the Scene: Organizational Wellbeing in Romania

Wellbeing initiatives in the workplace address employees' health in a holistic manner, with the aim of optimizing individual performance and producing positive effects at the organizational level (Dale & Burrell, 2014). Interest in

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employees' wellbeing can also be observed in other historical periods, for example, in the form of paternalistic regulations in 19th-century factories (Reid, 1985). Today, the market built around this interest reaches 6.3 billion USD, brings together specialists from various fields (Global Wellness Institute, 2024), and offers personalized services tailored to the organizational context and employees' needs (Abraham & White, 2017). It is within this context that the phenomenon of workplace wellbeing initiatives has emerged.

The current interest in employees' wellbeing derives from the fundamental role that work plays in their lives. On average, employees spend 9 hours each day at the office, and this time weighs significantly in their overall wellbeing (Chakraborty & Mahanta, 2019). However, an employee's wellbeing is also shaped by life outside of work, so wellbeing initiatives consider both levels: the individual's organizational identity and personal identity (Agarwal, 2020). A high level of wellbeing is one of the important conditions for maintaining motivation at work, which is necessary to achieve performance (Burlakova et al., 2020; Coppoletta et al., 2024). In this way, initiatives are oriented toward the individual's welfare and development, focusing on the choices employees can make to maximize their wellbeing in order to optimize performance and increase productivity. Thus, work becomes the most important aspect of bodily discipline in most contemporary societies, given that the regulations shaping individual behavior transcend organizational boundaries, affecting the private sphere of life as well (Dale & Burrell, 2014). In Foucault's (2003) terms, wellbeing initiatives can be seen as instruments of anatomopolitics.

Employees' need to improve their working conditions, along with the growth of this industry, lead to the introduction of wellbeing strategies as an area of organizational development in an increasing number of companies (Dale & Burrell, 2014). This approach can arise either from employees' voluntary involvement, in an organized manner, to achieve the goal of improving wellbeing, or from management-level decisions. These observations come from empirical reality studied through semi-structured, in-depth interviews with those responsible for implementing wellbeing processes within companies. These individuals can be grouped into three categories: HR employees, fully or partially, formally or informally responsible; wellbeing specialists in dedicated positions; and external service providers. The needs underlying the initiatives are similar from case to case, but the practical approaches of the actors differ. Collaborative relationships are formed between them, shaping a specific field. This also includes other types of actors in secondary roles, such as managers or employees who benefit from the initiatives.

Given this continuously expanding phenomenon of organizational wellbeing, which develops a significant services market and shapes a social interaction space for actors in the field, this study revolves around the research question: How is the field of workplace wellbeing organized in Romania? My aim is to first carry out a descriptive approach, reviewing the characteristics of the initiatives and the actors responsible for them, thus contributing to a clearer picture of the empirical reality as a solid foundation for later analysis through various theoretical lenses. The next objective is to analyze the relationships formed in the field among the actors themselves, who are directly involved in creating the initiatives, while also taking into account secondary actors. The empirical data highlight certain tensions generated by the need for justification through translation between different orders within the field (Thévenot & Boltanski, 2006). Finally, I interpret the systemic implications of these initiatives, considering the creation of the “well” employee model (Dale & Burrell, 2014) through the individualization of solutions (Brown et al., cited in Dale & Burrell, 2014) and individual responsibility (Watson et al., 2023). This instrument of anatomopolitics (Foucault, 2003) contributes to the reproduction of the capitalist system through the transformation of its “spirit” (Boltanski & Chiapello, 2005), with this process of incorporating critique overlapping with that of justification through translation (Thévenot & Boltanski, 2006).

Thus, the present analysis aims to offer a comprehensive descriptive account of the elements that make up the field, the relationships that form within it, and the possible macro-level implications of this phenomenon, applying sociological theoretical lenses. The study may be useful for practitioners, offering a holistic understanding of the activity and highlighting areas that could be improved. For the scientific community, the paper contributes by developing a specifically sociological way of understanding a constantly expanding reality, critically problematizing the contemporary phenomenon, and analyzing possible micro- and macro-level implications, while harmoniously integrating empirical material and specialized literature.

Tracing Wellbeing: Theoretical Pathways and Critical Lenses: The Concept of Wellbeing

Conceptualization

The concept of workplace wellbeing is defined in various ways in the literature, reflecting its complexity and multidimensionality, as well as the early stage of formation of this field of actions and initiatives. Conceptual discrepancies arise even from the terminology—literature also frequently uses

the terms “wellness” (Global Wellness Institute, 2024, p. 65) or “corporate welfare” (Coppoletta et al., 2024, p. 1027) to refer to the same concept.

Broadly speaking, workplace wellbeing is described as a biopsychosocial construct that encapsulates parameters related to employees’ physical, mental, and social health. At the same time, this composite state lies at the intersection of individual and organizational wellbeing, as the positive aspects of individual wellbeing—physical health, emotional satisfaction, personal development, adoption of a set of values, and prosperity—affect employee performance and, therefore, the performance of the company (Dale & Burrell, 2014).

Dimensions

Regarding its operationalization, studies tend to converge on three main pillars: the physical dimension, the psychological dimension (including mental and emotional aspects), and the social dimension (Burlakova et al., 2020; Chakraborty & Mahanta, 2019; Dale & Burrell, 2014). Additionally, some authors include further dimensions, such as financial health or the individual’s professional development (Burlakova et al., 2020).

Context and Evolution

The Global Wellness Institute defines the wellbeing market in terms of “employer expenditures on programs, services, activities, and equipment aimed at improving their employees’ health and wellness” (Global Wellness Institute, 2024, p. 55). Before becoming this seemingly innovative phenomenon—reaching a market value of USD 6.3 billion in 2023 (Global Wellness Institute, 2024)—interest in employees’ wellbeing had existed in the form of occupational health and safety regulations. With the outsourcing of production from Western societies to regions with cheap labor and weak government regulations, the most severe cases of “unwellness”—poor working conditions associated with health risks, injuries, or abuses—were eliminated (Dale & Burrell, 2014).

A pivotal moment in the evolution of the wellbeing field came with the COVID-19 pandemic in 2020, which reshaped the collective relationship with illness and heightened awareness of the importance of both physical and mental health. During lockdown, many work meetings began with a “wellness check-in” in which employees’ health status was reviewed. At the same time, performance standards were lowered in some companies to adapt to the difficult context, in a manner perceived as genuine (Nayani et al., cited in Watson et al., 2023). Following the pandemic, a “culture of care” emerged (Corbera, cited in Watson et al., 2023), in which organizations’ concern for employees’ wellbeing acquired

a central role (Watson et al., 2023). This is reflected in current investments in projects promoting mental health, which has become a priority area for many employers (Global Wellness Institute, 2024).

The Field of Wellbeing

The wellbeing market is dynamic and continually expanding, integrating an increasingly diverse set of actors (Abraham & White, 2017). Interest in workplace wellbeing is shared across different stakeholder groups (Dale & Burrell, 2014), which collectively form social networks composed of both actors and actions—effectively constituting a distinct social field.

Companies are increasingly engaged in this area—from isolated actions to global strategies—wellbeing has become an integral part of business plans (Chakraborty & Mahanta, 2019; Coppoletta et al., 2024). Specifically, workplace wellbeing programs aim to inform, educate, and motivate employees to adopt a healthier lifestyle. They include a variety of services, products, or platforms, such as medical check-ups, gym memberships, nutrition workshops, counseling services, and more. Companies also invest in reconfiguring office spaces by optimizing lighting, air quality, or thermal comfort (Global Wellness Institute, 2024). In most cases, HR departments are responsible for coordinating wellbeing initiatives (Abraham & White, 2017), aligning their objectives with broader departmental and organizational strategies (Chakraborty & Mahanta, 2019).

While some companies design and manage their own wellbeing programs internally, a significant and growing sector of specialized service providers has emerged (Global Wellness Institute, 2024). These providers are compelled by market pressures to diversify their portfolios and adapt to the new ways in which wellbeing is imagined and expected, as part of an integrated health culture. Their teams often combine project managers, marketing professionals, and health experts, offering consultancy and strategic support to organizations in implementing tailored solutions (Abraham & White, 2017).

A useful lens for understanding the wellbeing field is offered by Thévenot and Boltanski's (2006) social theory of "worlds of justification," which conceptualizes society as composed of multiple orders of worth, each providing a distinct logic for understanding the world, guiding action, and legitimizing decisions. While they identify six such "worlds," the workplace wellbeing field can be meaningfully interpreted through three: the industrial world (corporations), the inspired world (initiative creators, both internal and external), and the market world (service providers).

The industrial world presents an order based on efficiency and performance. Its components, including human resources, are valuable to the extent that they align with productive logic and deliver the expected output. People become surplus when they are no longer productive, fail to cover sufficient workloads, or face issues such as medical conditions, low motivation, or insufficient training. In the wellbeing field, this world could explain the perspective of company leadership and management, responsible for approving programs aimed at employees' wellbeing.

The inspired world centers on creativity and unrestrained expression. Here, the valued individual is one who can express themselves fully and pursue perfection and happiness, contributing positively to the community through their own vision. Within workplace wellbeing, this translates into initiatives aimed at achieving comprehensive employee wellbeing, often driven by passionate internal staff or committed external partners.

Finally, the market world is founded on competition, and actions are driven by the individual desire for success. Valued individuals are those who embody the entrepreneur archetype—constantly in motion, adaptable, and successful through accumulated capital and valuable assets. In the wellbeing sector, this logic drives service providers who must continually innovate and differentiate their offerings to maintain market position, reputation, and clientele.

Critical Perspectives on the Phenomenon

While the emerging field of organizational wellbeing has gained substantial attention, critical perspectives in the literature point to its potential limitations and dysfunctions. Wellbeing initiatives often address problems generated by the very nature of contemporary work and its unrealistic demands—such as excessive workloads or rigid deadlines—ameliorating or normalizing their effects without tackling the structural causes underlying employee distress and ill healths (Wallace, cited in Watson et al., 2023). In doing so, the practice of wellbeing overlooks the structural causes of problems affecting employees' lives and health, focusing instead on correcting individual “faulty” attitudes, with the ultimate aim of increasing productivity and efficiency (Watson et al., 2023). This tendency aligns with the broader trend toward the individualization of labor relations (Brown et al., cited in Dale & Burrell, 2014). Under this logic, the individual becomes responsible for their own health within a productivity-oriented framework, and wellbeing becomes a managerial imperative, blurring the boundary between professional and personal life (Dailey et al.; Dale & Burrell, cited in Watson, 2023).

Through such interventions, organizations contribute to constructing a standardized image of the “well” employee—someone expected to be healthy in every respect, making optimal use of the resources provided by the company (Goss; Haunschild, cited in Dale & Burrell, 2014; Watson et al., 2023). The “well” employee is physically and mentally fit, willing to contribute positively to the workplace (Dale & Burrell, 2014), actively engaged in personal development (Costea et al., cited in Dale & Burrell, 2014), and treats wellbeing as a necessary skill for building a successful career (Maravelias, cited in Dale & Burrell, 2014). Failure to meet this standardized image is framed as a personal shortcoming, linked to insufficient effort. This perspective can lead to stigmatization or exclusion. In this context, individuals from vulnerable, already-stigmatized groups—such as those facing mental health challenges—may develop “chameleonic” forms of resistance, aiming to conceal anything that could undermine their image as a “well” employee and thus as sufficiently productive (McCabe & Elraz, cited in Watson et al., 2023).

Within this logic, a mechanism of control becomes visible. This can be understood as part of a modern technology of governance, in which, according to Michel Foucault’s (2003) theory of biopower, power is exercised not through overt coercion, but through the regulation of individuals’ health, productivity, and behavior. For Foucault, biopower operates through two components: biopolitics—global interventions regulating bodies at the societal level—and anatomopolitics—the individual disciplining of the body to optimize and maximize performance. Contemporary wellbeing can be seen as the latest managerial trend in exerting control over employees’ bodies and minds for productivity purposes (Wallace, cited in Watson et al., 2023), through mechanisms of subjectivation (McGillivray, cited in Dale & Burrell, 2014). By internalizing the normative organizational discourse on wellbeing, over time, power shifts from being an explicit, external coercion to becoming an internalized force within each employee. The logic guiding and shaping their behaviors remains that of the industrial world, which values efficiency and productivity (Thévenot & Boltanski, 2006). In this way, wellbeing initiatives become instruments of anatomopolitics, subjectivating bodies by cultivating an active self in accordance with the “well” employee archetype.

Possible Macro-Level Implications

At the macro level, the current movement mobilizing organizational resources toward improving employees’ wellbeing can be analyzed through the lens proposed by Boltanski and Chiapello (2005) in relation to the reproduction of the capitalist system. The authors conceptualize the “spirit of capitalism” as the set

of individual and collective justifications that sustain the system's legitimacy, adaptability, and continuity. These justifications combine Weber's notion of work as a vocation (*Beruf*) inspired by higher purpose with Hirschman's emphasis on collective motivations serving the common good. The "spirit" becomes socially operative when it is widely shared, acquiring the status of common sense.

As an example, the authors examine how the social and artistic critiques of the 1960s and 1970s in the United States—targeting inequality, alienation, and lack of autonomy—were absorbed into capitalism through a flexible reorganization of work and the promotion of values such as autonomy, creativity, and mobility. This integration of critique allowed capitalism to present itself as a more humanized and individually responsive system, without abandoning the logic of accumulation. The transformation, however, was largely cosmetic: it did not eradicate the inequalities or alienation identified by critics but rebranded them under new ideals—autonomy, flexibility, and self-realization—leaving the exploitative structure intact.

In this sense, one can assess whether contemporary wellbeing initiatives remain faithful to their original aims or become vehicles for the integration of critique in ways that serve systemic reproduction. Moreover, the incorporation of critique can be seen as a process whose stages are reflected in the evolution of justifications between "worlds" (Thévenot & Boltanski, 2006).

Walking the Field: Research Design and Methodology

This study employs a qualitative research design, chosen for its capacity to explore the investigated phenomenon from the perspective of those directly involved in workplace wellbeing initiatives. By focusing on the meanings attributed by the actors themselves, the approach aligns with the study's descriptive aims and allows for flexible data collection—an advantage when examining a rapidly evolving field whose contours cannot be fully anticipated (Bryman, 2012).

The chosen method was the semi-structured in-depth interview, which facilitates interaction between researcher and respondent (Babbie, 2010). This method seeks to capture the subjectivity of actors through a non-directive approach (Mucchelli, 2002). Its main advantage lies in its flexibility: the data collection process is directly shaped by the personal input of interviewees, who are free to develop various narrative threads starting from the central topics of the study (Bryman, 2012). For the wellbeing field, where specialists have diverse backgrounds and responsibilities, this type of interaction brings forward unique contributions, sometimes impossible to predict. A semi-formal context and the creation of a trust-based environment support the collection of detailed

information. A potential limitation, however, is participants' reluctance to share in-depth reflections when engaging with an unfamiliar researcher in a new setting (Iluț, 1997). To address this, interviews were conducted online, allowing respondents to choose the most comfortable time and environment, with anonymity and confidentiality guaranteed in the analysis.

The study population comprised HR employees with formal or informal wellbeing responsibilities, wellbeing specialists, and wellbeing service providers. This category is relevant to the chosen topic as they are directly involved in the creation and delivery of wellbeing initiatives, and the study focuses on their activities and perceptions as specialists. Snowball sampling was used to access the dense, well-connected network of wellbeing professionals (Bryman, 2012).

The research instrument was a semi-structured interview guide, adapted for two groups: internal actors (HR and wellbeing specialists) and external actors (service providers). While the same thematic dimensions were addressed, question phrasing was tailored to reflect the specificities of each role. Broad, open-ended questions were followed by targeted prompts to encourage elaboration.

The dimensions addressed were:

- Professional activities related to wellbeing initiatives
- Current wellbeing actions and their evolution over time
- Collaborations with other actors in the field
- Personal views on workplace wellbeing

Data were collected between March 12 and May 2, 2025, via 12 online, live video semi-structured interviews averaging 50 minutes in length. The sample included five HR employees, five wellbeing specialists, and two service providers. Data were analyzed thematically to identify patterns and divergences. To protect participant confidentiality, codes were assigned: R1–R5 for HR employees, W1–W5 for wellbeing specialists, and F1–F2 for service providers. The numerical codes carry no hierarchical meaning and serve solely for reference purposes.

Stories of Wellbeing: Empirical Insights

The Actors

Stakeholders Involved

In the organizations studied, responsibility for workplace wellbeing rests primarily with two internal categories: specialists in dedicated wellbeing roles and Human Resources (HR) staff formally or informally engaged in such initiatives.

Additionally, external service providers operate as significant actors in the wider wellbeing ecosystem.

Wellbeing specialists, with titles such as Wellbeing Lead (W1), Wellbeing Coordinator (W2), Wellness Initiatives Leader (W3), or Wellbeing Designer (W5), appear in organizations that treat wellbeing as an integral part of their organizational development strategy. These specialists are responsible for identifying employee needs, developing and implementing strategy, and collaborating with service providers. The teams they work in are usually small, numbering between two and six members. Their roles are well defined, and their relationship with leadership is direct, with each team including at least one member of senior management.

Among HR specialists, two types of involvement can be distinguished. The first is formal, where employees in divisions such as Learning & Development or Employer Branding receive clear wellbeing-related responsibilities as a result of directives from higher, usually global, levels in multinationals. In this context, their duties focus mainly on strategy development, monitoring initiatives, and managing budgets. The second is informal, where involvement is voluntary, arising from personal initiative and without compensation. In both cases, HR frequently collaborates with employee communities organized around shared interests—such as sports, reading, or creative activities—that actively contribute to developing a positive organizational climate.

“I support communities because we people, in general, are born and raised through community—deep down in our souls, the idea of community exists, and we feel better when we share the same values and passions.” – W4

This collaborative mode of organization is considered natural, as communities are a central element of human life. Employees engage in such processes because the activity brings them personal satisfaction and allows them to invest time in their passions. However, in some companies, participation in such groups is essential for hierarchical promotion, which drives higher involvement.

“Volunteers are top performers... They say: ‘When work gets hard, I actually enjoy organizing the book club, because it relieves my stress.’” – W3

“We draw energy from each other and from ourselves, and because we care about these topics.” – R1

Finally, service providers have teams made up of administrators of financial, logistical, or human resources, while specialists in areas such as nutrition or psychology are contracted as collaborators. The core of these

companies is composed of professionals specialized in managing, designing, and selling programs, and their work consists mainly of consultancy for companies—identifying problems and offering tailored solutions.

Conceptions of Wellbeing

Actors from all three categories seem to share a common understanding of wellbeing. They all adopt a holistic approach, viewing wellbeing as the employee's overall state of health, determined by several dimensions. Primarily, they refer to physical, psychological, and social wellbeing. This integrated view encompasses both professional and personal spheres. Programmatic approaches vary depending on organizational maturity: while some companies base initiatives on three core pillars, others adopt frameworks with five, seven, or even nine dimensions, expanding into areas such as financial literacy, professional growth, spirituality, or emotional intelligence.

“Things are developing in many directions—if you research the topic, you’ll now find that there are N pillars of wellbeing.” – F1

HR respondents tend to conceptualize wellbeing in terms of business indicators, such as employee retention or job satisfaction. Beyond its holistic basis, they justify its importance in terms of figures and effects on workforce strategy. Some interviewees emphasized the link between wellbeing, performance, and retention:

“If someone isn’t okay with themselves and isn’t okay at work, there’s no point expecting them to perform—they won’t.” – R2

“I can tell you for sure—someone who doesn’t feel good won’t stay.” – R5

Wellbeing specialists, meanwhile, tend to produce deeper analyses, identifying business gaps and needs through indicators such as the most frequent medical leave codes, the number of leave requests, etc. They address the underlying dysfunctions that negatively affect employees’ wellbeing and play a strategic role in organizational development, aiming for long-term transformations and emphasizing prevention.

“The effects of such a job might not be seen in the same year you do it, but maybe five to ten years later, so we focus more on the proactive side, making sure everything is in order.” – W1

Service providers complement this organizational improvement effort by offering comprehensive solution packages. They act as a bridge between companies identifying needs and specialists prepared to address them. Providers also develop necessary tools, such as apps, programs, or platforms. They adapt to the perspectives of client companies to provide the resources they need and keep up-to-date with market developments, holding deep expertise in the field.

Finally, all specialists share a similar view regarding whether wellbeing actions are “genuine” or merely tools for employer branding. They stress that initiatives should meaningfully address the needs of those they serve and have significance for them:

“I think that’s important—if an action is taken, it should have meaning for me and significance for the other person.” – R1

They should also produce deep change, addressing structural dysfunctions at all levels of the organization:

“That’s the difference—a real wellbeing program works not just to give employees something as a perk or benefit, but to make changes in their lifestyle. And to make changes at the organizational level, for top and middle management too—allowing people to take breaks, to have lunch breaks, to exercise, to have flexible schedules.” – F2

Challenges Encountered

All actors report facing similar structural and operational challenges. The most common is the need to justify wellbeing initiatives to management, particularly in the early stages of program development. In many cases, interviewees described having to repeatedly advocate for the necessity and benefits of wellbeing, often in the context of negotiations over resources:

“I had to do a lot of convincing with managers to make them understand the benefits and necessity of wellness actions.” – W2

Depending on their position along this journey, some actors still face resistance, while others less so. Building a collaborative relationship with management is crucial, as it plays a decisive role in approving actions and allocating resources. For employees informally involved in these activities, financial, time, and human resources are extremely limited, since their work falls outside formal job requirements and priority budgets.

“(Managers) care about it, and it comes up in the survey, but we do encounter some resistance—for example, when we need a budget.” – R1

Their work is also hindered by the bureaucratization of approval and evaluation processes. In companies where wellbeing is not formally integrated into organizational development strategy, the approval process can be lengthy. Some individuals address this by organizing low-budget actions while awaiting formal approval.

Another common challenge is low participation from colleagues in organized activities. This is particularly frustrating as actions are designed based on employee-expressed needs and should align with their preferences. Interviewees attribute this to factors ranging from personal relevance—no program suits everyone—to structural constraints such as insufficient breaks or excessive workloads. Adaptations include offering activities online, adjusting schedules, and diversifying topics to engage different interest groups. They also note that wellbeing actions target deep lifestyle factors, and change is not easily accepted or implemented, which can create a gap between expressed interest and actual participation.

“People want to, and it shows in their personal life—you know it’s good to exercise, eat healthy, take care of your health—but in practice, when it’s time to do it, they don’t.” – R1

Finally, specialists point to the challenge of keeping actions relevant amid macro-level organizational changes, such as generational shifts, an increase in younger employees, and the aging of the workforce. This is navigated through constant diversification of activities and ongoing learning to implement new solutions.

The Actions

Core Pillars

When it comes to the actions themselves, these are fairly uniform across the analyzed cases. In terms of physical health, programs include health subscriptions to private providers, on-site sessions with physiotherapists or massage therapists, yoga, dance, and fitness classes organized either at the company headquarters or in a secondary location, nutrition and healthy lifestyle workshops, as well as encouragement to participate in sporting events such as marathons.

Regarding mental health, the resource investment is considerable. Implemented actions include free sessions with psychologists, counselors, or coaches, workshops with specialists in the field, and access to dedicated platforms.

As for social health, the focus is on activities that bring employees together, such as board game nights or team-building activities, as well as on activities that connect them with the community, with volunteering representing an important direction.

Field Trends

Actors in the field maintain an open perspective and adapt to the changes that inevitably occur. As one of them mentions: “The only constant is change” – W1.

In addition, the macro-social context, as well as the individual context, has a significant impact on this activity. Employees’ wellbeing is influenced by external situations such as the pandemic or war, but also by events occurring in their private lives. Thus, wellbeing-related actions need to keep pace with the difficulties employees face outside of work as well. In practice, the employee is viewed as a whole, and specialists’ efforts aim to address as many of their needs as possible, even when these do not originate directly in work-related issues. For example, parenting workshops or events that facilitate spending time with children are organized.

“Wellbeing is somewhat like the wind—we as people go through different states and events that impact us. And here I’m not referring only to events within the company, but also to external ones – like the pandemic, like the war, which is still ongoing; these are things that have an impact on us. No matter what, we are employees, but we are also human beings. Any negative impact outside inevitably spills over into work” – W4.

A notable emerging trend is preventive medical screening. Employers increasingly recognize the value of early detection in maintaining employee health, organizing onsite campaigns for cardiovascular and oncological risk screening, and providing both information resources and medical consultations. This reflects a return to wellbeing’s original focus on physical health—while extending it to encompass the employee as a whole person.

Team Workflows

Regardless of actor category, program development generally follows the same cycle. They start by capturing employees’ needs through informal conversations, official surveys, and participatory observations. Next, companies with a high

level of maturity in this strategic direction build annual strategies, segmented into quarters, months, and weeks, then assign relevant themes to each period.

Wellbeing service providers play a strategic support role, offering consultancy and practical solutions tailored to the needs presented by the company, through tools and specialists.

Subsequently, actions are conceptualized, and responsibilities are assigned. When it comes to evaluating their effectiveness, at the most basic level, employee participation and feedback are analyzed. In addition, some companies assess the impact on employees' behavior, monitoring indicators such as sick leave (number of days and medical codes) and changes in the Net Promoter Score.

Common Need Hierarchy

Similarly, companies show a successive chain of needs being addressed. In companies with limited resources and opportunities, efforts focus on improving the physical workspace. Once this need is met, specialists shift their focus to employees' mental health, through therapy sessions or through hiring of counselors and coaches. In parallel, emphasis is placed on developing the social side, through actions that bring the community together.

Only in companies where all these three levels are satisfied do specialists turn their attention to systemic reforms – either at the institutional level or at the general legislative level. In this way, a clear hierarchy of wellbeing levels emerges, which must be addressed sequentially, and these levels also influence the perspectives and possibilities of the specialists who design these actions.

The Field

Network Structure

Regarding collaborations within the field, these form dense and compact networks. Being an emerging field and one not formally recognized in most companies, specialists who work in it tend to know each other personally. In most cases, the main nodes of connection are represented by the main wellbeing service providers on the market. As one interviewee from this category states, the number of providers offering complex services is limited, which allows them to develop multiple connections with companies investing in this direction: “Here in Bucharest, it's very simple, apart from us there are very few wellbeing providers who cover a wide range of services” – F1.

Partnerships between providers and companies are typically stable and long-term, sometimes initiated through targeted outreach, past collaborations, or formal tenders. Providers offer project management expertise, creative input

for strategy design, and access to specialist networks whose composition shifts according to evolving employee needs.

Beyond the connection through service providers, specialists and HR staff also remain connected to the field through academic literature, professional conferences, and industry influencers (e.g., via LinkedIn).

Translating Between Worlds

Applying Thévenot and Boltanski's (2006) framework of "worlds of justification," three distinct orders emerge within the field.

Actors involved in developing wellbeing programs – wellbeing specialists, HR employees with formal or informal responsibilities, and employees of wellbeing service firms – belong to the inspired world. They conceive of wellbeing as the ultimate goal of their activities, channeling their energy into improving employees' wellbeing.

However, for these actions to be implemented, they must be approved by company management or decision-makers. These actors operate in the logic of the industrial world – they assign importance to actions insofar as they are profitable, increasing efficiency and productivity. At this point, specialists translate the actions designed in the inspired world into the terms of the industrial world, represented by concrete data, figures, and indicators that reflect profitability.

"Everyone looks at ROI, at what you get out of it" – W1.

"When you go with notions like turnover, translated into money, with notions like absences, translated into money, it's impossible not to find an angle from which leadership will understand. But if you speak from your emotional HR sphere and go to a decision-maker who wants to see concrete figures and statistics, there's no way you'll understand each other. We have to get out of our little pink bubble and get closer to the business" – R4.

In addition, in the case of service providers, there is the imperative to justify their programs in the logic of the market world. It is important for them to position themselves competitively, remain relevant, and promote their packages in this world's logic.

Moreover, as a precautionary measure, providers tend to develop a broad range of organizational services beyond wellbeing, such as personal development programs, coaching, or team building, since they do not consider it sustainable to rely on a single area.

"It is not sustainable to live only from providing wellbeing services" – F1.

This reinforces the idea of the field being in an early stage, though following an upward trend.

Negotiating Care and Capital: A Critical Discussion

Thus, the wellbeing field consists of three overlapping worlds of justification that communicate constantly. Actors implementing actions carry out double work – the creative work, which involves identifying needs and designing solutions, and the justificatory work, translating their wellbeing-improvement objectives into concrete figures, according to the industrial and market logics.

The wellbeing movement starts with the aim of improving the organizational environment for employees, but the imperative to justify actions in the industrial logic of productivity and efficiency transforms the final outcome into a diluted form, offering individual solutions for systemic dysfunctions.

This is reflected in how the actions end up being evaluated: if they remained within the inspired world, their ultimate goal would be the genuine improvement of wellbeing, possibly measured qualitatively through informal discussions with the community. However, in the logic of the worlds into which wellbeing initiatives are translated, quantitative evaluation reflects their impact – on productivity, absenteeism, and retention.

This becomes problematic when wellbeing, measured quantitatively (e.g., by event attendance), becomes the sole target and is converted into a performance standard. In this way, employees' behavior is guided and directed toward achieving organizational objectives through wellbeing.

In this context, a mechanism of control is exercised – a localized enactment of biopower, as problematized by Foucault (2003).

At the macro-organizational level, especially in the case of multinationals, there are global directives guiding local centers' actions regarding wellbeing. Intervention pillars, topics to be addressed, and action directions are assigned. In this way, elements of biopolitics are exercised in organizational settings.

At the local level, to meet management-set objectives (in the logic of the industrial world), employees become responsible for their own wellbeing, as also explained by Brown et al. apud Dale and Burrell (2014) through the idea of individualizing work relations. Their behavior is directed toward accessing organizational resources that shape it in line with the “well” employee ideal – healthy and productive (Goss; Haunschild apud Dale and Burrell 2014; Watson et al., 2023). This subjectivation represents a manifestation of anatomo-politics.

This trend is initially observable in the empirical reality through formal and informal coercive mechanisms associated with wellbeing activities regarding employee participation. Formally, some companies regulate in their organizational policies the necessity of participating in activities and integrating these indicators

into KPIs. Informally, involvement in activities increases, in some organizational cultures, the chance of promotion to higher hierarchical positions, as the employee is perceived as an engaged and active community member.

By incorporating such mechanisms, over time, the transition occurs from explicit coercive power to an internalized one within each employee. The logic guiding and shaping their behaviors remains that of the industrial world, which values efficiency and productivity (Thévenot & Boltanski, 2006). In this way, wellbeing actions become instruments of anatomo-politics, subjectivizing bodies by cultivating an active self aligned with the “well” employee archetype.

However, subjectivation is not inherently negative. Companies manage to cultivate healthier habits and behaviors among employees, physically, mentally, and socially. This shaping, based on positive intentions, positively impacts individual life. For example, respondents believe employees evaluate positively the impact of actions that provide opportunities to stay healthy through physical activity, psychological assistance programs, or activities with team colleagues.

These aspects of employee life are also valued in the job market, as people seek companies offering holistic benefits. Interviewees’ relationship with their work is clearly positive and employee-centered. There is a visible interest in helping colleagues and fostering a more pleasant organizational environment, with beneficial effects outside the professional sphere, improving overall quality of life.

Moreover, the pursuit of productivity and performance is inherent to the capitalist production system, and a world in which these are entirely separated from employer interventions in the workforce through wellbeing actions belongs to the realm of utopia.

Actors involved in the wellbeing action-creation process hold varying levels of decision-making authority. Considering the separation or integration of the processes of designing, approving, and implementing actions, one can observe the stage the company is in regarding the development of its wellbeing mechanism.

HR employees tend to depend on managerial approval for implementing proposed actions, revealing an external process of translation between worlds. Conversely, wellbeing specialists are already integrated into high-level decision-making structures, allowing them to perform this translation internally. In turn, service providers engage in a double translation – one internal, another external – adapting to market logic (Thévenot & Boltanski, 2006).

This process overlaps with what Boltanski and Chiapello (2005) describe as capitalism’s adaptation to new realities through the incorporation of critiques. While in the early stages the development and approval of initiatives are distinct phases, in later stages the entire process is managed by a single entity. Incorporated actions can thus be seen as a different form of the initial critique,

through the lens of the individual-level approach (Brown et al. apud Dale & Burrell, 2014), employee responsibility (Watson et al., 2023), and their subjectivation into the “well” employee model (Dale & Burrell, 2014).

Thus, HR employees, wellbeing specialists, and external providers are part of the same field, not from different positions, but at different stages of the same process: the transformation of the spirit of capitalism through the integration of wellbeing actions into organizational activities.

Closing the Circle: Contributions and Future Directions

The contemporary interest in employee wellbeing, conceptualized as a biopsychosocial construct encompassing parameters of their physical, mental, and social health (Dale & Burrell, 2014), is expressed in the form of workplace wellbeing actions. In this way, a profitable market is consolidated, attracting an increasing number of actors (Abraham & White, 2017). Within Romanian companies, the incorporation of wellbeing actions into organizational development strategies is becoming more frequent due to the benefits they bring. At an aggregate level, the interviewed specialists state that productivity, efficiency, and staff retention increase, while absenteeism and sick leave days decrease. At the same time, the work environment becomes more pleasant, and interventions across different life domains contribute to employees' overall wellbeing.

Similarly, the actions carried out by companies follow a common thread and address potential employee needs on three main levels: physical, mental, and social. A strong trend is the development of socially oriented actions, addressing the need for human connection. This also has the advantage of relatively low costs in the current unfavorable economic context, compared to those in other areas. This empirically observed trend represents an additional step beyond the last major trend identified in the specialized literature during the pandemic, namely significant investments in the area of mental health (Watson et al., 2023). Moreover, as also revealed by the collected data, the needs addressed through actions are structured hierarchically and satisfied in a linear manner. The wellbeing process begins with the physical environment, then addresses the psychological and social levels, and subsequently advances toward specific areas of interest such as parenting, spiritual health, or personal development, depending on the company's interests and resources.

Regarding the individuals who perform this work, three categories of actors can be distinguished: HR department employees, specialists with dedicated roles, and external wellbeing service providers. All present a holistic approach, viewing wellbeing as the employee's overall state of being, determined by the physical, mental, and social dimensions. In some cases, strategies are more complex and include additional dimensions. Overall wellbeing is thus found

at the intersection of these dimensions, considering both the employee's professional and personal life. HR specialists are often the first to be assigned tasks related to this field during the process of integrating wellbeing actions into the company. As a next step, "communities" are formed: groups of employees who voluntarily organize such activities, centered around shared interests such as sports or arts. Wellbeing specialists hold dedicated roles and typically work in small teams to ensure the smooth execution of all tasks. Service providers bring together specialists in HR, marketing, sales, and project management, offering support to internal actors through the development of various solutions, applications, or platforms.

Within this field, collaborative relationships are built. As an emerging domain, the network of actors is relatively small and well-connected. Considering the conceptualization proposed by Thévenot and Boltanski (2006), the broader field of organizational wellbeing brings together three different worlds of justification, between which certain tensions emerge. HR employees, wellbeing specialists, and external providers start from the goal of improving individual wellbeing, the aim of the inspired world. However, for initiatives to be implemented, they are translated into the industrial logic of management, focusing on effects related to efficiency and productivity. In addition, service providers undergo a second translation into the market logic in order to sell their services.

In this way, wellbeing actions come to address systemic dysfunctions, such as excessive workloads or faulty hierarchical communication, through individual solutions that place responsibility on the employee. Given that the ultimate goal is productivity, the effectiveness of the actions carried out is measured using indicators that reflect individual actions – participation in events, sick leave days, and staff retention. Nevertheless, respondents appreciate that the wellbeing actions carried out in companies have a positive impact on employees' lives, improving their workplace experience and overall quality of life. They also believe that organizations implementing wellbeing solutions genuinely centered on employees stand out in the labor market, particularly in the stages of attracting and recruiting staff.

By offering solutions and expecting compliance from employees, the template of the "well" employee emerges – a person physically and mentally fit and eager to contribute positively at work (Dale & Burrell, 2014). In this context, wellbeing actions become tools of anatomo-politics (Foucault, 2003), aimed at the subjectivation of employees. The literature consulted warns that this pressure can create stigmatization among vulnerable categories of workers, leading to chameleon-like forms of resistance so as not to be perceived as insufficiently engaged in the process of developing wellbeing (McCabe & Elraz apud Watson et al., 2023). However, based on discussions with specialists in the Romanian field, this does not seem to be an issue they face.

Through the alteration of the ultimate aim of actions, via translation between worlds within the field, a modification of the spirit of capitalism is observed (Boltanski & Chiapello, 2005), serving the reproduction of the system at a broader level. This integration of critique overlaps with the authority of actors responsible for wellbeing. In the early stages, HR employees carry out an external translation for justification to management, requiring its approval; wellbeing specialists perform this process of translation and approval internally, while service providers, in addition to internal translation, also carry out another external one, in the logic of the market. In practice, solutions addressing the initial needs related to employee wellbeing are incorporated into organizational processes, presenting an individualized, moralizing approach that seeks to subjectivate individuals according to a specific template. The translations between worlds reflect the stage of development regarding wellbeing in which the company finds itself, with actors positioned in roles that represent distinct and interconnected phases of the same process: the incorporation of critiques into the system.

Thus, the field of workplace wellbeing actions is an area in continuous expansion, bringing together specialists from diverse fields. They share a congruent vision of employee wellbeing and the ways of intervening to optimize it, with the ultimate goal of improving the organizational environment, in both the individual's and the company's interest. Addressing contemporary employee needs through wellbeing represents a modification to the spirit of capitalism for systemic continuity (Boltanski & Chiapello, 2005), and the process of incorporation into organizational structures overlaps with the evolution of the justification process through translation between worlds (Thévenot & Boltanski, 2006), measurable through the decision-making autonomy allocated to wellbeing-responsible structures.

This study has deliberately focused on the perceptions of specialists, as their expertise offers a structured vantage point for understanding how workplace wellbeing is organized in Romania. While this ensured analytical coherence, it also narrowed the range of perspectives. Future research could therefore include other actors—such as employees, managers, or business consultants—whose views would enable a more nuanced and multi-layered understanding of the phenomenon. Notably, differences between white- and blue-collar contexts emerged during interviews, but the limited sample prevented a systematic discussion. Exploring wellbeing in offices versus factories could thus be a valuable direction. Comparative and longitudinal studies would further enrich the understanding of how practices evolve across contexts.

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