The cost of coping: making it easier for people to take the lead on their health

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UKIHCA Independence

UKIHCA is an independent, non-profit professional body operating in the third sector. Free from commercial influence, control or ties that could compromise our independence, we exist to advance the health and wellbeing coaching profession, protect the public and uphold high standards of ethical, evidence-informed practice.

Bupa recently published Wellbeing Index 2026: *Wellbeing Index 2026: The Cost of Coping*[1]. which gives an important warning: when life gets harder, health is often the first thing people put down. We need to make taking action on health easier, not harder.

The Wellbeing Index puts a useful name to something most of us will recognise: the "*cost of coping*."

As financial pressure, time constraints and competing demands pile up, people push health down the priority list.

- They delay treatment. They reach for whatever is quickest and easiest, whether or not it's actually right for them.
- More than half of adults now say it's harder to prioritise their physical and mental health because of economic pressure, and over a quarter have delayed medical treatment as a result — rising to over a third of Gen Z.[1]
- Nearly three in five are turning to AI chatbots instead of a GP, and a growing number are taking health advice from social media influencers, often because they simply don't have the time, money or headspace to do anything else.[1] None of that is surprising, but it should give us pause.

From a UKIHCA perspective, this is an important contribution to the workplace health conversation, and it echoes what we've been arguing ourselves.

Because the challenge isn't really whether people *know* what's good for their health. Most people do. The challenge is whether they have the capacity, confidence, support and opportunity to *act* on it.

That distinction matters more than it might sound.

We can hand people information. We can offer healthcare, screening, benefits, apps. All of that is genuinely valuable, and Bupa's data starkly shows the scale of what's at stake if we don't get it right — workplace sickness absence in the UK is at a 15-year high, and mental health alone accounts for close to 18 million lost working days a year.[1]

But absence only ever tells *part* of the story. As I've argued elsewhere, some of us struggling most with our health aren't absent at all. We're still at our desks, still in meetings, quietly managing pain, poor sleep or exhaustion in ways that erode our concentration and capacity long before anyone notices.[2]

Bupa's own findings back this up. Presenteeism is already the norm for many: well over two in five people say they've worked through illness rather than take time off, and a similar share admit they keep pushing through even when exhausted.[1] Waiting for absence to be the signal that someone needs help means we're often intervening too late.[2]

But there is another step in the journey between knowing and doing, and it's the one we talk about least.

How does a person actually turn insight into meaningful, sustainable change, in the middle of an ordinary, overstretched life?

This is where professional health and wellbeing coaching earns its place.

A professionally qualified health and wellbeing coach doesn't tell someone what to do and doesn't replace clinical care. Through a skilled, whole person-centred process, they help someone work out what actually ***matters*** to them, what's getting in the way, and what a realistic next step looks like — one they can own and sustain, not one imposed on them.

In other words, whole person health and wellbeing coaching shifts the conversation from "*what should I do*?" to "*what matters to me, what can I actually change, and how do I take the lead on my own health?*"

And that's especially relevant at work.

Employers can't control every factor that shapes someone's health, and they shouldn't be expected to. Nor should the responsibility for managing health quietly get handed over to employees under the banner of "wellbeing." But employers can build the conditions in which people get to appropriate support earlier, understand what's actually on offer, and build the confidence to use it.

And for many, that's not for want of trying. Most employers now offer an impressive range of provision — private healthcare, EAPs, mental health services, financial wellbeing support, digital tools. The trouble is that a good list of 'benefits' isn't the same as a system that actually helps someone.

As I've written before, employees don't experience their lives in the neat categories organisations use to buy services. Someone who's exhausted, sleeping badly and struggling with a bad back doesn't see three separate problems — they see one story, and they need help making sense of it, not another portal to log into.[3]

Bupa's data shows exactly why that gap matters: real people, cutting back on the dental check-ups, therapy and GP visits that would have caught something early, because the cost of coping in the moment feels more urgent than the cost of waiting.[1]

So, I applaud and welcome Bupa's call for government, employers and the wider health sector to work together to make expert support, advice and preventive care easier to access, and easier to fit around real lives.[1]

The next step is recognising that supporting health isn't only about treating illness or handing over information. It's about enabling people to make change and stick with it. And that's exactly where professional health and wellbeing coaching has a distinctive contribution to make.

At UKIHCA, we don't believe a healthier, happier workforce is built simply by adding more wellbeing resources to the pile. It's built when people are genuinely supported to take the lead on their own health[6], with the right professional support, at the right time. That's the thinking behind what we've started calling Health Intelligence: not more information or more apps, but the capability to understand, prioritise and act on what actually matters, in the context of a real life.[4]

It's also why our Workplaces work treats health and wellbeing as a strategic, whole-person issue for organisations to own, not a peripheral perk to hand out.[5]

When we know that the cost of coping is real. Let's make the cost of taking action lower.

Artificial Intelligence Assistance Statement

AI tools were used to support drafting, structuring, iterative development, and editorial refinement under human direction. All content was critically reviewed, revised, and approved by the author, who retains full responsibility for the final output.

For UKIHCA's full *AI – Publications/Communications Assistance Policy*, please visit **HERE**.

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