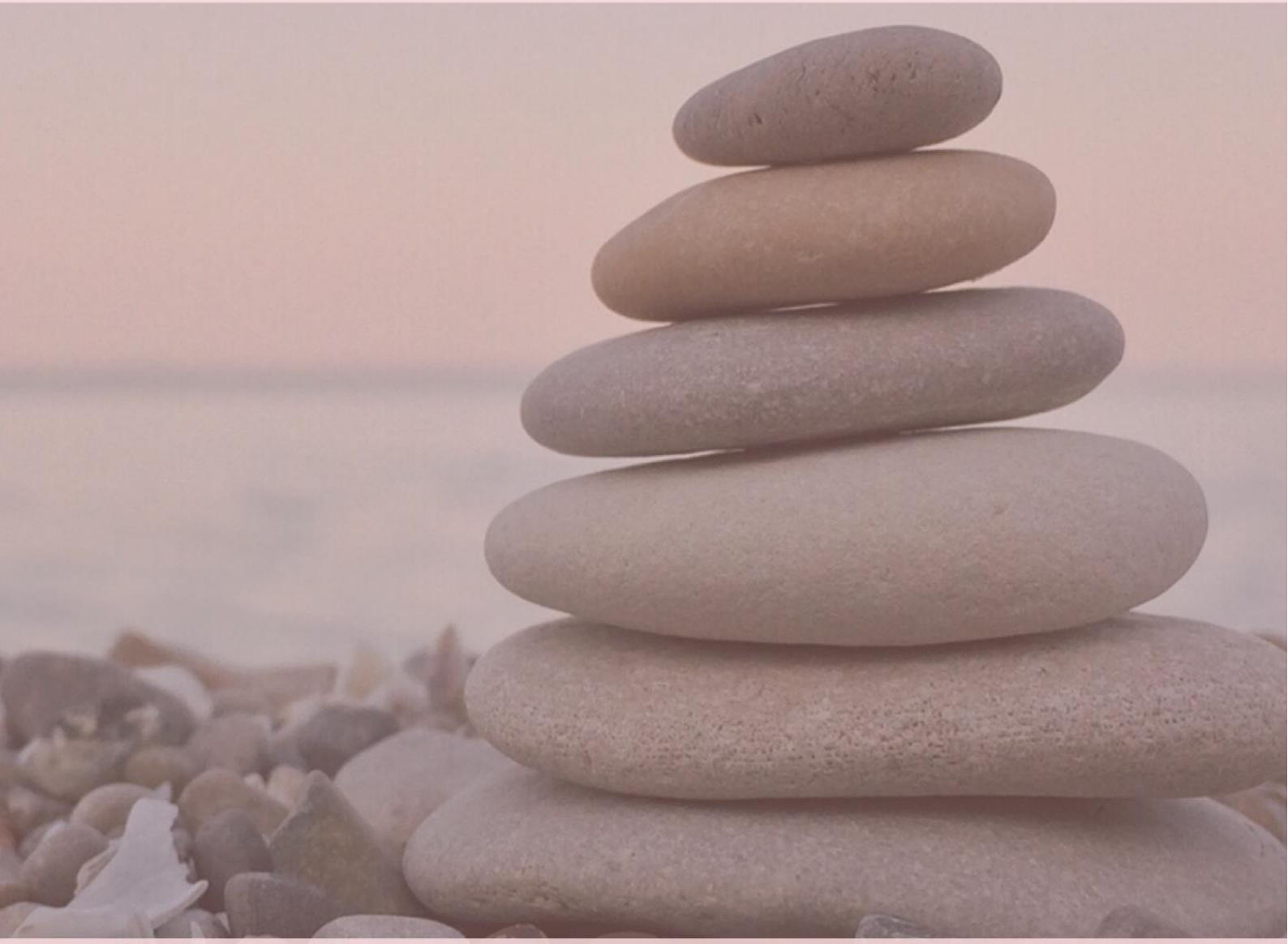
Can we do meaningful work without compromising our capacity to live well?



UK & INTERNATIONAL
HEALTH COACHING ASSOCIATION

The UKIHCA Voice | VO05 | October 2026

Can we do meaningful work without compromising our capacity to live well?

Helping teams perform more effectively is not the same as creating the conditions in which people can thrive

by Izabella Natrins, UKIHCA CEO

The UKIHCA Voice | VO05

© UK & International Health Coaching Association

November 2026

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.

Key points

- Team effectiveness and organisational performance matter, but they are not the whole picture.
- Psychological safety, engagement and collaboration are valuable; on their own, they do not amount to a whole-person health and wellbeing approach.
- Lifestyle and health behaviour are shaped by the conditions in which people live and work, not by individual choice alone.
- Health and wellbeing coaching strengthens individual agency and capability, but cannot substitute for addressing organisational conditions that undermine whole-person health and wellbeing.
- Workplace whole person health and wellbeing connects individual, team and organisational approaches so that people can thrive and contribute sustainably.



Two questions, two starting points

Organisations are under sustained pressure to perform, adapt and deliver through uncertainty. Team coaching has a genuine part to play: helping people navigate relationships, strengthen collaboration and work towards shared goals.

Performance-led team coaching typically asks:

> *How can this team work together more effectively to achieve its goals?*

A whole-person health and wellbeing approach asks something broader:

> *What enables people and teams to thrive, and to sustain their capacity to contribute, within the conditions in which they work?*

These questions are not opposed. Sustainable performance matters. The difference is that performance is not the sole organising objective; it sits alongside the whole-person health and wellbeing of the people who make it possible.

This changes where we look, what we ask and which outcomes we count.

Psychological safety matters. It is not the whole picture.

Psychological safety, a shared sense within a team that it is safe to speak up, ask questions and admit mistakes, supports team learning and, through learning, performance[1]. The strongest team coaching theory already recognises that team design and organisational context shape what coaching can achieve[2].

Yet none of these, by itself, shows that a workplace supports whole-person health and wellbeing. A team can have excellent relationships and a strong sense of purpose while its members carry excessive workloads, have too little time to recover or face financial insecurity.

People may feel safe enough to speak up. But what happens when they do? Do the conditions change, or are individuals simply expected to cope better? And if a team consistently delivers, at what cost to the people delivering?

People bring their whole selves to work

People are not units of productivity. They bring their physical health, emotional lives, relationships, values and circumstances into work, and their capacity to contribute is shaped by their environment.

Work design matters. The Health and Safety Executive identifies six areas (demands, control, support, relationships, role and change) which, if poorly managed, are associated with poor health, lower productivity and higher sickness absence[3].

In 2024/25, an estimated 964,000 workers in Great Britain reported stress, depression or anxiety caused or made worse by work, with 22.1 million working days lost[4]. More broadly, employment and working conditions are among the social determinants that drive health inequalities[5].

Lifestyle and health behaviour matter too. Sleep, movement, nutrition, recovery and relationships all influence how people feel and function. But addressing them in isolation risks placing responsibility on individuals for challenges that are partly, or substantially, systemic. A whole-person perspective holds two things together: individual agency and capability, and the influence of the wider environment. Neither is sufficient on its own.

Supporting individuals is necessary, but not sufficient

When people struggle, organisations often respond with individual support: stress management, resilience training, wellbeing apps. A large UK study of more than 46,000 workers in 233 organisations found that participants in such individual-level interventions reported no better wellbeing than non-participants[6]. The study was cross-sectional and did not evaluate health and wellbeing coaching specifically, but its message is consistent with World Health Organization guidance recommending organisational interventions to address psychosocial risks such as excessive workload and low job control[7].

Health and wellbeing coaching is not a one-size-fits-all programme. Grounded in an ongoing, person-centred relationship, it helps people explore what matters to them, build confidence and make meaningful, sustained changes[8].

But it must not become a way of helping people adapt indefinitely to conditions that undermine their capacity to thrive.

If workloads are unsustainable, or leadership behaviours erode trust, individual support alone cannot fix the problem.

The question must extend beyond *What does this person need to change?* to *What needs to change in the environment in which this person lives and works?*

This is not an argument against personal responsibility. It places responsibility in context

Nor should health and wellbeing coaches be expected to resolve every organisational or clinical challenge. For a UKIHCA-Registered Health Coach, working within a defined scope of practice and with health coaching supervision, part of professional practice is recognising the limits of individual-level work and collaborating with those best placed to change the system.

What this means for workplace health and wellbeing coaching

For UKIHCA, this distinction matters as health and wellbeing coaching develops its role in workplaces. **The Keep Britain Working review** has placed employers at the centre of prevention and of shared responsibility for workplace health[9]. That creates an opening, and a risk: that health and wellbeing coaching is commissioned simply as another engagement, resilience or productivity tool.

Its potential is broader: connecting individual whole-person health and wellbeing with the organisational conditions that enable people to sustain it. It also invites different questions from organisations:

- Do our working practices support or undermine people's capacity to sustain their health and wellbeing?
- Do people have meaningful agency over their lifestyle and health behaviour?
- Do our leadership practices and culture enable trust, belonging and constructive participation?
- Are we addressing the conditions that contribute to difficulties, as well as helping people respond to them?
- How do we define success beyond immediate performance measures?

These questions need dialogue across leadership, human resources, occupational health, public health and organisational development. What health and wellbeing coaching distinctively brings is the person's own perspective, priorities and agency into conversations that might otherwise be dominated by targets, programmes and metrics.

A more mature understanding of performance

There is no inherent conflict between human flourishing and organisational performance. The question is whether performance is treated as an end in itself, or as one outcome within a wider picture of human and organisational sustainability.

Workplaces where people thrive are not free of pressure or difficult change. They are workplaces that treat people as whole human beings and take seriously the conditions that shape their capacity to adapt, recover and contribute.

Team coaching, leadership development, organisational change and individual health and wellbeing coaching all have a place. No single approach should carry the whole responsibility.

The question, and the opportunity, is how to connect these disciplines in a shared and supportive commitment to creating the conditions in which people and organisations can thrive.

For UKIHCA, that means advancing workplace practice in which whole-person health and wellbeing is not simply a means to better performance, but an essential consideration in its own right.

So, can we do meaningful work without compromising our capacity to live well? I believe we can. But only if we stop asking how people can perform better at work, and start asking what our workplaces need to change so that they can thrive.

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**.

References

1. Edmondson, A. (1999) 'Psychological safety and learning behavior in work teams', *Administrative Science Quarterly*, 44(2), pp. 350-383. doi:10.2307/2666999.

2. Hackman, J.R. and Wageman, R. (2005) 'A theory of team coaching', *Academy of Management Review*, 30(2), pp. 269-287. doi:10.5465/amr.2005.16387885.

3. Health and Safety Executive (no date) *What are the Management Standards?* Available at: **https://www.hse.gov.uk/stress/standards/** (Accessed: 29 October 2026).

4. Health and Safety Executive (2025) *Health and safety at work: summary statistics for Great Britain 2025*. Bootle: HSE. Available at: **https://www.hse.gov.uk/statistics/** (Accessed: 29 October 2026).

5. Marmot, M., Allen, J., Boyce, T., Goldblatt, P. and Morrison, J. (2020) *Health equity in England: the Marmot Review 10 years on*. London: Institute of Health Equity.

6. Fleming, W.J. (2024) 'Employee well-being outcomes from individual-level mental health interventions: cross-sectional evidence from the United Kingdom', *Industrial Relations Journal*, 55(2), pp. 162-182. doi:10.1111/irj.12418.

7. World Health Organization (2022) *WHO guidelines on mental health at work*. Geneva: World Health Organization.

8. Wolever, R.Q., Simmons, L.A., Sforzo, G.A., Dill, D., Kaye, M., Bechard, E.M., Southard, M.E., Kennedy, M., Vosloo, J. and Yang, N. (2013) 'A systematic review of the literature on health and wellness coaching: defining a key behavioral intervention in healthcare', *Global Advances in Health and Medicine*, 2(4), pp. 38-57. doi:10.7453/gahmj.2013.042.

9. Mayfield, C. (2025) *Keep Britain Working: final report*. London: Department for Work and Pensions and Department for Business and Trade. Available at: **https://www.gov.uk/government/publications/keep-britain-working-review-final-report** (Accessed: 29 October 2026).