2026 Global Workplace Health and Wellbeing Maturity Report.

A benchmark study of employee health maturity across 230+ organisations.

Learn more at Personifyhealth.com/global

Making healthier easier

The right partner & platform to make healthier easier

Diverse client base	Massive impact	Unparalleled experience
7,500 Companies served	**25m** lives reached	**22yrs** leading the market

25% Fortune 500 companies

42% Average engagement rate

£60m per year invested into R&D

Global platform, local programme.

Personify Health can connect and inspire your people around the world with respect for regional and cultural differences. Whether it's promoting local events or customising benefits, we've got you covered! This allows you to foster inclusivity, boost engagement and nurture a connected culture.

Unparalleled global experience

195 Countries served

23 Languages translated by humans

2 Data centres

GDPR & APEC CPBR compliant

Editor's note.

The conversation around employee health and wellbeing has changed.

Today, most organisations recognise the importance of supporting employee wellbeing, yet our findings show that commitment alone is not enough. Many organisations are investing in wellbeing, but without the strategy, data, and structure needed to maximise impact.

The challenge facing leaders isn't whether to invest in wellbeing. It's knowing where to focus, what to prioritise, and how to create measurable progress.

This report reveals a clear opportunity. The organisations achieving the greatest success are not necessarily doing more. They are making better decisions. They use data to guide strategy, personalise support to the needs of their workforce, and focus investment on the areas that drive the greatest organisational impact.

At Personify Health, we believe wellbeing is not a one-size-fits-all programme or a standalone platform. It requires a holistic approach that connects strategy, leadership, culture, data, and personalised employee experiences into a single system designed to improve organisational health.

The findings in this report provide a practical roadmap for leaders. They highlight where maturity gaps exist, where effort should be focused, and which decisions are most likely to accelerate progress. Because better strategy leads to better decisions. Better data leads to better prioritisation. Better personalisation leads to better outcomes.

The organisations that act now will be better positioned to build healthier, more resilient workforces and equip leaders with the insight they need to create lasting impact.

Jill King
SVP, International

Contents.

The Maturity Assessment Report

Many organisations understand the value of investing in employee health and wellbeing.

But awareness alone doesn't move the needle.

Without a clear understanding of what's working, where gaps exist, and how strategy compares to wider market practices, it can be difficult to know where to focus next.

That's why Personify Health developed the <u>Maturity Assessment.</u>

Designed as a free strategic tool, the assessment helps organisations benchmark the maturity of their employee health strategy, identify opportunities to strengthen their approach, and track progress over time.

Since launch, more than 230 organisations have completed the assessment. This report shares the insights, trends, and patterns emerging from those responses.

Why maturity matters.

A mature employee health strategy helps organisations:

- ✓ Prioritise investment where it will have the greatest impact
- ✓ Identify strengths, gaps, and opportunities for improvement
- ✓ Align health initiatives with wider business priorities
- ✓ Strengthen leadership buy-in and accountability
- ✓ Demonstrate progress and strategic value
- ✓ Build a stronger case for future investment

What is the Maturity Assessment?

- An online survey featuring 5 targeted questions for each of the 9 crucial areas of your current health & wellbeing strategy.
- Instant results will categorise your business into 1 of 4 levels of maturity.
- Receive a summary of your wellbeing strengths and areas for growth.
- You can retake the assessment at any time to monitor progress.

Take the assessment

Or scan to take the assessment

personify HEALTH

Key findings

Commitment is high. Structure isn't.

Responses revealed a number of consistent themes. While the full report explores the findings in greater detail, these are the key insights.

38% of organisations lack clear wellbeing KPIs or a data-driven strategy.

Strategy is the weakest link.

Wellbeing activity is widespread, but strategic clarity and decision-making lag, limiting confidence, alignment, and sustained investment.

82% of organisations have no clear link between wellbeing spend and ROI.

Budget decisions are not evidenced.

Most organisations fund wellbeing without measuring what it delivers, leaving investment difficult to defend, protect, or scale when priorities shift.

26% of organisations report no clear ownership of wellbeing at all.

Accountability is vague.

Where roles and ownership aren't defined, wellbeing depends on individual effort rather than structure, making progress inconsistent and hard to sustain.

78% of organisations don't tailor wellbeing support to individual employee needs.

Personalisation rarely exists.

Most organisations recognise the need for personailsation, but limited data, resources, and structure slow progress. This reduces engagement and perceived value, leaving support broad rather than truly tailored.

69% of leaders offer no more than reactive support for wellbeing.

Leaders are falling short.

Only 8% of leadership actively champions wellbeing, with support elsewhere showing up mainly in response to issues rather than shaping day-to-day decisions. Without consistent reinforcement, wellbeing is easily de-prioritised.

The dataset

This report is based on responses from more than 230 organisations that completed the Personify Health Maturity Assessment. The dataset includes global organisations spanning multiple industries and workforce populations, providing a broad view of how employee health strategies are designed, governed, and delivered today.

Methodology

The Maturity Assessment is based on recognised maturity modelling principles, drawing inspiration from established frameworks*.

How was maturity measured?
Organisations were assessed across nine strategic levers and assigned a maturity level based on the strength, consistency, and integration of their approach.

The 9 levers

Together, these nine levers provide a holistic view of an organisation's employee health strategy and determine its overall maturity level.

- Accountability
- Alignment
- Budget
- Culture
- Personalisation
- Commitment
- Dimensions
- Resources
- Strategy

Levels of maturity

Each organisation falls into one of four levels below.

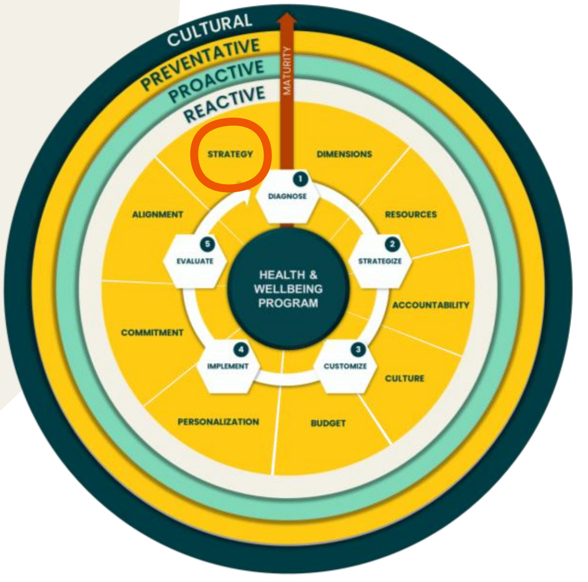
Reactive	Proactive	Preventative	Cultural
Wellbeing efforts are occasional and static, with little personalisation and minimal leadership investment. Budget and resources are limited.	A dedicated employee is driving the wellbeing strategy, but budget and resources still cap its impact.	Leadership and managers own wellbeing behaviours day to day, sharing resources and communicating regularly. Wellbeing is a genuine pillar of culture.	Wellbeing is embedded in business strategy, with strong personalisation, boardroom engagement, and sustained investment. This is the highest level of maturity.

*Including PMI (Project Management Institute) and CMM (Capability Maturity Model).

Bringing the assessment to life

The example below shows how the Strategy lever is assessed within the Maturity Assessment. Each question is scored across four maturity levels, from Reactive to Cultural. The scores are then combined to produce an overall maturity score for that lever.

Each row represents a key assessment area, while the maturity levels illustrate how practices evolve from reactive activity to fully embedded, cultural ways of working.



Example: Strategy lever across maturity levels

Reactive	Proactive	Preventative	Cultural	Score
How are KPIs for your health and wellbeing strategy established?				
We have no KPIs in place.	We use some subjective KPIs.	We have both objective and subjective KPIs.	We measure both subjective and objective KPIs, integrated with business KPIs.	2
What best describes the mission and goals of your health and wellbeing program?				
No program mission or well-defined goals; reactive approach.	Some loosely defined goals.	An annual mission with well-defined goals.	A long-term mission with constantly reviewed measured goals influencing business strategy.	3
How does your organisation utilise data in health and wellbeing decision-making?				
We don't collect or assess employee data.	Limited to global employee survey data.	Analyse global survey data plus our biometric and subjective data.	Comprehensive analysis including employee data, biometric, subjective, and business metrics.	2
How does your organisation's leadership engage with the health and wellbeing strategy?				
Minimal or no engagement	Periodic engagement, mostly in response to issues.	Regular engagement and support.	Leadership actively shapes and champions the strategy.	2
How is your health and wellbeing strategy communicated and promoted?				
Rarely or not at all.	Occasionally, but not consistently.	Regularly, with clear communication channels.	Integrated into all aspects of organisational communication and culture.	3
			Average Score	**2.4**

This example receives an average score of 2.4, placing the Strategy lever at the Proactive maturity level.
Every organisation that completes the Maturity Assessment receives a scored report across all levers.

Scale
Reactive: 1.0 to 1.74
Proactive: 1.75 to 2.49
Preventative: 2.5 to 3.24
Cultural: 3.25 to 4.0

Progression is defined by how clearly strategy, data, and leadership are connected in practice.

From insight to action

Across the data in this report, a clear pattern emerges.

A small number of decisions consistently shape whether wellbeing delivers meaningful impact or remains fragmented.

Based on these insights, we have identified three key decisions leaders can make today to drive the greatest impact, helping you prioritise effort, focus investment, and strengthen delivery in practice.

Together, they provide a clear path from insight to action.

The 3 decisions leaders must now make.

Decision 1: Integrate wellbeing into the entire employee experience.

What the data shows
Wellbeing activity is widespread but often lacks coordination. Many organisations operate multiple initiatives without a clear structure, leading to fragmentation and inconsistent impact.

What this decision really means
This is not about doing more. It's about making wellbeing part of the employee experience. How everyone already works, individuals, managers, and leaders alike.

The cost of not deciding
Without clarity on who's responsible for what, wellbeing relies on a few motivated people rather than being shared across the organisation, making it inconsistent and hard to sustain.

The leadership move
Give individuals the tools to manage their own health, equip managers to support their team's day to day, and have senior leaders visibly model it themselves. Shared ownership, not fragmented effort.

Decision 2: Focus effort on the few levers that drive system-wide impact.

What the data shows
The strongest maturity gains come from reinforcing a small number of connected levers. Spreading effort too broadly reduces impact and slows progress.

What this decision really means
This is a choice between doing a few things well or spreading effort too thin to make a real difference.

The cost of not deciding
Effort fragments. Teams stay busy but impact stalls. Initiatives grow, but maturity does not.

The leadership move
Prioritise high-leverage areas and commit to them. Do fewer things, more deliberately.

Decision 3: Make responsibility for wellbeing clear at every level.

What the data shows
Commitment is widely stated but not consistently reinforced. Where responsibility isn't shared across the organisation, wellbeing depends on a few people carrying it alone.

What this decision really means
This is a choice between intention and execution. Wellbeing only delivers outcomes when everyone knows what they're responsible for.

The cost of not deciding
Progress stalls under pressure. Wellbeing remains fragile and difficult to scale.

The leadership move
Make clear what individuals, managers, and leaders each own, and check in on progress regularly, without a heavy new structure.

Exploring the Findings

The Maturity Assessment examines nine interconnected levers that shape an organisation's approach to wellbeing. This section explores each one in turn, Strategy, Culture, Budget, Personalisation, Commitment, Alignment, Accountability, Dimensions and Resources.

For each lever, we look at the strongest patterns in the data, what they mean for leaders, and the practical actions organisations can take to progress.

Additional data points for each lever are included in the appendix, providing further depth alongside the findings in this section.

- Strategy
- Culture
- Budget
- Personalisation
- Commitment
- Alignment
- Accountability
- Dimensions
- Resources

Strategy

Strategy sets the direction for wellbeing, connecting it to business priorities and defining how success will be measured. Without this clarity, activity becomes fragmented, reactive and difficult to sustain.

A strong strategy gives leaders a framework for prioritising investment, making trade-offs and demonstrating impact.

3 Key Findings

1
The strategic foundations are often missing

With 38% reporting no wellbeing KPIs and 25% operating without a clear mission, many organisations are delivering wellbeing initiatives without a clear strategic foundation.

Without defined goals and measures, leaders lack the evidence to prioritise investment, assess impact or make informed trade-offs. This weakens alignment and makes long-term investment harder to sustain.

2
Strategic clarity depends on data and leadership

With 52% relying mainly on employee survey data and 50% receiving only periodic leadership engagement, many strategies lack the evidence and ownership needed to guide decisions.

Clear KPIs, broader insight and consistent leadership involvement enable organisations to assess progress, make informed trade-offs and turn strategy into a practical guide for action.

3
The strongest strategies guide decisions and investment

Only 11% integrate wellbeing measures with business KPIs, while just 13% have a long-term mission with measured goals that influence business strategy.

Organisations with more mature wellbeing strategies use strategy to prioritise investment, review performance and respond to evidence. This brings greater focus and credibility to wellbeing, strengthening confidence in where resources are directed and why.

Over 70% of organisations lack strategic maturity.

The pattern is consistent across all three measures. 72% of organisations have no KPIs or rely only on subjective measures, limiting their ability to assess progress and demonstrate impact.

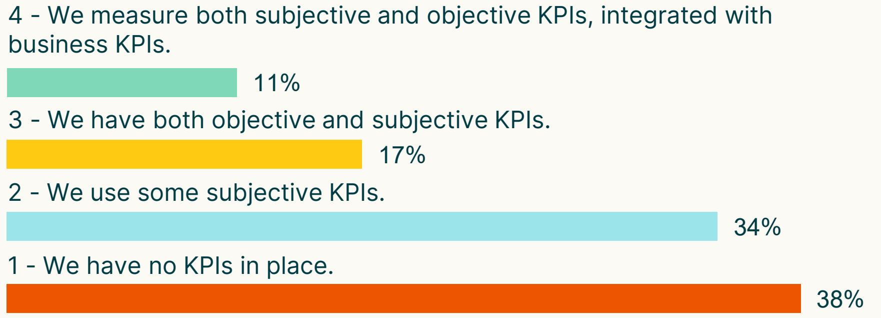
Data maturity is similarly limited: 76% either rely only on employee survey data or do not collect or assess employee data. This leaves leaders with a limited evidence base for prioritising activity and investment.

Leadership engagement follows the same trend. 71% report minimal or periodic involvement, while only 10% say leaders actively shape and champion the strategy.

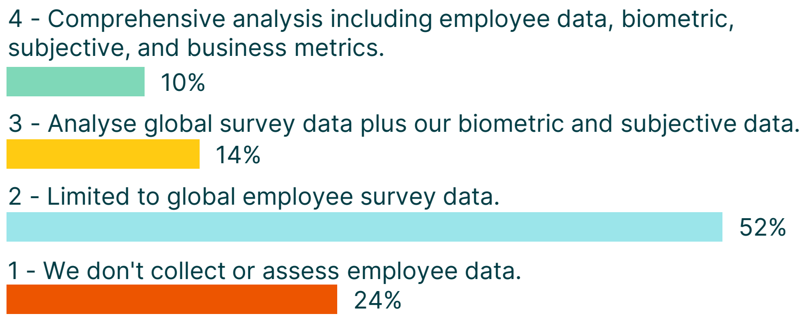
Together, these gaps make it harder to turn wellbeing activity into a coherent, evidence-led strategy that guides decisions and sustains investment.

View more results in the appendix.

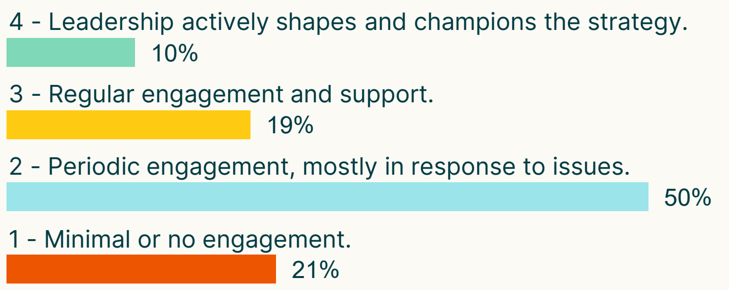
How are KPIs for your health and wellbeing strategy established?



How does your organisation utilise data in health and wellbeing decision-making?



How does your organisation's leadership engage with the health and wellbeing strategy?



Key Cultural · Preventative · Proactive · Reactive

Level of maturity definitions

How leaders strengthen strategy.

To strengthen strategy, leaders need to define it clearly, measure what matters, and use it to guide decisions and accountability.

	Action	Next steps
Define purpose	Articulate a clear wellbeing mission that explains why it matters to the organisation.	Define a concise wellbeing strategy that links directly to business priorities such as productivity, retention, safety, or cost. A good purpose guides decisions; it doesn't just describe intent. Keep it visible by referencing it consistently in leadership discussions and planning cycles.
Set meaningful KPIs	Establish a focused set of KPIs that reflect progress and impact.	Track a small number of measures that combine participation data with outcome indicators, such as sentiment, risk, absence, or retention. Fewer, well-chosen KPIs are easier to track consistently and more useful for demonstrating value.
Use data to guide decisions	Apply data to prioritise initiatives and inform trade-offs.	Use available data sources, such as survey results, utilisation trends, absence data, or risk indicators, to identify focus areas and allocate resources. Review data at leadership level to guide where to invest, where to adjust, and where to stop activity that is not delivering impact.
Strengthen leadership ownership	Ensure leaders actively shape and champion the strategy.	Involve leaders in setting priorities, reviewing progress, and reinforcing direction through regular updates and behaviours. Make leadership engagement visible and ongoing, rather than reactive, so strategy is consistently supported and embedded in decision-making.
Invest in long-term capability	Make the strategy visible and understood across the organisation.	Embed wellbeing strategy into internal communications, leadership messaging, and planning cycles. Use consistent language across regions and teams, ensuring employees understand priorities, what is changing, and how wellbeing connects to broader organisational goals.

Culture is where wellbeing is experienced, not just delivered.

Culture

Culture is reflected in behaviours, decisions, and how people experience the organisation day to day, not just in programmes or communications.

When wellbeing is embedded into how work gets done, it becomes consistent, visible, and shared. Where it is not, it remains occasional, dependent on access to initiatives rather than part of everyday experience. Over time, culture determines whether wellbeing is sustained or lost, shaping how people feel, perform, and support one another across the organisation.

3 Key Findings

1

Wellbeing is delivered through initiatives, not embedded in culture

73% report only partial cultural alignment, and a near-identical 71% only promote wellbeing occasionally or not at all. In both cases just 6% embed it fully.

Most organisations run wellbeing activities, but these aren't consistently reflected in everyday behaviours or reinforced through active promotion. As a result, wellbeing is experienced as something separate from how work happens.

2

Culture strengthens when wellbeing is consistently reinforced

70% mention wellbeing at some stages of the employee lifecycle without embedding it throughout, and 73% report only some or minimal peer support for employee-led wellbeing.

Progress builds when wellbeing is reinforced throughout the employee journey and supported through peer networks, not left to isolated touchpoints.

3

Leading organisations embed wellbeing into how work gets done

80% engage with wellbeing only moderately or not at all, and just 4% see genuine active participation where employees view it as essential.

At higher levels of maturity, wellbeing is treated as a shared norm rather than a programme. It's reflected in expectations, embedded across the employee lifecycle, and reinforced through peer networks, making it consistent and self-sustaining.

Culture is not yet embedded in how work happens.

Most organisations show some alignment between wellbeing and culture, but it's not consistently reinforced. Over half (55%) report only partial alignment, with just 6% embedding wellbeing into behaviours and values.

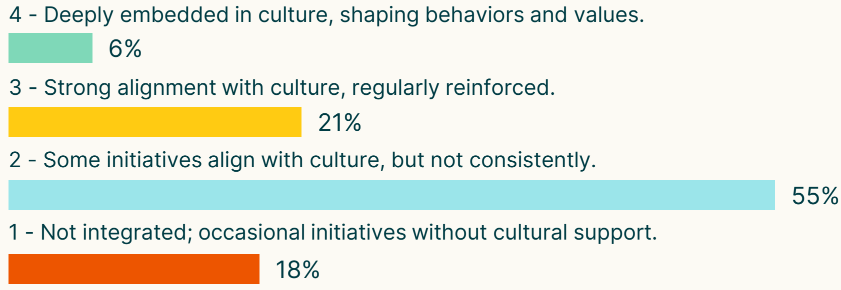
Promotion follows the same pattern. 55% only promote wellbeing occasionally, through campaigns or events, and just 6% reinforce it continuously through leadership actions, communications and policy.

The employee lifecycle tells a similar story. 50% mention wellbeing at some stages without embedding it throughout, and only 5% make it a central theme influencing attraction and retention.

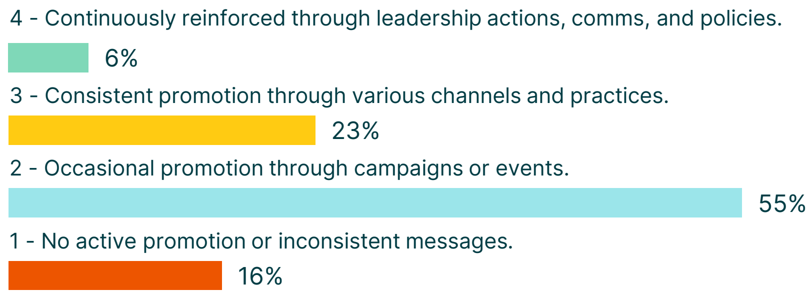
This creates a gap between intent and experience. Without consistent reinforcement through behaviours, leadership actions and communication, wellbeing remains something people access, rather than something they experience through how work is done.

View more results in the appendix.

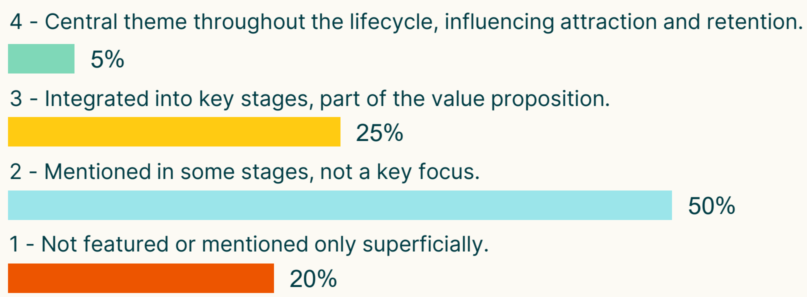
How is health and wellbeing integrated into your organisational culture?



How does your organisation promote a culture of health and wellbeing?



How does health and wellbeing feature in the employee lifecycle (recruitment, onboarding, development)?



Key Cultural · Preventative · Proactive · Reactive

Level of maturity definitions

How leaders can strengthen culture.

To strengthen culture, leaders need to embed wellbeing into how work is done, ensuring it is consistently reflected in behaviours, decisions, and the employee experience.

	Action	In practice
Lead by example	Make wellbeing visible through how leaders show up.	Leaders' role-model behaviours such as flexibility, recovery, and healthy ways of working, and reinforce wellbeing in regular business discussions, not just during campaigns or moments of focus.
Embed wellbeing across the employee lifecycle	Ensure wellbeing shows up at key moments that shape employee experience.	Integrate wellbeing into onboarding, learning, development, and performance cycles, ensuring it is reinforced at key moments that shape employee experience.
Move from campaigns to consistency	Shift from one-off activity to ongoing cultural reinforcement.	Align wellbeing messaging with business communications and leadership updates, ensuring it is reinforced regularly, rather than delivered through one-off initiatives.
Build peer support and shared ownership	Enable wellbeing to be supported across teams, not just top-down.	Establish wellbeing champions or peer networks, enabling employee-led initiatives and creating space for teams to support one another.
Listen to lived experience	Use employee insight to understand how culture shows up in practice.	Use structured employee insight, including surveys, focus groups, and listening sessions, to understand how culture is experienced and inform ongoing decisions.

Budget signals whether wellbeing is treated as a priority.

Budget

Clear, protected funding allows organisations to plan ahead, deliver consistently and scale what works. When budgets are unclear or constrained, initiatives become fragmented and vulnerable to short-term pressures.

Embedding wellbeing within financial planning and linking spend to measurable outcomes supports better decisions, strengthens accountability and demonstrates value.

3 Key Findings

1

Budget reveals whether wellbeing is a business priority

With 43% operating with a limited budget and 21% relying on ad hoc funding, nearly two-thirds lack a defined, strategic investment approach.

This leaves initiatives vulnerable to competing priorities and funding cuts, making it harder to sustain or scale what works.

2

Limited measurement weakens investment decisions

With 48% relying on informal ROI measurement and 34% not measuring ROI at all, most organisations lack the evidence needed to connect spending with outcomes.

Clear measures and regular review help leaders see what delivers value, redirect resources accordingly, and invest with more confidence.

3

Strategic budgeting remains rare

Only 5% set wellbeing budgets according to long-term strategic goals. While just 4% say funding reflects a core organisational commitment to wellbeing.

More mature organisations embed wellbeing funding within financial planning and use evidence to guide decisions, creating investment that's stable enough to withstand short-term pressure.

96% fall short of mature budget practice.

Funding is often present without the structure needed to make it strategic. 64% of organisations have either no specific budget or only limited funding within other initiatives, leaving wellbeing vulnerable to competing priorities.

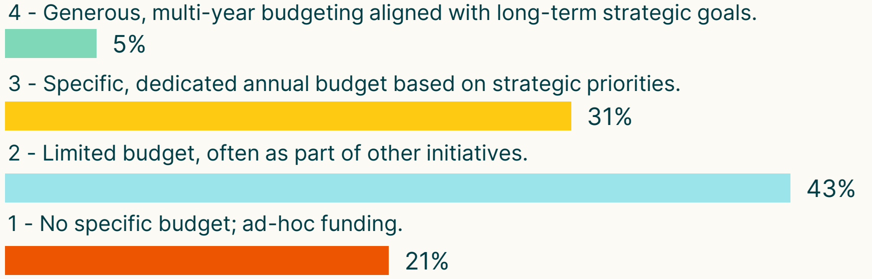
Budget allocation also reflects limited commitment. 78% say funding represents only moderate or no organisational commitment to wellbeing.

Measurement is an even greater gap. 82% rely on informal ROI measures or do not measure returns at all. This limits confidence in what delivers value and where resources should be directed.

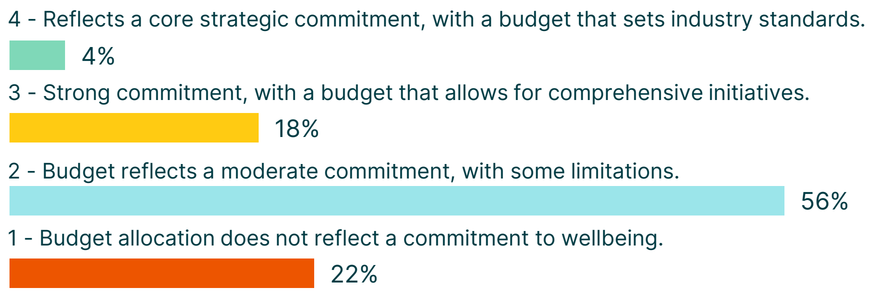
Together, these gaps make it harder to plan consistently, justify investment, and scale what works.

View more results in the appendix.

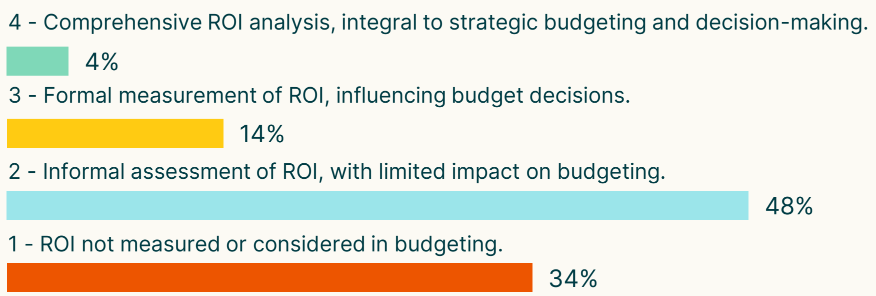
How is the budget for health and wellbeing initiatives determined?



How does budget allocation reflect the organisation's commitment to health and wellbeing?



How is the ROI of health and wellbeing initiatives measured and considered in budgeting?



Key Cultural · Preventative · Proactive · Reactive

Level of maturity definitions

How leaders can strengthen budget discipline.

To strengthen budget discipline, leaders need to prioritise investment, link funding to outcomes, and actively manage budget through regular review and decision-making.

	Action	Next steps
Link investment to priorities	Define where wellbeing budget is focused and why.	Allocate funding to priority areas such as productivity, retention, safety, or risk. Avoid spreading budget thinly, concentrate investment where there is a clear business case and link to outcomes.
Introduce value indicators	Track simple measures to understand what funding is delivering.	Track participation, utilisation, and key outcome metrics alongside spend to identify what is delivering impact. Use this insight to scale effective initiatives and stop or redesign low-impact activity.
Plan for consistency	Move from ad-hoc funding to more predictable investment.	Set defined budget lines, aligned to planning cycles, reducing reliance on ad-hoc approvals. Enable proactive investment decisions, rather than reactive funding in response to pressure or demand.
Align funding to delivery	Ensure budget reflects available resources and delivery capacity.	Adjust funding based on internal capability and delivery capacity. Where resources are constrained, reallocate budget or use targeted external support to maintain quality and avoid diluted impact.
Use data in decisions	Bring evidence into leadership and finance discussions.	Use simple, regular reporting to track what wellbeing initiatives are delivering, and build the case for continued investment.

Effective personalisation goes beyond basic segmentation.

Personalisation

Personalisation shapes support around individual needs, preferences and circumstances. It combines employee insight, inclusive design, data and technology to make wellbeing more relevant and accessible.

When designed well, personalisation improves engagement and outcomes while helping organisations target support without adding unnecessary complexity.

3 Key Findings

1

Personalisation remains broad rather than individual

With 53% tailoring support only to broad categories and 25% still using a one-size-fits-all approach, 78% remain at the two lower maturity levels.

Support may be available, but limited adaptation reduces relevance and risks leaving different needs unmet.

2

Insight is collected more often than it is used

While 50% collect employee feedback but use it only to a limited extent, 81% make limited or no use of technology and analytics.

This creates a gap between what organisations know and how support is designed. Using insight more deliberately enables more relevant and responsive delivery.

3

Effective personalisation is designed from the start

Only 5% continuously adapt support to diverse needs, while just 5% fully embed accessibility and inclusive design.

More mature approaches to personalisation build inclusion, feedback and adaptability into programme design from the start, allowing support to evolve and remain relevant at scale.

7 in 10 personalisation strategies aren't personal at all.

Support remains broad: 78% use generic approaches or personalise only according to broad categories, limiting relevance to individual needs.

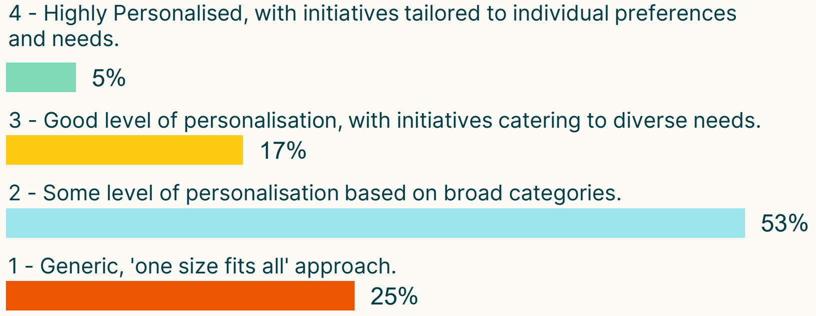
Employee insight is not consistently translated into design. 71% use feedback only to a limited extent or rarely collect it at all, creating a gap between listening and action.

Technology presents the greatest constraint, with 81% making limited or no use of analytics. This restricts organisations' ability to identify patterns, adapt support and deliver relevance at scale.

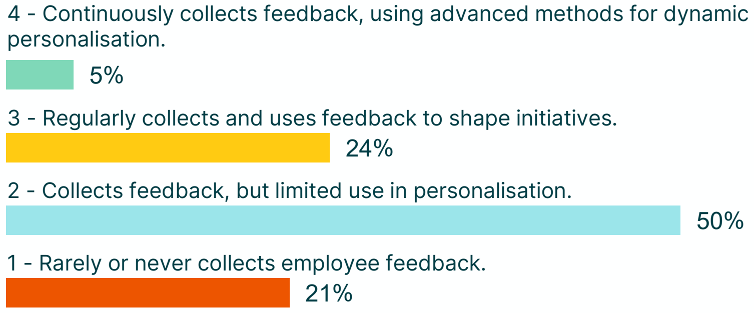
Together, these findings show that personalisation is often recognised in principle but lacks the insight, systems and feedback loops needed to make it responsive and scalable.

View more results in the appendix.

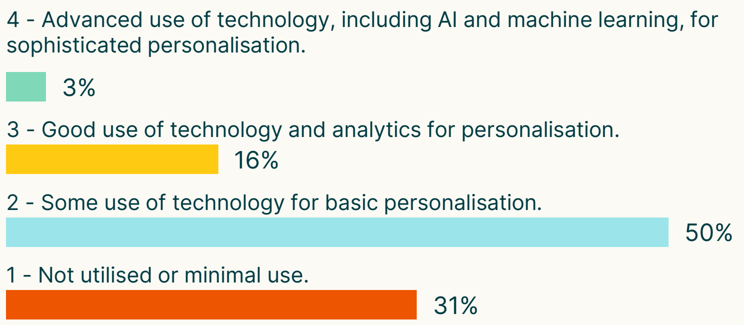
How personalised are health and wellbeing initiatives for individual employees?



How does the organisation gather and use employee feedback to personalise initiatives?



How are technology and data analytics utilised for personalising health and wellbeing initiatives?



Key: Cultural, Preventative, Proactive, Reactive

Level of maturity definitions

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How leaders strengthen personalisation.

To strengthen personalisation, leaders need to use insight, structure support around real needs, and continuously refine delivery based on data and feedback.

	Action	Next steps
Use employee insight	Systematically gather and apply employee insight to shape wellbeing priorities and design.	Focus on key drivers such as workload, financial pressure, and burnout risk, and use them to guide investment and design, not just communications.
Target relevance	Design wellbeing support for specific employee groups with distinct needs, rather than a single, organisation-wide offer.	Move away from a single organisation-wide offer, toward segmented, outcome-focused interventions that reflect those different needs.
Build with inclusion	Design wellbeing to be accessible and inclusive from the outset, not adapted later.	Offer multiple formats and removing barriers such as timing, language, and digital access, rather than adapting for accessibility later.
Enable with data and technology	Use data and available technology to move beyond basic segmentation towards more responsive wellbeing delivery.	Identify at-risk or disengaged groups and adapt support dynamically to improve relevance and scale.
Create feedback loops to continuously refine	Create feedback loops to continuously refine relevance.	Regularly assess engagement, outcomes, and feedback to identify gaps. Use this to adjust initiatives, messaging, and investment, ensuring support evolves with workforce needs.

Commitment is reflected in what leaders prioritise, and what's reinforced day to day.

Commitment

Commitment is reflected in decisions, behaviours and sustained support, not stated intent alone. When leaders reinforce wellbeing through their actions, investment and communication, it becomes more stable, credible and consistently delivered.

Real commitment to wellbeing shows up in the health of every individual, not just a handful of people. That only happens when it's embedded into everyday working life, protected from competing priorities.

3 Key Findings

1

Leadership support is visible, but not sustained

47% report only periodic or reactive leadership support, and 22% report limited or no visible commitment at all, leaving 69% at the two lower maturity levels.

This leaves wellbeing dependent on timing, individual leaders and competing priorities, making focus difficult to sustain.

2

Investment tracks leadership, almost exactly

Investment mirrors leadership support to an unusual degree. 47% allocate limited resources reactively and 22% provide no specific resources at all, the same 69% split seen in leadership commitment.

This isn't a coincidence. Where leaders don't consistently prioritise wellbeing, funding doesn't either, which means the two levers need to move together, not be addressed as separate problems.

3

Sustained commitment is built into everyday operations

72% reflect wellbeing only partially or minimally in organisational policies, while 70% rely on occasional or minimal employee engagement.

More mature approaches to commitment embed wellbeing into policies, leadership expectations and ongoing participation, so it is reinforced through everyday operations rather than isolated campaigns.

Leadership support is often inconsistent.

69% report only periodic or reactive support or limited to no visible commitment. This leaves wellbeing vulnerable to changing priorities and individual leadership attention.

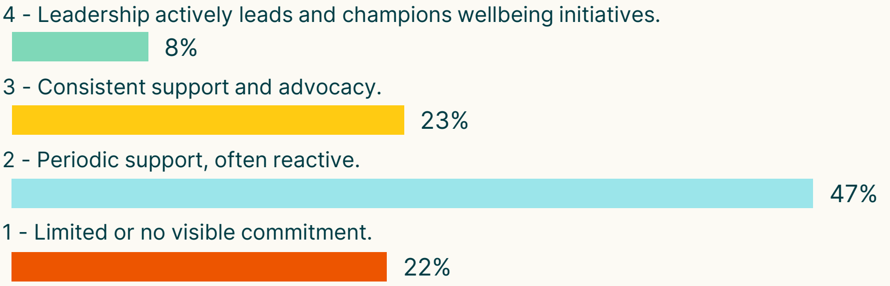
Investment follows the same pattern. 69% allocate limited resources reactively or provide no specific resources at all, showing that stated support is not consistently backed by funding and capacity.

Internal communication tells a similar story. 63% say health and wellbeing commitments are communicated only occasionally, reactively, or rarely at all, and just 5% treat it as an integral part of all corporate comms. Without consistent messaging, commitment struggles to stay visible day to day.

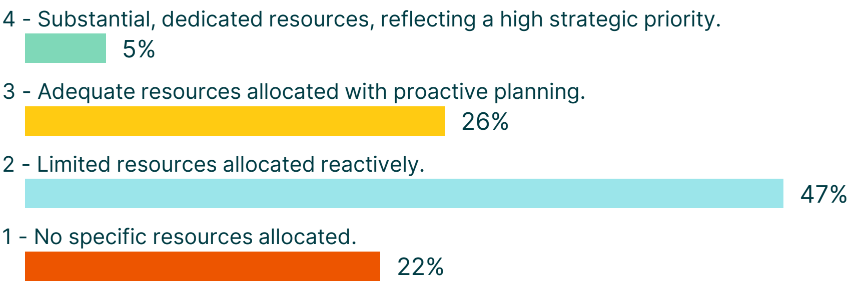
Together, these gaps show a pattern of intent that isn't yet backed by structure, leadership, funding, and communication.

View more results in the appendix.

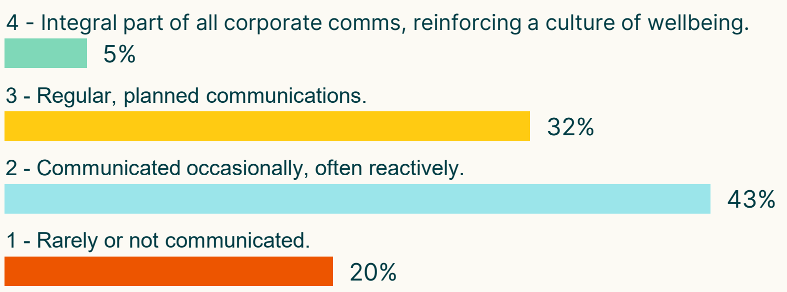
What level of commitment does leadership show towards health and wellbeing programs?



How is commitment to health and wellbeing demonstrated in resource allocation?



How are health and wellbeing commitments communicated internally?



Key Cultural Preventative Proactive Reactive

Level of maturity definitions

How leaders can strengthen commitment.

To strengthen commitment, leaders need to model it visibly, while making sure managers and individuals have what they need to make it part of everyday work.

	Action	Next steps
Make commitment visible through leadership	Show commitment through everyday leadership behaviour.	Leaders consistently role-model behaviours, reference wellbeing in decision-making forums, and reinforce it in regular business discussions, not just during campaigns or awareness moments.
Back commitment with investment	Align leadership support with clear investment.	Protect budget and time for wellbeing priorities, assign dedicated ownership, and avoid reactive reallocation of funding away from agreed focus areas.
Reinforce commitment consistently	Move from reactive to planned, repeatable communication.	Embed wellbeing into regular leadership updates and corporate communications, ensuring it is reinforced over time, not delivered through one-off campaigns.
Build commitment into how work actually happens.	Make commitment part of how the organisation runs.	Align policies such as flexible working, mental health, and recovery with wellbeing priorities, and be clear about what's expected of individuals, managers, and leaders in making that real day to day.
Encourage participation through leadership	Signal that wellbeing is expected and supported.	Leaders actively participate in initiatives, endorse employee-led efforts, and create space for open conversations. This signals that wellbeing is expected, supported, and part of how work gets done.

Alignment connects wellbeing to business performance.

Alignment

When wellbeing is clearly linked to business priorities, it becomes part of how the organisation operates and makes decisions, not a standalone activity.

Where alignment is weak, efforts fragment across regions and functions, limiting visibility and impact. Clear alignment reduces duplication and strengthens trust. It keeps initiatives relevant and embeds wellbeing within the employee experience for the long run.

3 Key Findings

1

Wellbeing lacks a clear connection to the business.

73% report either partial, loosely defined alignment with business strategy or no clear alignment at all, and just 5% have wellbeing integral to corporate decision-making.

As a result, efforts fragment across regions and functions, reducing visibility, weakening alignment, and limiting sustained impact.

2

Alignment breaks down across geographies and programmes.

71% report that alignment either varies largely by region or is fragmented across regions entirely, and the same proportion connect only informally, or not at all, with other engagement programmes.

Progress accelerates when wellbeing is treated as a strategic thread across the business, not a standalone initiative.

3

Alignment isn't sustained through governance or stakeholders.

71% only check how well their wellbeing strategy aligns with the business in response to major changes, or rarely at all, and 72% involve stakeholders minimally or only occasionally.

At higher levels of health strategy maturity, alignment is actively maintained through governance, regular review, and consistent stakeholder involvement, so initiatives evolve with the business rather than drift from it.

Wellbeing rarely connects to business priorities.

Only 5% have wellbeing integral to corporate strategy, and 22% report strong alignment with key business objectives. That leaves 73% with either a loose, partial connection to business priorities (51%) or none at all (22%).

Consistency across geographies tells a similar story. Just 7% are fully integrated and consistent across all levels, while 71% report that alignment either largely varies by region (45%) or is fragmented and inconsistent across regions (26%).

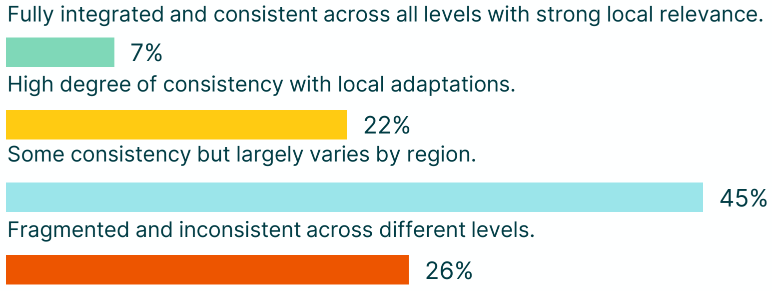
Alignment with other engagement programmes follows the same pattern. Only 8% are fully integrated, forming a cohesive part of overall strategy, and 71% report either some informal connections (50%) or isolation from other programmes entirely (21%).

Across all three measures, roughly seven in ten organisations sit at the two lower levels. Without a clear connection to business priorities, wellbeing initiatives fragment across regions and functions, weakening visibility and impact.

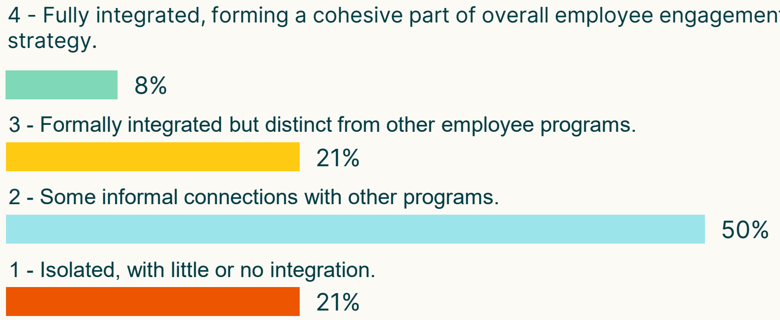
View more results in the appendix.

How is the alignment of health and wellbeing initiatives with overall corporate strategy?

How consistent are health and wellbeing programs across different geographies (local, regional, global)?



How do health and wellbeing initiatives align with other employee engagement programs?



Key Cultural · Preventative · Proactive · Reactive

Level of maturity definitions

How leaders can strengthen alignment.

To strengthen alignment, leaders need to anchor wellbeing to business priorities, embed it across the organisation, and maintain it through regular review and decision-making.

	Action	In practice
Anchor to business priorities	Connect wellbeing outcomes directly to core business goals and priorities.	Link wellbeing to core business outcomes such as productivity, retention, safety, and performance. Ensure it is referenced in business strategy and people plans, not positioned as a standalone initiative.
Create global clarity	Establish a clear global framework with flexibility for local adaptation.	Define shared principles, priorities, and success measures, for example, a consistent set of wellbeing KPIs used globally, while enabling local teams to tailor delivery, such as region-specific programmes or communication styles.
Integrate across people strategy	Align wellbeing with HR, engagement, DE&I, and talent initiatives.	Align communications and initiatives to reduce duplication and ensure a connected employee experience.
Create a regular rhythm	Review and adjust alignment as business priorities evolve.	Embed alignment reviews into planning cycles, with regular check-ins to reassess priorities and adjust direction as business needs evolve. Maintain focus and follow-through over time.
Share alignment across stakeholders	Involve leaders, managers, and employees in shaping alignment.	Use structured employee insight through surveys, forums, and feedback channels. Feed insights into leadership discussions to maintain alignment between business intent and employee experience.

Without accountability, strategy fails in execution.

Accountability

Accountability defines who's responsible for wellbeing, at every level, and how progress is tracked. Where responsibility is unclear, initiatives lose direction, delivery becomes inconsistent and progress is hard to sustain.

Clear roles, visible leadership ownership and regular review turn strategy into execution. They strengthen decision-making, follow-through and shared responsibility for outcomes.

3 Key Findings

1

Accountability exists, but remains fragmented

47% limit accountability to specific teams, and 26% report no clear ownership at all. Nearly three-quarters lack accountability across the organisation.

This creates gaps between intention and delivery, leaving initiatives without consistent ownership, follow-through or consequences.

2

Accountability must be designed, not assumed

79% report that leaders have only inconsistent or minimal responsibility for wellbeing.

Accountability improves when roles are defined at every level, review cycles are regular, and people, not just leaders, are visibly responsible for outcomes.

This turns intention into consistent execution and strengthens alignment with business priorities.

3

Strong accountability is embedded and measurable

Only 5% make wellbeing metrics part of leadership performance evaluation, while just 9% use integrated reporting with clear measures and transparency.

Stronger approaches embed accountability into roles, performance reviews and reporting, making ownership visible and enabling consistent follow-through.

Responsibility for wellbeing keeps falling through the cracks.

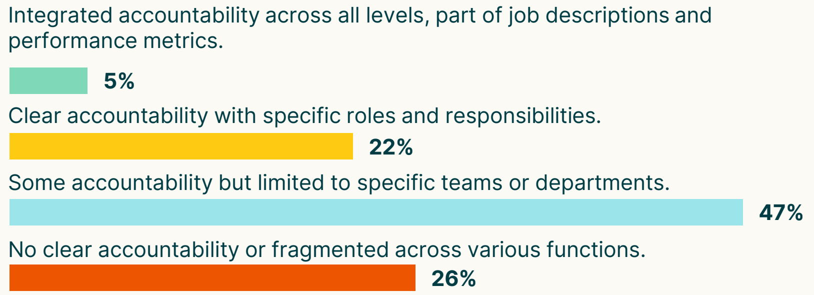
Ownership is often fragmented. 47% report accountability limited to specific teams or departments, and 26% report no clear ownership at all, 73% combined. This makes responsibility difficult to maintain across the organisation.

Leadership follows the same pattern. 79% say leaders and managers are involved inconsistently or not at all. Without defined expectations, accountability disappears between functions and levels of leadership.

Measurement is also limited. 74% rely on informal or ad hoc reporting, or don't measure accountability at all. Together, these gaps weaken the connection between strategy, ownership and consistent delivery.

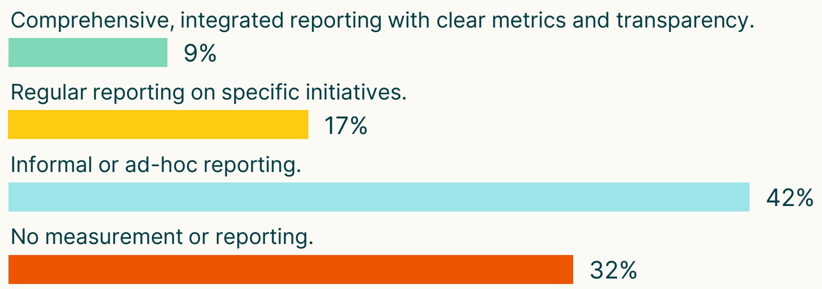
View more results in the appendix.

How is accountability for health and wellbeing initiatives structured in your organisation?



What role do leaders and managers play in accountability for health and wellbeing?

How does the organisation measure and report on health and wellbeing accountability?



Key: Cultural, Preventative, Proactive, Reactive

Level of maturity definitions

How leaders can strengthen accountability.

To strengthen accountability, leaders need to make clear who's responsible for what and check in on progress regularly.

	Action	Next steps
Clarify ownership	Make clear what individuals, managers, and leaders are each responsible for.	For example, individuals take ownership of their own health and how they manage their workload, managers take ownership of how well their team is supported, and leaders take ownership of the organisation's overall approach to employee wellbeing.
Embed into leadership	Make wellbeing part of leadership and manager role expectations.	Integrate wellbeing into leadership objectives, job descriptions, and performance reviews, with managers accountable for participation, team risk indicators, and role-modelling behaviours.
Create rhythm	Establish a light but consistent review rhythm for wellbeing progress.	Establish regular wellbeing reviews within leadership forums, tracking participation, sentiment, and priority KPIs. Align reviews with business planning cycles to maintain focus and follow-through.
Make it visible	Measure and report wellbeing outcomes in a transparent, proportionate way.	Use scorecards or dashboards combining engagement, outcome, and risk indicators. Share progress, gaps, and actions with leadership and employees to reinforce accountability.
Share account -ability	Enable employees to contribute, provide feedback, and shape wellbeing delivery.	Use structured employee insight through surveys, forums, and feedback channels. Ensure insights are reviewed, acted on, and used to create shared ownership between leaders and employees.

Dimensions shape how wellbeing is defined and delivered.

Dimensions

Wellbeing operates across several dimensions, also known as wellbeing pillars, distinct areas that shape the overall experience. Physical and mental health are the most familiar, but social connection, financial health, purpose, environment and ways of working all shape it too.

Most strategies concentrate on a narrow set of these dimensions, leaving gaps for needs that fall outside them. Organisations that define their dimensions clearly, and connect them, can prioritise more effectively, invest with greater precision, and deliver more balanced support.

3 Key Findings

1

Most organisations focus on a limited set of wellbeing dimensions

43% focus only on selected dimensions, and just 9% have fully integrated coverage across all key areas.

Most organisations prioritise a small number of areas, commonly mental and physical health, while dimensions such as financial wellbeing, social connection and purpose receive less consistent attention. This creates gaps in support and limits how well diverse employee needs are addressed.

2

Coverage isn't matched by measurement

49% measure effectiveness using participant feedback alone, and just 5% carry out comprehensive impact analysis.

Without clear measurement, it's hard to know which dimensions are actually delivering value, so broader coverage doesn't translate into better outcomes.

3

Leading organisations take a balanced and connected approach

Only 10% take a continuous, improvement-led approach to introducing new dimensions, and just 7% actively involve employees in shaping them.

More mature wellbeing strategies define clear priorities across dimensions and integrate them, rather than adding areas reactively. This creates a more coherent employee experience and a better ability to respond to a wider range of needs and risks.

Doing more doesn't mean delivering more.

Most organisations address multiple wellbeing dimensions, but only 30% report a holistic approach and just 9% have fully integrated coverage. The majority (43%) focus on selected dimensions, leaving gaps in support.

Personalisation remains limited. While 45% offer some level of customisation, only 7% deliver fully personalised programmes, indicating most support is still designed at a broad, general level.

Measurement is also weak. Nearly half (49%) rely on participant feedback alone, with only 5% assessing behavioural or business impact, limiting visibility of what is driving meaningful outcomes.

This results in breadth without clarity. Without integration, personalisation, and clear measurement, wellbeing remains difficult to navigate, prioritise, and optimise for impact.

View more results in the appendix.

How comprehensive are the health and wellbeing dimensions in your organisation?

4 - Integrated approach encompassing internal and external stakeholders. 9%

3 - Holistic offering covering all key dimensions. 30%

2 - Some specific dimensions targeted but not comprehensive. 43%

1 - Focus only on immediate issues or incidents. 18%

How are your health and wellbeing initiatives tailored?

4 - Fully Personalised programs adapting to individual, and group needs dynamically. 7%

3 - Targeted initiatives based on detailed employee needs analysis. 22%

2 - Some customisation based on general employee needs. 45%

1 - Generic, 'one size fits all' approach. 26%

How does your organisation measure the effectiveness of different health and wellbeing dimensions?

4 - Comprehensive impact analysis including behavioral and business outcome metrics. 5%

3 - Regular measurement of participation and satisfaction. 26%

2 - Limited to feedback from participants. 49%

1 - No measurement or follow-up. 20%

Key: Cultural, Preventative, Proactive, Reactive

Level of maturity definitions

The role of leaders in strengthening dimensions.

To get dimensions right, leaders need to define what they cover and embed them consistently into planning, decisions, and the employee experience, so they genuinely serve their workforce's needs.

	Action	In practice
Define a clear, shared set of wellbeing dimensions	Define what wellbeing covers and set clear priorities across dimensions.	Establish a consistent set of dimensions such as physical, mental, social, and financial wellbeing. Align these across HR, HSE, and leadership teams to guide planning, investment, and reporting.
Use dimensions to guide initiative design	Use dimensions to guide initiative design.	Map current initiatives against each dimension, physical, mental, financial, social, purpose, to see where you're overinvested (e.g. three separate mental health programmes) and where you have nothing at all (e.g. no financial wellbeing support). Use that map to close gaps rather than adding more of what already exists.
Tailor initiatives based on dimensional needs	Use data you likely already have, absence trends, exit interview themes, benefits usage, to spot which groups need what.	For example, high absence in one team might point to workload or burnout risk, while low uptake of financial wellbeing tools in another might mean the offer doesn't match that group's actual pressures.
Measure effective-ness at the dimension level	Track whether each dimension is delivering value.	Set one or two simple metrics per dimension, for example, engagement rate for a mental health programme and review them quarterly. If a dimension consistently underperforms despite investment, that's a signal to redesign it or reallocate the budget elsewhere.
Make dimensions part of leadership conversations	Use dimensions to guide decisions and discussions.	Use dimensions to guide strategy reviews, budget discussions, and leadership updates, ensuring decisions are focused on where impact is strongest and where further action is required.

Resources determine whether wellbeing can be delivered consistently and at scale.

Resources

Resources include time, capability, ownership and external support required to move from strategy into execution. Effective resourcing is not just about budget. It's about having the right mix of internal expertise, cross-functional ownership and external partners to deliver consistent, high-quality support.

Where resources are clearly defined and aligned to priorities, wellbeing becomes more stable, scalable and embedded into how the organisation operates. Where they're not, delivery becomes fragmented and difficult to sustain.

3 Key Findings

1

Wellbeing is often under-resourced and inconsistently delivered.

45% rely on limited dedicated resource, and 23% have no dedicated capability at all.

In many organisations, wellbeing is layered onto existing roles rather than supported by dedicated capability. This creates stretched teams, inconsistent delivery and limits the ability to scale or sustain initiatives over time.

2

Progress improves when resourcing is intentional.

Only 4% treat resourcing as a strategic priority reviewed to maximise impact, while 49% allocate resources moderately and often with limits.

Outcomes improve when organisations move from informal or reactive support to a deliberate resourcing model. Investing in the right mix of internal roles, cross-functional ownership and external expertise strengthens delivery quality, consistency and reach.

3

Leading organisations treat resourcing as a core enabler of delivery.

Just 8% make extensive, strategic use of external partnerships, and only 10% have a strong culture of continuous learning and development.

At higher levels of health strategy maturity, resourcing is structured around clear ownership, defined roles and ongoing capability development. It's aligned to priorities, reviewed regularly and treated as fundamental to delivering outcomes, not an afterthought.

Most wellbeing work relies on stretched teams.

Most organisations report constrained or inconsistent resourcing. 45% rely on limited dedicated resource, and 23% have no dedicated capability, depending instead on existing roles and budgets.

Capability is also mixed. Nearly half (46%) rely on staff with partial or informal expertise, with only 23% having dedicated, qualified specialists. This limits the ability to design and deliver effective, high-quality interventions.

Resourcing is often not prioritised. 49% report only moderate allocation, with 23% treating wellbeing as a low priority, reinforcing a gap between ambition and delivery.

As a result, delivery is shaped by available capacity rather than strategic intent, limiting consistency, quality, and the ability to scale impact.

View more results in the appendix.

How is the resourcing for health and wellbeing initiatives managed in your organisation?

4 - Excellent resourcing with a dedicated team of experts and a substantial budget.
8%

3 - Good resource allocation with dedicated staff and budget for wellbeing.
24%

2 - Limited dedicated resources; some initiatives have specific allocations.
45%

1 - No dedicated resources; reliant on existing staff and budgets.
23%

What level of expertise do the staff responsible for health and wellbeing initiatives possess?

4 - High-level expertise, with staff having advanced qualifications and continuous development in wellbeing.
9%

3 - Dedicated staff with professional qualifications in health and wellbeing.
23%

2 - Some staff with relevant expertise or interests.
46%

1 - Minimal or no specific expertise in health and wellbeing.
22%

How does your organisation prioritise resource allocation for health and wellbeing initiatives?

4 - Strategic priority; resources are allocated generously and reviewed to maximise impact.
4%

3 - High priority; resources are allocated proactively and reviewed regularly.
24%

2 - Moderate priority; resources are allocated but often limited.
49%

1 - Low priority; resources are allocated as an afterthought.
23%

Key Cultural · Preventative · Proactive · Reactive

Level of maturity definitions

How leaders strengthen their resources.

To strengthen resources, leaders need to move from informal and fragmented delivery to clearly owned, well-supported, and scalable capability.

	Action	In practice
Own delivery clearly	Define clear ownership for wellbeing delivery across the organisation.	Assign dedicated accountability for wellbeing at both central and local levels, rather than relying on informal or part-time ownership. Clarify how responsibilities sit across HR, HSE, and People teams, and ensure ownership includes both delivery and outcomes, not just coordination.
Build capability, not just capacity	Ensure teams have the skills required to deliver effectively.	Assess current capability across areas such as mental health, data analysis, engagement, and behaviour change. Invest in targeted upskilling where gaps exist, rather than relying on generalist roles. Strengthen capability early to avoid delivery challenges later.
Mobilise cross-functional support	Involve the right functions in delivering wellbeing outcomes.	Engage teams such as Communications, Safety, Operations, and DEI to support delivery and reinforce messaging. Create shared ownership of initiatives and align communications, ensuring wellbeing is not isolated within a single function.
Use external expertise strategically	Leverage external partners to extend capability and scale delivery.	Partner with specialist providers for areas such as analytics, programme delivery, or targeted interventions. Use external support to complement internal teams, avoid overloading resources, and bring in expertise that would be difficult to build internally at pace.
Invest in long-term capability	Build sustainable internal capability over time.	Develop structured learning pathways for wellbeing leads and teams, support continuous professional development, and create opportunities to build expertise in-house. Treat capability as a long-term investment rather than a short-term fix, enabling more consistent and scalable delivery.

Industry benchmark overview.

Industry context influences how wellbeing is delivered, but it does not determine maturity.

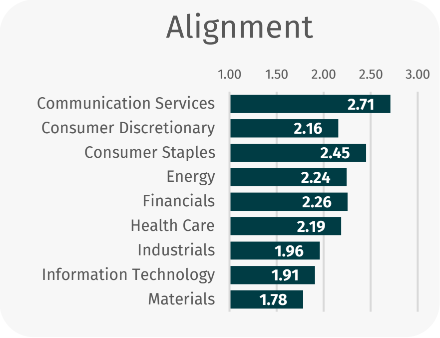
What differentiates organisations is not their sector, but how consistently they apply the core levers.

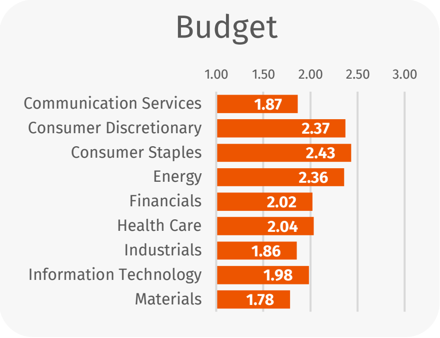
This perspective allows leaders to benchmark performance externally, while recognising that progress is driven by internal clarity, consistency, and leadership behaviour.

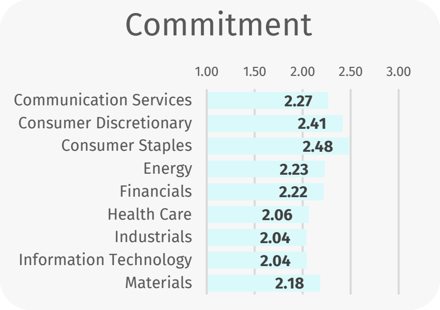
The following section benchmarks performance across industries, showing how organisations compare and where leaders should focus.

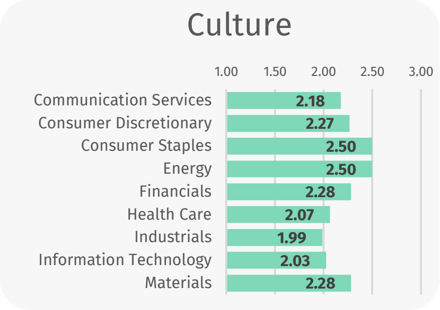
- Strategy
- Culture
- Budget
- Personalisation
- Commitment
- Alignment
- Accountability
- Dimensions
- Resources

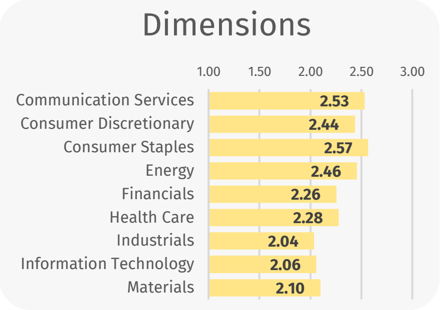
Industry doesn't decide your outcomes. Execution does.

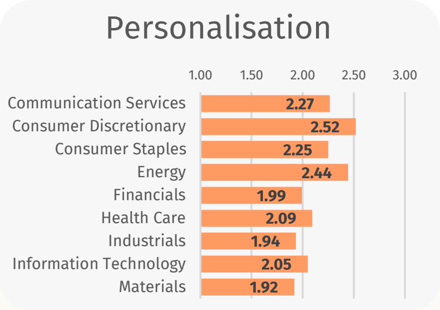


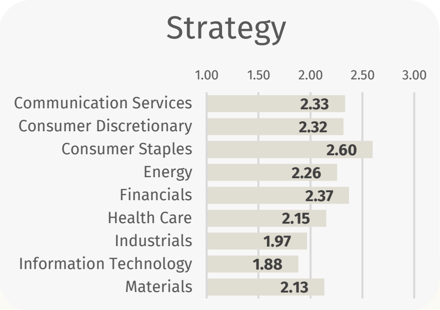












Across industries, wellbeing maturity scores cluster within a relatively narrow range, with no sector consistently leading across all nine levers. The more meaningful variation exists within industries rather than between them, highlighting the impact of internal execution.

Clear patterns emerge in performance across the levers. Culture and commitment tend to be more established, while dimensions, personalisation, and resources show greater variability.

In practice, many organisations generate engagement and visibility, but lack the structure, targeting, or capacity to deliver consistently across different employee groups.

Higher-performing organisations show a more balanced profile across all levers. They apply consistent discipline across strategy, accountability, alignment, and execution, using data to guide priorities, aligning resources to need, and designing support around different employee groups.

The data points to a clear conclusion: outcomes are less defined by industry and more by how effectively wellbeing strategies are executed.

What the benchmark results reveals for leaders.

Across industries, execution is the maturity differentiator.

Industry context matters but does not determine maturity.	Variation between industries is narrower than expected, reinforcing a consistent finding across external research: wellbeing maturity is shaped less by sector constraints and more by leadership decisions. Organisations operate in different contexts, but those contexts do not limit progress.
Maturity is driven by coherence, not activity.	Across industries, stronger maturity profiles are not those with the most initiatives, but those where core levers reinforce each other. Evidence from McKinsey and Deloitte consistently shows that fragmented wellbeing activity, rarely translates into sustained outcomes. When strategy, accountability, culture, and resources are aligned, maturity accelerates.
Budget and personalisation remain systemic pressure points.	Echoing global findings from Aon and OECD research, investment discipline and targeted delivery remain consistent challenges. Funding is often constrained by unclear ROI, while personalisation is limited to broad segmentation rather than individual or group-level needs. This reflects a gap not in intent, but in data, capability, and confidence to invest.
Alignment and culture act as force multipliers.	Industries that perform more strongly on alignment and culture show more consistent outcomes overall. This aligns with Deloitte's findings that wellbeing drives value when embedded into business priorities and everyday behaviours. Where alignment is weak, even well-resourced programmes struggle to scale or sustain impact.
The maturity gap reflects execution discipline, not ambition.	Commitment to wellbeing is broadly present across industries, a pattern seen in both this dataset and wider research. The differentiator is execution: clear strategy, shared responsibility at every level, data-informed decisions, and consistent reinforcement over time. Maturity is less about introducing new initiatives and more about making intent real in everyday working life.

Correlation insights.

While industry benchmarking shows how organisations compare, correlation analysis reveals how the levers interact to drive outcomes.

The nine levers do not operate independently. Improvements in one area are often closely linked to progress in others.

The following section explores how the levers interact, highlighting where combined focus can drive the greatest overall impact.

- Accountability
- Alignment
- Budget
- Commitment
- Culture
- Dimensions
- Personalisation
- Resources
- Strategy

How the levers work together to drive maturity.

Coefficient Interval	Correlation
0 – 0.19	Very Weak
0.20 – 0.39	Weak
0.40 – 0.59	Moderate
0.60 – 0.79	Strong
0.80 – 0.99	Very Strong
1.00	Perfect

	Accountability	Alignment	Budget	Commitment	Culture	Dimensions	Personalisation	Resource	Strategy
Accountability	1	0.79	0.734	0.766	0.822	0.756	0.746	0.774	0.749
Alignment	0.79	1	0.736	0.834	0.818	0.83	0.764	0.751	0.756
Budget	0.734	0.736	1	0.733	0.739	0.689	0.748	0.824	0.69
Commitment	0.766	0.834	0.733	1	0.864	0.785	0.729	0.764	0.758
Culture	0.822	0.818	0.739	0.864	1	0.802	0.765	0.793	0.759
Dimensions	0.756	0.83	0.689	0.785	0.802	1	0.788	0.74	0.836
Personalisation	0.746	0.764	0.748	0.729	0.765	0.788	1	0.786	0.764
Resource	0.774	0.751	0.824	0.764	0.793	0.74	0.786	1	0.713
Strategy	0.749	0.756	0.69	0.758	0.759	0.836	0.764	0.713	1

Scale	
0.86	Very strong
0.83	
0.8	
0.79	
0.76	
0.75	
0.73	
0.7	
0.6	Strong

The model shows that progress accelerates when a small number of core levers move together. The strongest relationships appear between culture and commitment (0.864), strategy and dimensions (0.836), and alignment and commitment (0.834). This highlights how leadership clarity, behaviour, and structure reinforce one another.

These patterns show that outcomes are not created by individual initiatives, but by how consistently strategy, leadership, and delivery are connected. Where these links are weak, progress stalls, even when activity levels are high.

For leaders, the implication is clear: focusing on high-correlation levers unlocks broader gains. Progress comes from prioritising impact over volume, doing fewer things well rather than adding more activity. The following insights highlight where those priorities should sit.

Top 5 correlation insights.

1. Clear strategy & defined dimensions reinforce each other.

Correlation: (0.836) Strategy & Dimensions
Very strong

Organisations with clearly defined wellbeing strategies and structured dimensions deliver more consistent outcomes. Strategy defines intent, but dimensions translate that into a usable system for execution. Without this structure, strategy remains abstract and difficult to operationalise.

Leadership Implication

Define what wellbeing includes and how it is organised. Clarity of structure strengthens clarity of decision-making.

2. Maturity is driven by coherence, not activity.

Correlation: (0.834) Alignment & Commitment
Very strong

Across industries, stronger maturity profiles are not those with the most initiatives, but those where core levers reinforce each other.

Evidence from McKinsey and Deloitte consistently shows that fragmented wellbeing activity rarely translates into sustained outcomes. Where strategy, accountability, culture, and resources are aligned, maturity accelerates.

Leadership Implication

Anchor wellbeing in business priorities and reinforce it consistently through leadership behaviour.

3. Culture & commitment are mutually reinforcing.

Correlation: (0.864) Culture & Commitment
Very strong

This is the strongest relationship in the model. Leadership commitment shapes culture through visible behaviours and expectations, while culture sustains commitment by embedding wellbeing into how the organisation operates day to day. One cannot scale without the other.

Leadership Implication

Treat culture as an outcome of leadership behaviour, not a standalone initiative.

Top 5 correlation insights, continued.

4. Resources & budget enable sustainable delivery.

Correlation:
(0.824)
Resource & Budget
Very strong

Organisations with stronger resourcing are more likely to secure and sustain budget, while clear budget allocation enables more effective deployment of capability. Where this link is weak, programmes rely on goodwill and struggle to scale or maintain consistency.

Leadership Implication Align funding with capability needs. Budget alone is not enough; it must enable delivery.

5. Personalisation depends on available capability.

Correlation:
(0.786)
Personalisation & Resource
Strong

More personalised approaches emerge where organisations have the capability to act on insight. Where resources are limited, personalisation remains surface-level. Delivering relevance at scale requires both data and the capacity to use it effectively.

Leadership Implication Treat personalisation as a capability challenge, not just a design choice.

Conclusion.

The results of the Workplace Wellbeing Maturity Assessment show that progress is not driven by activity, but by how well organisations translate intent into structured, consistent execution.

Across the data, a clear pattern emerges. Organisations do not struggle to start; they struggle to scale. Where strategy, accountability, alignment, resources, and personalisation are connected, maturity accelerates. Where they operate in isolation, progress stalls.

The difference is not effort. It is discipline.

Clear priorities, shared responsibility at every level, data-informed decisions, and consistent behaviour from individuals, managers, and leaders are what turn wellbeing from a set of initiatives into part of everyday working life.

This is not about doing more. It is about doing what matters, with clarity and intent.

Ultimately, wellbeing works when it's built into everyday working life. When it's given the same consistency and attention as any other priority, it delivers measurable impact across people, performance, and organisational resilience.

Insight is useful. Action is better.

Take the Maturity Assessment to understand where your approach is strong, where it is holding back progress, and what to prioritise next.

Scan to take the assessment today.

Personify Health Maturity Assessment

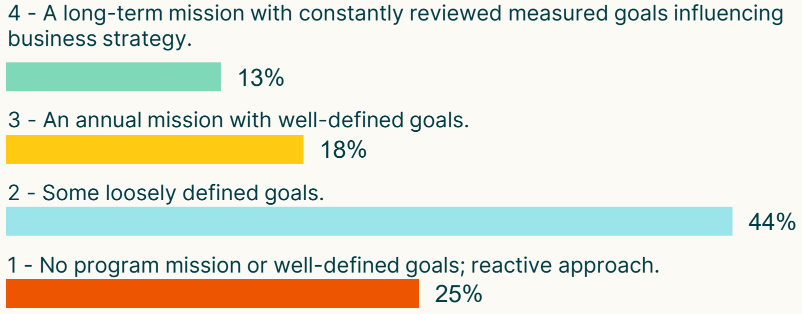
Appendix

Strategy lacks clarity and measurement discipline.

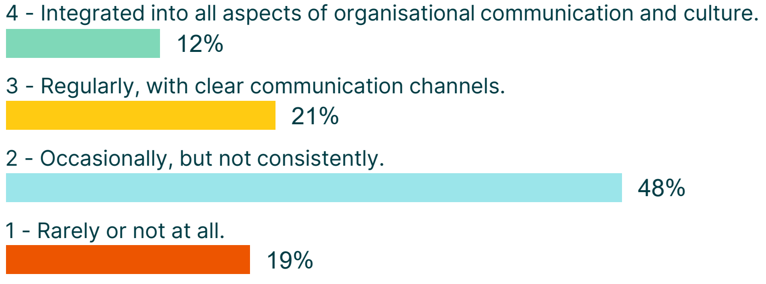
Just 13% of organisations have a long-term mission with constantly reviewed, measured goals, and only 18% have an annual mission with well-defined goals. That leaves 69% working from loosely defined goals or no goals at all, making it hard to point activity towards a clear destination.

Communication follows the same pattern. Only 12% have their health and wellbeing strategy integrated into all aspects of organisational communication and culture, while 67% communicate it occasionally, rarely, or not at all. Without consistent messaging, even a well-defined strategy struggles to reach the people it's meant to influence.

What best describes the mission and goals of your health and wellbeing program?



How is your health and wellbeing strategy communicated and promoted?



Key Cultural Preventative Proactive Reactive

Level of maturity definitions

Back to Strategy in the main report.

Culture is not embedded across the employee experience.

Engagement is largely passive. 58% report only moderate awareness, engaging mainly with popular programmes, and just 4% see genuine active participation where wellbeing is viewed as essential.

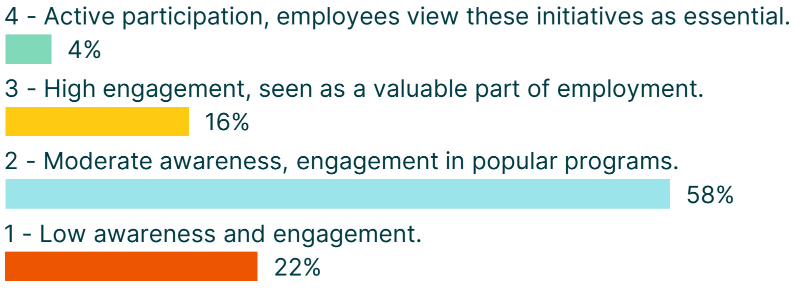
Peer support is also limited. 53% report only some or minimal support for employee-led wellbeing, suggesting culture is still driven top-down rather than reinforced through shared behaviours and networks.

This limits how consistently wellbeing is experienced. Without integration into the employee lifecycle and reinforcement through peer support, it remains separate from how people work, interact and support one another day to day.

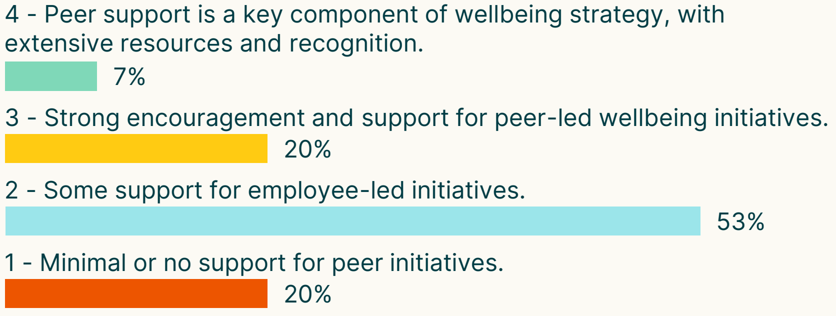
Embedding wellbeing into the employee experience and peer networks is what shifts culture from messaging to lived behaviour.

[Back to Culture in the main report.]

How do employees perceive and engage with health and wellbeing initiatives?



How does the organisation support a culture of peer support and shared responsibility for wellbeing?



Key Cultural · Preventative · Proactive · Reactive

Level of maturity definitions

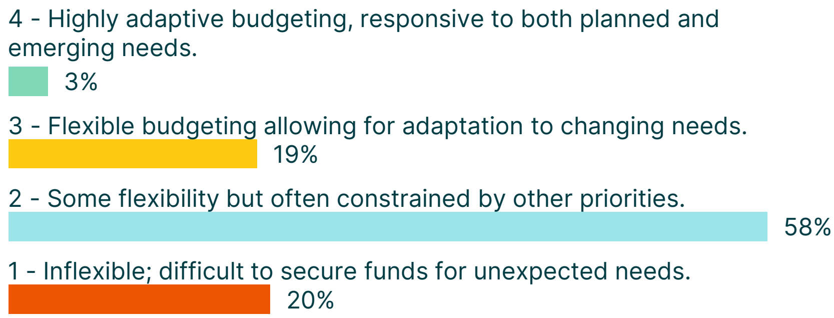
Budget decisions lack flexibility and oversight.

Flexibility is limited across most organisations. Only 3% describe their budgeting as highly adaptive to both planned and emerging needs, and just 19% have budgeting flexible enough to adapt to changing needs. That leaves 78% working with budgets that are either constrained by other priorities or inflexible, making it difficult to secure funds for unexpected needs.

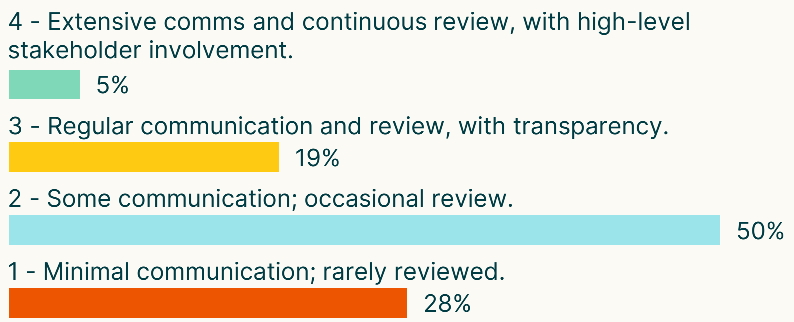
Communication and review follow a similar pattern. Just 5% have extensive communication and continuous review with high-level stakeholder involvement, while 78% rely on occasional communication or rarely review budgetary decisions at all. Without regular oversight, budget decisions are harder to track and harder to hold accountable.

Together, these gaps limit organisations' ability to adapt spending to real needs and to maintain transparency over how budget decisions are made.

How flexible and responsive is the budgeting process for health and wellbeing initiatives?



How are budgetary decisions for health and wellbeing initiatives communicated and reviewed?



Key Cultural Preventative Proactive Reactive

Level of maturity definitions

Back to Budget
in the main report.

Personalisation is constrained by structure, not intent.

While 53% report some effort to cater to diverse needs, this is often limited in scope. Only 24% demonstrate a structured approach, just 5% deliver a fully comprehensive and evolving model, and 18% show minimal consideration of diversity at all.

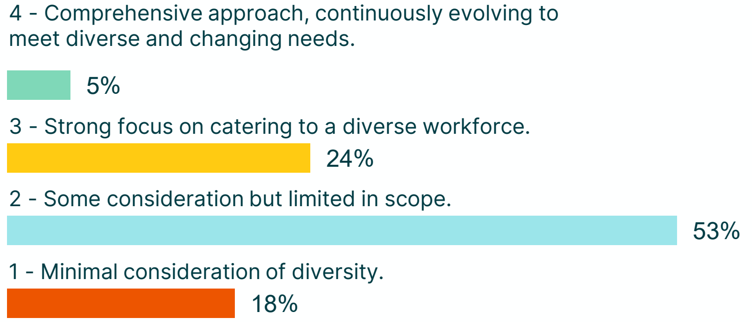
Accessibility shows a similar pattern. 45% describe efforts as inconsistent, considered but not systematically embedded, and a further 18% report limited accessibility and inclusivity. Only 32% report good accessibility, and just 5% have reached a standard-setting level.

This creates a gap between ambition and delivery. Without clear structures for segmentation, accessibility, and ongoing adaptation, personalisation remains uneven, limiting both engagement and overall impact.

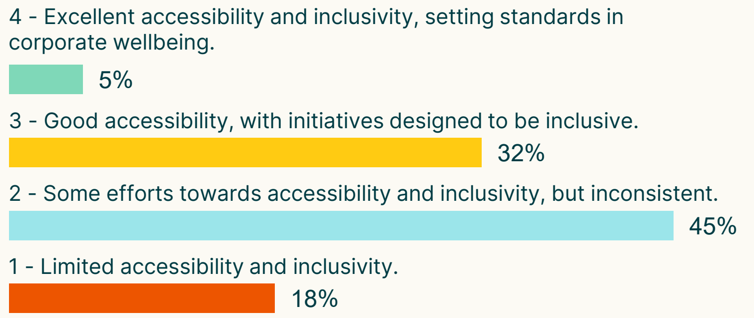
Effective personalisation depends on structured design, not good intent alone.

Back to Personalisation in the main report.

How does the organisation cater to the diverse needs and preferences of its workforce in wellbeing initiatives?



How does the organisation ensure accessibility and inclusivity in its health and wellbeing initiatives?



Key Cultural Preventative Proactive Reactive

Level of maturity definitions

Commitment is not embedded in policies or sustained through engagement.

Half of organisations (50%) report only partial inclusion of wellbeing in policies, and a further 22% report no or minimal reflection at all. That leaves 72% without policies that meaningfully embed wellbeing, while only 4% have policies that are innovative and set industry benchmarks.

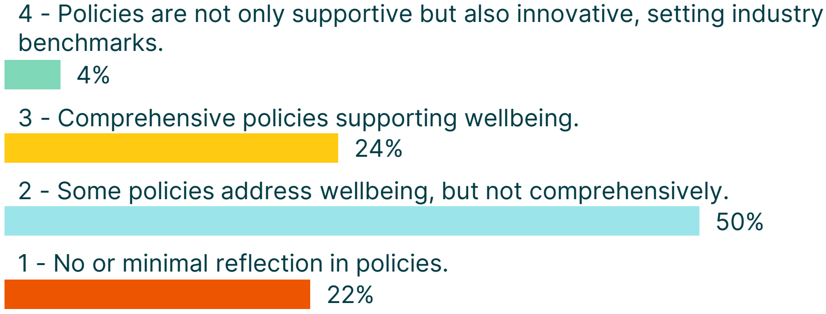
Employee engagement follows a similar pattern. 49% rely on occasional campaigns or initiatives, and 21% report minimal or no engagement, meaning 70% fall short of ongoing, structured involvement. Just 3% achieve deep, continuous engagement with diverse approaches.

This creates a gap between leadership intent and organisational reality. Without embedding commitment into policy and sustained engagement, wellbeing is delivered in short bursts, rather than reinforced through how the organisation operates day to day.

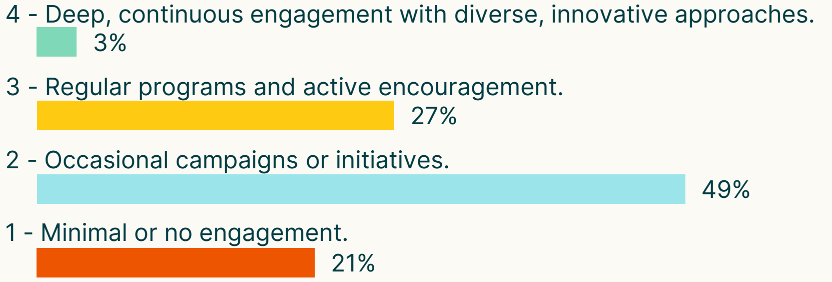
Embedding commitment into policy and continuous engagement is what shifts wellbeing from occasional activity to sustained organisational behaviour.

Back to Commitment in the main report.

How is the commitment to health and wellbeing reflected in organisational policies?



How does the organisation engage employees in committing to their health and wellbeing?



Key Cultural · Preventative · Proactive · Reactive

Level of maturity definitions

Alignment requires continuous reinforcement.

Most organisations rely on occasional employee involvement (47%) and informal participation rather than structured ownership. Accountability remains concentrated at leadership level, rather than embedded across the workforce.

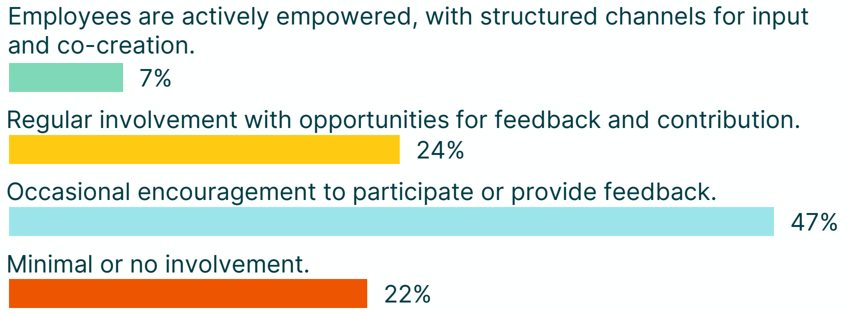
Measurement is equally inconsistent. 42% rely on informal or ad hoc reporting, while 32% have no clear measurement in place, limiting visibility of progress and impact.

Without shared ownership and structured measurement, accountability cannot scale. Activity continues, but progress remains difficult to sustain, evidence, or improve over time.

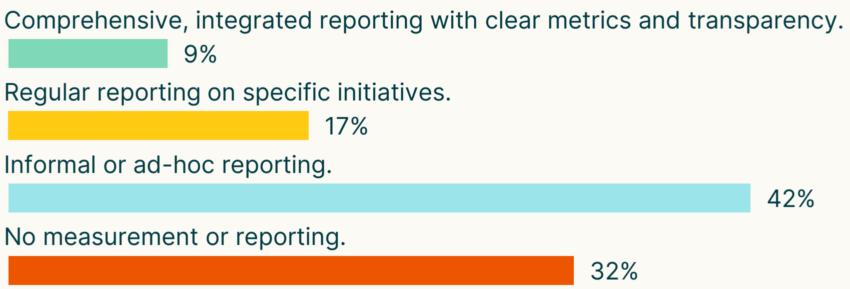
Embedding accountability across employees, supported by clear measurement, is what shifts wellbeing from leadership intent to organisation-wide execution.

Back to Alignment in the main report.

How are employees involved in accountability for their own and others' wellbeing?



How does the organisation measure and report on health and wellbeing accountability?



Key: Cultural, Preventative, Proactive, Reactive

Level of maturity definitions

Accountability isn't shared or measured consistently.

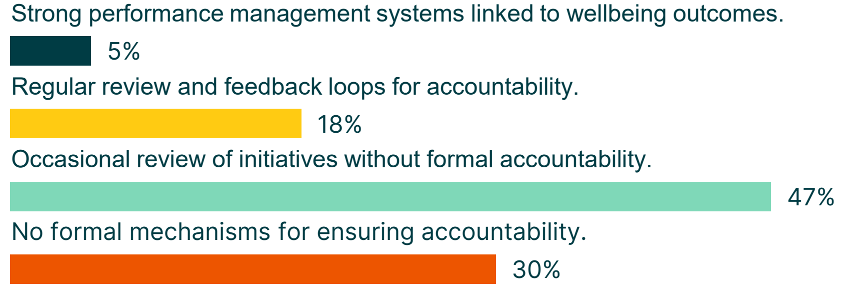
Structured accountability for delivery is the exception, not the rule. Only 5% link performance management systems directly to wellbeing outcomes, and 18% have regular review and feedback loops. 47% only review initiatives occasionally with no formal accountability, and 30% have no formal mechanisms at all.

Employee involvement follows a similar pattern. Just 7% actively empower employees with structured channels for input and co-creation, while 47% offer only occasional encouragement to participate, and 22% involve employees minimally or not at all.

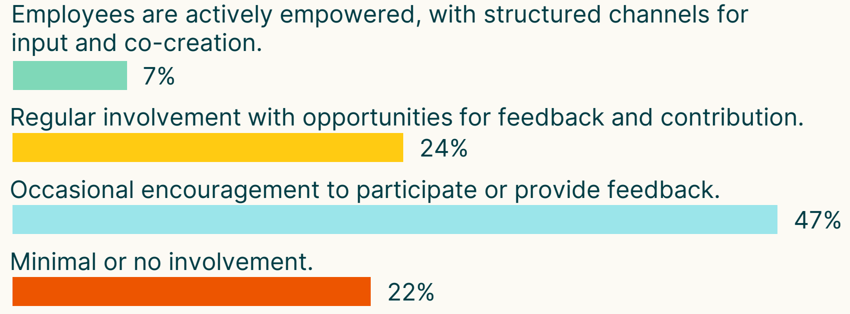
Without shared ownership and structured review, accountability cannot scale. Activity continues, but progress is hard to sustain, evidence or improve over time.

Embedding accountability across employees, supported by clear measurement, is what shifts wellbeing from leadership intent to organisation-wide execution.

How does the organisation ensure accountability in delivering health and wellbeing initiatives?



How are employees involved in accountability for their own and others' wellbeing?



Key Cultural · Preventative · Proactive · Reactive

Level of maturity definitions

Back to Accountability in the main report.

Dimensions are introduced reactively and engagement remains uneven.

Almost half of organisations (49%) introduce new wellbeing areas occasionally based on perceived needs, with only 24% doing so systematically and just 10% taking a continuous improvement approach.

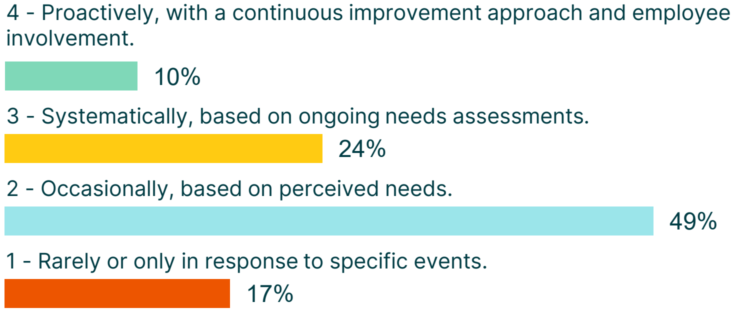
Engagement follows a similar pattern. 49% report participation focused on popular or promoted programmes, rather than a balanced range of dimensions, and only 7% involve employees in shaping or co-creating offerings.

Without clear structure and ongoing refinement, both coverage and engagement remain uneven. Participation concentrates in visible areas, while other dimensions are underused, limiting overall impact.

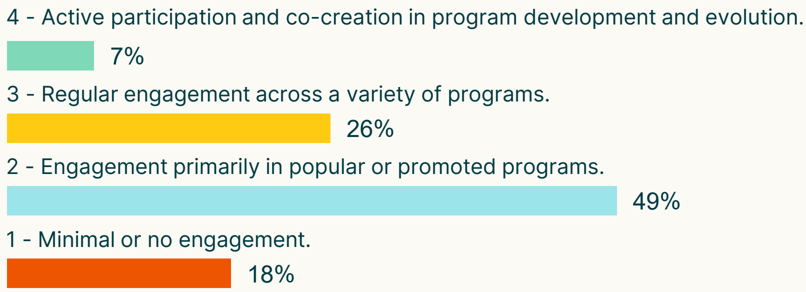
A structured, continuously evolving approach is what balances engagement across dimensions and improves overall effectiveness.

Back to Dimensions in the main report.

How are new health and wellbeing dimensions introduced in your organisation?



How do employees engage with the available health and wellbeing dimensions?



Key Cultural | Preventative | Proactive | Reactive

Level of maturity definitions

Unlocking scale through resources.

The data highlights that external support and capability development remain under-utilised levers.
43% of organisations use external partners in a limited or non-strategic way, and 46% provide only occasional opportunities for learning and development. This suggests that while gaps in capability are recognised, they are not being systematically addressed.

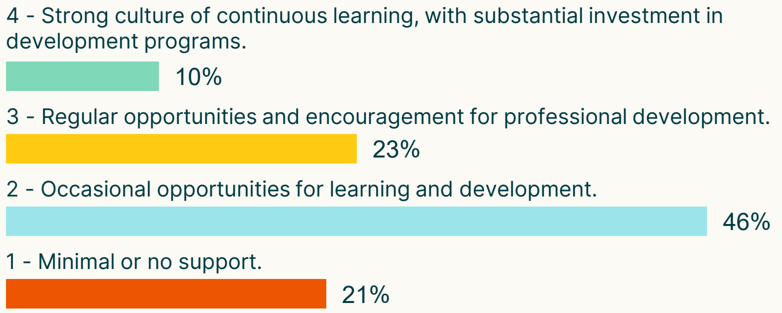
There is a clear opportunity to move from reactive support to a more deliberate model, where external expertise, internal capability building, and continuous development are used to strengthen delivery over time.

Organisations that do this well are better positioned to scale impact, maintain quality, and adapt as needs evolve.

Back to Resources in the main report.

How are external resources and partnerships leveraged for wellbeing initiatives?

How does the organisation support continuous learning and development in the field of health and wellbeing?



Key Cultural · Preventative · Proactive · Reactive

Level of maturity definitions