



DIRECTORS OF HEALTH PROMOTION AND EDUCATION INVESTING IN THE PUBLIC HEALTH EDUCATION WORKFORCE POLICY BRIEF

Issue:

America's health is at greater risk than ever before. Protecting the health of the public depends on well trained professionals to meet the ongoing demands of public health threats such as chronic diseases, the under/uninsured population, health disparities, health inequities and changing population demographics. Concerns about the rising cost of healthcare and the inclusion of prevention services gives renewed urgency for state health agencies to implement effective health promotion strategies that improve overall health and achieve health equity. This includes assuring that the public health workforce has the capacity and expertise to achieve these results.

State health agencies often find themselves in difficult economic circumstances that compel administrators to combine or eliminate programs. This in turn puts pressure on existing staff to carry out a number of different job functions, such as health promotion and education or the elimination of health inequities, without having the benefit of formal training or expertise in these areas. Health promotion and public health education involve a broad range of population-based interventions from disease prevention to risk reduction and are adaptable at various levels. Health educators are professionals with specialized education, training and expertise in promoting and influencing behaviors, policies, systems, and environmental changes that help communities achieve and maintain optimum health.

Varying personnel classification systems result in health educators being employed under a range of job titles. Fortunately, some public health professionals have taken the advanced step of obtaining certification in health education either as a Certified Health Education Specialist (CHES) or as a Master Certified Health Education Specialist (MCHES). This requires formal academic training in health education and requisite skills for implementing health promotion and education strategies within various settings.

Unfortunately many state and local health agencies assign employees to carry out health promotion and health education job functions without the necessary academic preparation or certifications. Furthermore, many public health professionals receive little or no formal academic training in how to address health inequities effectively. However, the basic competencies needed for health promotion



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and education complement skill-sets needed to address the entire spectrum of health equity concepts including health disparities, social determinants of health and health inequities. Effectively promoting the health of a population requires training in core competencies in addition to ongoing professional development in order to stay current with developments in the public health education practice field. Yet, professionals in health promotion/health equity units face a variety of barriers to securing training opportunities including, but not limited to:

- Agencies disallowing spending to meet educational needs;
- Administrative freezes on travel, especially out-of-state travel;
- Extensive workload burdens brought on by slow hiring processes, budget cuts, or under-funded programs, that don't allow workers to use work time for professional development;
- Lack of recognition by leadership that common core competencies for health educators have value and the belief that anyone can effectively fill the role of a health educator/health promotion/health equity specialist; and
- State job classification and salary ranges that do not accurately reflect the needed skills, knowledge and abilities.

These barriers and the lack of ongoing professional development result in professionals not having exposure to the latest information, to evidence-based strategies in health promotion and education, health equity or to grant opportunities that would bring additional resources to the state health agency. In the end, the state loses benefits of a comprehensive health promotion strategy that would improve the health of its residents, reduce the burden of medical care costs and strengthen health equity/disparity efforts.

Background:

The Directors of Health Promotion & Education (DHPE), as the national association serving state health agency health promotion staff and supporting health education functions, encourages its members to engage in professional development that focuses on health promotion and health equity in public health. This policy brief outlines the skills needed of a person working in health education/health promotion in order to improve health outcomes and achieve health equity. The brief includes



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recommendations for further dialogue and consideration by the membership of the Directors of Health Promotion and Education, state health agencies and federal agencies to explore ways to improve public health education workforce development while recognizing the constraints of limited resources.

The premise is that all professional staff need professional development. Those who are trained and/or are certified health education specialists need professional development to stay current. Those without a traditional health education background need training in the core competencies of public health education practice. If we are to achieve health equity in this country, the public health education workforce needs to be culturally competent and knowledgeable of evidence-based approaches that work for or across different population groups. The workforce must have the skill set to employ these approaches at the community level as well as the ability to communicate and connect with community leadership and residents.

To meet today's public health challenges, the skills and abilities needed by the public health education workforce must be able to:

- Assess community needs for health education and interpret epidemiological data to determine courses of direction for programs;
- Examine policy choices that would benefit the population and improve opportunities for health equity and facilitate their implementation;
- Strategically plan, organize, and implement interventions collaboratively with partners;
- Evaluate interventions, strategies, and program implementation, and use evaluation data both for reporting and taking corrective courses of action;
- Manage human resources, fiscal resources and identify/obtain funding;
- Act as a resource and consult effectively with others engaged in health promotion/education services and interventions;
- Communicate effectively with various target audiences; and
- Advocate for health programs and services.

Certified Health Education Specialists (CHES) and Master Certified Health Education Specialists (MCHES) have met standards of competence established by the National Commission for Health Education



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Credentialing, Inc. (NCHEC). Certified health education specialists (Bachelors and Masters Level) possess the requisite skills noted above. When an agency hires CHES or MCHES to fulfill health education/health promotion functions, the public can be assured that health promotion/education services are provided by professionals who have met national standards and are committed to continued professional development.

Professional Development and Continuing Education

All health promotion/education professionals need continuing education. Those who are CHES or MCHES must obtain ongoing continuing education to maintain their certification. Continuing education can be in-person, self-study, and through distance learning (e.g., online, satellite broadcast). Generally, distance learning is better suited for *knowledge-based* learning, while in-person education is better suited for *skills-building*. As a service, DHPE supports and provides opportunities for continuing education to its members and associates.

Benefits of Professional Education

For the individual professional, the benefits of continuing education include higher job satisfaction, feelings of competency, and building and maintaining a network of colleagues who can serve as resources.

For the state health agency, the benefits of having a well trained workforce include:

- Enhanced leadership abilities in meeting the challenges faced by the state;
- Higher quality of health education and health promotion offerings;
- Insights from colleagues in other states that encourage broad-based thinking;
- Improved integration of health promotion with other public health programs;
- Greater access to competitive funding through offerings by federal and private sources;
- Less employee turnover, which reduces costs in hiring and lost program development time due to vacancies;
- Greater dissemination of best practices to those in the state working at the local level; and
- Exposure to state-of-the-art primary prevention strategies that can save health care dollars.



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Recommendations for DHPE and/or State Health Promotion Directors:

- Assess the current capacity of state health agencies with respect to health promotion and health education by asking questions such as:
 1. Are staff health educators qualified through academic preparation?
 2. Do staff health educators have certification in health education (CHES or MCHES)?
 3. Are there talented professionals who are untrained filling positions in the health education unit?
 4. How well do current policies support professional development and continuing education for trained health educators and related professionals?
 5. What changes could support further training and professional development of the health education/health promotion work force?

- Advocate for hiring academically prepared health education specialists, especially those with CHES or MCHES;
- Advocate that staff who are not academically prepared health education specialists receive appropriate core training and opportunities for coaching, mentoring, job shadowing, job rotation, and other opportunities;
- Encourage advanced training for people with academic background and preparation;
- Advocate for adequate funding for professional development for health education and health promotion staff; and
- Maintain multiple event provider status with the National Commission for Health Education Credentialing, Inc. and offer continuing education contact hour units for DHPE's professional development offerings.

Recommendations for State Health Agencies:

- Hire highly qualified professionals to lead health promotion and public health education programs, ideally they would have Certified Health Education Specialist (CHES) or Master Certified Health Education Specialist (MCHES) credentials;



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- Provide continuing education for personnel with responsibility for health promotion and public health education, allowing them to maintain their expertise;
- Adopt continuous quality improvement plans for their health promotion and education programs using both internal and external review;
- Base accountable practice in health promotion and education on the areas of responsibility and competence identified by the National Commission for Health Education Credentialing; and
- Calculate the value of workforce development as a long-term investment.

Health Promotion and Public Health Education programs that improve the health of individuals and communities as well as the living and working conditions that influence health are integral for a strong public health system. State health agencies benefit from qualified and prepared staff and from investing in ongoing professional development. Management and staff at all levels must be actively involved in the process. Workforce development and continuity planning is essential to meeting organizational goals and assuring the workforce is well prepared to practice public health in the 21st Century.

References:

National Commission for Health Education Credentialing www.nchec.org

Public Health Accreditation Board <http://www.phaboard.org/standards/default.asp>

Public Health Foundation, Council on Linkages: Core Competencies for Public Health Professionals
<http://www.phf.org/link/core-061109.htm>

Date: July 2012