Health Education: An Essential Part of Public Health and Health Care

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Given the increasing complexity of our public health and health care systems, the public health profession has a more important role to play than ever in helping consumers/patients achieve and maintain optimal health. At the population level, public health professionals are at the forefront of research and education, forging multi-disciplinary alliances as never before. As a result, graduate degrees in public health are proliferating nationally.

The need for health education in community and clinical health environments is great, and growing. This includes education about personal and community health issues; strategies to reduce risk and improve health; specific resources and tools to help consumers to take appropriate pro-health actions; and support systems (access, financial assistance, health information resources, etc.) to sustain such actions. The goals of health education are two-fold: to provide information to enhance consumer or patient knowledge; and to help effect positive and long-term change in health behaviors.

This article provides a brief background of health education and health promotion, including an overview of its leading professional organization, the Society for Public Health Education (SOPHE); and explores the unique and critical role of the health educator in helping individuals internalize positive behavior-change, the ultimate goal of public health education.

Health education was first defined in the 1940s as “...requiring careful and thorough consideration of present knowledge, attitudes, goals, perceptions, social status, power structure, cultural traditions, and other aspects of whatever public is to be addressed.”

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Health education and health promotion are often referred to interchangeably, as “...any planned combination of educational, political, regulatory, and organizational supports for actions and conditions of living conducive to health of individuals, groups, and communities.”

Although it is an important first step in the health education process, knowledge alone does not lead to positive health behavior change. Guy Steuart, a health education leader during the 1960s through the 1980s, described public health services and health education as natural adjuncts to good quality medical care. He defined the role of the professional health educator as an agent of social change and a generalist whose skills are applicable in a variety of settings, cultures, and topics.

There are an estimated 58,000 professionally-trained health educators working in a wide variety of private and governmental settings, promoting healthy lifestyles.

Professional health educators typically possess graduate-level training, such as a Master’s of Public Health (MPH), and the ability to:

- Promote behaviors that help individuals, families, and their communities maximize and maintain the quality of their life and health
- Facilitate collaboration between the individual and health service organization to address the growing demand for comprehensive public health education
- Design and deliver evidence-based, cost-effective health education programs
- Assess health education needs and the impact of health service organizations in the community
- Effectively incorporate the teaching learning process to change behavior and improve patient outcomes
- Evaluate the effectiveness of health education programs, products, and services
- Advocate for and implement changes in policies, procedures, rules and regulations to advance the public’s health
- Partner with clinical providers to plan, conduct, and evaluate programs designed to improve patient outcomes
- Develop programs and policies that not only take into account individual knowledge, attitudes, beliefs, and behaviors but those behaviors and policies of key systems such as education, business, government, health care, civic organizations and societal norms and values.

Certification of health educators, while not required, is integral to continuing education, professional development, and standards of practice. The profession of health education has evolved over the past generation, with a defined code of ethics, competencies
Responsibilities and competencies of a Certified Health Education Specialist (CHES) include:

- Access individual and community needs for health education
- Plan health education strategies, interventions, and programs
- Implement health education strategies, interventions, and programs
- Conduct evaluation and research related to health education
- Administer health education strategies, interventions, and programs
- Serve as a health education resource person
- Communicate and advocate for health and health education

SOPHE, the leading national health education professional organization, was founded in 1950 and is affiliated with the International Union for Health Promotion and Education (IUHPE). It consists of over 2000 national members and an additional 2000 members of local chapters in the United States. Its purpose is to: provide leadership to the profession of public health education; contribute to the health of all people; eliminate disparities in health through advances in health education theory and research; promote excellence in professional preparation and practice; and advocate for public policies conducive to health. Its members work in schools, universities, health care settings, corporations, voluntary health agencies, health foundations, international organizations, and federal, state, and local government. Its two principal scholarly journals are *Health Education & Behavior* and *Health Promotion Practice*. SOPHE is a partner with the American Public Health Association, the U.S. Centers for Disease Control and Prevention (CDC), the Society of Behavioral Medicine, the National Public Health Partnership, and numerous other national and international health organizations that advocate and promote preventive health initiatives and resources to improve the health of our society.

Thomas Jefferson University’s Master of Public Health (MPH) Program embodies the principles of health education within its core curriculum, including two required community-based experiences, a clerkship, and a capstone research project. The program is aimed at both current health professionals seeking to expand their clinical practice to incorporate public health and those entering the public health profession for the first time. The degree can be pursued full-time or part-time, and a number of dual degree programs are available. Further information regarding Jefferson’s MPH program is available at www.jefferson.edu/mph/jcgs/msph.

Regardless of job title or training, we are all consumers of health information and, formally or informally, serve as health educators on behalf of our family, work colleagues, and community. It is vital that we strive to be the best “health educators” possible, to improve the health of our nation, our community, our family and ourselves.
References


