



Health Education Specialist Practice Analysis II (HESPA II)



*A Cooperative Project of the National Commission for Health Education Credentialing, Inc.
and the Society for Public Health Education, Inc.*

Executive Summary

The Health Education Specialist Practice Analysis II 2020 (HESPA II 2020) study was conducted from October 2017-August 2019 to investigate changes in the essential Areas of Responsibility, Competencies and Sub-competencies at entry-and advanced-levels of practice for health education specialists. The HESPA II 2020 is a joint initiative of the [Society for Public Health Education, Inc. \(SOPHE\)](#) and the [National Commission for Health Education Credentialing, Inc. \(NCHEC\)](#). The findings of this research have significant implications for professional preparation, continuing education, and practice for the health education profession. In accordance with national and international certification industry standards, the practice analysis study is conducted every five-years to ensure the [Certified Health Education Specialist CHES®](#) and [Master Certified Health Education Specialist MCHES®](#) examinations are updated and reflect contemporary practice.

The 22-month, multi-phased national study was commissioned by NCHEC and SOPHE and conducted with the technical guidance of [Scantron](#), a global technology and services driven company that provides expert assessment and technology solutions.

The following research questions were addressed by the HESPA II 2020:

- What are the Areas of Responsibility, Competencies, and Sub-competencies in the practice of entry-level health education specialists?
- What are the Areas of Responsibility, Competencies, and Sub-competencies in the practice of advanced-level health education specialists?
- What baseline knowledge is required to perform the Areas of Responsibility, Competencies, and Sub-competencies for health education specialists?

The study was guided by a Technical Advisory Group (TAG) consisting of chair Randy Cottrell, D.Ed., MCHES®; vice chair Adam P. Knowlden, MBA, PhD, CHES®; the HESPA I - 2015 task force co-chair, James F. McKenzie, PhD, MCHES®; Kathleen Allison, PhD, MPH, MCHES®, coordinator of NCHEC's Division Board for Certification of Health Education Specialists; the chief staff officers of NCHEC, Linda Lysoby, MS, MCHES, CAE and of SOPHE, Elaine Auld, MPH, MCHES; and Cynthia Narh, MPH, MCHES®, NCHEC staff member. A broad section of certified and non-certified health education specialists from all 50 states volunteered to participate in the study as members of the study panel, pilot study participants, and respondents to the formal validation survey. We are grateful to these participants for their time, energy and thoughtful contributions.

In addition to the planning process, the HESPA II 2020 study consisted of two major implementation phases, the first of which was the development of a model of Areas of Responsibility, Competencies, Sub-competencies. A panel of 17 individuals, diverse along variables that affect the practice of health education including work setting, experience level, education background, demographic groups, and geographic settings, were tasked with examining the 2015 Responsibilities, Competencies, and Sub-Competencies and knowledge items that eventually became the basis for two survey instruments. The second phase was the validation study. Study participants were contacted via existing lists of the sponsoring organizations and additional organization assistance was requested from member organizations of the Coalition of National Health Education Organization (CNHEO) and national and state affiliates of major health education associations. Two online surveys, one focusing on competencies one focusing on knowledge areas, were available for a three-month window from November 2018 to January 2019, resulting in 3,851 usable surveys.

The resulting hierarchical model consists of 193 Sub-competencies, organized into 35 Competencies within Eight Areas of Responsibility. Of the Sub-competencies, 114 (59.17%) were validated as entry-level, 59 (30.6 %) were validated as advanced-1-level, and 20 (10.4%) were validated as advanced 2-level. The knowledge base needed by health education specialists was organized into 10 conceptual topic areas, and 145 knowledge topics were validated as being used by health education specialists.

HESPA II 2020 Hierarchical Framework Summary	
Areas of Responsibility	8
Competencies	35
Entry-level Competencies	29
Advanced-level Competencies	6
Sub-competencies	193
Entry-level Sub-competencies	114
Advanced-1 Sub-competencies	59
Advanced-2 Sub-competencies	20
Verified Knowledge List	145

HESPA II 2020 Areas, Competencies, and Sub-competencies at each level

	Area of Responsibility	Competencies	Total Sub-competencies	Entry-level	Advanced 1	Advanced 2
I	Assessment of Needs and Capacity	4	25	22	3	0
II	Planning	4	19	11	8	0
III	Implementation	3	16	15	1	0
IV	Evaluation and Research	5	37	6	16	15
V	Advocacy	4	18	16	2	0
VI	Communication	6	26	24	1	1
VII	Leadership and Management	5	31	6	23	2
VIII	Ethics and Professionalism	4	21	14	5	2
	Total	35	193	114	59	20

The HESPA II 2020 Exam Specifications were approved by the NCHC board* as is the board that oversees the exams' administration. The exam specifications based on HESPA II 2020 will be effective 2021. Test specifications for the CHES® and MCHES® were empirically derived based on the validation survey data. Test specifications are the recommended percentages of the CHES® and MCHES® examinations that should be comprised of questions from each Area of Responsibility and for each Competency within the Areas of Responsibility. Information on the use of the validated knowledge also may be used in the construction of examination questions. Findings of this report should be shared widely with the health education profession and other stakeholders in efforts to promote continuous quality improvement of professional preparation, professional development, and certification of health education specialists.

HESPA II 2020 Exam Specifications for the CHES® and MCHES® examinations – effective 2021

Areas of Responsibility	CHES® % of exam	MCHES® % of exam
I. Assessment of Needs and Capacity	17%	12%
II. Planning	14%	10%
III. Implementation	15%	9%
IV. Evaluation and Research	12%	20%
V. Advocacy	12%	9%
VI. Communication	12%	12%
VII. Leadership and Management	6%	18%
VIII. Ethics and Professionalism	12%	10%
Total	100%	100%

**Exam specifications were approved by the NCHEC Board of Commissioners only*

The Executive Summary of the study includes 12 recommendations to the health education profession, employers and other stakeholders regarding the use of the HESPA II 2020 model. The Executive Summary can be accessed on the NCHEC Website at www.nchecc.org. Findings from the HESPA II 2020 will be published in *A Competency Based Framework for Health Education Specialists 2020*, which will be available in spring 2020.

Health Education Specialist Practice Analysis II 2020 (HESPA II 2020) ***Recommendations for Advancing the Profession***

The Society for Public Health Education, Inc. (SOPHE) and the National Commission for Health Education Credentialing, Inc. (NCHEC) commissioned the Health Education Specialist Practice Analysis II (HESPA II 2020) to verify and update the health education competencies on behalf of the health education profession. As the copyright holders of the health education competencies, the boards make the following recommendations regarding the use of the HESPA II 2020 hierarchical model for all Health Education Specialists and for further advancing the health education profession.

1. Baccalaureate degree programs with a health education and promotion emphasis should prepare graduates to perform all entry-level Competencies and Sub-competencies within the Eight Areas of Responsibility. Additionally, curricula should incorporate the verified knowledge items.
2. Master's programs with a health education and promotion emphasis should prepare graduates to perform all entry-level and advanced 1-level Competencies and Sub-competencies within the Eight Areas of Responsibility. Additionally, curricula should incorporate the verified knowledge items.
3. Doctoral programs with a health education and promotion emphasis should prepare graduates to perform all entry-level, advanced 1-level and advanced 2-level Competencies and Sub-competencies within the Eight Areas of Responsibility. Additionally, curricula should incorporate the verified knowledge items.
4. NCHEC should use all entry-level Competencies and Sub-competencies within the Eight Areas of Responsibility as the basis for the Certified Health Education Specialist (CHES®) examination. Additionally, verified knowledge items should be utilized in the development of exam questions.

5. NCHEC should use all entry- and advanced 1-level and advanced 2-level Competencies and Sub-competencies within the Eight Areas of Responsibility as the basis for the advanced-level Master Certified Health Education Specialist (MCHES®) examination. Additionally, verified knowledge items should be utilized in the development of exam questions.
6. All entry- and advanced-level Competencies and Sub-competencies within the Eight Areas of Responsibility and the verified knowledge items should serve as the basis for professional development and continuing education for the health education and promotion profession.
7. Accrediting agencies and approval bodies should recognize the Eight Areas of Responsibility, Competencies, and Sub-competencies as the basis for quality assurance of health education professional preparation programs and all workforce settings.
8. The HESPA II 2020 hierarchical model should be used as the basis for communicating about the Responsibilities and Competencies of all health education specialists to public and private employers, national/state/local government agencies, health insurers, health professionals, and other stakeholders.
9. Public and private employers should hire certified health education specialists and utilize the HESPA II 2020 Responsibilities and Competencies in developing job descriptions and evaluating the performance of their health education and promotion workforce.
10. Public and private employers should provide support for professional development and continuing education offerings aligned with the latest HESPA II 2020 Responsibilities and Competencies as a means of promoting continuing competency of their health education and promotion workforce.
11. Health education specialists at all levels of education and experience should abide by ethical principles and practices in alignment with the HESPA II 2020 hierarchical model.
12. As the profession moves forward, all those practicing health education and promotion should obtain and maintain certification as a health education specialist.