Over the past 30 years, four health education competency development/job analysis studies have been released in the US:

1. 1985-Role Delineation Project,
2. 2006-Competencies Update Project (CUP),
3. 2010-Health Education Job Analysis (HEJA); and
4. 2015-Health Education Specialist Practice Analysis (HESPA).

The studies were examined to:

- Identify which of the verified HESPA competencies address processes related to health literacy.
- Compare the similarities and differences in the number of Areas of Responsibilities, Competencies, and Entry- and Advanced-level Sub-competencies of Health Education Specialists.
- Identify which of the verified HESPA competencies address processes related to health literacy.

### Selected HESPA Sub-competencies Related to Health Literacy

**Area I: Assess Needs, Resources, and Capacity for Health Education/Promotion**

1.5 Examine factors that influence the process by which people learn

   1.5.1 Identify and analyze factors that foster or hinder the learning process
   1.5.2 Identify and analyze factors that foster or hinder knowledge acquisition
   1.5.3 Identify and analyze factors that influence attitudes and beliefs
   1.5.4 Identify and analyze factors that foster or hinder acquisition of skills

**Area VII: Communicate, Promote, and Advocate for Health, Health Education/Promotion, and the Profession**

7.1 Identify, develop, and deliver messages using a variety of communication strategies, methods, and techniques

   7.1.1 Create messages using communication theories and/or models
   7.1.2 Identify level of literacy of intended audience
   7.1.3 Tailor messages for intended audience
   7.1.4 Pilot test messages and delivery methods

### Areas of Responsibility of Health Education Specialist (2015)

- Assess Needs, Resources, and Capacity for Health Education/Promotion
- Plan Health Education/Promotion
- Implement Health Education/Promotion
- Conduct Evaluation and Research Related to Health Education/Promotion
- Administer and Manage Health Education
- Serve as Health Education/Promotion Resource Person
- Communicate, Promote and Advocate for Health, Health Education/Promotion, and the Profession

### Growth in Responsibilities, Competencies and Sub-competencies of Health Education Specialists in Four U.S. Studies

<table>
<thead>
<tr>
<th>1985 Role Delineation</th>
<th>2006 CUP</th>
<th>2010 HEJA</th>
<th>2015 HESPA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Responsibilities</td>
<td>7</td>
<td>27</td>
<td>7</td>
</tr>
<tr>
<td>Competencies</td>
<td>7</td>
<td>35</td>
<td>36</td>
</tr>
<tr>
<td>Sub-competencies</td>
<td>79</td>
<td>163</td>
<td>223</td>
</tr>
</tbody>
</table>

Entry-level

- 1985: 79
- 2006: 82
- 2010: 161
- 2015: 141

Advanced- Level

- 1985: 0
- 2006: 81
- 2010: 61
- 2015: 117

Advanced-1

- 1985: 0
- 2006: 48
- 2010: 42
- 2015: 76

Advanced-2

- 1985: 0
- 2006: 33
- 2010: 19
- 2015: 41

The results of these studies, spearheaded by the National Commission for Health Education Credentialing Inc (NCHEC) and the Society for Public Health Education (SOPHE), serve as the basis of the Certified Health Education Specialist (CHES®) and the Master Certified Health Education Specialist (MCHES®) examinations.

### Outcomes/ Impact

Four US Studies continue to define contemporary health education practice within 7 Areas of Responsibility with increasing numbers of Competencies and Sub-competencies.

The name of each Area of Responsibility was expanded to show “health education/promotion” rather than the previous “health education.”

The occupational title was changed from health educator to health education specialist for more distinction from other disciplines who provide health education.

Thirty percent (76/258) of the verified Health Education Competencies directly or indirectly address processes related to health literacy.

An increased recognition of the impact of health literacy on health status emphasizes the importance of training and competence of the health education professional in this arena.

With the increasing diversity of the U.S. population, employers seeking to provide training to their health/non-health employees in health literacy can utilize CHES®/MCHES® who have core knowledge and skills in this area and can develop curricula.

### REFERENCES