

**Ethics and Health Education/Promotion**

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PBH 602 Module 6

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Ethics and professional ethics are a fundamental part for a solid foundation within health education. Ethics are the guiding morals that allow for individuals make decisions where professional ethics are the standards and direct behavior that is expected in a specific profession. It is important to health educators, such as myself, because of impact on individuals and the community. This will be further explained through the two main ethical decisions that can be made and those are dealing with actions through consequences (outcome driven) and the other is about the focus of the action, consequentialism, or deontology, respectively. In the decision making of ethics there are 5 basic principles: value of life, goodness, justice, honesty, and autonomy that can be applied to health education decisions. Using all the pieces of ethics as a Health Education Specialist I will ensure that my work remains professional, competent, and upholds the ethical standards.

We will be starting with understanding why it is important for health educators to act ethically. When looking at the SOPHE 2019 Health Education Teacher Preparation Standards it states that “Component 6e: Candidates can apply the Health Education Code of Ethics and other major responsibilities of a health education specialist to professional practice.”. This component is put in place to ensure that the standard of professionalism is met. This is important because it created a more defined line where there is a lot of grey area in ethical. It helps guide the moral compass and ethical decision making the right direction. Then looking at “HESPA II Competencies and Sub-competencies” the 8<sup>th</sup> area is Ethics and Professionalism. Again, it is mentioning “applying professional codes of ethics and ethical principles throughout assessment, planning, implementation, evaluation and research, communication, consulting, and advocacy processes” (HESPA II, 2020). This is the standard because the application not only affects the individual,

but also can affect the community that the Health Education Specialist is part of. These standards are put in place to ensure that there is some type of consistency among the health education realm for ethics and guiding educators in the right direction. An analysis done on the Competencies and Sub-Competencies surveyed 3,851 participants in their knowledge of the 8 areas of responsibility and different levels of competency for each of the categories and components. The result in the ethical category was that “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” (HESPA II Summary, 2020). This means that leaning into ethical decision-making within the profession is an essential part in overall success and competence in the field. In a study done about emotions and how they play a role in health professional ethics teachings it was believed that “there is a need for a coherent ethical and pedagogical framework to locate the appropriate roles of emotion in ethical deliberation and practice” (Gilliam 2014). The discussion was for utilizing emotion in the ethical decision making, rather than setting those emotions aside in the educational field. The conclusion was that through the development of emotion in ethics in the health professional experience “a sound theoretical and pedagogical base, trained and confident educators are needed to deal with the educational and pastoral concerns raised by participants” (Gilliam 2014). Therefore, it is not only the development of ethics in relation to the standards, but a sound moral compass, curriculum, and personal confidence that allows for competence within the field. Ethical decision making as a health education professional is important because ““in making decisions it is imperative that one has analyzed his or her decisions in terms of standards of right and wrong, good and bad’... to decide and, in turn, act in an ethical manner, people must rely on their values, principles, and ethical thinking” (Cottrell 2023). Ethics are needed in the process of education built upon

personal morals and guided by the standards. The standards are assisted by the 5 basic principles for making ethical decisions and rooted in the two main ethical theories.

Again, the theories are consequentialism, which focuses on the consequence of an action or the outcome and deontology, which is based on the morals of the process or the actions themselves. Each of the principles could be viewed through either scope. The first principle is the value of life, “this means that no life should be ended without strong justification” (Cottrell 2023). This can be applied when talking about sensitive issues and having discussions about abortion or suicide with mature audiences. You could look at the outcome or the process of these situations, using each theory of ethics. These are topics that are covered in health education and need to be talked about in a manner that allows for personal and professional ethics to come into play. The second basic principle is goodness/ rightness. This is a difficult concept that involves many different parts mostly because it is relative to each person’s own abstract meaning of the word and is in relation to other people. It incorporates the concepts of nonmaleficence and beneficence meaning not inflicting harm, preventing harm, and removing harm and avoiding doing harm or completing a kind act, respectively. This shows the “benefit-harm ratio” (Cottrell 2023). A small example of this in the classroom is when to intervene when a student is struggling with classwork (a very mild example). The question lies in what is allowing the student to struggle so much that they are frustrated and quit or appease them too much and they have gained learned helplessness. This is where the ethical ratio can come into play. The third principle is justice. An example of this is “should only those who are able to pay for them receive health education/promotion services or should only the poor carry that burden?” (Cottrell 2023). There is a opportunity for those that are poor to have the services, but is it equitable for them to receive the services, so then the question arises: should the rich pay? This is where different morals,

views, and emotions can play into ethics. The fourth is truth telling. This is the backbone of meaningful communication. It is not to say that all lying is not justified. An example that was given is that a “health education specialist working in a clinical setting... [has a patient] that an ill child (a minor by law) asks about their health problem, but the child’s parent or guardian has strictly forbidden such communication” (Cottrell 2023). This is a difficult situation to be in and this is where ethics play a big role and why there are rules and standards put into place to allow for them to be a more defined line within the grey area. Lastly, the fifth principle is autonomy. This is the freedom and individuality of the individual. If, Health Education Specialist, I give all the information to live a healthier lifestyle and quit smoking, give them the side effects, costs, benefits of stopping, and the person chooses to continue I need to respect their choice and rights to their autonomy.

As a Health Specialist it is important to act ethically upon the standards that are given within the profession. First starting with the “Core Ethical Expectations”. This is setting the standard of what is expected in the profession. Number 1 alludes to following the 5 principles of ethics that previously mentioned: honesty, autonomy, beneficence, respect, and justice. This relates directly to Area VIII: Ethics and Professionalism section 8.1 that states “Practice in accordance with established ethical principals” (SOPHE...(8) 2019). The next question to answer is what would this look like in action? As an educator, as previously stated, there is a need for strong morals and pedagogical reliance. It is important to apply each of the codes in an appropriate manner. This means that educators “should, under no circumstances, engage in derogatory language, violence, bigotry, racism, harassment, inappropriate sexual activities or communications in person or through the use of technology and other means” (Harris 2023). This creates a very defined line within the grey area of ethics. The bottom line is that there is a need to act

professionally and maintain a positive relationship that is appropriate. The Code of Ethics for the Health Education Profession in ARTICLE I section 2 and 4 goes on to account for individual's rights and respect of their privacy. This is on the educator to hold respect for other individuals, groups, and communities and their rights to make decisions, as well as show support in those relationships. This is as long as the activity or behavior shows no risk to others. This connects to sections 8.1.4 and 8.1.6 of the Eight Areas of Responsibility for Health Education Specialists because of the promotion of health equity and inclusion of diverse groups. This may not be the personal belief of the educator, but it is our duty to educate all students and respect their beliefs and aspects of their lives and create culturally responsive pedagogy. Section 3 in ARTICLE I of the Code of Ethics mentions having the proper qualifications and recommends those who are also properly qualified or informed to share their practice. This is to only practice where their competence lies as a Health Education Specialist. This falls under section 8.1 of the Areas of Responsibility; "Practice in accordance with established ethical principles" (Harris 2023). If the educator follows the principle of honesty, they are giving the proper services to those who are in need. An example would be that a Health Educator is not the best resource for trauma intervention services such as counseling, but they are able to give trusted resources to guide the individual in the right direction. Acting as a counselor would be against the code of ethics in this situation. The last 3 sections in ARTICLE I: Core Ethical Expectations say that communication and responsiveness to unethical situations is imperative. If this is not implemented, then it is a violation to the Code of Ethics. I believe that this connects closest with Area V: Advocacy of The Eight Responsibilities for a Health Education Specialist because the educator needs to show advocacy for their profession and uphold their responsibility to speak on behalf of the issues that are seen as unethical. In ARTICLE II: Ethical Practice Expectations in the Code of Ethics

Section 1: Responsibility to the Public it mentions that Health Education Specialists must “promote maximal health benefits and eliminate or minimize preventable risks... redefine existing practices, develop new practice and share outcomes...involve individuals, groups, stakeholders, and communities in the entire educational process” (Appendix A). This involves Areas V and VI Advocacy and Communication, respectively. This is because the educator needs to advocate for the benefits and the discovery of new practices and then have the communication skills to engage those various communities in the educational process (Appendix B). Section 2: Responsibility to the Profession, Section 3: Responsibility to Employers, Section 4: Responsibility in the Delivery of Health Education/Promotion, and Section 6: Responsibility in Professional Preparation and Continuing Education in the Code of Ethics all relate most closely with Area VIII: Ethics and Professionalism because of diligence of the educator needs to be carried out an expanded upon within additional professional development, promotion of health education, and advancement of their knowledge ion the profession to stakeholders, the public, and other groups. This is all being done in accordance with the established ethical principles. Finally, Section 5: Responsibility in Research and Evaluation closely related to, you guessed it, Area IV: Evaluation and Research. Overall, this shows the importance of the impact of evaluation and eventually intervention. When using findings there needs to be sound research backing it, to in turn make a change for the betterment of the issue being investigated.

This paper had allowed me to take a closer look at the critical role that ethics play in health education. It highlights the decision-making and behaviors that should be adhered to in the profession. The driving force to professional ethics is strong pedagogical methods and morals, values, and beliefs of an educator. The standards act as a guide to decision-making through the two main theories: those driven by outcomes (consequentialism) and those driven by process

(deontology). The 5 principles involved in ethics include value of life, goodness, justice, honesty, and autonomy. These principles are the framework for maintaining professionalism, competence, and a sense of consistency across the field. When analyzing the Code of Ethics for Health Education Profession it is important to acknowledge the connection to The Eight Areas of Responsibility for the Health Education Specialist because these parts work in conjunction with one another. It helps guide and assist thinking in a direction for the betterment of the individual educator, the learner, stakeholders, and communities. Overall, this paper emphasizes the importance of acting ethically in health education, guided by principles and standards, to ensure the ethical health practices that are strived for.



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