1. **POLICY AND MANDATES**: Advance national, state, and local policies, systems, and environments that support health education and promotion.

   1.1. Advocate for the appropriation and authorization of legislation, supportive regulations, and funding mechanisms domestically and globally.

      1.1.1. Educate key executive and legislative decision makers at federal and state levels about the value of health education and promotion, especially when there are changes in leadership within agencies.

      1.1.2. Advocate jointly with health and education organizations that have shared values to advance the health education and promotion policy agenda.

      1.1.3. Establish alliances with nontraditional partners who share our values (e.g. faith communities, urban planners, and youth organizations).

      1.1.4. Utilize multiple communication channels, including social media, to accomplish advocacy objectives.

   1.2. Build administrative leadership capacity of health education and promotion specialists to assume positions of power and influence within state and federal agencies.

      1.2.1. Conduct an Annual Health Education Advocacy Summit.

      1.2.2. Expand and promote policy fellowships and other continuing education opportunities in health education and promotion.

      1.2.3. Expand and promote opportunities for early career leadership development, including mentoring and internships.

      1.2.4. Infuse health policy analysis and advocacy skills in professional preparation and professional development.

   1.3. Prioritize school settings as venues for primary prevention, health education, and health-promoting environments.

      1.3.1. Develop and maintain a toolbox of existing resources to help leaders advocate for funding and resources to support school health education and promotion and broader school health efforts.

      1.3.2. Implement mechanisms for sharing successes in accessing ESSA and other resources to support local school health efforts, including school-based health centers.
2. **PREPARATION AND PROFESSIONAL DEVELOPMENT**: Strengthen the presence and quality of health education and promotion academic preparation programs and professional development.

2.1. Increase opportunities for health education and promotion specialists to develop leadership skills for service in diverse settings.

   2.1.1. Create opportunities for health education and promotion specialists to develop leadership skills during health education and promotion professional preparation programs and in-service professional development.

   2.1.2. Identify existing opportunities for, and gaps in, leadership development targeted to health education specialists during health education and promotion professional preparation programs and in-service professional development.

   2.1.3. Provide leadership development opportunities at national conferences.

2.2. Increase the presence of health education specialists in leadership positions in diverse settings.

   2.2.1. Create and disseminate a white paper identifying best practices and resources related to leadership development.

   2.2.2. Strengthen communications related to leadership opportunities in diverse settings (e.g., through job banks or professional recruiters).

2.3. Use research-informed practices and promote organizational structures that enhance health education and promotion professional preparation programs.

   2.3.1. Track job placement of health education specialists upon graduation from professional preparation programs.

   2.3.2. Increase the number of faculty in professional preparation programs who hold CHES®/MCHES® certifications and promote the certification to students.

   2.3.3. Promote certification requirements based on the seven health education areas of responsibility at the state and national accrediting-body levels.

2.4. Promote the use of evidence-based in-service professional development for health education specialists.

   2.4.1. Identify the principles of best practices in professional development for health education specialists.

   2.4.2. Disseminate and incorporate best practices into in-service professional development events for strengthening health education and promotion programs.
3. **CREDENTIALING**: Increase the proportion of health education specialists who are CHES®/MCHES®.

   3.1. Obtain CNHEO endorsement of the CHES®/MCHES® certifications for health education specialists.

      3.1.1. Develop a statement endorsing support of the CHES®/MCHES® certifications for health education specialists.

      3.1.2. Disseminate the endorsement statement (3.1.1.) to all CNHEO member/observer organizations and request the statement be available in an open access, downloadable format to be used in promotional materials (e.g., websites, social media, newsletters, and journals).

   3.2. Cooperate with the on-going practice analysis conducted every 5 years for health education specialists.

      3.2.1. Share information about, and encourage members and professionals in the field to participate in the practice analysis research.

   3.3. Increase the proportion of professional organizations promoting the CHES®/MCHES® certifications.

      3.3.1. CNHEO member organizations shall develop a tailored statement endorsing support of CHES®/MCHES® certification for health education specialists.

      3.3.2. Request that conference program planners of CNHEO member organizations provide a venue (PowerPoint slides, announcements at general session, or program announcement, etc.) to share CHES®/MCHES® certification updates.

      3.3.3. Encourage CNHEO member organizations to display credentials at professional meetings and on materials (e.g., badges presentations, program materials, and journal articles).

      3.3.4. Promote the availability of CHES®/MCHES® continuing education credits for various activities of member organizations.

   3.4. Increase awareness of resources available on the NCHEC website to help those preparing to take the CHES®/MCHES® examinations.

4. **IDENTITY AND VALUE**: Improve the identity and value of the health education and promotion profession among internal and external stakeholders.

   4.1. Define and gain consensus about the unique identity and value of the health education and promotion profession.

       4.1.1. Initiate a work group to update and add to the existing, unified definitions for the profession.
4.1.2. Disseminate updated definitions for the profession through various venues.

4.1.3. Specify how health education specialists’ unique identity and value benefits other sectors.

4.1.4. Promote ways that health education specialists’ work positively affects health and social outcomes.

4.2. Communicate the unique identity and value of the health education and promotion profession to internal and external stakeholders.

4.2.1. Develop a communication plan to inform and disseminate the unique identity and value of the health education and promotion profession through various outlets (i.e., toolkit, presentations, social media strategy, journals, and newsletters).

4.3. Evaluate the impact of the professions’ collective efforts to improve the identity and value of health education and promotion.

4.3.1. Establish a working team to develop recommendations for improving the identity and value of the health education and promotion profession.

4.3.2. Develop benchmarks to evaluate the impact of the professional organizations’ efforts through 2024.

4.3.3. Track benchmarks and inform internal and external stakeholders on the impact of the identity and value of health education and promotion.

5. **WORKFORCE AND DIVERSITY:** Increase the number of worksites who hire professionally prepared certified/licensed health education specialists, which reflect the diversity of the communities served.

5.1. Develop linkages between colleges and worksites to advocate for credentialed health education specialists.

5.1.1. Identify and collect in a database all institutions of higher education programs that prepare health education specialists.

5.1.2. Publish a listing of institutions of higher education in a central location.

5.1.3. Develop and distribute tools/materials describing the role, purpose and training of health education specialists to institutions of higher education and worksites.

5.1.4. Identify Human Resource organizations outreach opportunities to the communication group such as resource fairs, webinars, and conferences.
5.2. Increase opportunities for certifications and training among diverse populations.
   
   5.2.1. Offer scholarships to support candidates taking the CHES®/MCHES® exam for a limited number of individuals each year.
   
   5.2.2. Offer a limited number of scholarships each year to support participation in professional development events.
   
5.3. Assist worksites in developing pathways to CHES®/MCHES® certification.
   
   5.3.1. Develop incentives to assist worksites in offering CHES®/MCHES® for health education specialists (such as a 10% discount on the fee if 10+ employees take the exam).
   
   5.3.2. Develop a model value proposition statement for businesses and other organizations that maintain and support certified health education specialists’ positions.
   
   5.3.3. Market to hiring officials and Human Resources departments the value of certification/licensure/endorsement (using tools developed by whom and located where?).
   
   5.3.4. Develop a toolkit to help Human Resources staff members know how to relate health education and promotion competencies to position descriptions and job announcements.
   
   5.3.5. Identify professional employers that recognize CHES®/MCHES® as a preferred qualification for health education and promotion positions.
   
6. RESEARCH AND PRACTICE: Strengthen and integrate quality research and practice in health education and promotion.
   
   6.1. Advocate for increasing networks between researchers and practitioners to address current and emerging issues in quality practice.
   
   6.1.1. Identify a network(s) of researchers and practitioners interested in current and emerging issues in quality practice.
   
   6.1.2. Develop and implement messages to help close the gap between research and practice.
   
   6.1.3. Investigate opportunities to connect researchers and practitioners through various means like conference calls and annual conventions/meetings.
   
6.2. Develop an agenda for the profession of health education and promotion to inform and link research and practice.
   
   6.2.1. Establish a research and practice collaborative among the CNHEO organizations and other invited entities.
6.2.2. Develop a research-agenda for best practices on developing health education specialists in professional preparation programs.

6.2.3. Identify quality research that has implications for health education and promotion practice and deserves broad dissemination in identified settings to include the value of health education and promotion in impacting health and social outcomes and best practices on developing health education specialists in professional preparation programs.

6.2.4. Develop a research work plan that supports health education and promotion policies, practice, and resource allocations.

6.2.5. Create and disseminate a profession-wide white paper on the key areas of research of the profession.

6.3. Support and promote the adoption and research on the effectiveness of the Whole School, Whole Community, Whole Child (WSCC model).

6.3.1. Identify key stakeholders and current implementation practices of the WSCC model.

6.3.2. Identify current research being conducted on the WSCC model.

6.3.3. Establish plans for research to understand, promote, and implement the WSCC model and its impact.

6.3.4. CNHEO organizations commit to disseminating information about quality research and practice on the WSCC model.