

Association for the Advancement of Health Promotion (AAHE)
AAHE Code of Ethics for Health Educators

Article I – Responsibility To The Public

Health educators' ultimate responsibility is to educate people about health in order to promote wellness and quality of life. Health educators recognize that decisions about health are made at the individual, family, peer, community, societal, and global levels. When there is a conflict of interest among individuals, groups, agencies, or institutions, health educators consider all issues and give priority to the principles of responsibility and freedom of choice.

Section 1. Health educators support the right of individuals to make informed decisions regarding their own health.

Section 2. Health educators encourage actions and social policies that support the best balance of benefits over harm for all affected parties.

Section 3. Health educators accurately communicate the potential benefits and consequences of services.

Section 4. Health educators act on conditions that can adversely affect the health of individuals and communities.

Section 5. Health educators are truthful about their qualifications and the limitations of their experience and provide services consistent with these qualifications and limitations.

Section 6. Health educators are committed to providing professional services equitably to all people.

Section 7. Health educators respect the rights of others to hold diverse values, attitudes, and opinions.

Section 8. Health educators protect individuals' privacy and dignity.

Article II – Responsibility To The Profession

Health educators are responsible for the reputation of their profession. Their professional behavior is consistent with the Code of Ethics. When appropriate, they consult with colleagues in order to promote ethical conduct.

Section 1. Health educators maintain their professional competence through continued study and education.

Section 2. Health educators treat all individuals equitably in professional actions (e.g., hiring, promotion, retention, work assignments, and admission policies) regardless of age, gender, race, ethnicity, national origin, religion, sexual orientation, disability, socioeconomic status, or any basis prescribed by law.

Section 3. Health educators encourage and accept critical discourse in order to improve the profession.

Section 4. Health educators contribute to the development of the profession by sharing program components they have found to be effective.

Section 5. Health educators do not manipulate or violate others' rights in sexual, emotional, financial, or other ways.

Section 6. Health educators are aware of possible conflicts of interest and exercise integrity in these situations.

Section 7. Health educators give appropriate recognition to students and colleagues for their professional contributions.

Article III – Responsibility To Employers

Health educators recognize the boundaries of their professional competence. They provide services and programs for which they are qualified by education and experience, and they are accountable for their professional activities.

Section 1. Health educators accurately represent their own qualifications and the qualifications of others they recommend.

Section 2. Health educators use current professional standards, theory, and guidelines as criteria when accepting consultations, when delegating Health Promotion activities, and when making referrals.

Section 3. Health educators accurately represent potential program outcomes to employers.

Section 4. Health educators make known competing commitments, conflicts of interest, and endorsement of products when the quality of Health Promotion delivered could be adversely affected by these activities.

Section 5. Health educators openly communicate to employers when expectations or job-related assignments conflict with professional ethics.

Article IV – Responsibility In The Delivery Of Health Promotion

Health educators promote integrity in the delivery of Health Promotion and respect the fundamental rights, dignity, confidentiality, and worth of all people by adapting strategies and methods to the needs of different populations.

Section 1. Health educators are sensitive to the variety of cultural and social norms.

Section 2. Health educators promote the right of individuals and groups to be actively involved in all aspects of the educational process.

Section 3. Health educators use educational strategies and methods that reflect the Code of Ethics and applicable laws. If neither law nor the Code of Ethics provides guidance in resolving an issue, health educators consider other professional standards as well as their own personal standards of ethical behavior, and consult other health educators.

Section 4. Health educators implement strategies and methods that enable individuals to adopt healthy lifestyles through choice rather than by coercion.

Section 5. Health educators conduct regular evaluations of program effectiveness.

Section 6. Health educators provide educational interventions that are grounded in a theoretical framework and supported by empirical evidence.

Article V – Responsibility In Research And Evaluation

Health educators contribute to the health of the population and to the profession through research and evaluation activities. When planning and conducting research or evaluation, health educators do so in accordance with federal and state laws and regulations, organizational and institutional policies, and professional standards.

Section 1. Health educators conduct research in accordance with recognized scientific and ethical standards.

Section 2. Health educators ensure that the consent of participants in research is voluntary and informed.

Section 3. Health educators implement standards to protect the rights, health, safety, and welfare of human research participants.

- Section 4.* Health educators maintain confidentiality and protect the privacy of research participants in accordance with law and professional standards.
- Section 5.* Health educators take credit, including authorship, only for work they have actually performed and give credit to the contributions of others.
- Section 6.* Health educators who serve as research or evaluation consultants discuss their results only with those to whom they are providing service, unless maintaining such confidentiality would jeopardize the health or safety of others.
- Section 7.* Health educators report the results of their research and evaluation accurately and in a timely fashion.