



Prof. Don Nutbeam:

Professor Nutbeam returned to Sydney in February 2016 following a six-year term of office as Vice-Chancellor (President) of the University of Southampton, UK. He recently completed a 6-month role as an Interim Executive Director of Sydney Health Partners (sydneyhealthpartners.org.au) and now shares his time as a Professor of Public Health at the University of Sydney, and a Senior Advisor at the Sax Institute (saxinstitute.org.au), an independent, not for profit organization dedicated to knowledge transfer for better public policy.



His career has spanned positions in universities, government, health services and an independent health research institute. Prior to his appointment as a Vice-Chancellor he was Provost (2006-9) and Pro-Vice-Chancellor (Health Sciences) at the University of Sydney from 2003. In this latter position, he was Head of the College of Health Sciences, comprising the Faculties of Medicine, Health Sciences, Dentistry, Nursing and Pharmacy.

For the period 2000–2003 he was a senior public servant, Head of Public Health in the UK Department of Health. In this role he was responsible for leading policy development within the Department and across government on a range of complex and large-scale public health challenges. He was also responsible for the development of the public health workforce across the whole of England, and public health research and information strategies.

His career prior to 2000 included a 10 year spell at the University of Sydney as a Professor of Public Health and in different leadership roles, including Head of the School of Public Health; and prior to this various appointments in the UK in public health roles in the NHS, an independent research institute and a government agency.

He has substantial international experience in both developing and developed countries, working as an advisor and consultant on public health issues for the World Health Organisation over a 30 year period, and as consultant and team leader in health system capacity development projects for the World Bank.

Academic Interests

He is a social scientist with research interests in the social and behavioural determinants of health, and in the development and evaluation of public health interventions. His early work examined the development of health related behaviour during adolescence. This led to publications that helped to define patterns of behaviour (lifestyles) and to identify social and environmental factors influencing these patterns of behaviour. His work in identifying modifiable public health risks among adolescents and young adults has continued throughout his career through a series of international collaborations. Subsequent work in developing and testing school and community-based public health interventions led to a series of publications of results and methodological papers in the 1980s and 90s.

During the 1990s He also made a significant contribution to public policy development in Australia. This included leadership of a project to rewrite Australia's National Health Goals and Targets, and major contributions to national reviews of programs to tackle diabetes, cardiovascular disease and HIV/AIDS. During this period he also researched and published on the relationship between research and public health practice, and following my time in government in the UK, he wrote on the interface between research and policy-making.

Since 2000, he has continued his work in testing health literacy interventions through funded research in collaboration with colleagues in the UK and Europe, and in Australia. He continues to publish regularly and his work continues to be regularly cited.



Health literacy as a population strategy for health promotion

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The past 25 years have seen extraordinary growth in interest in health literacy. This interest has been driven along by debate about the concept, definition and measurement of health literacy, and numerous studies that have investigated the relationship between health literacy and a wide range of health and social outcomes.

In response to studies that have indicated high prevalence of inadequate health literacy in populations, governments and national agencies in countries as diverse as the US, China, Australia and some European nations have developed national strategies and targets to improve health literacy in their populations. As these policies and other government responses have emerged there has been increasing attention given to interventions to address the challenges posed by low health literacy in populations, and to improve health literacy in populations.

Health literacy can be improved through the provision of information, effective communication and structured education. It can be regarded as a measurable outcome to health education or patient education. Improvements in health literacy can be assessed through the measurement of changes to the knowledge and skills that enable well-informed and more autonomous health decision-making. Differences in communication methods, media and content will result in different learning outcomes and associated behavioral and health outcomes. Individual responses to information and education are moderated by the environment in which they occur. Methods of changing the environment, including and especially the organization of health services to ensure that they are more sensitive to the needs of people

with low health literacy are also receiving greater attention.

To date, the great majority of reported interventions have been in clinical settings. These studies have provided broadly consistent evidence that comprehension of health information and advice among individuals with low health literacy can be improved through modifications to communication and other mixed-strategy interventions, and that these improvements are associated with better health outcomes. To date there are fewer studies that have systematically examined health promotion approaches to improving health literacy in community populations.

This presentation will provide an overview of progress in the definition and measurement of health literacy internationally, before focusing on advances in practical and effective health promotion interventions to improve health literacy, and interventions to reduce the impact of low health literacy in disadvantaged populations.

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