

Profile

Marleen Temmerman: a polymath in reproductive health

"During my studies to be a doctor I was also interested in social things, political things", says Marleen Temmerman, Professor of Gynaecology and Obstetrics at Belgium's Ghent University. "From when I was very young I wanted to go into a social profession, I wanted to fight injustice. Even when I was 12 or 13 my mother tells me I wanted to do something for the developing world. I wanted to work with the poor and I wanted to choose a profession where I could do something in health science in developing countries. I wanted to become a nurse or midwife or a doctor." Having opted for medicine, Temmerman trained at Ghent University. But in her subsequent career, principally in reproductive health, she's managed to incorporate those other childhood ambitions.

Last month WHO became the beneficiary of Temmerman's accumulated experience when she took on the Directorship of its Department of Reproductive Health and Research, and the UNDP/UNFPA/WHO/World Bank Special Programme of Research, Development and Research Training in Human Reproduction. Out of this mouthful of a title she hopes her work in reproductive health will be able to make a more global impact. "The topic that's really been neglected over the past few years is family planning", she says. "We should create a sense of urgency, as was done for AIDS—and not just in the health sector. We have to meet unmet needs and also create more demand for family planning. Now I think people are realising that this is an important issue not only for women's rights and health but also for ecology and economics. The world has to do something."

Given her interests in women's rights and in developing countries, Temmerman's early decisions to specialise in obstetrics and gynaecology and then to find a job in Africa were perhaps predictable. Temmerman went to Kenya to take part in a study of HIV/AIDS in Africa, working initially with Peter Piot at the University of Nairobi. Given the shortage of local doctors, she was active clinically. "Working in a maternity hospital in the slums of Nairobi we had about a hundred deliveries a day in very poor conditions", she recalls. "There was a shortage of everything, so I knocked on the doors of donors and embassies to get funding to refurbish the maternity hospital and a lot of other things. And I stayed there for almost 6 years." Piot, now Director of the UK's London School of Hygiene and Tropical Medicine, remarks that "Her strength is that she can combine the science and the research with politics and policy."

On returning to Belgium, Temmerman became the country's first female professor of gynaecology: an achievement that gave her enormous satisfaction given the grudging acceptance of women still prevalent when she'd first applied to study medicine. In 1994, she was appointed

the founding Director of Ghent University's International Centre for Reproductive Health (ICRH). "From the very beginning we decided that it should be multidisciplinary—not only medical people, because health is much more than that, but also social scientists and lawyers for human rights, and others. Now we are a group of about 30 people here at the headquarters in the University, but we also have satellites in many other countries. In Kenya, for example, we have 60 or 70 people." Dirk Van Braeckel, director of finance and administration at ICRH, speaks with admiration of her organisational talent. "She combines unique high-level skills in management, science, and politics. This means that she really succeeds in getting things moving." He laughs. "She inspires people—and gets what she wants. A nice person to work with, but someone who challenges you all the time." Wendy Graham, Chair in Obstetrics and Gynaecology at the University of Aberdeen, has known Temmerman for two decades. "She's lively, very direct, very focused and driven. But she's also warm and friendly. She listens to other people's views, but is very clear about her own position, and quite forceful", she says. "Her biggest contribution stems from being a polymath, and having moved between different worlds."

Easily the most different of these worlds is one Temmerman entered in 2007 when invited to stand as Senator for the Belgian Parliament. She agreed on condition that she could keep her job at the university, and do political work only half time. It was agreed, and she explains that she focuses on those topics of which she has knowledge and experience. "But I'm trying to combine two full time jobs, which is not easy." It seems, however, to have worked because in 2010 she was re-elected for a second term.

Piot says he was surprised when Temmerman decided to go into parliamentary politics. "It's unusual for a politician to have had experience both of research and of working in a developing country. That makes her unique." He thinks her experience will make her a valuable asset at WHO. Temmerman says the WHO post appealed to her because she saw the chance of making a wider impact. Graham imagines that Temmerman's exposure to politics will have taught her some useful skills, including how to communicate with politicians. "She knows how to duck and dive around sensitive issues." This, Graham thinks, will also serve her well at WHO. WHO's official retirement age is 62, which gives Temmerman 3 years in her new role. Beyond that the future is uncertain—except that the words "Temmerman" and "retirement" seem somehow to represent an irreconcilable combination.

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For WHO's Department of Reproductive Health and Research see http://www.who.int/reproductivehealth/about_us/en

For the International Centre for Reproductive Health see <http://www.icrh.org>