



Melissa Gilliam

Melissa Gilliam is the Ellen H. Block Professor of Health Justice in Obstetrics and Gynecology and Pediatrics.

As Vice Provost, Melissa lead efforts around faculty development and institutional diversity. She oversees leadership and academic development for department chairs and faculty at each academic rank, directs activities to increase accountability and measurable progress in creating a diverse and inclusive campus, and provides infrastructure and training in the recruitment and retention of faculty, including management of the Neubauer Family Assistant Professors program. Melissa also oversees both the Center for Identity and Inclusion and the Center for the Study of Race, Politics and Culture.

Melissa is a member of the National Academy of Medicine. In November 2012, she launched The Center for Interdisciplinary Inquiry and Innovation in Sexual and Reproductive Health (Ci3) at the University of Chicago. Ci3's research uses games, narrative, and design to advance knowledge, develop interventions, and inform policies on the sexual and reproductive health and wellbeing of diverse adolescents.

Melissa's research is funded by the National Institutes of Health, The National Science Foundation, the Bill and Melinda Gates Foundation, the John D. and Catherine T. MacArthur Foundation, the Ford Foundation, The William and Flora Hewlett Foundation, the Irving Harris Foundation, and others. She currently serves on the National Advisory Child Health Development Council of the National Institutes of Health. Melissa has a bachelor's degree in English from Yale University, a master's degree in philosophy and politics from Oxford University, her medical degree from Harvard Medical School, and a Master of Public Health degree from the University of Illinois at Chicago.

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Chief of Family Planning and Contraceptive Research and Head of Pediatric and Adolescent Gynecology at the University of Chicago Medical Center

To Dr. Melissa Gilliam, research on how to prevent teen pregnancy demands more than medical insight; it's about understanding teens' lives and their everyday challenges.

Her work also is a quest for solutions to social problems. Gilliam, chief of Family Planning and Contraceptive Research and head of Pediatric and Adolescent Gynecology at the University of Chicago Medical Center, believes attending to teens' reproductive health issues can help overcome the barriers to education and careers that arise when teens have children.



"It's the thing that takes a perfectly healthy adolescent and completely changes her life trajectory, and I became fascinated by that," Gilliam says. "There are so many developmental milestones that have to be achieved during adolescence, and when they are interrupted by pregnancy and parenting, it is a disservice to the teen as well as the child."

Gilliam has become a national leader on teen pregnancy reduction, including advising the American College of Obstetricians and Gynecologists on preventive services for adolescents. Her research interests range from how adolescent girls can access high-quality health care, to the role of social perceptions in teen pregnancies. That includes the perceptions of doctors on how teens should behave, as well as how teens perceive pregnancy and their own potential in life. Often, she says, young men and women with few plans for the future choose not to use contraception.

BROAD TRAINING SPURS MULTIDISCIPLINARY VIEW

"Growing up in poverty and not having great expectations for your future make it so that some teens even desire pregnancy," Gilliam says. *Broad Training Spurs Multidisciplinary View*

A native of Washington, D.C., Gilliam graduated from Yale University with a degree in English literature before getting a master's in philosophy and politics from the University of Oxford. She earned her MD from Harvard Medical School in 1993, and finally a master's in public health from the University of Illinois at Chicago, specializing in epidemiology and biostatistics. She recently received a Research Project Grant from the Office of Population Affairs and has worked in family planning for 10 years.

Her work often delves into the complex nature of teen pregnancy, recognizing that it has many social causes and effects. One of her research interests is the contraceptive and social behavior of first-time adolescent mothers after childbirth. She also studies the long-term effects of teens becoming parents.

"If you're a child born to a teenage mother, you are more likely yourself to become a teenage mother, and you're more likely to live in a resource-poor setting," Gilliam says. "So there is a generational effect."

Dr. David Meltzer, director of the University's Center for Health and the Social Sciences, says Gilliam's work charts an intriguing course by exploring how a host of biological and social forces affect young women's reproductive health choices. The significance of social science for such situations is sometimes overlooked, he says.

A 'VISIONARY' APPROACH TO SOCIAL PROBLEMS

"Some people think about contraception as a biological phenomenon, but the biology only works if the people want it to and let it," Meltzer says. "Melissa's work shows beautifully how the effectiveness of contraception and other reproductive choices that women make is affected by a broad array of social forces." *A 'Visionary' Approach to Social Problems.*



Dr. Debra Stulberg, an assistant professor in the Department of Family Medicine, calls Gilliam a “visionary” who approaches challenging problems from creative perspectives, which are often influenced by the diversity of thinkers she brings together to help create solutions. Stulberg described a recent workshop in which Gilliam included an economist who runs field experiments on social and behavioral interventions.

“That is not something that we typically do in the world of medical research,” Stulberg says. “Usually, we give people a medication or a drug or we give them a survey to see what they know about something. But to bring someone to the table who would look at, for example, is it better to pay people to take their birth control pills, just to think that way, is just amazing.”

Gilliam plans to take her research in even more innovative directions, including looking at the role new digital media can play in health promotion for young people, particularly urban youth. The new project is not simply about sex education, Gilliam says, but rather about collaborating with youth to create knowledge and tools for health decisions. That, in turn, will lead to better sexual health choices.

“Teaching young people about their health has many implications for some of the problems we see later in life, sexual assault, and problems in gender relationships,” Gilliam says. “I think we sometimes get overly caught up in the controversial aspects of [sex education], and we forget some of the basic aspects, such as teaching youth how to treat one another in a respectful way and to respect differences, which are very simple lessons, but I think kids need to hear them.”

By Kayce T. Ataiyero