

This is the unedited version of a profile which appeared in *Australian Doctor* in 2000. The published version may have had minor changes.

The Profile: Sally Redman

CV

1999- Member, Board, National Cancer Control Initiative
1997- 1999 Member, NHMRC Research Committee
1998 Professorial appointment, University of Newcastle
1995- Director, NHMRC National Breast Cancer Centre
1994 - 1995 Manager, Cancer Screening Unit, New South Wales
Cancer Council
1991-1994 Member, World Health Organisation Collaborating Centre for
Training and Research in Health Social Science,
specialising in Health Promotion
1984-1994: Lecturer then senior lecturer, Behavioural Science in
Relation to Medicine, Faculty of Medicine, Newcastle
University.
1982 PhD Victoria University of Wellington

A QUIET ACHIEVER WITH A LOUD LAUGH

Maybe it's the chuckle. Never far away, it starts somewhere deep inside, often developing into shrieks of laughter. Perhaps it's fresh face or the soft voice, thick with a Kiwi accent.

Or maybe it's her self-effacing, unpretentious manner - on first acquaintance you would not guess the clout that Professor Sally Redman wields in many different circles.

In fact, there are many reasons why Redman is so eminently likable, a trait which is a huge asset given her role, as director of the National Breast Cancer Centre (NBCC), in juggling the many competing interests involved in that most high-profile and political of diseases.

It is remarkable, given the sheer impossibility of satisfying all these interests, that Redman is so widely praised, both for her professional achievements and personal style. Even the stories about her appalling

sense of direction, occasional scattiness and tendency for spilling meals are told with fondness.

But don't get the wrong impression. Professor John Hopper, a Melbourne scientist who chairs the Centre's Genetics Working Group, admits that he did, initially. "I underestimated her," he says. "I thought she was pretty shy and timid, but that's not true at all. She's got an enormous strength."

Many colleagues remark that Redman is comfortable with herself, perhaps explaining why she is so good at putting others at ease. She also has a sharp, analytical mind and a strong will - more assets when you're charged with establishing a first-of-its-kind organisation but not sure whether you will be funded next year.

That battle, at least, is no longer. In between non-stop meetings in her pastel-toned office in the NSW Cancer Council building, Redman explains that the NBCC has moved on from what she calls its establishment phase.

After surviving a traumatic management crisis in the NSW Cancer Council in 1996, there was a long period of uncertainty over the NBCC's future and funding. This ended with the last Federal Budget's allocation of \$8 million over the next four years. Combine that with a recent \$1 million grant from AMP, and Redman is now looking forward to a "new era".

As part of this, the Centre is becoming an independent company with its own board of directors. Until now, it has been managed by the NSW Cancer Council, under contract from the Federal Government. Amongst other things, it is hoped the change will help allay concerns about a NSW-centric focus.

It may come as a surprise, given its prolific output, to realise that the Centre was just about to celebrate its launch at around this time five years ago. It has quickly become an important player in influencing research, clinical practice, health services and policy.

Its publication list is impressive, including many evidence-based guidelines and literature reviews - on familial aspect of breast cancer, treatment of advanced breast cancer, a GPs' guide to investigation of

breast symptoms, and a national pathology audit, to name just a few. It is also preparing a directory of breast cancer services, which will help GPs with referral.

Just as important are the networks developed with professional and community groups, resulting in communication courses for health professionals, the fostering of consumer advocates, and the development of best practice projects. The Centre has also worked with the Royal Australasian College of Surgeons (RACS) to establish an audit of breast cancer surgery trends and outcomes, and promoted the role of breast physicians and nurses.

It's a far cry from the early 1990s, when landmark Federal Parliamentary reports focused public attention on the inadequacies of breast cancer care. Senior clinicians and others, backed by the media's enduring interest in breast cancer and the support of Annita Keating and other high profile women, lobbied bureaucrats and politicians for action. The new mammography program was also highlighting the need for a more coordinated approach.

Dr Carmen Lawrence was health minister when the funding came through, for both the centre and a national-funding raising body, now known as the National Breast Cancer Foundation.

When the National Health and Medical Research Council (NHMRC) called for tenders for the NBCC, there were several heavyweight applications, from groups including the Australian Cancer Society, prominent clinicians and researchers.

Professor Christine Ewan, now pro-vice chancellor, academic, at the University of Wollongong, was on the selection panel. One of the attractions of the NSW Cancer Council bid was, she recalls, "the excellent reputation" of its nominated director. Redman was then managing the Council's cancer screening unit.

It is not surprising, given the professional and personal rivalries in cancer control, that there were rumblings about the new centre. The skeptics wondered what it could do that wasn't already being done by established groups? It wasn't based at a hospital, and its director wasn't even a doctor. At least not a medical one.

NHMRC heavies gathered recently at a plush Sydney hotel for the launch of several new guidelines, including those developed by the NBCC for the psychosocial care of women with breast cancer.

Despite her role in their development and her media skills, Redman was not put forward as the “talking head” for interviews. That role fell to Brisbane psychiatrist Dr Jane Turner.

This typifies Redman’s approach, who is not one to jostle for the limelight. Despite her intense attachment to the Centre, she is reluctant to position herself as its “public face”. Instead, she describes her role as bringing together all relevant parties, facilitating a multi-disciplinary approach, and encouraging the various stakeholders to take both responsibility and credit for the outcomes.

“A lot of our work is about how you can encourage people to work together as teams,” she says.

She tries to make the Centre and its 30-odd staff outward-looking so that their many collaborators feel an ownership. “Sometimes people who come to work at the Centre find it quite uncomfortable at first because it can’t be ‘theirs’,” she says.

This philosophy reflects both her training, as a behavioural scientist with a Phd in psychology (involving a study of blood pressure), and professional experience. Before joining the NSW Cancer Council in 1994, Redman was a senior lecturer in behavioural science at Newcastle University’s medical faculty.

Her boss was Professor Rob Sanson-Fisher, a behavioural scientist who is now the dean. He remains a mentor and good friend. “I think I learnt a lot from him about how to bring people together,” Redman says. “Rob saw that you should be saying, not ‘what do I know from my discipline’, but ‘what is the problem here that needs to be resolved?’”

Tom Reeve, emeritus professor of surgery at Sydney University and a key collaborator with the NBCC, is another mentor. “He’s so wise,” Redman says. “He understands a lot about people and their needs - my ability to do my job is very much influenced by that.”

“The problem with this is that it’s going to sound unbelievably glowing,” begins Dr Alex Barratt, a senior lecturer in epidemiology at the University of Sydney, when asked to describe Redman.

“She’s one of the most amazing people I’ve ever met, an absolute joy to work with. Meetings with Sally will often dissolve into uncontrollable laughter, but the meetings get things done. She copes with about 20 times as many things as ordinary mortals. She is the closest thing that I know to a superwoman.”

Barratt is not alone in reaching for the superlatives.

“She’s absolutely wonderful,” says Dr Peter Malycha, former head of the RACS section of breast surgery. “She’s always completed what she said she would do and if she couldn’t do it, she’s said so, so that there’s been no messing around.”

“She’s a genuinely warm person,” says Professor Rob Burton, director of the Anti-Cancer Council of Victoria. “She’s got terrific, non-verbal communication skills - you go to meet Sally and you immediately feel better.”

Tom Reeve describes working with Redman as “one of the most pleasant experiences of my professional career”.

“She’s just a lovely, gentle person who at the same time has enough steel to get the job done,” adds RACS president Dr Bruce Barraclough.

“I adore her,” says the well-connected Janet McDonald, a member of the Centre’s management committee and a keen networker on the Centre’s behalf (Redman is not known as a socialiser but McDonald once took her for lunch at the Lodge with her dear friend, Janette Howard).

John Hopper: “Although she’s in a very politically sensitive area, she doesn’t play politics. She’s aware of the politics but she’s basically trying to achieve an aim, she’s not a Machiavellian manipulator of people.”

Christine Ewan, who now chairs the Centre’s management committee, adds: “She’s got the patience of a saint. She’s obviously a very

competent person but there's no super ego involved there. She's really comfortable with standing back and saying, 'I don't know, tell me'."

Dr Helen Zorbas, the Centre's clinical director (and a regular columnist with Australian Doctor), describes Redman as a great conciliator and listener with whom people drop their defences: "She can be having morning tea with the PM one day and will then tell you about the drama about doing the homework with the kids that night".

Lyn Swinburne, national coordinator of the consumer group Breast Cancer Network Australia, says Redman has helped change the focus from the tumour to the woman. The widespread respect for her "is a testimony to her diplomatic skills but also her ability to rally the troops and get people on board. I think everybody realises the incredible energy that she gives to something and her personal commitment. She works incredibly hard."

Colleagues - some of whom worry about how hard Redman works - recount that she broke her leg just before going into labour with her first baby. Despite the pain, she was so dedicated that she was back at university meetings a few days later, on crutches and with baby in tow.

Laughter erupts when Redman is asked about this. Yes, it's true that the fracture was very painful and not immediately diagnosed. But she didn't go back to work until at least three weeks after the birth. And that was more of an "economic imperative", in the days before maternity leave, rather than a measure of workaholism, she says.

Quentin Bryce, a prominent feminist and chair of the Centre's women's advisory network, confides that she sometimes gives her colleague "a little quiet talk" about the importance of time out. Redman volunteers that one of her biggest challenges is to create balance between work and family, especially as she is so often on the road.

One of the rare criticisms of Redman relates to the degree of personal control that she exerts over the Centre and its work. Not everyone sees this as a negative, however. Some see it as the mark of a perfectionist, ensuring that quality is maintained.

"I would not believe it if somebody said Sally had done poor quality work," says Rob Sanson-Fisher. "She's not capable of it. She'd have to

be classified as one of the best behavioural scientists in Australia. She's the best collaborator that I've ever worked with. She can argue ferociously about a particular issue and then on some occasions, when she's wrong, she'll say 'oops'."

Asked about Redman's weaknesses, he says they are, as with all of us, the same as her strengths. "Demand for excellence means that things have to be gone over 30 times. That may be exasperating for some people but it produces a better product. Passion means you can adopt a position that's not helpful. Intelligence means that you can sometimes reject others' views."

What really makes Redman light up, what she enjoys the most, are the parts of her work which bring out the scientist in her - analysing data, planning research.

She is now in that age group where there is such debate over the merits of mammography screening. Unlike many middle-class women of her age, Redman has not yet begun having regular mammograms. It is "an evidence-based decision", she says.

A strong advocate of evidence-based approaches, she takes great satisfaction from being part of the processes which help move evidence into action: "When I came into this job, I thought the issue would be changing clinicians' behaviour. But now I think the need is much more to change the systems in which people work."

This is why she does not believe that her lack of medical qualifications is an issue: "My job is not really about what the guideline says, but about how you get it implemented."

Although often passionate in discussions with colleagues, Redman can be extremely cautious - sometimes to the frustration of colleagues - in her comments to the media about new developments in breast cancer research or treatment.

Quentin Bryce says the caution reflects Redman's understanding of the impact of sensational headlines on women.

Redman is well known for chatting about her family at work. But she declined to have her husband, Merrick Fry, and sons - Jacob, 14, and Luke, 9 - involved in interviews for this article.

This partly reflects her reluctance to promote a personal focus. The Centre's communications manager, Debra Lee, says most media requests to profile Redman are declined (although she did pop up in *The Bulletin* last year, interviewed by Maxine McKew, a member of the Women's Advisory Network).

Redman's family left London in search of a better life in Wellington when Selina (a name she has never used) was about five. She remembers being teased at school about her English accent, which probably explains why she now sounds more like a New Zealander than those born there.

A keen student, she was the first of her extended family to go to university. Her mother insisted she learn typing in case she couldn't get a job.

Stimulated by the heady days of student activism, she went on marches and rallies, and developed a passion for women's issues. After graduating, she arrived in Sydney for a working holiday, aged 21, with \$100 saved from work with a shearing gang. She met a young artist called Merrick soon afterwards.

More than 20 years later, she says he is her best friend. "That's really sappy isn't it?" she laughs. "But it's actually true. He's the person who I talk to most, and who I want to tell things at the end of the day." Working from home, he's also the one who does most to ensure household runs smoothly, she says.

In the early days of their romance, with a PhD under her belt, Redman was tossing up whether to become a journalist or librarian, when a postdoctoral scholarship prompted her decision.

It was the start of an academic career which led, relatively quickly, to her current influential position, where her priorities for the future include developing strategies for preventing breast cancer and for better targeting of treatments to the individual.

Sally Crossing, a consumer advocate who works with the NBCC, says she only began to realise its wider influence through her work with other cancer groups, where the Centre's work is often held up as a guide.

Professor Judith Whitworth, the former Commonwealth Chief Medical Officer, believes the Centre's approach is providing a model for improving care and coordination in areas beyond cancer.

"I've really been extremely impressed by her professionalism, the quiet but determined way she's gone about it," says Whitworth.