

EPISODE 46. DIALOGUES: A CONVERSATION WITH CHIKWE AND VIVIANNE IHEKWEAZU

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Chikwe Ihekweazu [00:00:00] The evening before everything changed, I was sitting on the veranda with some of our family members as our routine was most evenings, enjoying each other's company over freshly tapped palm wine and an assortment of beer. The air was thick with dust from the masquerade dance that had taken place in the village square. The next day was scorching. I collapsed on the sofa in our sitting room, trying to catch my breath after a long morning workout. The whirring ceiling fan provided little relief from the sweltering heat. To distract myself, I mindlessly scrolled through my email and notifications. My scrolling finger stopped and hovered. There was a news report about a mysterious pneumonia-like illness spreading in Wuhan, a town in China that I never heard about.

Garry Aslanyan [00:01:03] Welcome to Dialogues. I'm Garry Aslanyan. This is a special series of the Global Health Matters podcast. In this series, I'll be blowing open some of the echo chambers that exist in global health. To help me in this quest, I've invited thoughtful and inquisitive individuals from different walks of life. Each of them has explored and written about global health issues from different disciplinary perspectives. I hope this dialogue series will give you, the listeners, an opportunity, and space to step out of your daily routine and contemplate global health issues through a different lens. So, let's get started. For this dialogue episode, I have a special guest, Dr. Chikwe Ihekweazu. Chikwe currently serves as the deputy executive director for the WHO's health emergencies programme and at the time of the recording, he's been acting as a regional director for the World Health Organization's regional office for Africa. Chikwe is a Nigerian infectious disease epidemiologist, with extensive leadership experience in public health. Before this, from 2016 to 2021, he was the founding director general of the Nigeria Centre for Disease Control, where he played a pivotal role in strengthening the country's public health infrastructure. In this episode, we'll explore Chikwe's journey in establishing the Nigeria CDC, and how the organization became instrumental in Africa's response to COVID-19 pandemic. We'll also discuss his book, "An Imperfect Storm, A Pandemic and the Coming of Age of a Nigerian Institution", which he co-authored with his equally accomplished wife, Vivianne Ihekweazu, the Managing Director of Nigeria Health Watch. I'm thrilled to have Chikwe join me for this dialogue, where he'll share his experience, challenges, and insights as a public health leader. Later in the episode, Vivianne will join us to reflect on how a career in public health impacts and shapes family life. Hi Chikwe, how are you today?

Chikwe Ihekweazu [00:03:36] I'm very good, Garry. How are you?

Garry Aslanyan [00:03:39] I'm great. Let's get into this conversation that I was looking forward to. So, I'm going to start by asking you if your illustrious career in public health is maybe influenced by experiences you had when you were a child or in your youth and they motivated you to embark on such a career.

Chikwe Ihekweazu [00:04:02] Good question, Garry, one never really is sure on what pushed one in what direction. But I do guess I did grow up in an extraordinary community. You know, it was a campus set up, a university campus in Nigeria, the University of Nigeria, where staff, students and everyone lived in this big expanse, and my father happened to be the campus doctor, the physician that provided primary care to everyone on campus. There were a couple of them, he was one of them, and you know that really brought me close to the idea of someone kind of being responsible for the health of a community. So yeah, I think that really influenced me a lot, and the other thing was, quite a number of diseases that I ended up working with were not things that were hypothetical to me, whether it's

children with malaria, whether it's you know ultimately patients with HIV, all these were really present at various stages of my development that they became part and parcel not only of work but of conversation at home with my dad, in the community, and yeah, so there was a lot of consciousness of health and public health as I grew up.

Garry Aslanyan [00:05:31] Yeah, and we probably sometimes underestimate these things that have an influence on us. Thanks for sharing that. You recently took the post of Assistant Director General at WHO for the Division of Health Emergency Intelligence and Surveillance Systems within the Emergencies Programme, and also acting as the Regional Director for the WHO African region, and you also led the Pandemic Intelligence and Epidemic Intelligence Hub, which is in Berlin. What excites you about all of these opportunities, Chikwe.

Chikwe Ihekweazu [00:06:10] Well, I think the most significant one for WHO really has been leading the WHO Hub for Pandemic and Epidemic Intelligence in Berlin. I think through the pandemic, we all experienced a common frustration. Most public health leaders around the world were frustrated that we were not able to access the data that we needed to advise our leaders with the agility that we would have loved to. And you know we were in a vulnerable position, many of us around the world and this was a shared experience across many continents had to face our populations every single evening trying to explain to people what was going on in the world, what they should do, what their country was doing, who was going to be affected next. So, it was a position of extreme vulnerability and one of the reasons for this was just inability to efficiently collate the data we needed to make this decision. So, setting up and leading the hub for pandemic and epidemic intelligence in Berlin was a direct response to that. And the opportunity to grow this from scratch, you know, our staff number 001 in Berlin with a team that had come over from Geneva to lay the groundwork. And together with them to build this extraordinary new part of an organization that is thriving today has really been an incredibly exciting opportunity. WHO in the era of a new DG has pushed hard on many transformational opportunities and this has been one of his most important and most significant.

Garry Aslanyan [00:07:58] Maybe let's talk about your book, which is called "An Imperfect Storm". You write about the unexpected call that came one evening your way in 2016, while you were living in South Africa, and this call informed you that the president of Nigeria appointed you to lead the Nigeria Centre for Disease Control. That must have been an evening. This phone call started a very new chapter for you, for your family. What were your hopes at the time when you were thinking of returning to Nigeria and what really was going to await you in that new position?

Chikwe Ihekweazu [00:08:42] Well, you know, Garry, it was a real mixed feeling because, this was not on my horizons at all. So, the suddenness of the call and the scale of the responsibility is really, threw me off in the beginning. But on the other hand, you know, prior to that call, I had worked in national public health agencies, most of my career. So if there was one job I was most prepared for, it was probably this one. Of course, everyone in my social cycles and professional cycles knew how passionate I was about working in Nigeria and working on the continent. So, it was really with mixed feelings. One, the incredible challenge and honour of being offered this opportunity. But secondly, the trepidation of just the scale of the challenge that we were facing, knowing it's a country of 200 million people right in the middle of the tropics. There's no deficit of infectious disease threats to walk on. So, it was that combination of emotions that I took on this challenge of leading this small emerging public sector parastatal in Nigeria.

Garry Aslanyan [00:10:05] People talk about peacetime in pandemics or infection diseases. I always say, when is that peacetime? There's no such a thing as a peacetime, in infection control, right?

Chikwe Ihekweazu [00:10:18] Not in the context of Nigeria, for sure.

Garry Aslanyan [00:10:22] I can imagine. So, one of your first goals, Chikwe, was to build localized, decentralized technical capacity in the country. Why was this so important to you?

Chikwe Ihekweazu [00:10:36] So when you start on any new assignment, you assess, I guess, the opportunities that you have and the challenges. And I won't go into the challenges, we have many in our country that are well documented. And that is the dominant narrative about Nigeria, unfortunately. But our opportunity is an incredibly innovative, young, resourceful population. So given that we were a new agency, I quickly worked hard to get some approvals to recruit a few new people. I focused almost entirely on recruiting young people, fresh out of university or a few years of experience. They were talented, they were keen, they were motivated and willing to learn and willing to push hard at some goals. So that's really what drove me. We brought them in. They took on the challenge. They never accepted that anything wasn't possible. So, you know, from mundane things to building a new website from scratch, to addressing some of the hardest infectious disease challenges, building labs, this team really took it on. I guess that really was our strength as a country, that there is talent around, but you have to kind of find a way of bringing them together, giving them the opportunity to thrive. That's at the heart of whatever small successes we achieved in the organization.

Garry Aslanyan [00:12:15] Do you think that strengthening the capacity for CDC in Nigeria contributed to effective national response to COVID after the first case was diagnosed in February 2020?

Chikwe Ihekweazu [00:12:32] Yeah, Garry, when I think about it retrospectively now and as we wrote the book, I did think about this. It seems like we had three years to prepare for a pandemic that we knew was coming. But of course, no one knew the pandemic was coming, we were just focused on building this institution. But I shudder to think where we would have ended up if we didn't have the institution that we had spent the three years prior building. So, it was this opportunity to build partnerships with all our collaborators, to work with the UN agencies, including, of course, the World Health Organization, to develop a voice in the consciousness of Nigerians and Africans, to use a science-based approach to drive a lot of our work, to build the laboratories around what would eventually be at the heart of our response. All of these were done. While building an organization, not with the pandemic in mind, but that was absolutely what enabled us to ultimately have the confidence and competence to respond to the pandemic, do it fairly well, and come out at least holding our heads high that we did the very best that we could do with the resources that we had.

Garry Aslanyan [00:13:54] Chikwe, can we listen to an extract from your book if you could please read?

Chikwe Ihekweazu [00:14:02] I must say that I consider many global leaders my close friends and have no doubt about their competence and good intentions. But I'm often uncertain about how well they appreciate the depth and complexity of the challenges on our continent. I believe having more colleagues from Africa playing leadership roles in global health organizations will be incredibly beneficial to everyone. These roles require not only technical competence, but also empathy and compassion, which I believe can only develop with time and experience. Global health indices will benefit greatly from more diverse representation at all levels of leadership.

Garry Aslanyan [00:14:49] Thanks for that, Chikwe. Another area you invested heavily was strengthening the agency's capacity for effective communication, including launching a website with resources and implementing creative communication strategies during the pandemic, which was so interesting to learn

about. In public health, communication often seems like an afterthought. Why did you consider it so essential, right from the start.

Chikwe Ihekweazu [00:15:20] So Garry, I think in my years even prior to NCDC, I recognized through my work and many other public health agencies and also just living in the world that we live in, that it wasn't enough just to do your work. You had to let people understand the purpose of your existence, build trust with them, and build this in, quote unquote peacetime because you will need this at the point of crisis. And when there's a crisis, it's never the best time to start building relationships. So very early, we focused on this. We, like you mentioned, launched a new website, opened social media channels, trained, and supported many leaders across the organization to become spokespeople for the agency. So, it wasn't just left for the director general to communicate. We really had encouraged colleagues to speak about their work, engage with the public, and build trust. So once this pandemic started, I knew that we didn't have all the answers, but that the public needed to hear from us in terms of where we were, what we were doing, why we were doing what we are doing. So, we very early on defined a communication strategy of being very open and transparent with Nigerians, spoke to them every evening in the beginning, started a social media campaign we called "take responsibility" that was basically founded on the premise that government cannot do everything. So, every individual, every community, every group of individuals had to take some responsibility for the response. And doing this, we communicated the results, got feedback, responded to queries, responded to criticism. But it was hard. You know despite our best effort, there were many conspiracy theories all the time. There were mainly attempts to discredit government in our efforts or propose alternative solutions. But thankfully, that trust that we had built kind of saw us through and enabled a consistently trusted narrative to continue to come out from our agency and hopefully led to a lot of the trust we are able to build with the Nigerian public and beyond.

Garry Aslanyan [00:17:46] That's so interesting. That comes up really quite often in the trust and the issue around how we as public health professionals need to pay more attention to that. Another key takeaway for me from the experience you shared in the book was how much you value the effective collaboration. You mentioned building collaborative culture within the CDC in Nigeria, of fostering partnerships with private sector during pandemic. Why do you consider collaboration to be such an essential leadership value?

Chikwe Ihekweazu [00:18:24] I think collaboration is so important at all levels. Let me start with the collaboration of the book itself. The book was written with my wife, Vivianne, who played both a professional role throughout in supporting me, but also played a big role in leading her organization in responding to several parts of the pandemic from the communications advocacy role that they have. In addition, in everything we do, even in our work early in NCDC, the first time I arrived, the first thing I did was reach out to everyone I had worked with prior to coming back to Nigeria, so in South Africa, in the UK, in Germany, and say, listen, friends, I've just been given this incredible task. Please, how can you help me? So, these guys had expertise in laboratory diagnostics, in field epidemiology training, in management capacity. I reached out to every single organization and colleague and asked for help and through that started working, in the context of Nigeria, we needed to work through parliament in order to pass the first bill that led to the act that established NCDC. I had to understand how to work with parliamentarians to get things through Parliament. Of course, when you're leading a parastatal, you still have your minister to work with. You have other parastatals in the health sector. You have to work with all the international organizations supporting work, WHO, Africa CDC, UNICEF, all of them. So, the key thing is to explore all these opportunities. You may not get everything you want, and I definitely didn't, but all our partners know I push them very hard and hopefully was also there to support the work they intended to do in the country. I think collaboration is so important because no organization has

everything it takes. Sometimes you need extra funding, new technology, new expertise, new incentives, and it's only through these partnerships that you're able to do that. And you know, partnerships are never built on the huff. They're built in the long term and what you build today, you might need 20 years down the line or never need it, but you've got to keep building throughout the journey of your professional existence.

Garry Aslanyan [00:20:52] So I hear that the value of leadership was not to hesitate to ask for help and engage in collaboration. And it doesn't make you any less of a leader if you're asking for that, right?

Chikwe Ihekweazu [00:21:07] It never does. If that was a problem, I probably would have died off of my career many years ago. I ask for help all the time.

Garry Aslanyan [00:21:18] If I can ask you to do another reading and we'll listen to the extract from the book.

Chikwe Ihekweazu [00:21:24] As someone who had been studying the possibility of a pandemic for years, it was often frustrating to see how little people seemed to appreciate the threat of emerging infections, especially political leaders. To communicate this threat, I had used the famous Time Magazine cover that predicted the next pandemic in many of my presentations. I also shared the narrative of the AIDS pandemic and how it evolved, as well as our dealings with Influenza. Communicating the threat of emerging infectious diseases was a particularly complex challenge, given that this threat wasn't immediately visible. I'm not sure I ever fully convinced anyone that a pandemic was a real possibility in our lifetime, yet here we were. Likewise, I always championed the importance of open, honest communication in the event of an outbreak.

Garry Aslanyan [00:22:22] Chikwe, you were part of the initial delegation from WHO to Wuhan in China at the start of the pandemic, and you were the only African in the group. Although representing an African perspective in global health forums isn't new to you, you write in the book that achieving equity in global health requires more African voices in these decision-making spaces. How do agencies like CDC help elevate African leadership in global health? And what further steps are necessary, you think?

Chikwe Ihekweazu [00:23:00] Yeah, it was an incredible privilege going to China very early, before this was kind of actually on the map. And I learned a lot from that trip in so many different ways, both from the scientific perspective, but just about the country itself. And I've had an incredibly privileged career. And I recognize that every time I sit in meetings anywhere in the world, I recognize the responsibility I have. And why I say it's important, yes, we all learn about many of the challenges that we deal with, whether it's children dying from malaria or a woman dying in childbirth. But when you grow up in the so-called global north, these things have become so rare. That very few people have a personal connection with the tragedy that surrounds it. Rightly so, that's where we should all aspire to. So, it's different when people that have grown up in the context that I have, sit to discuss these issues. They're not academic, they're not hypothetical. Many of us unfortunately have had, have felt the pain that comes with it. So, the more we are part of the conversations around the solutions, the better and more enriched those conversations are. So, if I think of all the things we achieved in Nigeria Centre for Disease Control, the one that probably I am proudest of, is the number of colleagues that went through the institution during those years. That were inspired and pushed to want more for themselves and have now been almost seeded in many other global health organizations. And hopefully we will have a whole new cadre of leaders. And the same thing is happening in many countries. So as we push for the big topics that are important for us today on the continent around local vaccine manufacturing, having stronger research institutions, having a greater voice in all the decisions that affect us, that there will be many more people

coming through the ranks that have both the competence and the confidence to contribute to these important conversations that we have to have.

Garry Aslanyan [00:25:39] And reflecting on your firsthand experience with Nigeria's approach to pandemic, what do you believe are the approaches that other African countries need to take and strengthen their health security effectively? Where do you come to that? What's your view on this?

Chikwe Ihekweazu [00:25:59] So, Garry, I think there are many things we could list here, from laboratories to surveillance to having an appropriately trained workforce. But in all of that, the most important single thing every country should have is a national public health agency that pulls these skills together and enables capacities that come to be retained in an institutional framework. I have worked in national public health agencies in Germany, the UK, South Africa. I ultimately led the one in Nigeria. We have in the US, the US Centers for Disease Control and Prevention, in the UK the UK Health Security Agency. All of these are very similar institutions and there are many more of them in South Korea, in Brazil, countries and continents around the world. The purpose of having an organizational framework is that the capacity built ultimately stays. And this is happening more and more. More countries are developing new ones, improving the ones we have. So, I think this is at the heart of what we need to do for the future. None of the individual skills and competencies are sufficient. They're necessary but not sufficient. Really, it's the glue that holds these together, pulls together the lab to surveillance to the risk communication to the diagnostics to the response capability that really enables you know the institutional frameworks to be built that will take us into the future.

Garry Aslanyan [00:27:42] Do you think that African CDC for the whole continent also plays that role?

Chikwe Ihekweazu [00:27:47] Yeah, African CDC is an extremely important institution that will enable us to work together. But primarily, the world is organized in countries. That's where the sovereign responsibility and the resources are organized. So the first unit of organization has to be aligned with the sovereign responsibilities through which every country organizes its resources around all other problems, whether it's aviation, education, defence, you know, it's the same concept. So, you know, just like every country has a central bank, every country, has a military, the same way every country has to have one national public health agency to organize for its health security responsibilities.

Garry Aslanyan [00:28:39] So, extending that, and this is something I've seen happen all the time in my own experience working with public health agency, whether or not these public health agencies are only looking at disease control and emergencies, or they also have a role in prevention more actively. And I know this is also probably a topic at the network of association of the national public health institutes that I'm sure you're aware of. Where do you see the role of these agencies' kind of more of an expanded role or and how can they do it better?

Chikwe Ihekweazu [00:29:22] So it's a very important question. The International Association for National Public Health Institutes is kind of the networking body of all these institutions. And while we call the Nigeria CDC and many other CDCs Centre for Disease Control, the full names are actually center for disease prevention and control. But just like most things we do in public health; prevention sometimes is lost in the narrative. Yeah, no doubt about it. The big challenge, we will not control ourselves out of the situations we face. Without a big prevention portfolio, we are not even at the game. So, prevention with many tools that we have already, from basic immunization programmes to infection prevention and control to just risk communication and communicating with people and behavioural change, and this is really where you get the biggest bang for your buck across public health. Unfortunately, it's never been the sexiest part of our portfolio, so sometimes it's lost in translation, but

this is at the heart of what we need to do. And these are probably the lessons we need to learn from the countries that have made the most progress around the world. They've worked their ways to longer life expectancy, much fewer women dying from childbirth, many more children surviving into adulthood. Most of these big wins were not done by responding to the crisis. It was done by careful planning of prevention efforts organized in the societies that have evolved over many years.

Garry Aslanyan [00:31:11] I have this feeling that we all have our work cut out for us because trying to, well, you, advocating for this importance of having a central piece of public health system in a country, being an institute agency responsible and also not just having a narrow focused view of disease, but also looking at prevention. So much work needs to go to that. It's going to be hard to say the least.

Chikwe Ihekweazu [00:31:45] It will be.

Garry Aslanyan [00:31:47] As long as we recognize.

Chikwe Ihekweazu [00:31:48] All the easy problems in the world have been solved. So, our generation is left with the hard ones, but that's why we're here.

Garry Aslanyan [00:31:56] Love that attitude. Great. So, let's move to the close and I would like for us to discuss the personal and family impact of career in public health and in your case specifically, and for this final discussion, I'm welcoming your wife and partner Vivianne. Hi Vivianne, thanks for joining. Maybe we can start by you doing the reading from the book that you have written. Can you please read that part?

Vivianne Ihekweazu [00:32:25] The months that followed the first reported case in Nigeria taught me that unwavering support enables more than simply changing plans and relocating to another country. It means accepting that nothing is predictable and learning to cope with uncertainty while working together as a team, riding the ebbs and flows of change, knowing you have each other's back. You learn not only to make certain changes, but also take on the laborious responsibility of ensuring that wherever you move to, the transition is seamless for the whole family, especially when children are involved. Chikwe's appointment to the NCDC was no different. It has been a life-changing and immersive experience. It has opened many doors we never expected to open while providing opportunities for us to find common ground in the work we do together and independently. We've always tried to make the best in any situation we encounter and that will never change. It's onwards and upwards for us, yesterday, today, and always.

Garry Aslanyan [00:33:34] Vivianne, in the book, as our listeners just heard from you, you described the uncertainty and excitement of being a partner to someone with a career in public health. Can you share more about your experience and how the challenges and successes of his career and your career shaped your family?

Vivianne Ihekweazu [00:33:57] I think when a reader goes through the book, they will really see the genesis of how Chikwe's career has really influenced our family life. Starting from when we first got married, when we were expecting our first child, Chikwe suddenly had to go to Yambio in Sudan as there was an Ebola outbreak. And really, quite honestly, since then, it has really been a lot of uncertainty and excitement, very much so. You know, being a partner for somebody like Chikwe who has throughout his career, chose public health as a field to focus on, but knowing how much he enjoyed it and how he felt committed to focusing on population health, I always knew that this was something he was passionate about. So, for us, what it has really meant is having to adjust often quite quickly. It's also been a privilege

and a really great experience, having that opportunity to live and have our children grow up in different countries. But I know that especially now as our children are getting older, they have a much deeper understanding of what their father does, and I think the COVID-19 outbreak was really that poignant moment. All those previous years of almost a build-up to what's transpired, let's just say in 2020, all the learnings we've had really enabled our children to understand a lot deeper what their father does. And one of the things we really wanted with the book was to really humanize their experience of not just our family, but really find those spaces for people who also, everybody went through this together, for people to really understand how it was for us, but also to understand that behind the scenes, we were just like any other family, having our kids go to online schooling and us having to cope with the stresses and the uncertainty of the outbreak. So that really shaped for us how we responded, and one of the reasons why we wrote the book in the tone we did, so it's not a scientific or academic book, but really is a book of stories that shares the experience of our family through the COVID-19 outbreak.

Garry Aslanyan [00:36:07] So it was almost impossible for this book to be written just by one of you. Co-authorship was kind of the only option. Is that right?

Vivianne Ihekweazu [00:36:16] I'd say to an extent, I mean, it could have been written by Chikwe on his own and very much he would have spoken about the clinical response, the testing, all of those things, which are equally as important. But knowing how traumatic it was for many families, how do they themselves understand really some of the background, some of things that happened to us as a family. And I think hopefully it's an avenue for us to learn. And you know writing the book was also quite cathartic for both of us, it enabled us to really put down some of those experiences, but also more importantly, to share a lot of the stories of the many poor parts of the response to COVID-19.

Garry Aslanyan [00:36:56] Thanks, a ton of insight there, very interesting. Chikwe, if I can bring you back for a moment. Throughout your career, you've been deeply committed to various roles, as you've shared with us. But commitment often comes with sacrifice. And in your book, you describe a moment when both Nigeria's health and your own health demanded attention at the same time. I'd love to hear from both of you, how have you navigated these moments of tension?

Chikwe Ihekweazu [00:37:27] Never easy, but you know, if you think through the two years or three years that we went through the peak of the pandemic, so many families went through so many difficult times. And so, this book, I differ slightly from Vivianne on this part. I don't think I could have done a book on my own because the stories that she offered through her contributions to the book really represents the reality of our collective, when I say collective, I mean around the world, experience of those two years. It didn't just affect any of us. It wasn't just an infectious disease. It affected all aspects of all our lives and in many parts of the world, in almost every part of the world the impact of that is still being felt in families, communities and countries. So we hope that the book really represents the various ways that the pandemic affected our ways of life and the lives that we live and that particular event is just one illustration that life continued, good things continued to happen, bad things continued to happen and we had to manage all of those in the context of the pandemic.

Garry Aslanyan [00:38:49] Vivianne.

Vivianne Ihekweazu [00:38:52] I think for us, navigating those moments of tension were real. I mean, I used to say that Chikwe has very broad shoulders because each day, it almost felt sometimes like Groundhog Day in that you will always be facing challenges, Chikwe's phone was always ringing, so many people were calling him at the same time. And those moments tension also were when, we also needed to have conversations with him, but knowing all the things he had to almost carry in his head, there were

almost these small windows in which I knew I could get his attention, and this was early on. I think as the outbreak progressed, it became a bit easier, but those early months were very difficult. And I could just see the weight and the pressure that was on him. But I do think, I know Chikwe would be embarrassed when I say this, but I do think that it's not many people who could have coped with that amount of stress and tension and knowing that an entire country was really dependent on a lot of the guidance and advice that he and his organization and the special task force was given at that time. And it was never easy, so there's no way of sugarcoating it. There were a lot of tense moments, but I think, one thing we did do as a family is stay very close. And with support of family and support of friends calling up and just checking on us, that I have to say really, really helped us during that period.

Garry Aslanyan [00:40:19] As a closing, maybe I could ask you if you have any advice for couples or families striving to balance the professional and personal demands on the career in public health, what would you tell them?

Chikwe Ihekweazu [00:40:35] It's hard to give advice around this because, you know, everyone's circumstance is different, families are different, people are working in different circumstances. But I think what we try to do is just be in each other's professional lives, be as aware of what we are all doing, and not just ourselves, our children, and therefore, you do not separate this, not to keep too much separation between these. This works for us. I'm not saying it will work for everyone else. People have different approaches, but what works for us is really being very present in our lives. And we do spend a lot of time at work, thinking about work, so we share a lot those every day, and we share with our children their lives, and they share with us as much as they are able to at the moment. They are in their late teens and early twenties, so long may it continue.

Garry Aslanyan [00:41:38] Vivianne.

Vivianne Ihekweazu [00:41:41] Just as Chikwe said, there's no easy answer and every couple's circumstances is completely different. But if ever there was a word of advice or whatever I would give, it's more in terms of we as a couple experienced the pandemic as adults. So, we were able to cope with a lot of the situations we were faced with. One of the key learnings was the impact they had on children and the whole having to go to online schooling, I saw the impact it had on, especially our younger son. So, if anything I would say is, if ever we have to be in this situation, we have to be really mindful and watchful of how these things impact different audiences. Children and old people, the isolating impact it had on children not being able to socialize with their friends. So, I think for me and for us what was a learning was making sure that whatever we were going through that the children were okay because as adults we can cope but sometimes the long-term impacts it can have on children can be difficult to fix. So as a couple we managed and as I said every couple's situation is different but for children it was really really important that we were mindful and made sure that they were okay no matter what we were going through at any point in time.

Garry Aslanyan [00:42:57] Thank you, Chikwe. Thank you Vivianne for joining us today. I wish you best in your future endeavours.

Vivianne Ihekweazu [00:43:04] Thank you very much Garry, good to talk to you.

Chikwe Ihekweazu [00:43:08] Thanks, Garry, it's been a real pleasure sharing these thoughts with you.

Garry Aslanyan [00:43:14] Chikwe's remarkable career in public health offers an invaluable inspiration and leadership lessons for all of us in this field. What stands out mostly is his humility, his willingness to

ask for help, seek collaboration and never go it alone. He reminds us of the power of building trusting partnerships today that can sustain our efforts well into the future. I felt that his journey in establishing the Nigeria CDC underscores how these principles who were instrumental in shaping the institution's success, particularly in its pandemic response. Beyond their professional achievements, Chikwe's and Vivianne's openness in sharing their personal journey sheds light on the realities of a public health career, one that brings both excitement and uncertainty for partners and families. Their strong relationship is a testament to the importance of navigating work-related challenges together in a way that not only protects but also strengthens their family. To learn more about the topic discussed in this episode, visit the episode's webpage where you will find additional readings, show notes and translations. Don't forget to get in touch with us via social media, email or by sharing a voice message and be sure to subscribe or follow us wherever you get your podcasts. Global Health Matters is produced by TDR, a United Nations co-sponsored research programme, based at the World Health Organization. Thank you for listening.