As a child, Nicole Maddox dreamed of becoming a doctor; she was driven by the idea of providing cures and saving lives. As an adult, her passion for global health led her to Africa and thanks to a Global Health Corps (GHC) Fellowship Nicole’s horizons were widened. In between, Nicole earned a B.A. in African Studies and an M.A. in Public Service.

“My fellowship experience expanded my views on global health, social change and development work,” she recalls. It also caused an evolution in her dream of a career in medicine. Improving health systems that contribute to unnecessary ailments and even death became her passion. But it was a very personal experience, the loss of her grandmother to leukemia when Nicole was 13, that served as a milestone. “My family struggled tremendously refusing to even use the word cancer,” she recalls. This silence applies to many treatable diseases like HIV/AIDS, and affects developed and developing countries alike. Nicole sees her calling for global health work as a chance to address silence and stigma by offering solutions that improve access to affordable quality health care.

Nicole’s GHC Fellowship was based at the Ministry of Health in Zambia. Her role within the Directorate of

“GHC is an incredible opportunity to engage with other young professionals who are interested in improving health equity.”
Disease, Surveillance, Control and Research was to ensure that all research conducted in Zambia met ethical standards, promoted the health rights of all Zambians, and that it complied with the health priorities established by the Minister of Health each year. This important work involved reviewing research protocols from local and international investigators and seeking approval from the Ministry to commence research activities.

“I spent my first day of work in the small town of Chongwe helping to close out a $4.6 million TB survey project,” she recalls. The TB survey received attention globally for being the first fully digital survey in Africa. Nicole helped interpret the data and used the information to help write the final report.

The co-fellow model is one of the reasons Nicole chose GHC. Nicole’s co-fellow, Albertina Moraes was instrumental in teaching her the local culture, the language, and government protocols. They also collaborated on projects and taught each other new skills. “Our ability to work together so fluidly was recognized by the Directorate and as a result, we both accepted offers to continue working at the Ministry after the Fellowship ended,” she said.

The list of skills that Nicole developed during her time as a GHC Fellow is impressive. Among them, she co-authored a research proposal for conducting the very first country-wide quality of care assessment of health facilities in Zambia and went on site visits to learn about the health structure of the country. She used this information to design survey tools for collecting information about logistics management, adequate and equitable distribution of resources, and patient satisfaction.

Currently, Nicole works within the Directorate of Clinical Care and Diagnostics Services at the Ministry. She analyzes the effectiveness and impact of all MOH supported Antiretroviral Therapy (ART) sites and translates data into reports that inform the public and research audience on how services are responding to the needs of HIV/AIDS patients in Zambia. She also supports programs sponsored by USAID, Global Fund, PEPFAR, and CDC.

Although Nicole has come a long way, professionally, since she started her GHC Fellowship, an early experience has stayed with her. A presentation by Dr. Sharon Rudy (GHFP-II Program Director) is still fresh in her mind. “Dr. Rudy said ‘Don’t judge, just notice’ as she encouraged all of the fellows to be observers of our thoughts instead of critics. This simple quote has been incredibly powerful in my work with the Ministry of Health.”

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**A look at the work of USAID in Zambia**

Support for HIV/AIDS services improves treatment for infected mothers and infants

USAID, in partnership with the Ministry of Health in Zambia, has expanded quality services for prevention of mother-to-child HIV transmission, HIV counseling and testing, and treatment. As a result, more than 400,000 people now regularly receive antiretroviral treatment and the percentage of infected infants born to HIV-positive women dropped from 39 percent in 2005 to under 5 percent in 2010.

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Adapted from Frontlines May/June 2014 and USAID website 2/4/16

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**GHFP-II expands the career pipeline in global health**

Practical field experience is essential for early career professionals, which is why GHFP-II partners with Global Health Corps to support underrepresented individuals in their global health careers. Occupational interests tend to stabilize by late adolescence or early adulthood. In addition, certain environmental conditions can exert direct, potent effect on choice formation and implementation.