

Joyce Sackey-Acheampong, M.D. '89: In good faith

By Jennifer Durgin

At 14, Dr. Joyce Sackey-Acheampong made a decision that would change her life. It was the early 1970s, and a preacher was giving a talk at the all-girls boarding school she attended in rural Ghana. His words affected her deeply, and she decided that day to make her faith an integral part of her life. When the preacher called out to the audience, "If you've never invited Christ into your life, come forward and we will pray for you," she answered his call.

"I don't recall a feeling of elation or being overwhelmed," says Sackey, who is now an assistant professor of medicine at Harvard Medical School. "It was a simple step of faith—literally and figuratively—that marked the beginning of a new life journey for me." From then on, she says, for her "there was no such thing as having your faith be separate from your life."

As part of her spiritual awakening, Sackey joined a club at her school called the First Aid Society because she wanted to do "good works." The society visited neighboring villages to hand out nutritional supplements, bandage wounds, and treat chronic ulcers—"very simple things" that high-school students could do, as she recalls. "That was a pivotal time for me," she says. "Recognizing that Ghana was not uniform and not everybody had access to hospitals and doctors like I had when I was in the capital, and to realize that these people were miles and miles and miles away from the nearest hospital and, for them, the first person they were seeing who could actually attempt to help was a high school student—it was just amazing to me."

Growing up in Accra, Ghana's capital, Sackey lived a relatively comfortable life. Her mother, an orphan who never finished high school, worked as a seamstress and owned a small fabric shop. Sackey's father, who came from a wealthy family, went to the United States to earn his M.B.A. shortly after marrying. "Right from the beginning," says Sackey, "there were tensions in terms of their backgrounds." Sackey's parents separated when she was a baby, but she remained close to her father's family, who always included her in family gatherings. They even offered to send her to the U.S. for high school, but her mother refused to let her go. Instead, Sackey's mother pushed her to apply to the most prestigious schools in Ghana—"all the top-notch schools," says Sackey, who received a full scholarship to attend Aburi Girls' Secondary School, where she found her faith and her life's work.

"I remember standing there," says Sackey of one of her first visits to a village with the First Aid Society, "and checking somebody's chronic ulcer or something . . . and saying to myself, 'I love science. Wouldn't it be nice—a natural combination—to become a physician and someday come back and attend to the needs of these villagers?'"

That night, "I bawled my eyes out," Sackey remembers. Then "I said, 'Okay, okay, Joyce. You're a physician. What can you do . . . to go back to that original dream of helping?'"

Sackey began collecting a list of U.S. colleges, since she and her parents had always planned for her to go to the United States at some point to be closer to her father. She couldn't afford the application fees, though, so she applied only to schools that agreed to waive the fee—which included Dartmouth College. When Dartmouth offered her a full scholarship, she accepted.

At Dartmouth, Sackey majored in biology and psychology, yet still had time to explore other subjects, like literature, history, and languages. In Ghana, she had focused only on science. "I felt like the world was open to me all of a sudden," she recalls. She began looking beyond Hanover, N.H., and decided she'd like to attend medical school elsewhere—in an urban and perhaps warmer location.

But a letter she received late in her senior year from the Immigration and Naturalization Service (INS) stymied those plans. Sackey had come to the United States on a student visa and, during college, had also applied for permanent residency. The two processes were incompatible, the INS informed her, and since she was applying for permanent residency, her student visa could not be extended. "Suddenly I was without status," Sackey remembers. And without residency, she also was not eligible for federal loans to pay for medical school. Not sure if she would be able to stay in the U.S. as she'd hoped, Sackey went to talk to the dean of Dartmouth Medical School. She remembers him asking how long she thought it would take to be granted residency. "I don't know," she said. "Things could be done by second semester of medical school, [but] things could take longer than that." DMS accepted Sackey on a conditional basis.

The Medical School also put together a financial aid package for her and helped her find housing. "I didn't have enough [money] to stay in the dormitory," she explains. "So the financial aid director at the time said, 'We have this professor and his wife who [are] always interested in taking students.'"

Sackey had dinner with the couple, Drs. Robert Nye, a physiologist, and Frances Nye, a psychiatrist, and the three hit it off. Sackey moved in, assuming she would pay some rent, but the Nyes refused her offers. The couple—both now emeritus faculty members—also took in Tenagne Haile-Mariam, DMS '88, who was from Ethiopia and a year ahead of Sackey. The young women, though from very different countries and backgrounds, became fast friends. Frances Nye remembers Sackey and Haile-Mariam wrapping themselves in blankets and huddling near the woodstove to study at night. Haile-Mariam "became like a sister," Sackey says, and the Nyes, whom Sackey and her family still visit on holidays, "took me in as their daughter."

As Sackey's visa and residency troubles dragged on, semester after semester, both DMS and the Nyes hung with her. "By the time I phys-

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ically got that green card,” Sackey says, “I was literally about to start my internship.”

Sackey did her internship and residency in internal medicine—including a year as chief resident—at Boston’s Beth Israel Hospital. In 1992, she joined the faculty of Harvard Medical School as an instructor. In 1996, she was named medical director of the North Suite outpatient unit of Beth Israel Deaconess Medical Center. “The years just flew by,” she says. During that period, she also got married (to a Ghanaian she’d met in Boston through a friend), bought a home, and had three children (the first of whom died in 1991 at age one and a half after a prolonged illness). She felt she was living an ordinary life, doing the “things that I guess normal people do,” she says. But something happened in the summer of 2000 that sent Sackey in an *extra*-ordinary direction.

One night, she found herself in her car listening to a BBC report on AIDS in Africa. AIDS was undoing all the economic progress Africa had achieved over the past 50 years, and life expectancies were falling after years of improving. Sackey was well aware of the AIDS crisis. Some of her patients had AIDS. She’d been working with a colleague, Dr. Deborah Morris-Harris, to get funding for AIDS education in African-American communities in and around Boston. She’d heard from relatives in Ghana about friends who were infected and dying. She’d even prayed about the epidemic with members of her church. But that night, the news overwhelmed her. “I bawled my eyes out,” she remembers. But “as I cried, I said, ‘Okay, okay, Joyce. You’re a physician. What can you do? Remember what you began [your career] saying? You were going to go into medicine and help [people]. What can you do to go back to that original dream of helping?’”

Three months later, in August 2000, she made a “pilgrimage” home to Ghana—her first trip back in 10 years. Sackey intended to visit her mother, to meet her husband’s family, and to give her children a chance to meet their faraway relatives. She also researched what the country was doing to combat AIDS and met two Ghanaian physicians who had recently established an organization called AIDS Ally. They, too, wanted to do something about HIV/AIDS in Ghana, where about 3% of the population is infected with the virus.

Once back in the U.S., Sackey; her husband, Kwaku Acheampong, a Harvard-trained accountant; and Morris-Harris founded a nonprofit group called Foundation for African Relief (FAR). One of FAR’s first actions was to establish a 12-week fellowship for African health



JON GILBERT FOR FOX

A Harvard internist and teacher, Joyce Sackey-Acheampong founded the nonprofit group Foundation for African Relief after “just really being moved—moved to tears.”

workers who care for people with HIV/AIDS. Fellows would spend time with AIDS experts at Beth Israel Deaconess, take courses at Harvard Medical School, and learn how to effectively manage patients on antiviral therapy. The first fellow, Dr. Peter Preko, a co-founder of AIDS Ally, came in May 2001. FAR also agreed to help Preko and AIDS Ally start an HIV/AIDS clinic in Kumasi, Ghana; in November 2001, the clinic welcomed its first patients. FAR provided some funding for the clinic, as well as medical supplies and HIV medicines, while

AIDS Ally did most of the work on the ground. When it started, says Sackey, “the clinic was really a pioneer” because it provided comprehensive, compassionate, and affordable AIDS care.

To help get the clinic off the ground, in December 2001, FAR also organized an HIV/AIDS-care training workshop in Kumasi, inviting 15 national and international experts and 70 local participants. FAR plans to hold more such workshops in the future.

Most recently, FAR has been working with AIDS Ally to revamp the Kumasi clinic. In recent years, Ghana has received millions of dollars for AIDS relief from the international community and has established a national treatment program. As more and more Ghanaians with HIV/AIDS get their medicine from government-run clinics, FAR and AIDS Ally are trying to modify what their clinic offers to avoid duplicating the government’s efforts. Sackey hopes the clinic will continue to be a pioneer and will be transformed into an education and support center. Many Ghanaians with HIV/AIDS “thought they were going to die,” explains Sackey, but now, thanks to life-prolonging antiviral treatment, they need to figure out how to get back into the workforce and support their families.

When Sackey reminisces about how FAR came together, she talks about her faith. FAR “very much came from just really being moved,” says Sackey, “moved to tears, and then praying.”

Today, Sackey devotes about one day a week to FAR. The other days she spends practicing in a Beth Israel Deaconess outpatient clinic and teaching first- and third-year medical students. In 2003, she was promoted to assistant professor and embarked on a one-year fellowship to study medical education. She loves academia, she says, and is considering pursuing a degree in public health. She’d also like to move back to Ghana some day. But wherever her career takes her, it seems clear that her faith will be her guide. ■