

A person is walking across a suspension bridge made of ropes and netting, set against a backdrop of a dense, green forest. The bridge's ropes are thick and dark, and the netting is made of smaller, lighter-colored ropes. The person is wearing dark pants and sandals. The background shows a vast expanse of trees and foliage, with a bright sky above.

# GONE TO GHANA: WHO IS EMILY SAATHOFF?

BY RACHYL JONES

A hand-painted rainbow elephant hangs on a cloth canvas next to Emily Saathoff's bedroom door. Above her desk sits a canvas of seven women carrying baskets on their heads. Her bedroom is riddled with mementos from her semester in Ghana, a country on the western coast of Africa.

In the spring of 2019, the University of South Carolina (UofSC) senior studied abroad in Accra, the capital of Ghana. "It is breathtakingly beautiful with the friendliest atmosphere," she says. "A chaotic energy but in the best way possible." Emily traveled to Ghana to experience something new. "A culture I could immerse myself in," she says. She found that and more. In Ghana, she discovered her purpose. Emily has always known that she would serve others through healthcare, but her experiences overseas crystalized that idea into something tangible. She's been reaching for it since she left.

Emily's passion for medicine stems from her early introduction to doctors. Her twin sister, Annie Saathoff, suffered a traumatic childhood injury resulting in 30 surgeries by the time they graduated middle school. As a college senior at Texas Tech University, Annie manages her disability but doesn't let it define her.



Annie and Emily Saathoff

“When I was in eighth grade,” Emily explains, “Annie had a big operation. There were two girls staying with her [in the hospital] – one from Haiti and one from Egypt. Annie’s doctor brought them to America to be treated.” With this, Emily was introduced to the idea that a doctor who lives in the U.S. isn’t confined to who they can serve. This first sparked Emily’s desire to work in third world countries.

“If I want to work with more vulnerable populations on a global scale, I want to learn directly from those populations,” Emily says.

In Ghana, she identified a unique population of underserved people. Much of Accra’s homeless population suffers with a physical handicap, which life on the streets doesn’t accommodate for. As part of her community psychology class at the University of Ghana, Emily and her peers conducted a public survey demonstrating how Ghana’s Persons with Disabilities Act was nonfunctional. For example, the act said all facilities would have ramps. They did not. Her class conducted the survey by speaking with homeless, handicapped people about their experiences getting around the city.

“I proposed the idea to my class,” Emily says. “I was really passionate about accessibility. It’s definitely because of my sister.”



Emily and her classmates conducting the Persons with Disabilities Act survey

In addition to handicap advocacy, Emily spent her time volunteering in the University of Ghana Hospital’s surgical ward. While she’s worked in hospitals before, the Ghanaian hospital experience was unlike anything she’d ever witnessed.

“On more than one occasion I’d have to remove a spider from the surgeon’s back,” she says. “One time, the air conditioning blew out and the surgeons had to throw their bodies over the patient. Ice and water droplets were flying everywhere.”

This isn’t representative of the country, Emily clarifies. The surgeons are as educated and qualified as those in America. “But this would happen,” she says, and it’s because of how resources are inequitably distributed.

During a hernia repair, which is a procedure relocating displaced tissues in the body, a surgeon turned to Emily and said, “You’re never going to see something like this in your country,” because while the U.S. operates on hernias, preventative screenings catch them early when they are manageable. Ghana doesn’t have access to this technology, so hernias have often become fatal by the time doctors catch them.

“The American and Ghanaian healthcare systems have the same goal,” Emily says. “And if they were given the same resources, maybe more people would realize that. It’s a big wakeup call for how privileged we are.”

Emily also served the Accra community through the Play and Learn Foundation (PAL), an

an after-school program intended to keep underserved students away from negative influences. A few days each week, she tutored two preteen girls, Jessica and Maame Serwaa, in Okponglo, a poor suburb of Accra.

“Mentoring is something these children lack,” says Nana Ohene, founder and executive director of PAL in Ghana, “especially in the communities they live in.”

“Now, we have children that are confident and striving for excellence,” he continues. “Once you light that fire in a child, you’ve done half the job.”

The girls refer to Emily as “Auntie,” similar to “Miss” in the U.S.

“I went on a trip, and when I came back, Jessica had written on our whiteboard,” Emily’s voice shakes, “Auntie, I missed you so much, welcome back.”

Emily sits in her college bedroom, surrounded by Ghanaian art. Her head hangs down and she takes a breath before she speaks. “Since I’ve come home,” she says, “I’ve just wanted to go back.”

With the help of the Columbia Rotary Club and UofSC’s Office of National Fellowships and Scholars, Emily was awarded the Rotary Global Grant, a scholarship funding one year of study abroad for a master’s degree. She will return to Ghana next fall.

Jim Morris, member of the Columbia Rotary Club, says, “It’s one of those things where many are qualified, few are chosen. And she’s the deserving student.”

When Emily returns to the University of Ghana, she will earn her master’s degree in public health with a specialization in family populations and reproductive health. The aim of her studies will be to reduce the mortality rate in mothers and children under the age of five. She plans to attend medical school in the U.S. and practice medicine in both the U.S. and Ghana.

Emily and Nana Ohene at a Play and Learn Foundation event



Emily tutoring Jessica and Maama Serwaa



“It’s been cool to see her grow and make these changes, and put them into action,” Annie says. “She’s chasing her dreams, and everything she wants to do with her life is about helping other people.”

In her graduate studies, Emily plans to build upon her previous volunteer work in the community. “As a physician,” she says, “if you don’t take the time to understand the people that you’re treating, you shouldn’t be treating them in the first place.”

“It’s a two-way street,” she continues. “It’s not charity, and I hate how these countries are looked at in that way.” American physicians have a unique

opportunity to equitize the healthcare system, Emily says. If other countries are ever going to experience the same ease of medicine that exists in the U.S., people need to go out of their way to make that happen.

“When I was in middle school,” Emily says, “we had an assignment to write your goal somewhere you could see it every day. I had a chalk wall, and I wrote ‘change the world.’ I’ve come to realize it’d be very difficult for one person to do that. But at the very least, what a bunch of individuals can do is shape communities, and that’s what I’d like to do.” ■

