



Equalizing Access to Healthcare

2017 ANNUAL REPORT

“When I first received the phone call about the donation of medical supplies, I thought I was dreaming. It was not realistic. Today, with all the medical supplies here, I thank you and your team. I am not in a dream world. This is reality. Thank you so much for the items received today.” – Rakiraki Hospital



Donating medical supplies and equipment to Rakiraki hospital, an area that was devastated by cyclone Winston in 2016. Picture of Nivita Sharma with Nurse Sai receiving the donation in July 2017.

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MISSION

EqualMed aims to improve access to healthcare in under-served communities around the world and make a difference to the lives of many one-step-at-a-time.

VISION

A world in which every human has equitable access to quality healthcare.

HISTORY

The foundation of EqualMed began in 2013 and in 2016 was officially registered as a 501(c)(3) tax exempt public charity with the Inland Revenue Service (IRS) and as a corporation in the State of Georgia. Its genesis was Nivita D. Sharma who was a 17-year old high school student at the time. The call to establish a non-profit to help the medically under-served and economically disadvantaged was motivated by the passing away of Nivita's grandmother in 2013 who did not have access to quality healthcare in the Fiji Islands. Turning her own sorrow of losing her young grandmother into the impetus to form EqualMed, Nivita wants to make a difference to the lives of the medically under-served and those less fortunate to afford basic healthcare. However, Nivita's pledge to bring healthcare to those in need in Fiji was a tremendous struggle when she embarked on her mission as an individual in 2013 and 2014. She used her personal savings to achieve the medical missions in 2013 and 2014 because organizations would not support an individual's cause. Learning the hard way, Nivita established her charity EqualMed as a tax exempt 501(c)(3) non-profit to pursue her passion of significantly reducing the medical care disparity throughout the world. Fiji is her first country to work with as it is close to her heart and the fact that large charities do not usually assist the nations in the South Pacific.

To learn more about our history visit: <https://equalmed.org/founder-%26-ceo>



Grateful doctors and nurses at Sigatoka Hospital upon receiving urgently needed medical supplies and equipment in July 2017. Second from left, Mr. Peter Hopgood, General Manager of Outrigger Fiji Beach Resort, our partner since 2013. Mr. Hopgood is a tremendous social worker and leader in Fiji.

ABOUT US

EqualMed's Inaugural Project Fiji

The foundation of EqualMed was two medical missions to Fiji by its founder and chief executive officer, Nivita D. Sharma. Using her personal savings, Project Fiji was successfully executed in the summer of 2013, and medical needs' evaluation resulted in the second project that was successfully executed in the summer of 2014. The desperate medical needs of health facilities in Fiji evaluated in the 2013 and 2014 missions led to the formal genesis of EqualMed that was incorporated as a tax exempt 501(c)(3) non-profit in 2016, and its first major mission, Project Fiji 2017, was successfully executed in July 2017.

Why Fiji?

To many, Fiji is paradise and indeed it is for hundreds of thousands of tourists enjoying the clear blue skies, sunshine, and unspoiled beaches engulfing the crystal-clear waters. But for the people of this friendly nation, paradise is elusive. This archipelago of about 300 islands has suffered multiple military coups that resulted in the exodus of medical professionals that has left the nation with a relatively neglected health system due to withdrawal of foreign aid since 1987. Yet, patients from neighboring pacific nations come to Fiji for medical treatment because Fiji is regarded as having the most advanced medical facilities in the South Pacific. Fiji has a School of Medicine and is the primary hub of the University of the South Pacific.

Medical facilities in Fiji do not have the very basic of medical supplies to treat people in need of medical care. They often lack primary medical supplies and equipment. Necessary medical supplies such as micropore tape, thermometers, dressings, stethoscopes and otoscopes, skin prep wipes, crutches, scissors, insulin injections, diabetes monitoring equipment (blood glucose monitors and test strips), catheters, and even basic medications are lacking and urgently needed. These supplies are available abundantly in the USA. Each year tons of unexpired medical supplies in the USA are discarded in landfills that unnecessarily burden our lovely planet.

Patients in Fiji often must bring their own medical supplies. For example, during previous medical missions, Nivita witnessed a boy of about 10 with a suspected broken arm waiting for hours to be seen at a major city hospital only to be told to purchase plaster from the pharmacy in town as the hospital did not have any. Admitted children were asked to bring their own bedding (pillows, sheets and blankets). Medical staff use commercial adhesive (sticky tape) tape instead of medical micropore tape on wounds and seconds later the tape falls off (try it on yourself). The list goes on. The take home idea is that basic medical supplies are lacking in paradise – a paradox! Together we can take one-step-at-a-time and make a difference to the lives of many.

Please see photos over the next few pages and visit <https://equalmed.org> for details and photographs of medical facilities crying out for help.



Hospital staff at Nausori Health facility making cotton balls with bare hands to use in dressing wounds and wound care. This facility is EqualMed's target to equip in 2018.

Health clinic in a shipping container in northern Viti Levu, main island of Fiji. See container picture below. This clinic lacks basic medical supplies. Imagine yourself as a patient here in the hot and humid tropical Fiji.



The shipping container medical clinic in northern Viti Levu.

Would you want used catheters and IVs for your medical treatment?



PEOPLE

EqualMed is in its early years and board members comprise the following individuals. EqualMed welcomes interested persons to volunteer as board members and help it grow in its mission to equalize access to healthcare throughout the world.

Founder & Chief Executive Officer: Nivita D. Sharma.

Nivita Sharma is currently a senior and Honors Research Scholar at The University of Georgia, USA and will graduate in May 2018 with a Bachelor of Science (with Highest Honors) major in Biology and a minor in Global Health. Nivita was inducted into Phi Kappa Phi, Phi Beta Kappa, and National Blue Key Honor Society.

Nivita held the office of Vice President (2017-2018) of The American Red Cross Chapter at The University of Georgia. She is a certified Red Cross first aid and CPR responder. Nivita served on the Student Health Advisory Committee (SHAC) at The University of Georgia in the 2016 to 2018 academic years. She volunteered at Piedmont Athens Regional Medical Center from 2015 to 2017. Through her role in MEDLIFE, she travelled to Lima, Peru to set up mobile clinics and provide medical care to less fortunate and medically under-served families living in rural communities. While in high school, Nivita engaged in various charitable events to help the economically disadvantaged and those with medical disabilities.

Nivita will attend Cornell University's Weill Cornell Medical College in New York beginning August 2018.

Chairman of the Board: Divesh S. Sharma, PhD.

Dr. Divesh Sharma is a Distinguished Professor of Accounting at Kennesaw State University, Georgia, USA. He grew up in the Fiji Islands and obtained his undergraduate and graduate qualifications from the University of Canterbury in New Zealand and Griffith University in Australia. Dr. Sharma is a Fellow of the Institute of Chartered Accountants (Australia) and worked as an auditor with KPMG prior to his academic career.

Corporate Secretary: Vineeta D. Sharma, PhD.

Dr. Vineeta Sharma is an Associate Professor of Accounting at Kennesaw State University, Georgia, USA. She grew up in the Fiji Islands and obtained her undergraduate and graduate qualifications from the University of the South Pacific in Fiji and Griffith University in Australia.

PARTNERS AND SUPPORTERS

Our generous donors and volunteers
Hospital Sisters Mission Outreach, USA
Jack DeLoss Taylor Charitable Trust, USA
Brother's Brother Foundation, USA
NewEyes, USA
Ministry of Health, Fiji
Fiji Pharmaceuticals and Biomedical Services
Diabetes Fiji Inc.
Outrigger Fiji Beach Resort
Navutu Stars Resort, Fiji
Southsea Cruises, Fiji
Fiji Airways
Fortune Star, Fiji
Laucala Bay Pharmacy, Fiji

CEO'S REPORT

Dear Generous Donors,

With **YOUR** help, Project Fiji 2017 was a huge success. It is my pleasure to describe how **YOUR** contributions impacted the lives of thousands of medically under-served and economically disadvantaged in Fiji. **YOUR** generosity enabled shipment of a 20-foot container of medical supplies and equipment, air-freighting 250lbs of medical supplies, and hand-carry of delicate medical equipment. I want to remind you that EqualMed operates purely on a volunteer basis, and **YOUR** contributions were used to acquire the medical supplies and equipment, ship the 20-foot container from Illinois to Fiji, and air freight supplies from Atlanta to Los Angeles. I paid for travel to Fiji and the cost of sea transportation within Fiji. All of **YOUR** generous contributions went directly to beneficiaries as you can see from the financial summary in this report. Details of the mission are on the newly designed website of EqualMed (<https://www.equalmed.org>), which includes (1) a two-minute slideshow video, (2) pictures of the mission, (3) detailed inventory of medical supplies and equipment donated, and (4) Fiji newspaper articles about the mission.

The success of the mission can be seen by the impact **YOU** made:

(1) About \$200,000 USD of medical supplies and equipment were donated to 12 rural and remote area medical facilities. Approximately 300,000 patients including the economically disadvantaged and those with diseases and illnesses will directly benefit.

(2) Conducted eye tests and issued reading glasses to more than 200 low-income villagers living in the most remote parts of Fiji.

(3) Provided first-aid kits to all schools in the interior region of Nadroga/Navosa (in southwest Viti Levu, main island of Fiji).

(4) Visited villages with Diabetes Fiji Inc. to provide medical supplies such as adult diapers, medical socks for proper foot care, crutches, and insulin injections; and conducted research and advised patients about diet and nutrition as part of the World Diabetes Foundation footcare project. Severe diabetes related problems lead to 3 amputations per day in 2017 (it was 2 amputations per day in 1996). 500 known children (many are unknown) as little as 3 years old have type 1 diabetes and 10,000 adults living in remote areas cannot afford diabetes care. I interacted with some of these patients and created a four-page diabetes awareness booklet to be used in hospitals and schools, and a large diabetes awareness banner to be displayed in major hospitals in Fiji. In Project Fiji 2018, my aim is to help these vulnerable patients and avoid amputations through proper care and treatment of diabetes. In the pages that follow, I provide a summary of budgeted costs for Project Fiji 2018 that is scheduled for the summer of 2018.

I am very thankful to all of **YOU**, and to the partners, supporters and volunteers of EqualMed. Without **YOUR** support, EqualMed would not be able to execute its mission of providing access to medical care to the medically under-served and economically disadvantaged.

To summarize, I believe in engaging in meaningful charitable work truly from the heart and utilizing donor funds for the primary purpose of providing access to healthcare where it is needed most.

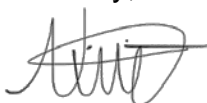
During the 2017 mission, I was shocked to learn that there is a severe lack of insulin injections for children suffering from type 1 diabetes. Fiji is among the top nations in the world with diabetes on a per capita basis. Please see the article on the diabetes epidemic in Fiji that appeared in the *Lancet: Diabetes-Endocrinology* included at the end of this report. Also allow me to share some facts.

In Fiji, children suffering from diabetes are often shunned by not only their friends, but often by their families. Children with diabetes from as little as 3 years old are neglected and frequently end up abandoned simply because their parents cannot afford medication or because of the stigma. I know of two siblings who live alone about nine miles from the main hospital in the city of Suva. The elder sibling, a child, is disabled and unable to work and the government refuses to provide care (the law only helps the unemployed elderly). The younger female sibling I will call Mary for anonymity, is not even a teenager and suffers from type 1 diabetes. She quit school because she was shunned from students and teachers. They believe diabetes is contagious and Mary is sick and must stay home. Mary, like many others, cannot check her glucose levels because she does not have a glucose monitor. She also does not go to the hospital for check-ups because she cannot pay for the bus fare (about \$2 FJD, \$1 USD). After being discovered and invited by Diabetes Fiji to its clinic, Mary WALKS, yes, she WALKS all by herself nine miles one-way from her village home to the clinic to receive treatment. What is the treatment and how often? Mary has her blood sugar checked and receives an ADULT insulin injection. Mary returns after two weeks to the clinic. This is because the young Mary cannot afford her own glucose monitor and insulin injections. She is afraid of the ADULT insulin injection because it leaves large blisters and scars, and the 18-mile daily WALK takes a toll. It is very painful for Mary. I was devastated, speechless, and very emotional when I learned about Mary and many such kids I met.

I want to help Mary and other kids, and together with **YOUR** help we can reduce their suffering. My aim is to ship insulin injections, glucose monitors, and strips and other medical supplies to Fiji. I humbly request you to consider giving the gift of life again that you can make on the website (<https://www.equalmed.org>), by sending a check to EqualMed, 933 Checkered Way, Kennesaw, Georgia, 30152 (USA if you are overseas), or a direct deposit. **YOUR** gift will be utilized without any administrative costs, unlike many charities.

I look forward to a successful Project Fiji 2018 and thank you enormously from the bottom of my heart. With **YOUR** support, we can take one-step-at-a-time and make a HUGE difference to those suffering medical disparities in economically disadvantaged communities.

Sincerely,



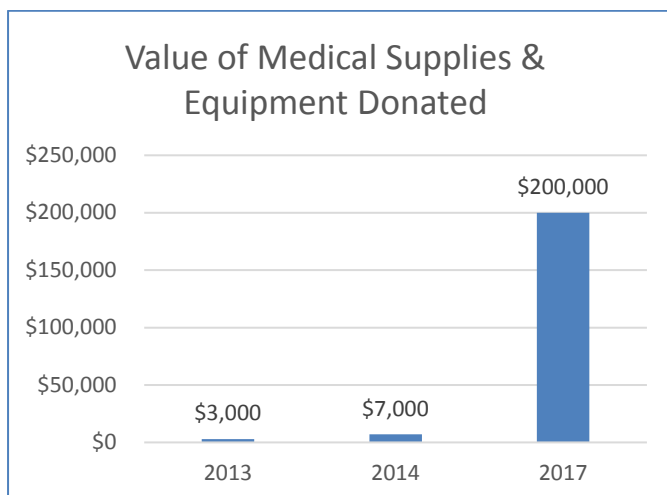
Nivita D. Sharma

**FOR PROJECT FIJI 2017, EVERY \$100 GIFT MULTIPLIED
TO ABOUT \$2,000 WORTH OF MEDICAL SUPPLIES &
EQUIPMENT THROUGH OUR MEDICAL SUPPLY PARTNER
HOSPITAL SISTERS MISSION OUTREACH**

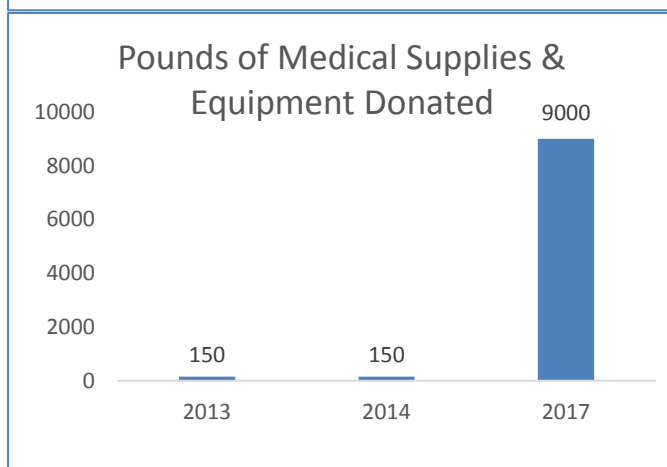
PERFORMANCE AND GOVERNANCE



EqualMed reports key performance metrics and its governance practices to GuideStar, which is the largest worldwide provider of information about non-profits. GuideStar collects, standardizes, and distributes information on millions of non-profits. GuideStar promotes and rates the transparency of non-profits so that donors and other stakeholders can have confidence in the charities they support. GuideStar issues four levels of Seal of Transparency: Bronze, Silver, Gold, and Platinum. EqualMed attained the highest level, Platinum Seal of Transparency in April 2018.



MEDICAL SUPPLIES & EQUIPMENT DONATED IN 2013 AND 2014 WERE FUNDED PERSONALLY AS THESE WERE INDIVIDUAL MEDICAL MISSIONS THAT LED TO THE FORMATION OF EQUALMED.



100% OF 2017 DONOR FUNDS OF \$10,802 WERE USED TO PROVIDE MEDICAL SUPPLIES & EQUIPMENT IN 2017.

EQUALMED DOES NOT USE DONOR FUNDS FOR OPERATING EXPENSES AND NO COMPENSATION IS PAID TO ANYONE. ALL WORK IS PURE VOLUNTEER.

No medical missions were carried out in 2015 and 2016.

HOW DONORS SEE US

*“I do not donate money often, but **this organization actually follows its mission**. All donations have reached those intended with Ms. Sharma actually doing all the work from foundation administration to operations, personally delivering and making sure **ALL** medical supplies reached those individuals and medical facilities that lack proper medical supplies. I will **continue to donate** to this organization.”*



Issuing baby blanket to a newborn's mother at a rural hospital. Note that mother brought her **own blanket** to the hospital!

“EqualMed is a fantastic charity. It is truly great to see such a positive direct impact on those in need of medical supplies. Your donation goes directly to those in need.”

*“I cannot say enough good things about this nonprofit. The founder of this organization has a **heart of gold**. Her vision at such a **young age** and what she has accomplished through this nonprofit is amazing. The organization is operated with the **utmost integrity, character, and consideration**. The organization also operates with **sound and dependable fiscal responsibility**. **You know where each dollar of your donation is being spent and can be assured is being put to the good use** you intended with your donation. Those involved with the organization have a passion to help others and they **genuinely care** for those that benefit from its mission.”*

*“I am so impressed with the organization and thoughtfulness of such a **young person to help poor and needy people access medicine**...I am a proud donor towards this cause. I encourage people to donate to this organization...”*

*“Inspired by inadequate health care for her grandmother in her native homeland of Fiji, Nivita Sharma has made it her mission to distribute medical supplies throughout the small island country. **EqualMed is an inspiring** non-profit organization that demonstrates we can **ALL** make a difference if we will just put forth the effort. In today's world, it is rare to find a young person willing to selflessly give so much of themselves to benefit others, whom they have never met. Truly, EqualMed is a **GREAT** non-profit worthy of your time and investment.”*

*“The calling that Nivita Sharma has, and the task she has willingly taken on is **beyond what one would expect of a 20 year old college student**. When I heard the history behind the formation of EqualMed and was asked to donate for Project Fiji 2017, I did so immediately. The focus and purpose of EqualMed helps fill the medical needs of an underserved population...In following up on the outcome, it is clear that Project Fiji 2017 is a great success. Nivita and her supporters...should be proud of what has been accomplished in Project Fiji 2017.”*



*“This charity is **purely volunteer based** and I am so thrilled to have contributed to its cause of bringing healthcare to the poor in the South Pacific. The charity was **quick to update its donors** on how the contributions were used through a dedicated page on its website about the project to which I contributed. Run by a college student, this charity **utilizes 100% of donor funds for the beneficiaries**. Has to be the best charity in effectively using donations and providing **transparent accountability**.”*

HOW BENEFICIARIES SEE US

*“Thank you Nivita from behalf of the **medical superintendent**. I would like to take this time to say thank you. Thank you so much for your contributions and the donations given today, which is going to be useful for the patients of Lautoka hospital. **We always run out of consumables** so this is a big, big assistance to us. And we thank you and your team out there who are asking for donations for the hospital. **We look forward to more donations in years to come.**”*

-Lautoka hospital



*“I am very thankful from the bottom of my heart, diaphragm, and maybe even the pit of my stomach. I am thankful for the donations you have brought to us today. **We are in a place where we often fall short of the things you brought** like blankets, linen, bed covers, even beds, tubing, and everything. We are very, very thankful for your help. Again, thank you.*

Vinaka vaka levu.”

-Sigatoka Hospital



*“Thanks very much for donating all the items that you have given. It is a privilege receiving these things. On behalf of my SDMO, Dr. Dasi, I would like to take this opportunity to thank you for making yourself available and providing us with all these items. **These are very needy in this hospital.**”*

Thanks a lot and may God bless you.”

-Nausori Health Center



The Diabetes Fiji staff (left to right) Dr. Rajeshwar Sharma, Viliame Qio - CEO, and nurses view some of the medical supplies donated in 2017. Luckily, we were able to provide some urgently needed medical supplies and equipment such as insulin needles for children and crutches for amputees. In 2018, EqualMed aims to provide medical supplies to treat children and the elderly suffering from diabetes.

*“I would like to express my sincere gratitude to EqualMed for **the timely donations** we have received. These donations will be used for training and to be distributed to health facilities. For example, we have received crutches and these crutches will be used by nurses. Currently we are running foot care training at the health centre and the nurses are trained on how to treat diabetic wounds. And one of the important things is crutches to help off load the wounds, and we just received a timely donation of crutches which will assist our nurses in wound care. Secondly, we are receiving other supplies like insulin syringes, which is a big factor in our diabetes care. One of the things we have is that the **syringes are very costly** and patients need to inject themselves daily. The syringes we are receiving are 0.1 and these are very helpful because they are **less painful to our patients** compared to the ones that we have in our pharmacy that is 0.2, which is **very painful, especially to our little ones**. We hope to continue this relationship that we have built to continue in the future. Once again, thank you to **everyone** who has assisted in EqualMed. We would like to say our big vinaka vaka levu and thank you so much for the assistance we received.”*

-Diabetes Fiji



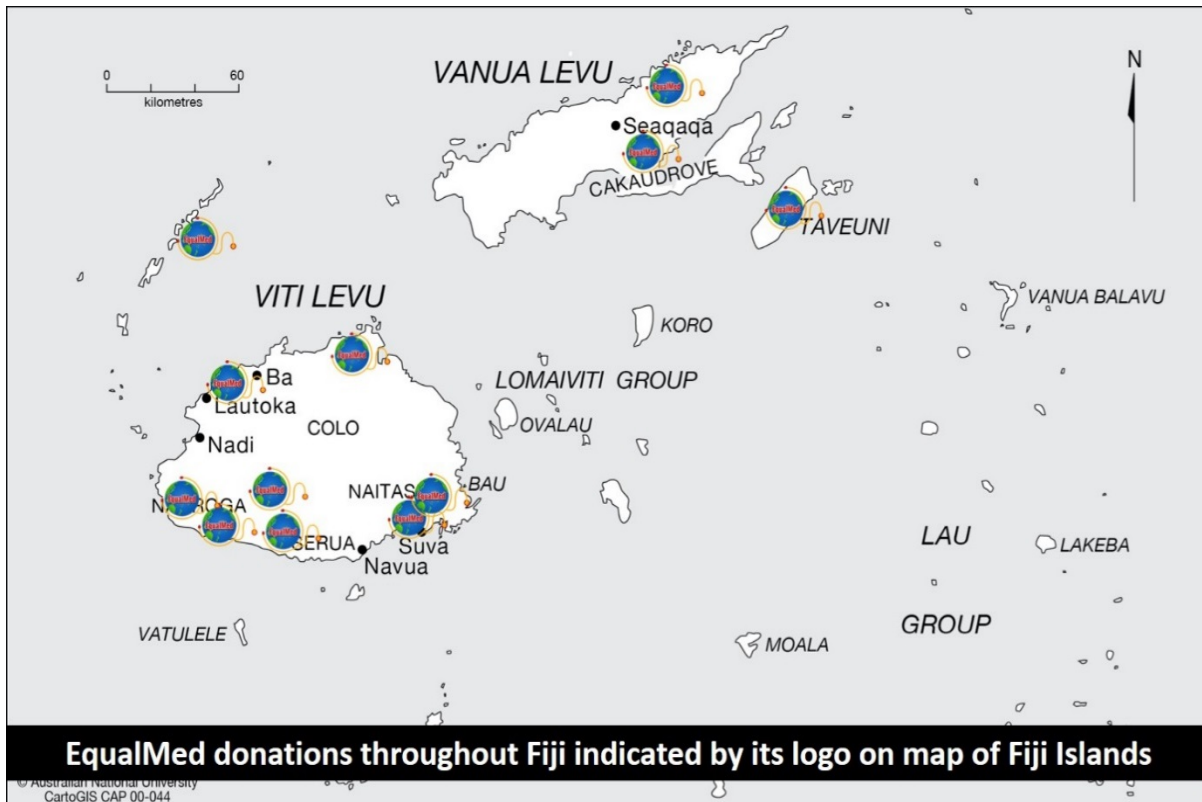
*“On behalf of Nalagi public school I would like to express my gratitude to EqualMed for donating this first aid box to us. Thank you very much EqualMed. **Our school...didn't have one**, but finally we got one. So thank you very much EqualMed.”*

-Nalagi public school in Sigatoka

*“Bula EqualMed! We are very grateful for the donations that you have given to our hospital. Just seeing the **number of boxes and the variety of items**, we are **very very very** grateful to your organization. We wish you all the best in what you’re doing and **it’s a very good deed that you are doing**. We hope that you will continue to do these things so that at **the end of the day our patients benefit in Sigatoka**. Thank you very much and vinaka vaka levu.”*
-Sigatoka Hospital



*“These glasses are awesome. And **now I can read** the Bible, Fiji Times, any books. Thank you for your gift. Your gift is fully appreciated. Vinaka.”*
-Recipient of a pair of eye glasses



2018 OBJECTIVES AND ACTIVITIES

Project Fiji 2018

The primary target group is 500 children as young as 3 years and 10,000 village elders suffering from diabetes. please visit <https://equalmed.org/fighting-diabetes> for photos of some of the children with diabetes Nivita interacted with in the summer of 2017. The second primary target is a health center in Nausori, which was visited in 2017. This health facility is in dire shape and desperately needs medical supplies and equipment. The photos of broken hospital beds, hospital staff making cotton balls with their bare hands, outside tents used to treat patients, and other dilapidated equipment were captured at this facility – please visit <https://equalmed.org/urgent-needs> for photos.

EqualMed aims to ship and distribute in the summer of 2018 a 20-foot container of medical supplies primarily containing supplies to treat diabetes and equip Nausori health center. The diabetes supplies to ship include blood glucose monitors, test strips, lancets, insulin needles, and skin prep wipes. This list of diabetic supplies may seem trivial and indeed they are in the USA. These are not available and unaffordable, if available, to the medically under-served and economically disadvantaged in villages in Fiji. As you can see from the budget for Project Fiji 2018, test strips are the most expensive yet a critical component in the treatment of diabetes.



Some of the children with diabetes Nivita interacted with during a diabetes 5K fun run in the summer of 2017 to raise awareness and educate kids, adults, and the public about diabetes. Banner in background created by Nivita Sharma. Diabetes Fiji will print multiple banners for display at hospitals and health facilities throughout Fiji.

FINANCIAL SUMMARY & BUDGET
Financial Summary for Project Fiji 2017

	<u>\$ USD</u>
Net donations received (after Paypal and bank fees)**	10,802
Payments for medical supplies	(4,195)
Payments for shipping and transportation	<u>(9,112)</u>
Surplus/Deficit	(2,505)
Deficit met out of pocket**	\$ <u>2,505</u>

Donations received in 2017 after completion of Project Fiji 2017 but before Project Fiji 2018

Net donations received (after Paypal and bank fees) in 2017	4,391
Net donations received (after Paypal and bank fees) in 2018 till April 15**	7,232
Budgeted costs for Project Fiji 2018***	<u>(35,000)</u>

Funding gap for Project Fiji 2018 **\$23,377**

Total donation by board members: Nivita, Divesh, and Vineeta Sharma = \$5,005, **excluding in-kind donations related to operating expenses (state of Georgia registration fees, website hosting fees, and other expenses like phone calls to Fiji) and travel costs to Fiji.

*****Budgeted costs** include acquisition of medical supplies and shipping to Fiji. Within Fiji transportation and travel costs to Fiji are excluded and will be funded personally or through partners. The \$35,000 includes shipping costs of \$5,000 and cost of medical supplies of \$30,000 that is made up of Blood Glucose Meters sourced from USA manufacturer (500 x \$10 = \$5,000), Test strips sourced from USA manufacturer (1,000 x \$20 per box = \$20,000 – this item is scarce and most expensive in USA and Fiji), and Lancets, Insulin needles, skin prep wipes and other medical supplies and equipment sourced from our USA medical supply charity partners at discounted prices (\$5,000).

Note: EqualMed is a small tax-exempt organization (as defined by the IRS) and files Form 990-N with the IRS. All tax filings are current through the tax year ended December 31, 2017.



Discussing and educating a village diabetic patient who does not have access to treatment or medical supplies. She is unable to check her blood glucose and control her diabetes.

HOW YOU CAN HELP

As you can see from the budget there is a significant gap to fund *Project Fiji 2018*. You can help in various ways including making a donation or sending medical supplies or assisting in some other way such as transportation/freight of medical supplies within the USA and/or to Fiji. All cash or in-kind donations are tax deductible under the IRS as EqualMed is an IRS tax exempt 501(c)(3) non-profit charity and is registered in the state of Georgia, USA.

Make a donation

Please contact us or visit <https://equalmed.org/donate-now-1>

Leave a bequest

Please contact us or visit <https://equalmed.org/donate-now-1>

Become a corporate partner or board member

Please contact us to discuss how you can help

Other ways you can help our cause

Please contact us to discuss how you can help

CONTACT US

933 Checkered Way NW
Kennesaw
GA 30152
United States of America

<https://equalmed.org>
equalmed1@gmail.com
<https://www.facebook.com/equalmed/>

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Death urges her on

Solomoni Biumaiono (Monday, July 15, 2013)

MOTIVATED by the death of her grandmother earlier this year in Fiji, US-based teenager Nivita Sharma has started her own charitable effort to help medical institutions.

The 16-year-old student from Atlanta, Georgia has come up with a grand plan of supplying medical equipment and supplies to various hospitals and health centres in Fiji.

She has brought over the first batch of medical supplies with her parents, who are in Fiji on a one-month assignment with the University of the South Pacific.

These supplies are earmarked to be distributed to the Sigatoka Hospital, the Navua, Cuvu and Lomawai health centres.

Nivita's father, Professor Divesh Sharma, originally hails from Sigatoka Town before he left Fiji to study in New Zealand in 1984.

"In the future I want to expand throughout Fiji. I want to go to Rakiraki, Tavua, Naitasiri and Tailevu and other small towns and villages and the outer islands because those are the places that need the most help," Nivita said.



Sixteen-year-old Nivita Sharma has embarked on her grand plan to get much needed medical supplies to various hospitals and health centres around the country. Picture: SOLOMONI BIUMAIONO

Her efforts started earlier this year after her grandmother, her dad's mother, died in April.

"This trip I decided to help out my home country, my grandmother passed away in March, three months ago and that really motivated me to help out the medical system here.

"So, if only my grandma was here today, maybe other people will feel the way I do to help out hospitals in Fiji," Nivita said.

Her grandmother was a life-long volunteer, helping out at the Sigatoka Hospital apart from helping physically handicapped children, the Red Cross and the Poor Relief Help.

Nivita is also following her grandmother's footsteps and is eagerly awaiting her turn to help other people.

"I want to volunteer because I want to help out my home country and I want to gain some experience overseas because I aspire to be a doctor, so once I become a doctor I want to come here and share my expertise, so I thought I should get an early start," she said.

To honour her grandmother's memory and put her plan into action, the Australian-born girl approached two corporations dealing in medical supplies in the US, MedShare and WellStar.

"Well, in the US they love to donate to other countries so all I have to do is email a few medical corporations.

"There are two in particular that I went to. So I emailed the managers at the two corporations and I told them what I was doing, an individually initiated mission to go to Fiji and they said, 'come in, tell us what you need and we'll give it to you'," Nivita said.

She had to buy and was given \$5000 worth of medical supplies ranging from bandages, gauze, syringes and other small supplies that she could handle, because as yet she does not have a sponsor, to help her pay for the freight charges.

"The number one problem I encountered was baggage because we have to pay a lot of it and what I would like is for Fiji Airways to help us out with the baggage cost because it is for a good cause.

"We can bring a whole container but right now we just brought band aid and gauze but in the future we can bring wheelchairs, hospital beds and baby cots, like bigger things, even machinery for the hospitals," she said.

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Student Donates Medical Supplies

by

08:52
2014
Staff nurse Losana (third from left), with Nivita Sharma's family at Solevu Medical Clinic.



This is her second visit to Fiji
JYOTI PRATIBHA
NADI

For a 17-year-old pre-medical American student, giving something back to her country meant donating medical supplies to various hospitals in Fiji.

Nivita Sharma was born in Australia where her parents initially moved to from Fiji. She still considers Fiji her own country. Recently, Ms Sharma got together medical supplies worth F\$5000 for clinics on Mana Island.

This is her second medical mission. Her first in July last year when she donated supplies to the CWM, Sigatoka, and Navua hospitals, and the Korolevu, Korovisilou, Cuvu, and Lomawai clinics.

She will be visiting some of these medical facilities as she had compiled a needs list in her last visit.

This year, Ms Sharma contacted the general manager of Mana Island Resort, Ulrich Hoffgen, who suggested that she help Solevu and Yaro village medical clinics.

“After liaising with staff at Mana (Vini and Cecilia Frost) from America my dad called the nurse, Losana, at the Solevu clinic and asked if she would provide a list of needs. We then put together a package of about 23kg valued at approximately F\$5000 and brought it all the way from Atlanta, USA.

“Medical supplies for the other clinics and hospitals are valued at approximately FJ\$8000, which I will distribute in the next few weeks.

Nurse Losana was quite anxious because she received a call from a stranger, thousands of miles away in the USA promising to bring her medical supplies.

Her anxiety is understandable because patients at her clinic including visitors from overseas leave with promises that were never fulfilled.

“We are not her patients so it was only natural for her to be anxious. Her anxiety turned to wide-eyed smiles and loving appreciation. She even organised a lovo lunch for us, and we thank her and her village headman, Jona, and his team.

“For us, the most valuable commodity is time. As we know, time is priceless as we cannot wind the clock back. One can spend money and earn it back tomorrow but time cannot come back.”

Ms Sharma said choosing to assist Fiji ‘was natural’ for them.

“My parents, grandparents, and great-grandparents were born in Fiji. My heritage is Fiji. I was born in Australia but have been living in the USA. My medical mission began with my grandmother, Sarita Sharma, of Sigatoka.

“She was a social and charitable worker helping at Sigatoka hospital, Crippled Children’s and Red Cross in the 70s and 80s. I was inspired by her good deeds and more so after knowing that she had health issues that

was not treatable in Fiji.

“I had visited Fiji as a younger child and saw that hospitals were in dire need. I could not do anything then. But now I can. And I want to help the country of my heritage.”

And the Sharma family’s generosity does not end here. They have also encouraged family, friends and all those having some tie to Fiji to give a helping hand.

“If each family visiting Fiji can bring even a small donation imagine the volume of medical supplies we would have. I understand not everyone will have access to the kind of access I have from my sponsor, but if a family can get a pair of surgical scissors, a digital thermometer, a pack or two of band aid, and simply take them to a health clinic in the rural area, we would make a small but important step towards a healthy Fiji.

“By publicising this mission, we hope we can reach out to others who would like to help.”

Ms Sharma’s efforts would have been futile, had it not been for assistance from Wellstar Health System in Georgia.

“I really want to thank my donor, Wellstar Health System in Georgia, in particular, David Piotter and Darrell Sharp. Without their support, I would not have been able to bring the amount of medical supplies I brought.

“I want to thank and express our gratitude to Mr Hoffgen, the GM at Mana Island Resort and Spa.”

“Finally, I want to thank the Minister for Health, Dr Neil Sharma, for facilitating the customs clearance through Jonetani Lasaqa of the Ministry of Finance and Mitieli Matavewa, Mr Gounder and Mr Jeremaia of the Ministry of Health.

“In two weeks time I will be distributing medical supplies to health centres along the Coral Coast.

“I thank Mr Peter Hopgood for facilitating us with accommodation at Outrigger on the Lagoon, as he did last year too.”

Feedback: jyotip@fijisun.com.fj

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The Fiji Times ONLINE

Nivita's heart of gold

Felix Chaudhary
Saturday, August 05, 2017



Nivita Sharma and Peter Hopgood unload medical supplies at the Sigatoka Hospital. Picture: SUPPLIED

A PHILANTHROPIC spirit has forged the most unlikely of friendships between the general manager of one of Fiji's most popular resorts and a young woman from the United States of America.

In 2013, when Nivita Sharma was a 16-year-old high school student living in Kennesaw City, Georgia, she decided she was going to do something for Fiji, the birthplace of her parents.

She raised funds and gave medical supplies to the Sigatoka Hospital and clinics from Lomawai to Korovisilou.

While staying at the Outrigger Fiji Beach Resort and Spa during the medical mission, she met resort general manager Peter Hopgood.

"He encouraged me to continue the work I was doing and come back with more," she said.

In 2014, fuelled with the overwhelming response from her previous mission and better informed of the needs in Fiji, she returned with more medical supplies.

"I was again encouraged by Mr Hopgood to keep up with my mission and to enable me to do that I established a legal non-profit charity called EqualMed.

"The vision of EqualMed is a world in which every human being has equitable access to quality healthcare."

In June this year, EqualMed shipped a 20-foot container of medical supplies worth \$400,000 which arrived in the country last Friday.

"The supplies will be donated to various hospitals including Sigatoka, Rakiraki, CWM, Lautoka, Nausori, and Labasa, Savusavu and Taveuni, and clinics and nursing stations in other parts of Fiji and to Diabetes Fiji."

When she delivered medical supplies to the Sigatoka Hospital last week, Mr Hopgood welcomed Ms Sharma and organised the unloading of the truck.

He then gave her a tour of the new maternity ward that he played a leading role in establishing.

The Outrigger Fiji GM has taken a keen interest in the hospital and monitors it on a regular basis to ensure that patients are taken care of and facilities are up to date.

For Ms Sharma, Sigatoka has a special place in her heart because this is where her parents and grandparents were born.

"A lot of people know my dad. Some people even stop us when we are in Sigatoka and greet us," she said.

Her grandmother, Sarita Sharma, was well known in Sigatoka for her charity and community service work in the 1970s and 1980s.

She was active in activities for the hospital, Red Cross and the special school.

"She also did a lot of work for the poor through the Sigatoka Women's Club and so

on. "In some ways, I am continuing the work of my grandmother."

Ms Sharma heads back to Sigatoka next week and in partnership with Mr Hopgood and Outrigger, will reach out to schools in remote areas to contribute first-aid kits she brought from the US.

Mr Hopgood said as GM for Outrigger and chairman of the Coral Coast Chapter of the Fiji Hotel and Tourism Association, he commended Ms Sharma for her dedication and hard work in bringing medical supplies to Fiji.

"It has not been easy for her," Mr Hopgood said.

"She has overcome many challenges including logistical difficulties, transport, lack of engagement with several hospitals as well as the enormous distances she has had to travel over the past three weeks.

"I personally can't believe that one so young has so much to give.

"On behalf of the people of Nadroga-Navosa, we thank Nivita and her family for their love and generosity."

The Fiji Times ONLINE

\$400k in medical supplies for Fiji

Linda Filiai

Saturday, July 29, 2017



From left, Viliame Qio, staff nurse Tavaita Dau, Siteri Lewaroqo and Nivita Sharma look through the equipment in Suva on Thursday. Picture: JONA KONATACI

THE health sector and Diabetes Fiji received a container load of medical supplies worth \$400,000 this week.

The aid was made by an American non-profit charity EqualMed and would be shared with various hospitals and health centres around the country.

EqualMed founder Nivita Sharma handed over the medical supplies, which included crutches for patients, syringes, and other supplies.

Ms Sharma said she heard stories about Fiji and how patients were suffering from the lack of medical supplies and this resulted in her starting the mission.

"Learning about the needs of Fiji motivated me to bring more for the country and these items aren't necessarily going to the Ministry of Health. They're going directly to hospitals and health centres, apart from Diabetes Fiji," she said.

"When I visited in 2013, I saw what the condition was like in hospitals, health centres and that's what pushed me to bring more on my next trips."

She said the general manager of Outrigger Resort, Peter Hopgood, friends, relatives and Fijians around the world contributed towards her initiative to ship medical supplies to the country.

Diabetes Fiji program manager Viliame Qio said the supplies would be used at the health facilities for those living with diabetes.

"It's a timely donation because our amputation rates are going up and more patients are presenting with foot problems. Some of the things that were donated will assist the nurses in their care for patients," he said.

Mr Qio said diapers donated would be given to senior citizens suffering from diabetes.

Country in Focus: turning the tide of diabetes in Fiji

Lifestyle changes have led to a huge rise in obesity prevalence in Pacific Islanders. Jules Morgan reports on the problem of noncommunicable diseases in Fiji and efforts underway to address it.

With its rugged coastline, palm-lined coral beaches, and lagoons, Fiji is an ideal destination for those seeking a tropical climate. But beyond the utopian landscape is a multicultural society burdened with a health crisis. Changes in lifestyle—a decline in traditional dietary customs and increased physical inactivity—from more than a century of colonial influences, and steady integration into the global cash economy has had a substantial and sobering effect on the prevalence of noncommunicable diseases (NCDs). Diabetes prevalence in adults in the Pacific Islands Region is among the highest in the world (WHO, 2010), and Fiji is no exception.

There were an estimated 57 640 cases of prevalent diabetes in Fiji in 2013. In a total adult population (20–79 years) of 5 430 600, the prevalence rate is over 10.9% (World Bank Data, 2013). This is expected to increase globally in the next two decades, and it is unlikely that Fiji will buck this trend. In parallel, the financial burden of NCDs on Fiji's health-care system is also ballooning.

Efforts to curb the complications of diabetes in Fiji therefore face substantial challenges. Diabetes Fiji (previously the National Diabetes Foundation of Fiji) has the remit to access, educate, and provide medical treatment to the island's entire population. In August, 2010, Diabetes Fiji appointed a new President, Dr Abdul Wahid Khan, a general practitioner with a special interest in diabetology. Khan recognises that the organisation benefits from its present governance—health-care leaders who can respond with appropriate medical interventions—but in time, with more infrastructure and stability, the organisation will evolve according to its priorities, with the aim to hand over governance to people with diabetes.

Fiji's steady transition from indigenous community lifestyle traditions towards a more urban and western-orientated environment continues to take its toll on the burden of NCDs—so-called lifestyle diseases. Khan recognises that civil society needs to act alongside the health authorities. Addressing health-care infrastructures and investing in training health professionals is crucial, but education at the community level is equally important.

In the past 3 years, the Fijian Ministry of Health, assisted by Diabetes Fiji, has responded by setting up three diabetic hubs in central, western, and northern divisions. Dr Rajeshwar Sharma, a clinician in the central division's capital city Suva, tells *The Lancet Diabetes & Endocrinology* that "each hub is set with a team to provide one-stop-shop for diabetes care. This includes a doctor, clerical personnel, nurses, diabetic educators, nutritionists, physiotherapists, and counsellors". Patients are usually referred from other health faculties to the hubs, which have twin parallel clinics: one for uncontrolled diabetes, and one for foot care.

In July, 2014, the Minister of Health, Dr Neil Sharma, issued a statement about the rising threat of diabetes to Fijian society. He launched a new initiative of free diabetes screening at established hubs. Such screening clinics might help to curb the devastating effects that late presentation is having on the diabetes epidemic—early intervention is now a priority.

However, pressures on the health-care system are drastically impeding progress in tackling diabetes and its complications. Although medications for diabetes (classified as essential drugs) are funded by state health care, stocks are often depleted

and insufficient. Low availability of diagnostics for diabetes and its complications (eg, tests for HbA_{1c} and microalbumin, and the high cost of glucometers), and scarcity of wound dressings for diabetic foot treatment also affect the delivery of optimum health care. Procurement is often delayed because suppliers operate overseas, there are no funds for stockpiling, and with an improper quantification of need because of unreliable data, Fiji's overburdened and under-resourced health-care system faces yet more challenges.

Three in every four people with diabetes in Fiji are undiagnosed. Without optimum disease management, repercussions are inevitable. As in other low-income countries, poor management creates a high prevalence of peripheral neuropathy, which leads to foot ulcers and chronic foot sepsis, with amputation the only option in advanced cases. Amputations are associated with increased morbidity and mortality, and Fiji is battling with the highest amputation rates in the Western Pacific Region.

Dr Isimeli Tukana, National Advisor for Non-Communicable Diseases and Head Clinician at the Wellness Centre, Suva, told *The Lancet Diabetes & Endocrinology* that, in his view, this clinical scenario is "an outcome of a primary health care system that is nonresponsive to the Fijian NCD crisis". Indeed, statistics from Diabetes Fiji on the rate of amputations in Fiji (one every 12 h) is staggering. Factors that increase risk are unhygienic living conditions, walking barefoot, foot injuries, and rodent bites—all associated with poverty and worsened by delayed presentation.

Tukana agrees that foot care is both a lifestyle, and resource and financing



Marco Simoni/Science Photo Library

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For the WHO news see <http://www.who.int/bulletin/volumes/88/7/10-010710/en/>

For Diabetes Fiji see <http://www.idf.org/membership/wp/fiji/diabetes-fiji>

For the article in Fiji Sun see <http://www.fjijun.com.fj/2014/07/18/ncds-minister-warns-on-rise-of-diabetes/>

For the World Diabetes Foundation's projects in Fiji see <http://www.worlddiabetesfoundation.org/projects/fiji-wdf12-735>

For World Bank data on health expenditure per capita see <http://data.worldbank.org/indicator/SH.XPD.PCAP>

For WHO's Global Health Data Repository see <http://www.who.int/gho/database/en/>

issue. "Fijian health-seeking behaviour is associated with cultural and environmental factors...compounded by the lack of clinical expertise in podiatry". He adds that the World Diabetes Foundation's support in establishing a foot care project is directly aimed at "improving diabetes at the primary health care level." Sharma also stresses the importance of educational programmes such as the Footcare project, a three-step model of foot care designed to assist health practitioners in Fiji and train primary care doctors, clinical nurses, and peer groups.

Increasing diabetes prevalence also leads to rising rates of kidney disease. Renal dialysis is not free. Availability of renal dialysis is low owing to costs, and is provided through a private-public partnership. The Kidney Foundation of Fiji opened an outpatient diagnostic centre earlier this year, but both the operational and treatment costs are high. Run by a non-profit organisation, The Kidney Dialysis Centre offers lower cost treatments but at a cost of FJD\$250-00 per patient per treatment dialysis, it is, in most cases, still beyond a patient's means, and medical insurance is not a benefit many can afford. The threat of widespread kidney disease has worrying cost implications and improving intervention measures must crucially be central to diabetes management strategies.

2013 World Development Indicators show health expenditure per person in Fiji is low, at US\$177 (PPS\$197), among the lowest for Pacific Island countries. By contrast, in high-income countries this figure is between \$1030 and \$6140 per person. Health-care funding largely comes from taxation revenue, but with a low tax base from a small pool of taxable income earners, the government's allocation resources are limited. The outcome of an underfunded health care system is that an inadequate pot of money has to go a long way, and cannot cope with a booming disease-burdened population.

Added to underfunding is a limited workforce: there are only 0.4 practicing physicians per 1000 people in Fiji, which falls into WHO's lowest health workforce density band. This low ratio is partly caused by high migration rates of health professionals to neighbouring developed countries. Rural populations are marginalised because medical centres with trained clinicians tend to be based in urban areas. Providing a free health service is laudable, but government resources for health expenditure are simply inadequate.

Addressing management infrastructures is key, but prevention is also high on the agenda for the health authorities, and for Diabetes Fiji. Fiji is fast becoming more modernised. Tourism and the infiltration of western media influences have brought enticements to unhealthy living. Imported white rice and noodles are easier and cheaper to buy than locally grown indigenous sources of carbohydrates, such as plantains, bananas, and breadfruit. Fijians are similarly abandoning traditional high-starch diets and opting for processed foods that have a longer shelf-life and cost less. To address the increasing obesity rates in Fiji, adjustments are needed. A drive to boost the agricultural and fishing industries by promoting local produce will help to counteract the commercialisation of highly refined imported food but will need a collaborative commitment.

In an effort to address lifestyle concerns, the Ministry of Health devised the Wellness Program project, focusing on activities and attitudes with a drive to change behaviour patterns. Talking to *The Lancet Diabetes & Endocrinology*, Khan acknowledges that targeted advertising to children and adolescents, and the saturation of supermarket shelves with cheap unhealthy food is a "formidable task to battle". Tackling this conditioning requires education and awareness, but, as Khan predicts, this will not be enough. "More legislation is needed", he says, to curb what he considers to be "the primary cause of

NCDs—sugar-sweetened beverages and junk food". He explains that the glamour of calorie-rich and nutritionally poor imported foods cannot compete with the promotion of traditional foods, despite nutrition being a core subject in the school education system.

In 2000, the Ministry of Health banned the import of a fatty offcut of lamb, known locally as sipi, which had become a ubiquitous protein source for the islanders. However, since Fiji is heavily import dependent, there are calls for more legislation on food security on imports, especially in labelling sodium, trans-fat, and saturated fat content on packaged and tinned foods. Fiji's Ministries of Agriculture, Health, and Trade and Commerce are working together to progress a Food Security Bill, and, according to Khan, recent legislative regulations have been enforced on sodium levels in processed food. Khan adds that Diabetes Fiji has teamed up with the Consumer Council of Fiji and the National Food and Nutrition Committee to "organise an umbrella organisation of Civil Societies called the Alliance for Healthy Living", a partnership that Khan believes will be a "tour de force" in the fight against sugar-sweetened beverages and the negative effects of advertising.

A collaborative effort is clearly needed. Khan has led Diabetes Fiji in making great strides in identifying where limited resources are best diverted, and he stresses that the involvement and intervention of Civil Societies is crucial to halt the NCD epidemic. The diabetes epidemic in Fiji might seem insurmountable, in view of the socioeconomic challenges, but Diabetes Fiji has clear objectives and Khan remains optimistic. "Our aim is to register all people diagnosed with diabetes in Fiji, empower people with diabetes through establishing diabetes community groups, decrease the level of amputations, and be the prime advocacy institution for diabetes in Fiji."

Jules Morgan