



# **Making the most of commitments to diabetes to support Canada's recovery from COVID-19**

## **Submission to the Pre-Budget Consultations in Advance of the 2022 Federal Budget**

**By Diabetes Canada  
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Charitable Number: 11883 0744 RR0001

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**Recommendation:** To reduce the burden of diabetes and support Canada’s recovery from COVID-19, the federal government should dedicate the necessary financial and human resources required to realize the 2021 Budget and Bill C-237 commitments to implement a national diabetes framework based on the Diabetes 360° framework as quickly and comprehensively as possible. Previous stakeholder consultations suggest an investment of \$150 million in funding over seven years. Concomitantly, the federal government should facilitate the creation of Indigenous-specific strategic approaches to diabetes led and owned by Indigenous groups.



## Making the most of commitments to diabetes to support Canada's recovery from COVID-19

In 2021, in honour of the 100<sup>th</sup> anniversary of the discovery of insulin in Canada and in recognition of the huge and growing burden of diabetes on Canadians, the federal government and all Parliamentarians made significant and laudable commitments to improve prevention, management and research in diabetes. Canada proudly co-hosted a World Health Organization symposium on diabetes in April 2021, and jointly with them launched a [Global Diabetes Compact](#). The 2021 federal budget contained important commitments to funding research and developing a national diabetes framework and to creating more equitable access to the Disability Tax Credit for people with diabetes. And on June 29, 2021, royal assent was received for Bill C-237, *An Act to Establish a National Diabetes Framework*, which was unanimously supported by all Parliamentarians.

These commitments lay a critical foundation that we can build upon to meaningfully reduce the burden of diabetes in Canada by implementing the recommendations of Diabetes Canada's Diabetes 360° nation-wide strategy and by continuing to fund life-changing and life-saving research into diabetes in Canada. But there is much work to do to act upon these commitments and to implement a comprehensive, impactful national diabetes framework. Diabetes Canada is eager to collaborate with the federal government on this important and urgent work.

That is why Diabetes Canada's recommendation for the 2022 federal budget is that:

**The federal government should dedicate the necessary financial and human resources required to realize the 2021 Budget and Bill C-237 commitments to implement a national diabetes framework based on the Diabetes 360° framework as quickly and comprehensively as possible. Previous stakeholder consultations suggest an investment of \$150 million in funding over seven years. Concomitantly, the federal government should facilitate the creation of Indigenous-specific strategic approaches to diabetes led and owned by Indigenous groups.**



## **Diabetes remains a large and growing burden, especially during the COVID pandemic**

Diabetes is a large and growing burden in Canada. Diabetes or prediabetes affects 1 in 3 Canadians and the International Diabetes Federation lists Canada among the worst OECD (Organization for Economic Co-operation and Development) countries for diabetes prevalence. Beyond the immeasurable human costs of this, if prevalence grows by 40% in the next decade as projected, the health care costs associated with treating people with diabetes in Canada will top \$39 billion by 2028.

People of certain ethnic backgrounds are at two- to three-times greater risk of developing type 2 diabetes, specifically people of African, Arab, Asian, Hispanic and South Asian descent. Diabetes is also a greater burden on seniors, and Canadians with lower levels of education and/or income.

The COVID-19 pandemic has highlighted the vulnerability of Canadians with diabetes, particularly in marginalized populations, and the urgent need to address the diabetes epidemic in Canada. People with diabetes have proven to be at significantly greater risk of severe infection or death from COVID-19. To protect our citizens and our healthcare systems against this and future infectious disease pandemics, it is critical that we reduce the burden of diabetes.

## **Diabetes is an extra burden on Indigenous people**

Canada's Indigenous populations continuously demonstrate great strength and resilience. However, these communities face greater health challenges than most, including an increased risk of developing type 2 diabetes. This is a result of several compounding factors, including Canada's historic and continued colonial policies, such as residential schools, Indian hospitals, and the Sixties Scoop; lack of access to healthy, nutritious, and affordable food; and a strong genetic risk for type 2 diabetes. These factors have severely undermined Indigenous values, culture, and spiritual practices, while creating lasting physical, mental, emotional, and social harms for these communities.

Diabetes has affected Indigenous communities greatly. Indigenous peoples have an approximately three times greater likelihood to be diagnosed with type 2 diabetes than non-Indigenous populations, are diagnosed with diabetes at a younger age, have more



severe symptoms when diagnosed, face higher rates of complications, and experience poorer treatment outcomes.

There are many barriers that affect the care that Indigenous peoples receive, impacting the ability of Indigenous peoples to manage their diabetes well and achieve optimal health outcomes. These barriers include fragmented healthcare, a lack of culturally appropriate care, poor chronic disease management, high health-care staff turnover, chronic underfunding of health services for Indigenous communities, and limited tracking of new diabetes cases. Western medicine does not incorporate traditional healings or medicine and does not resonate with traditional knowledge and/or wellness. Social and economic inequalities, which were brought about by colonization, including oppression, cultural erosion, forced relocation, forced assimilation, and institutionalized racism, have impacted Indigenous people's health. These inequalities also contribute to the main risk factors associated with the development of type 2 diabetes and its complications.

Diabetes Canada is committed to helping reduce the burden of diabetes in Indigenous communities in a culturally appropriate manner. We firmly commit to do so in ways that respect and uphold the Truth and Reconciliation Commission of Canada's Calls to Action. This means working to ensure that any actions taken by the organization do not harm Indigenous groups, and that they help to repair the harms caused by Canada's historic and continued colonial systems. Diabetes Canada is committed to listening to and working alongside Indigenous-led organizations to develop trust and build relationships based on respect and dignity. We wish to support Indigenous-led initiatives, interventions, and policy development in whatever way these organizations see fit.

One of the ways in which Diabetes Canada seeks to support Indigenous communities is by incorporating the wisdom of Indigenous advisors into our Diabetes 360° strategy. Acknowledging the unique experiences of Indigenous communities, the strategy supports the need for unique, tailored approaches led by Indigenous peoples to reduce the burden of diabetes. Diabetes Canada believes strongly that the federal government should complement its work to implement a nation-wide diabetes framework by facilitating the creation of Indigenous-specific strategic approaches to diabetes led and owned by Indigenous groups.

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## Diabetes 360° should be Canada's nation-wide diabetes framework

To make the most of these 2021 commitments, in the second half of 2021 and in 2022, we will need to conduct consultations with all key stakeholders to confirm which elements of the Diabetes 360° strategy will feature in the national diabetes framework to be tabled before Parliament by the deadline of June 29, 2022. Diabetes Canada encourages that the Minister of Health refer closely to the Diabetes 360° strategy in preparing Canada's new national diabetes framework. Diabetes Canada will be pleased to collaborate with the government to define and implement governance and evaluation mechanisms and supports for intergovernmental collaboration to ensure that the national diabetes framework quickly benefits the maximum number of Canadians possible.

When developing the nation-wide diabetes framework to be tabled before Parliament in 2022, the federal government should rely heavily on Diabetes' Canada's Diabetes 360° strategy. It is an evidence-based solution developed by 120 health stakeholders over a year of rigorous effort that will enhance the prevention, screening and management of diabetes to achieve better health for Canadians. Based on the successful 90-90-90 target adopted by UNAIDS and informed by the successes of the Canadian Partnership Against Cancer, Diabetes 360° will reduce unnecessary health care spending by billions of dollars, improve the lives of millions of Canadians and protect Canada's productivity and competitiveness. Implementing Diabetes 360° will help to reduce the burden not only of diabetes but of all chronic disease in Canada.

Diabetes Canada also encourages that the federal government of Canada fully support and participate in work related to the World Health Organization's [resolution](#) from May 2021 on reducing the burden of noncommunicable diseases through strengthening prevention and control of diabetes. By fully and rapidly embracing the recommendations of Diabetes 360° as Canada's nation-wide diabetes framework, Canada can emerge as a global leader in embracing the elements of this important resolution.

To implement Diabetes 360° recommendations, the stakeholders who developed the framework recommend that the federal government should establish a national task force for approximately 7 years, at a total cost of \$150 million. The mandate of this task force would be to collaborate with provincial, territorial and, if appropriate and agreeable, Indigenous governments, along with academia, industry and non-governmental organizations to further plan and implement an approach to the prevention and

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management of diabetes in Canada. The task force should facilitate the creation of Indigenous-specific strategic approaches led and owned by any Indigenous groups wishing to embrace this framework. The goal of this task force would be to collaborate with healthcare systems to optimize disease prevention and health-care delivery for people with diabetes, with a goal of sunseting itself as quickly as possible.

That said, should the federal government choose a different mechanism with which to implement the framework, Diabetes Canada and other key stakeholders are ready to collaborate with the federal government and other partners for the speedy implementation of Diabetes 360° recommendations.

### **A more equitable disability benefit**

Many people with diabetes face a large financial burden to treat their disease (often up to \$15,000 per annum out of pocket) and therefore rely heavily on the Disability Tax Credit (DTC), a program designed to help defray additional medical expenses borne by those with severe or prolonged medical conditions (type 1 diabetes is, at present, both unpreventable and incurable).

For that reason, Diabetes Canada fully supports the commitments in Budget 2021 to both reform the eligibility process for federal disability programs and benefits to design a new disability benefit and, in the meantime, to recognize more activities in determining time spent on life-sustaining therapy to qualify for the DTC.

In order to best meet the needs of the maximum number of people affected by diabetes, Diabetes Canada encourages that the federal government work rapidly to codify in law and regulations the 2021 Budget commitments regarding expanded eligibility criteria under life-sustaining therapy AND that it include diabetes patient organizations in its review of federal disability programs and benefits.

### **Conclusion**

The federal government has made important and valued commitments in 2021 to measures such as a National Diabetes Framework and a Global Declaration on Diabetes that will improve the lives of Canadians affected by diabetes. This comes at a time when



the global COVID-19 pandemic has highlighted the vulnerability of Canadians with diabetes and the need for solutions that are core parts of the Diabetes 360° approach, such as enhanced virtual care and health-care systems and data integration. Diabetes 360° therefore is an enabler of Canada's recovery from the COVID-19 pandemic and should be implemented in honour of the 100th anniversary of the discovery of insulin in Canada. in 2021.

In light of the COVID-19 pandemic, Diabetes 360° is more relevant than ever and should heavily inform the national diabetes framework to be tabled before Parliament in 2022. Its implementation will support public health, and deliver on the need for collaborative, value-based health-care models and a multi-disciplinary, comprehensive approach to health care. The billions of dollars in savings that will be realized by our health-care system when we implement Diabetes 360° are an example of the effective use of public dollars to combat chronic disease. Diabetes Canada and its valued partners and collaborators in the diabetes community in Canada urge the federal government to dedicate the necessary financial and human resources required to realize the 2021 Budget commitment to implement a national diabetes framework based on the Diabetes 360° framework as quickly and comprehensively as possible, and we stand ready to collaborate on this important work.

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