



Rt. Hon. Justin Trudeau  
Prime Minister of Canada  
80 Wellington Street  
Ottawa, ON K1A 0A2

Via email: [pm@pm.gc.ca](mailto:pm@pm.gc.ca)

February 2, 2023

Dear Prime Minister:

In advance of the First Ministers meeting on healthcare that you will host on February 7<sup>th</sup>, I write to you on behalf of the 11.7 million people in Canada who live with diabetes or prediabetes.

To start, it is important to recognize the important progress taken by your government, with the support of Parliamentarians from all parties over the past five years, which resulted in the tabling of the [Framework for Diabetes](#) this past October in the House of Commons.

The “Framework” is a policy roadmap for all sectors of Canadian society to address the epidemic of diabetes – a new diagnosis occurs every three minutes, of every hour, of every day – in Canada. Its tabling has generated a palpable level of excitement within the diabetes community, and an expectation of the beginning of concrete funding commitments in this year’s federal, and provincial/territorial, budgets. This Framework can also be deployed as a template to inform strategies and approaches to the prevention and management of other chronic diseases.

As you prepare to discuss the sustainability and future of healthcare with the premiers it should be noted that, across Canada, it costs \$50 million each day to treat diabetes and its complications. These complications result in healthcare system utilization as diabetes contributes to 30% of strokes, 40% of heart attacks, 50% of kidney failure requiring dialysis, 70% of all non-traumatic leg and foot amputations, and is the leading cause of preventable blindness. Diabetes can also reduce lifespan by five to 15 years and it is estimated that the all-cause mortality rate among those living with diabetes is twice as high for those without diabetes in Canada.

Diabetes is also a disease of inequity with certain populations at higher risk of developing type 2 diabetes, such as those of African, Arab, Asian, Hispanic, Indigenous, or South Asian descent, those who are older, have a lower level of income or education, are physically inactive, or living with overweight or obesity. And the out-of-pocket costs – drugs, device, supplies – for Canadians living with diabetes can be as high as \$18,000/year depending on their province of residence and type of diabetes if they only have public coverage.



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At a global level, the World Health Organization (WHO) has identified diabetes as a major public challenge of the 21<sup>st</sup> century. Given all these factors, Diabetes Canada calls on the federal government, and provincial/territorial governments to support our mission to #EndDiabetes through the provision of:

**Adequate Resources** via funding innovative models such as *cost sharing, matched funding programs, and public/private partnerships* to ensure health authorities, communities, and all relevant stakeholders have opportunities and support to build capacity and improve access to services, medications, and devices for people affected by diabetes.

**Measurable Progress** through the creation and funding of a *multi-sectoral oversight body* to convene key leaders and commit stakeholders to action, develop performance indicators, share best practices, and measure and report on the progress of the Framework for Diabetes elements annually against key principles, such as health equity and scalability to other chronic diseases.

**Comprehensive Data** through *scaling up and expanding current data sources and increase data sharing and coordination* through new data connection points that will improve health outcomes for people with diabetes. This is consistent with, and aligned to, the pan-Canadian health data strategy.

**Inclusive Education** by funding and supporting *culturally appropriate, inclusive, and evidence-based education programs and knowledge transfer programs* that focus on management and preventive measures using patient-focused training to address stigma and health inequities faced by those with diabetes.

**Research** through continued funding of *impactful research for all types of diabetes (type 1, type 2 diabetes, gestational, and prediabetes)*, diabetes management, the impact of health inequalities, and the impact of diabetes on equity-seeking communities.

I have also written to your fellow First Ministers on this subject and have asked them, as I am asking you, to work collaboratively when you gather next week to seek innovative solutions and funding partnerships in your discussions and support the needs of the 1 in 3 Canadians who live with diabetes or prediabetes.

Sincerely,

Russell Williams  
Senior Vice-President, Mission  
Diabetes Canada

cc: Hon. Jean-Yves Duclos, Minister of Health