



Diabetes 360°

Q's and A's

Why is Diabetes Canada calling on the government to establish a national strategy for diabetes and why now?

We are experiencing an alarming trend of increased diabetes prevalence in Canada, one that places us among the worst of OECD countries. When this was considered by stakeholders against the backdrop of the upcoming 100th anniversary of the discovery of insulin, it spurred the development of this new strategic framework for diabetes. The 2021 celebration of Banting's discovery, which saved the lives of millions of people with type 1 diabetes, ought to be a moment of great pride for Canada. And, it still can be, if urgent, intentional, coordinated action is taken now.

Do other countries manage diabetes this way?

Other nations have benefitted from national strategies on diabetes, with most countries in the European Union having such strategies.

Finland's national framework, implemented in 2000, included testing a lifestyle modification program of diet and exercise interventions that supported weight-loss, which reduced the risk of developing diabetes by 58%. This model's success led to a range of new models and practices being developed from the bottom-up, taking account of local needs, resources and initiatives. It is recognized as an international success in reducing the burden of diabetes on the Finnish people. Similar successes are being seen in Sweden, Denmark, India and Portugal, among many other countries that have national approaches to diabetes prevention and management.

Is diabetes prevalence really getting that much worse in Canada?

In Canada today, close to 11 million people live with prediabetes or diabetes. Every three minutes, someone new is diagnosed with this progressive, chronic disease. Many factors have contributed to a greater than 50% increase in diabetes prevalence within the last 10 years. And rates are expected to continue to rise over the next decade.

Once thought to be a disease of older individuals, type 2 diabetes is now being diagnosed in young Canadians, impacting people in the prime of life. Canadians now 20 years old face a 50% chance of developing the disease in their lifetime. For First Nations Peoples in Canada, that risk is up to 80% and in some subgroups within this population, it is even higher.



By any definition, a disease affecting that proportion of the population is an epidemic. In the case of diabetes, which affects close to 425 million people worldwide, it is a pandemic.

Can't diabetes just be managed with better lifestyle choices?

No, unfortunately it cannot. While a healthy diet and regular physical activity can help prevent diabetes and its complications in many cases, other factors such as genetics and the environment we live in can get in the way. Diabetes isn't caused entirely by poor lifestyle choices and it can't be beaten by better lifestyle choices alone – we also need relevant public policy and high-quality health care.

Who is most at risk of getting diabetes?

Diabetes is a disease that disproportionately affects certain Canadian sub-populations, many of whom are vulnerable economically or physically to begin with.

Seniors make up over half of the people living with diagnosed diabetes in Canada, and close to 40% of new diagnosed cases of diabetes in 2018 will occur in the senior population in Canada. Canadians with lower incomes have a much higher prevalence of diabetes and greater challenges accessing supports.

People of certain ethnic backgrounds are at greater risk of developing type 2 diabetes, specifically people of African, Arab, Asian, Hispanic, Indigenous and South Asian descent. For First Nations peoples living on reserve, diabetes prevalence is 3 to 5 times greater than in the general population, and the rates of complications are higher than in non-First Nations Canadians.

What has caused this rapid increase in diabetes prevalence in Canada and is it happening elsewhere?

Many factors have contributed to a greater than 50% increase in diabetes prevalence within the last 10 years. Standard diets, the built environment (e.g. many Canadians live in suburbs or in rural areas, both of which are not conducive to active transport), and the lack of a coordinated nation-wide approach to addressing the disease are among the culprits.

Who are the stakeholders who convened to create the Diabetes 360° framework?

The strategic framework is the culmination of a rigorous, collaborative process amongst more than 115 representatives of 100 organizations and 25 patient advocates. Those involved are from academia, health care, governments, NGOs and private industry from across Canada and



around the world. Diabetes Canada was the project secretariat during the initial phases of this initiative.

How were the stakeholders selected and what is their role going forward?

Diabetes Canada invited hundreds of organizations from across Canada to participate and also issued a public call for volunteers. As part of moving from strategic framework design to implementation, governance will evolve to ensure the process is guided by the best possible operational experts.

Where can I find out more about the UN/AIDS program upon which Diabetes 360° is modelled?

In late 2014, The Joint United Nations Programme on HIV/ AIDS (UNAIDS) adopted a galvanizing new target to end the HIV/AIDS epidemic – 90-90-90. This model was based in significant part on the Treatment as Prevention (TasP) model developed by Dr. Julio Montaner at the University of British Columbia.

While ambitious, the 90-90-90 target was embraced by the world HIV/AIDS community as a catalyst for action given its focus on outcomes. The model was deemed so effective that the same target was embraced in December 2014 for tuberculosis. And in 2015, the World Health Organization (WHO) called for such a target to be adopted for hepatitis.

For more information on the model upon which the Diabetes 360° strategic framework was built, please visit: <http://www.unaids.org/en/resources/909090>

What will happen if the government does not fund this national strategy?

Without urgent and coordinated action now, the costs to the Canadian health care system will approach \$40 billion per year within a decade and millions more Canadians will develop diabetes and suffer its debilitating complications. Like a snowball rolling downhill, the problem will have even greater momentum than it does right now, making it harder to solve in future. The time for action is now.

What will be achieved if the new targets for diabetes are met?

Embracing a coordinated strategy could result in huge savings in human and other costs:



- Implementation of proven diabetes prevention programs across the country could stop 110,000 cases of diabetes from developing and save up to \$322 million in healthcare costs in one year. Those benefits grow exponentially each year.
- With more effective diabetes management for those who do have diabetes, studies show we could avoid 35,000 hospitalizations each year, greatly reducing the burden on our healthcare system.
- A multi-disciplinary, integrated approach to care can prevent 85% of the 5,000 amputations of lower limbs currently performed due to diabetes in Canada each year.
- Early detection and treatment can reduce by 95% the risk of blindness due to diabetes.
- Other nations have benefitted greatly from adopting national strategies on diabetes.

How will local, regional, provincial and other jurisdictions fit into this national framework?

The first order of business for the national partnership will be to establish a governance model that places all key national, provincial and territorial counterparts at the table. Then, the partnership will work with counterparts in each province and territory to take stock of strengths and priority opportunities for development in their jurisdiction, and to develop a plan forward.

Some other national programs and health organizations are under scrutiny at present, why would we create another one?

The Fit for Purpose report that recommends some national health organizations be disbanded does so precisely because those organizations have served their intended purpose well. For example, Canada's cancer care is world-class. This is not the case with diabetes. No existing organization has the mandate to implement the Diabetes 360° recommendations, so we should create one on a temporary basis to do so and then close itself down as quickly as possible.

How will this be implemented?

With federal government backing for these recommendations in Budget 2019, implementation could begin in 2020 and continue through 2021 when Canada will celebrate the 100th anniversary of the discovery of insulin.

To implement the Diabetes 360° recommendations, the federal government should establish a national partnership for a period of time (approximately 5 to 7 years). Through the partnership, provincial, territorial and, if appropriate and agreeable, Indigenous governments would collaborate with academia, industry and non-governmental organizations to further plan and implement an approach to the prevention and management of diabetes in Canada.



A diabetes strategy for Canada that is inclusive of the needs of Indigenous groups is overdue. Diabetes 360° will provide a framework for stakeholders to work with Indigenous leaders and communities wishing to embrace and implement a similar strategic framework that works for their populations.

How have Indigenous groups been included in this process?

All major Indigenous organizations (AFN, MNC, ITK, CAP, NADA, IDHC, CINA) were invited to participate. While not all groups were able to form part of the Steering Committee or Working Group, all have been a part of regular information sharing and consulting on the initiative's suitability for potential adoption by Indigenous groups in the future.

The national partnership, if created by the federal government, will have as a core part of its mandate to collaborate with any Indigenous organizations wishing to do so.

What are the targets?

The Diabetes 360° strategic framework features an even stronger focus on prevention of the disease and measurable outcomes:

- 90% of Canadians live in an environment that prevents the development of diabetes
- 90% of Canadians are aware of their diabetes status
- 90% of Canadians living with prediabetes or diabetes are engaged in appropriate interventions to prevent diabetes and its complications
- 90% of Canadians engaged in interventions are achieving improved health outcomes.

Each of these targets can be achieved by focusing on a number of supporting actions, all of which are evidence-based. They are described in detail in the full report on Diabetes 360°.

How much will this cost and how long will it take?

In Budget 2019, Diabetes Canada recommends that the federal government should establish a national partnership and invest \$150 million in funding over seven years to support the development and implementation of a new nation-wide diabetes strategy, based on the Diabetes 360° framework, and should facilitate the creation of Indigenous-specific strategic approaches led and owned by Indigenous groups.

With federal government support in Budget 2019, implementation of this national strategy could begin in 2020 and continue through 2021 – a milestone year that marks the 100th anniversary of Dr. Banting's discovery of insulin. This would allow Canada to mark the occasion



with another critical achievement in the prevention and management of diabetes, and once again improve the lives of millions.

[More information](#)

For more information on these and all aspects of the plan, visit www.diabetes.ca/strategy.

To learn more or to get involved, please contact kimberley.hanson@diabetes.ca.