

# A Federal Framework for Diabetes in Canada:

## Implications for HealthCareCAN Members



### PURPOSE

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Diabetes is one of the most prevalent chronic diseases affecting Canadians. The pandemic has had a serious impact on individuals living with diabetes, including an increased risk of severe illness from COVID-19 and delays in diagnosis, treatment, and management of the condition.

In October, Health Minister Jean-Yves Duclos tabled the timely [Framework for Diabetes in Canada](#). The framework provides direction for the government and partners in various sectors, including healthcare and research, to ensure better health outcomes for people living with diabetes in Canada.

### DIABETES IN CANADA: BY THE NUMBERS<sup>1</sup>

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- More than 3 million Canadians or nearly 9% of the population have been diagnosed with diabetes.
- Approximately 90% of diagnoses are type 2 diabetes, 9% of diagnoses are type 1, and gestational diabetes accounts for less than 1% of cases.
- 6% of Canadian adults have prediabetes, a condition which puts an individual at high risk of developing type 2 diabetes.
- [Diabetes Canada](#) reports that treating people with diabetes costs the healthcare system an estimated \$30 billion a year.

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<sup>1</sup> Data pulled from the *Framework for Diabetes in Canada*, unless otherwise indicated.

## BACKGROUND

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The Standing Committee on Health (HESA) tabled [A Diabetes Strategy for Canada](#) in April 2019. The report contained 11 recommendations, including recommending that the federal government work with provinces and territories, and relevant stakeholders to create a national plan to help prevent and manage diabetes in Canada.

In 2020, Liberal Member of Parliament Sonia Sidhu introduced Bill C-237, which called on the Minister of Health to develop a national framework designed to support improved access to diabetes prevention and treatment to ensure better health outcomes for people living with diabetes. The *National Framework for Diabetes Act* was passed by Parliament in June 2021, creating the foundation to develop a [national framework for diabetes](#).

To inform the framework, all levels of government and diabetes stakeholders<sup>2</sup> from various sectors and community-level organizations were invited to participate in an engagement process from February to May 2022. The engagement process was comprised of a series of key informant interviews, followed by larger dialogue sessions to identify challenges related to diabetes and share ideas for collaboration and action. An online feedback tool also allowed stakeholders to further express their perspectives and identify more opportunities to enhance diabetes care in Canada.

Indigenous organizations were included in the engagement process designed to support this framework. However, to capture the unique interests, circumstances and perspectives of First Nations, Inuit and Métis peoples, and recognize the principles of reconciliation and the right to self-determination, a separate and more extensive nation-wide Indigenous-led engagement approach is being undertaken.

The federal government pledged \$35 million over five years starting in 2021-22, including \$25 million in funding for research, surveillance, and prevention, and to work towards the development of a national framework for diabetes, in Budget 2021 to help bolster its commitment to address diabetes.

## AN APPROACH TO ADDRESS DIABETES IN CANADA: THE FRAMEWORK

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The framework seeks to increase collaborative and coordinated action by relevant sectors and all levels of government to lessen the impact of diabetes and to overcome the inequities and socioeconomic conditions that influence an individual's risk of developing diabetes and prediabetes, as well as barriers to access diabetes programming and services.

Five foundational principles for the framework were identified in the engagement process:

- **Addressing health equity:** to reduce the burden of diabetes it is important to understand the complex relationship between the social determinants of health and diabetes risk.
- **Applying a person-centred approach:** places people at the heart of activities, services, and care to advance progress on diabetes.
- **Differentiating between types of diabetes:** each type may differ with respect to its potential causes, prognosis, and treatment.
- **Supporting innovation:** new models and ways of working are needed to make meaningful progress in the prevention and management of diabetes.

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<sup>2</sup> Including, health professionals, researchers, academia, non-profit organizations and charities, representatives from marginalized groups, people living with diabetes and their families, insulin and device manufacturers, and Indigenous peoples.

- **Promoting leadership, collaboration, and information exchange:** coordination and pooling resources and networks will help increase information sharing and the development of innovative, effective, and sustainable solutions across jurisdictions, hospitals and healthcare organizations, and research institutes.

The framework consists of six components that represent key areas to advance efforts on diabetes:

**1. Prevention:**

Foster a “health-in-policies” approach to eliminate inequities in the social determinants of health; scale up and invest in community-based health promotion programs tailored to high-risk populations, and promote, support and utilize validated preventative measures, such as screening tools for type 2 diabetes and prediabetes.

**2. Management, treatment and care:**

Expand access to virtual care options across the continuum of diabetes care; improve access to culturally relevant diabetes material and training for healthcare professionals to properly manage diabetes and related complications in their patients.

**3. Research:**

Enhance investments for investigator-initiated diabetes research and intervention research targeting the social determinants of health and diabetes risk; strengthen collaboration between researchers, practitioners, industry, policymakers and people with lived experience to establish diabetes research priorities to drive innovation; build on the success of the Strategy for Patient-Oriented Research (SPOR) by advancing research activities inclusive of persons with diabetes and diabetes-related complications, and identify effective interventions to prevent diabetes.

**4. Surveillance and data collection:**

Explore options to establish a comprehensive national diabetes surveillance system that allows for differentiation by types of diabetes and demographics; ensure data collection activities include health equity considerations, and leverage partnerships to expand current data sharing and create new data linkages to enhance the surveillance of diabetes.

**5. Learning and knowledge sharing:**

Expand technologies and digital solutions to provide resources that increase diabetes knowledge sharing; promote collaborative efforts among healthcare providers to identify, develop, and share best practices and coordinate knowledge mobilization, and facilitate regular updates of clinical practice guidelines.

**6. Access to diabetes devices, medicines, and financial supports:**

Increase information sharing on new technologies across federal, provincial and territorial jurisdictions, and enhance collaboration with industry to encourage innovation in the development of diabetes devices and products through meaningful engagement with populations at higher risk of diabetes, including people living on low incomes, children and youth, Indigenous peoples, and people of African, East Asian and South Asian descent.

Within five years the *National Framework for Diabetes Act* requires the Minister of Health to table in Parliament a progress report on the current state of diabetes prevention and treatment across the country, and on the effectiveness of the framework to address diabetes in Canada.

## IMPLICATIONS

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One of Canada's greatest contributions to medicine comes from the discovery of insulin by two medical scientists Frederick Banting and Charlies Best more than a century ago. Yet, despite Canada's proud history of advancements in medicine and science, our investment in the research sector lags other OECD countries.

Research and innovation, data collection, surveillance, and collaboration among researchers, academics, and drug and device manufacturers, account for a significant share of the opportunities the framework lays out. But, to drive innovation in diabetes research, the federal government needs to commit to strengthening the federal research support system. HealthCareCAN, with the support of our Vice-Presidents of Research, has made several recommendations to government in its submissions to the [Standing Committee on Finance 2023 Pre-Budget Consultation](#) and to the [Advisory Panel on the Federal Research Support System](#) on specific actions to strengthen the health research ecosystem in Canada.

The pandemic has had a serious impact on individuals living with diabetes, including delays in diagnosis, treatment, and disease management. [Recent data from Statistics Canada](#) adds to the mounting evidence that individuals living with chronic conditions, including diabetes, were more likely to have experienced challenges accessing health services during the pandemic than those without a chronic disease and will continue to experience challenges in the future.

HealthCareCAN remains concerned that it all adds up to further strain on a healthcare system in crisis and near collapse. The opportunities proposed in the framework will struggle to be achieved without fundamental reforms to the system and an increase in the federal health transfer to provinces and territories. [HealthCareCAN, the Canadian Medical Association and the Canadian Nurses Association calls on governments](#) to put aside jurisdictional considerations, find common priorities and work quickly toward solving the health system crisis that is deeply affecting Canadians.

Lastly, the Public Health Agency of Canada has a new funding opportunity through its Healthy Canadian and Communities Fund. The aim of this funding program is to prevent chronic disease, including diabetes, through primary prevention interventions targeting unhealthy eating, physical inactivity, and tobacco use. A full overview of the Healthy Canadians and Communities Fund can be found [here](#). The deadline for submitting is **December 21, 2022**.

## FOR MORE INFORMATION

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HealthCareCAN remains attentive to our members – if your organization has any questions, concerns or feedback in connection with these developments we encourage you to contact us.

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