

STAFF REPORT ACTION REQUIRED

Diabetes Prevention Strategy

Date:	February 4, 2009
То:	Board of Health
From:	Medical Officer of Health
Wards:	All
Reference Number:	

SUMMARY

This report provides information on the implementation and funding of a new Diabetes Prevention Strategy for the community and the workplace in Toronto. The project will be conducted between January 2009 and March 2010 and will be 100% funded by the Ministry of Health Promotion (MHP). Toronto Public Health (TPH) has received confirmation of funding from January 1, 2009 to March 31, 2009. Confirmation of funding for April 2009 to March 2010 is expected in March 2009.

Diabetes is a major public health challenge and is one of the fastest growing diseases in Canada and around the world. As of 2004, over two million Canadians are currently living with diabetes and that number is expected to reach three million by 2010. The Institute for Clinical Evaluative Studies (ICES) and St. Michael's Hospital's 2007 report *Neighbourhood Environments and Resources for Healthy Living – A Focus on Diabetes in Toronto* (known as the Diabetes Atlas) estimated the Toronto prevalence rate for diabetes was 7.6%, compared to 6.2% for the rest of Ontario. This was based on 1998/99 hospitalization and physician billing data.

This project will focus efforts on implementing diabetes prevention activities in up to two communities where adults are at high risk for diabetes and in six workplaces using a comprehensive workplace approach.

The purpose of this report is to inform the Board of Health about this new program and Toronto Public Health's plan for implementation. The report also seeks approval to adjust the Toronto Public Health 2009 Operating Budget to include the related funding and to increase the staff complement by 1.0 temporary position.

RECOMMENDATIONS

The Medical Officer of Health recommends that:

- 1. The Toronto Public Health 2009 Operating Budget be increased by \$186,065 gross and \$0.0 net, and 1.0 temporary position, to reflect confirmed one-time funding for January 1, 2009 to March 31, 2009 from the Ministry of Health Promotion for the Diabetes Prevention Strategy; and
- 2. This report be forwarded to the Budget Committee for consideration during the 2009 Operating Budget process.

Financial Impact

The one-time funding for the Diabetes Prevention Strategy is \$186,065 for the period January 2009 to March 2009. One temporary position will be required to administer this phase of the program. Confirmation of funding for the period April 2009 to March 2010 is expected to be received by March 2009.

Diabetes Prevention Strategy	2009 Impact		
	Positions	Gross	Net
Community Intervention	1.0	\$132,275	\$0
Workplace Intervention		\$53,790	\$0
Total	1.0	\$186,065	\$0

The Acting Deputy City Manager and Chief Financial Officer has reviewed this report and agrees with the financial impact information.

DECISION HISTORY

At the September 18, 2008 Board of Health meeting staff provided an overview of the programming and policy development being done in Toronto to prevent diabetes.

ISSUE BACKGROUND

Toronto Public Health takes a comprehensive and integrated approach to diabetes prevention because the risk factors and the social and environmental changes that need to be addressed also apply to the prevention of many other chronic diseases. This is consistent with Toronto Public Health's Strategic Plan where it aims to reduce health disparities and improve the health of the City's diverse population by addressing the determinants of health.

Toronto Public Health works closely with partners and multiple sectors using a variety of health promotion strategies to achieve improvements in physical activity levels and eating patterns in Toronto's adult population. However, because of the scope and complexity of these problems, long term effort is required to sustain these improvements.

The World Health Organization (WHO) recommends that because of the scale of the diabetes epidemic action must be taken by countries at a population level. Approaches based only on education to promote individual behaviour change are unlikely to succeed in environments where there are many inducements to engage in unhealthy behaviours and many barriers to change. Education must be supported by population-based changes to both social and physical environments such as in transportation and urban design to increase physical activity, and in access to healthy foods. These changes require multi-sectoral collaborations that will engage a broad range of partners working to make system changes that address the underlying determinants of health.

COMMENTS

As part of a provincial diabetes strategy, the Ministry of Health Promotion is funding three sites in Ontario to implement diabetes prevention initiatives for adults in the community and in the workplace. Toronto has been selected as one of these pilot sites.

The purpose of this project is to reduce the incidence of diabetes in high-risk communities by developing culturally appropriate, accessible programs that increase awareness of the risk factors for diabetes and increase the opportunities to reduce these risk factors. The project will involve planning, implementing and evaluating a comprehensive, primary prevention, health promotion pilot in the workplace and in community settings. The project will identify opportunities to invest in new initiatives and will build on existing community and workplace partnerships to enhance or expand healthy eating and active living initiatives. Where feasible, activities will build on existing initiatives (e.g. heart health partnership) and work with communities to help them take action, set priorities, make decisions and implement effective strategies to meet identified needs. The project will be evaluated to identify the most effective strategies that may be implemented more broadly in the future.

Community Setting:

This component of the project will involve a community engagement approach to build partnerships and implement ethno-culturally appropriate and accessible programs for the prevention of type 2 diabetes in up to two neighbourhoods in Toronto. These neighbourhoods will be selected based on areas that have a high incidence of type 2 diabetes because of existing high risk factors such as susceptible populations and low income. The project will enhance community capacity to implement sustainable initiatives. Specifically, the project will:

- engage stakeholders in diabetes prevention and health promotion activities
- engage participants in personal health assessments relating to diabetes
- develop programs that provide culturally-appropriate knowledge about healthy eating and that provide culturally appropriate and accessible physical activity opportunities
- increase awareness and knowledge of risk factors and methods of behaviour change

Workplace:

Health Options at Work (HOW), Toronto Public Health's workplace health program, has provided service to over 500 workplaces in Toronto since May 2006. These workplaces

represent a broad range of sectors, are spread throughout the city and are very ethnoculturally diverse, many comprising groups that are at higher risk for diabetes such as Southeast Asian, Latin American and African-Caribbean populations.

The provincial funding will allow TPH to augment and focus on existing workplaces where the risk for diabetes of selected populations is likely to be greatest and to conduct outreach to new workplaces where employees may be at greater risk. The workplace component of the project will:

- engage six worksites/employers in comprehensive workplace health promotion activities that address diabetes prevention
- have employers implement policies that facilitate diabetes prevention for their employees
- engage employees in personal health assessments relating to diabetes
- increase awareness and knowledge of risk factors and methods of behaviour change
- increase healthy eating and physical activity levels among employees

CONCLUSION

Diabetes is one of the most significant public health challenges in Canada and around the world. The Ministry of Health Promotion is providing Toronto Public Health with onetime funding from January 2009 to March 2009 to implement the initial phase of a diabetes prevention strategy in the community and the workplace. Toronto Public Health is requesting to amend the 2009 Operating Budget to reflect this one time funding enhancement. Confirmation of project funding for April 2009 to March 2010 is expected by March 2009.

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