



Recommendations in Advance of Budget 2026

Submission to the House of Commons Standing
Committee on Finance

Canada is paying the price for not treating obesity like a chronic disease. Budget 2026 is a chance to fix that.

A science-based path forward on obesity: Practical federal action for chronic disease recognition, surveillance, and research

Recommendations for Budget 2026

- **Recommendation 1:** That the Government formally recognize obesity as a chronic disease and direct Health Canada and the Public Health Agency of Canada to align federal policies, programs, and communications accordingly.
- **Recommendation 2:** That the Government fund the inclusion of obesity within the Canadian Chronic Disease Surveillance System (CCDSS), including the development of a case definition, regular public reporting, and integration into federal chronic disease monitoring.
- **Recommendation 3:** That the Government fund and convene a federal roundtable on obesity, led by Health Canada and the Public Health Agency of Canada, to identify and advance near-term federal actions.
- **Recommendation 4:** That the Government invest in obesity research and innovation by directing the Canadian Institutes of Health Research (CIHR) to establish a dedicated obesity funding program focused on prevention, treatment, health system delivery, and stigma reduction.

Overview

Obesity Canada is the leading national health charity working to change how Canada sees, supports, and understands people affected by obesity. Our work focuses on reducing stigma, advancing clinical care, and reshaping public narratives. We lead the development and dissemination of Canadian Adult and Pediatric Obesity Clinical Practice Guidelines, train health professionals, advance recognition of obesity as a chronic disease, and work to improve access to evidence-based care.

Obesity is one of the most prevalent and costly chronic diseases in Canada, yet public policy continues to treat it primarily as an issue of individual behaviour rather than a multifactorial, chronic condition. That misalignment contributes to poor access to care, fragmented systems, and ongoing pervasive stigma. Canada is a global leader in obesity research and clinical guidance, but we have not translated that expertise into policy implementation.

Nearly 33 percent of Canadians were living with obesity in 2023, up about eight percentage points since 2009.¹ The cost of inaction in treating obesity reached an estimated **\$27.6 billion in 2023**, including **\$5.9 billion** in direct health care costs and **\$21.7 billion** in indirect costs linked to reduced workforce participation, lower earnings, disability, and premature mortality. Governments also lose an estimated **\$5.1 billion** in tax revenue.² This is expected to grow, with the World Obesity Federation projecting obesity prevalence could reach 50 percent by 2035.³ Obesity is an upstream chronic disease that contributes to more than 200 downstream conditions, including diabetes, cardiovascular disease, and cancer, further exacerbating its health and economic impact.

Budget 2026 is an opportunity for the federal government to take practical, affordable steps that reflect both the science of obesity and the scale of its impact in Canada. Obesity is not only a chronic disease, but also a **fiscal, productivity, labour market, and equity issue**. Yet federal policy still does not consistently recognize, measure, or coordinate around obesity as a chronic disease.

¹ Laura N. Anderson, Rabiul Islam, and Arthur Sweetman, "Trends in obesity defined by body mass index among adults before and during the COVID-19 pandemic: a repeated cross-sectional study of the 2009–2023 Canadian Community Health Surveys," *CMAJ* 197, E708–E718 (2025)

² Fang Chen, Tanvi Sapra, Zachary Natale, Timothy M. Dall, Ian Patton, and Sanjeev Sockalingam, "Modeling the cost of inaction in treating obesity in Canada," *BMC Public Health* 25, 865 (2025)

³ World Obesity Federation. *World Obesity Atlas 2025*. London: World Obesity Federation, 2025.
<https://data.worldobesity.org/publications/?cat=23>

→ Recommendation 1: Formal recognition of obesity as a chronic disease

Leading medical and health organizations, including the Canadian Medical Association and the World Health Organization, recognize obesity as a chronic disease^{4,5}. In 2025, Alberta became the first Canadian province to do the same, showing that governments can take concrete steps to align public policy with current science.

Formal recognition is not symbolic—it determines what governments measure, what they prioritize, and how care is delivered. Without it, obesity will continue to be addressed inconsistently across federal policy and public communications, despite its significant impact on health systems, patient outcomes, public spending, and economic growth.

Budget 2026 can establish this foundation by formally recognizing obesity as a chronic disease and directing Health Canada and the Public Health Agency of Canada to align federal policies, programs, and communications accordingly. This is the foundational step that enables coordinated federal action across surveillance, research, and care.

→ Recommendation 2: Inclusion of obesity in the Canadian Chronic Disease Surveillance System (CCDSS)

What gets measured gets managed—and obesity is not currently measured as a chronic disease in Canada. Although obesity is the most prevalent and costly chronic disease affecting Canadians, and a major upstream driver of many conditions tracked in the CCDSS, it is not itself included. This represents a significant gap in Canada’s chronic disease infrastructure.

Canada is currently measuring the consequences of obesity—but not the disease itself. Effective federal policy depends on accurate, comprehensive data. Including obesity in the CCDSS would strengthen the federal government’s ability to monitor trends, identify inequities, evaluate interventions, and support more coordinated policy across jurisdictions. It would also improve accountability and provide decision-makers with a more complete picture of chronic disease burden in Canada.

⁴ World Health Organization, Obesity and overweight, Fact Sheets, <https://www.who.int/news-room/fact-sheets/detail/obesity-and-overweight>

⁵ Canadian Medical Association, “CMA recognizes obesity as a disease,” <https://web.archive.org/web/20170421083232/https://www.cma.ca/En/Pages/cma-recognizes-obesity-as-a-disease.aspx>

Budget 2026 can address this gap by funding the inclusion of obesity within the CCDSS, including the development of a standardized case definition, regular public reporting, and full integration into federal chronic disease monitoring.

→ **Recommendation 3: The establishment of a federal roundtable on obesity**

Canada's obesity policy landscape remains fragmented, even as the evidence base has advanced significantly. A decade has passed since the Senate of Canada published *Obesity in Canada: A Whole-of-Society Approach for a Healthier Canada*, and there is a clear need to refresh the federal policy conversation considering current science, economic evidence, and lived experience.⁶

Canada lacks a coordinated federal mechanism to act on this latest evidence. The definition and scientific understanding of obesity have changed dramatically over the past ten years. With the introduction of new evidence-based treatments and a rapidly expanding pipeline of innovative medications, Canada needs to align its policy and communication on obesity with current best practices and up-to-date knowledge.

Budget 2026 can support coordinated federal action by funding and convening a national roundtable on obesity, led by Health Canada and the Public Health Agency of Canada. This roundtable would bring together clinical experts, researchers, provinces and territories, Indigenous partners, caregivers, and people living with obesity to identify and advance near-term federal priorities.

The focus should include chronic disease recognition, access to care and treatment, surveillance, stigma, and prevention. This provides a practical, time-limited mechanism to align stakeholders, accelerate action, and translate evidence into policy. Obesity Canada welcomes collaboration with the federal government to convene a roundtable to advance clear solutions, build understanding, and accelerate coordinated action.

⁶ Senate of Canada, "Obesity in Canada: A Whole-of-Society Approach for a Healthier Canada" https://sencanada.ca/content/sen/committee/421/SOCI/Reports/2016-02-25_Revised_report_Obesity_in_Canada_e.pdf

→ Recommendation 4: The investment in obesity research and innovation

Canada has long been a global leader in obesity research, from internationally recognized clinical practice guidelines to advances in understanding the biological, environmental, and social drivers of obesity. However, federal investment has not kept pace with the scale and urgency of the issue, even as obesity becomes the most prevalent chronic disease affecting Canadians.

Canada has the expertise—but lacks the sustained federal investment to fully mobilize it. Targeted federal investment in obesity research and innovation is needed to strengthen Canada’s evidence base, accelerate the translation of knowledge into practice, and improve prevention and treatment approaches. That includes research on health system delivery, access to care, long-term outcomes of emerging therapies, and strategies to reduce weight bias and stigma.

Budget 2026 can advance this work by investing in obesity research and innovation through the Canadian Institutes of Health Research (CIHR), including the establishment of a dedicated funding program aligned with national priorities. This program should support interdisciplinary research across biomedical, clinical, health systems, and population health fields, while partnering with people living with obesity and Indigenous communities.

Investing in obesity research is both a health and economic priority. Strengthening Canada’s capacity for innovation in this area will support more effective interventions, reduce long-term health system costs, and position Canada as a leader in addressing one of the most defining global public health challenges of our time.

Conclusion

The evidence is clear: inaction on obesity carries a major cost, not only in increased health care spending, but in lower workforce participation, reduced productivity, and lost economic potential.

The federal government cannot solve every aspect of obesity policy in a single budget. It can, however, take the foundational steps needed to treat obesity as the serious chronic disease it is.

Budget 2026 presents a practical opportunity to do just that—through recognition, measurement, coordination, and targeted investment. These actions will strengthen

Canada's health system, support economic resilience, and improve outcomes for millions of Canadians.

Obesity Canada respectfully urges the Committee to adopt these recommendations in its report for Budget 2026.

The Economic Impact of Obesity in Canada

- \$27.6B annual cost
- \$5.9B direct healthcare costs
- \$21.7B productivity losses
- \$5.1B lost tax revenue
- 50% projected prevalence by 2035