



Written Submission  
for the  
Pre-Budget Consultations  
in Advance of the  
2025 Federal Budget

By:

THE SOCIETY OF  
OBSTETRICIANS AND  
GYNAECOLOGISTS  
OF CANADA



LA SOCIÉTÉ DES  
OBSTÉTRICIEUX ET  
GYNÉCOLOGUES  
DU CANADA



## Summary of Recommendations:

- Recommendation 1** Fulfil the Liberal Party's 2025 platform commitment to invest \$20 million in women's health data by directing a portion of this funding to creating a National Women's Health Data Dashboard as a centralized, long-term solution to track outcomes, combat misinformation and inform evidence-based policy.
- Recommendation 2** Invest \$412 million over three years, as committed in the 2025 Liberal Party election platform, to establish a national in vitro fertilization (IVF) program providing up to \$20,000 for a single standard IVF cycle.
- Recommendation 3** Implement Liberal Party platform commitment to make the Sexual and Reproductive Health Rights (SRHR) Fund permanent, with annual funding of at least \$40 million, and to ensure this funding goes to independent, evidence-based organizations that work to advance sexual and reproductive rights and improve access to care for women in Canada.
- Recommendation 4** Fulfil the Liberal Party 2025 election commitment to invest \$20 million in postpartum maternal health research to fund studies, track outcomes and disparities, identify service gaps and inform future investments to ensure women receive improved, equitable care after giving birth.
- Recommendation 5** Provide dedicated funding in the amount of \$100 million over three years to provinces and territories to reduce surgical wait times for obstetric and gynaecological procedures and to leverage Artificial Intelligence (AI) to improve system efficiency, lower overall costs and redirect resources to frontline care.

## Introduction

The **Society of Obstetricians and Gynaecologists of Canada (SOGC)** is one of Canada's longest running and most respected national medical specialty organizations. Our membership includes: obstetricians; gynaecologists; family physicians; nurses; midwives; pharmacists and other allied health professionals involved in women's sexual and reproductive health. As the national voice of women's health, the SOGC advocates for better health care policies, enhanced medical education and ensuring that women across Canada receive the highest standard of care. In an era marked by an overwhelming rise in misinformation and disinformation in health care, we are committed to providing education based on science and evidence-based, peer-reviewed research. This commitment ensures that our patients and the public receive accurate, trustworthy information to make informed decisions about their health.

### **Recommendation 1 – Fulfil the Liberal Party's 2025 platform commitment to invest \$20 million in women's health data by creating a National Women's Health Data Dashboard**

In the 2025 Liberal Party platform, \$20 million was committed over two years to invest to help close persistent gaps in women's health across Canada through improved data collection. The SOGC strongly supports this commitment and urges the federal government to direct a portion of this funding toward the creation of a National Women's Health Data Dashboard as a foundational first step.

**The economic case is clear:** incomplete data drives unnecessary health care costs, from delayed diagnoses and ER visits to chronic opioid use and long-term disability. It also leads to negative impacts on the workforce and the economy. For example, a [2020 study](#)<sup>1</sup> showed that nearly 47 per cent of women with endometriosis reported work impairment, and 17 per cent missed work time, leading to lost productivity and greater costs to the health care system.

A national dashboard must be built on a standardized, disaggregated database that draws consistent data from all provinces and territories. A dataset like this is essential to provide meaningful insight into key women's health indicators such as maternal mortality and morbidity, stillbirth and perinatal loss, menopause and endometriosis. Making this data publicly available would also be necessary to support evidence-based policy, drive high-impact research and enable more responsive, equitable and cost-effective care.

The federal government must take a leadership role in co-ordinating and standardizing this data collection, as approaches to health data collection across provinces and territories vary widely. Only national leadership can ensure consistency, comparability and the quality needed to build a reliable, actionable and nationally-focused database and dashboard. Without co-ordinated, federally driven health data infrastructure, Canada will continue to miss emerging health trends, fall short in reducing system costs and fail to support women whose pain and illness limit their ability to fully participate in the economy.

A national data strategy on women's health would also help counter the growing threat of health misinformation and disinformation, which thrive in the absence of trusted, science-based data. Clear, accessible reporting from a national dashboard would strengthen public trust, improve clinical decision-making and support smarter investments that drive better health and economic outcomes.

This recommendation aligns with the Prime Minister's mandate to [increase government productivity, "focus on results over spending," and modernize how services are delivered through better use of technology and data](#). By collecting and analyzing disaggregated data, this dashboard would enable smarter decision-making for policymakers, clinicians and health system leaders.

## **Recommendation 2 – Invest \$412 million to launch the national IVF program and support equitable access to fertility care**

**The economic case is clear:** Infertility affects at least [one in six Canadian couples](#), and many face steep out-of-pocket costs that make access unequal across Canada. This is not only a barrier to those who want to grow their families, but it is also an economic loss in terms of delayed population growth, lost earnings and, in some cases, mental health costs.

During the 2025 election, the Liberal party committed to \$412 million over four years for a national IVF program that would provide up to \$20,000 toward one IVF cycle per patient. The SOGC urges the government to deliver this promise in Budget 2025 and stands ready to assist by offering medical expertise and guidance on eligibility and care pathways, with a focus on equity and inclusion.

This recommendation supports the government's mandate to ["bring down costs for Canadians and help them get ahead."](#) Fertility care access is also a question of workforce sustainability and future population health. As a trusted medical partner whose members are among the physicians who deliver fertility care, the SOGC can help ensure this investment delivers real results for Canadian families.

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<sup>1</sup> Soliman AM, et al Impact of Endometriosis on Fatigue and Productivity Impairment in a Cross-Sectional Survey of Canadian Women. J Obstet Gynaecol Can. 2021 Jan;43(1):10-18. doi: 10.1016/j.jogc.2020.06.022. Epub 2020 Jul 18. PMID: 32978082.

### **Recommendation 3 – Fulfil the commitment to invest \$20 million in postpartum maternal health research to improve care and outcomes for Canadian women**

In its 2025 platform, the Liberal Party pledged \$20 million to address the long-overlooked area of postpartum maternal health by funding research to identify care gaps, measure health outcomes and guide future investments.

**The economic case is clear:** untreated postpartum health conditions, which can range from **mental health disorders** to **chronic pain** and **surgical complications**, carry **high long-term costs** for the health system and, in turn, the country's economy. They result in lost productivity, increased use of costly emergency department resources and avoidable suffering. This undermines the ability for families to meaningfully contribute to the workforce and the economy.

Investing in postpartum research now will result in smarter, more targeted care models, reduced health system costs and a healthier workforce.

The SOGC has experience in guiding the implementation of evidence-based maternal health initiatives across Canada and is well positioned to support this federal commitment. We can contribute clinical expertise, help design outcome-based metrics and advise on national co-ordination strategies to ensure the funding achieves maximum impact across Canada.

### **Recommendation 4 – Make the Sexual and Reproductive Health Rights (SRHR) Fund permanent, with annual funding of \$40 million directed to evidence-based organizations**

Stable, multi-year funding through the Sexual and Reproductive Health Rights (SRHR) Fund is essential to protect progress in reproductive care from being vulnerable to shifting political priorities or budgetary cycles.

**The economic case is clear:** investing in sexual and reproductive health rights and services reduces costs to the health system, improves population health and strengthens economic participation – especially for women. Access to contraception, abortion and evidence-based reproductive care reduces unplanned pregnancies, lowers maternal health complications and supports individuals in making choices that align with their health and financial stability.

In a global context where sexual and reproductive rights are increasingly under threat, Canada has a responsibility to lead. Sustained investment in SRHR is not just good health policy, it is nation-building work that affirms Canada's role as a beacon for rights-based care, equity and evidence.

Making the SRHR Fund permanent, with at least \$20 million per year, as pledged in the 2025 Liberal Party platform, would support sustained public education and service delivery of sexual and reproductive care, particularly in underserved and remote communities.

To be effective, a portion of this funding must be directed to independent, evidence-based entities such as the SOGC, which have a proven track record of advancing women's sexual and reproductive rights both in Canada and globally. The SOGC develops **clinical tools**, delivers **health provider education** and **public education materials** and **responds directly** to the evolving needs of frontline health workers, patients and health systems. We are well-positioned to ensure these funds have the greatest impact where they are needed most.

## **Recommendation 5 – Provide dedicated funding in the amount of \$100 million over three years to reduce surgical wait times for obstetric and gynaecological procedures**

**The economic case is clear:** long wait times for obstetric and gynaecological surgeries result in delayed diagnoses, avoidable complications and lost productivity. These delays force many women to take extended time off work or seek care in emergency settings, increasing pressure and costs on the health system and reducing workforce participation – negatively impacting the economy.

According to a **2025 report**<sup>2</sup> from the World Economic Forum and McKinsey Health Institute, addressing key women’s health conditions could unlock \$400 billion in annual global GDP by 2040. Investing in timely surgical care for women is not just a health priority; it is a proven strategy for driving economic growth.

Across Canada, women are suffering as a result of unacceptable wait times for obstetric and gynaecological surgeries. Many are forced to turn to private care and pay out of pocket to access timely treatment - an option that is neither affordable nor accessible for most. These privately accessed procedures are not captured in existing public data, meaning the true price tag and scale of unmet need and the growing reliance on private care remains invisible. A federal investment of \$100 million over three years would help provinces and territories expand and prioritize access to publicly funded care for women.

This funding should be tied to measurable outcomes to ensure wait times are lowered and women are able to access better, more timely care. A national data dashboard focused on women’s health conditions (*see recommendation 1*) would help track these outcomes, monitor progress and ensure this investment delivers value for money.

This funding could also be used to support the adoption of AI tools that reduce administrative burden, reduce unnecessary assessments and procedures and streamline paperwork — freeing up more time for physicians to focus on patient care. Increased efficiency through AI can help stretch health system capacity, reduce burnout and ensure more women get the care they need, when they need it, which ultimately improves outcomes while lowering system-wide costs.

## **Conclusion**

Canada’s economic future depends on a healthy population — and that includes the half of the population that is too often overlooked in national health planning and financing.

The SOGC’s recommendations are modest in cost but transformative in impact. They address long-standing systemic inequities in women’s health, but they also align with the government’s stated goals: better use of public dollars, strengthened service delivery, better outcomes and a stronger economy that works for all Canadians.

The SOGC stands ready to support these efforts and, drawing on our experience in convening national health initiatives, can help the federal government work collaboratively with provinces, territories and key stakeholders to achieve these important goals.

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<sup>2</sup> World Economic Forum and McKinsey Health Institute. Blueprint to Close the Women’s Health Gap: How to Improve Lives and Economies for All. 21 Jan. 2025, [www.mckinsey.com/mhi/our-insights/blueprint-to-close-the-womens-health-gap-how-to-improve-lives-and-economies-for-all](http://www.mckinsey.com/mhi/our-insights/blueprint-to-close-the-womens-health-gap-how-to-improve-lives-and-economies-for-all)