

WHAT THE FUTURE: WELLNESS

How Tech-Enabled Care Is Taking Pressure Off The System — And Putting Power In Patients' Hands PAGE 8

How A 36-year-old Start-up Mentality Is Reinventing Youth Mental Health In Canada PAGE 13

Your Biology Holds The Blueprint For Aging Well. How Tech Is Finally Decoding It. PAGE 17

How The Best Companies Are Putting Care At The Core Of Productivity PAGE 22

From Sleep To Sanctuary: How Home Is Becoming The New Wellness Destination PAGE 29

+ Experts from The Menopause Society, Destination Canada, and Ipsos explore how wellness is being redefined across life stages, how food, travel, and branding are converging with health, and why Canadians are increasingly taking well-being into their own hands.



Contents

Introduction

- 3 Wellness: The Rising Currency of Our Time

Shifts

- 6 How Longevity, Access and Cost Will Shape Future Care

Frontiers

- 39 Questions for the Future



Perspectives and Research from industry leaders and Ipsos experts

- 8 **How Tech-Enabled Care is Taking Pressure Off the System – and Putting Power in Patients' Hands**

Daniel Shearer, Chief Marketing Officer at Maple, shares how tech is transforming access, experience and outcomes for patients, providers, and partners alike.

- 12 **Canada's AI Health Revolution is Happening Without Canadians**

Paul Acerbi, who leads Ipsos Canada's AI Adoption Team, explores why health care innovation is moving faster than public trust – and what it will take to close the gap.

- 13 **How AI, Gaming, and Real-Time Data Are Shaping the Future of Youth Mental Health**

Katherine Hay, President & CEO of Kids Help Phone, on how a start-up mindset fuels innovation to expand access and personalise youth mental health support.

- 17 **Your Biology Holds the Blueprint for Aging Well. How Tech is Decoding It.**

Sameer Dhar, Founder & CEO of NiaHealth, on how advanced diagnostics, personal data, and longevity-trained clinicians are shaping a future of prevention, personal empowerment, and tech-enabled care.

- 21 **From Waiting Rooms to Early Warnings: The Cultural Shift Toward Prevention**

Rama Zuñiga, part of Ipsos' in-house strategic consulting team Strategy3, on how Canadians are turning from passive patients into proactive managers of their own health.

- 22 **How the Best Companies Are Putting Care at the Core of Productivity**

Paula Allen, Global Leader of Research, Insights, and Strategic Communications at TELUS Health, on how data, AI, and a whole-person approach are redefining workplace well-being.

- 25 **Why the Menopause Revolution Matters**

The Menopause Society's **Dr. Monica Christmas** shares how the shift on menopause from silence to the spotlight will drive better care for women.

- 28 **In Case You Missed It... You're Already in the Wellness Business**

Karen Tilley, Client Officer at Ipsos, on how consumers now expect wellness from every brand – even those that never saw themselves in the space.

- 29 **From Sleep to Sanctuary: How Home is Becoming the New Wellness Destination**

Danyal Syed Ali, Head of Consumer and Customer Insights at IKEA Canada, shares how the brand is expanding its focus on wellness – from sleep to support.

- 32 **If Wellness Is a Place, Could Canada Be Where the World Comes to Find It?**

Susan Dong, Executive Director of Brand at Destination Canada, shares how radical openness, cultural connection, and regenerative tourism are shaping Canada's bid to become a world-class wellness destination.

- 36 **Is Food the Frontline of Future Wellness?**

Asad Amin, SVP Head of Ipsos' syndicated research and a leading voice on food trends, highlights six shifts — from functional foods to tech-enabled nutrition — that are redefining wellness for Canadians

Wellness: The Rising Currency Of Our Time

From what we eat to how we age, wellness is becoming the unit by which prosperity and progress are measured.

In the coming decades, wellness could become Canada's most valuable currency, shaping where we live, how we work, what we eat, and even how long we choose to live. Its value may be measured in years of healthy life, in the trust we place in our institutions, and in the vitality of our communities. But like any currency, access will not be equal, and its worth will depend on the systems and choices we build today.

Yet the more choices we have, the more complex wellness becomes. We're navigating a world where:

- Wait times push people toward parallel systems of care.
- AI promises faster, more personalized answers — if we trust it.
- Food can be both pleasure and prevention.
- Physical health outcomes improve while mental health lags.
- And the definition of “healthy” shifts with each generation.

We're also facing distinctly Canadian pressures:

A publicly funded health care system under strain. A population that's both aging and diversifying at historic rates. Urban–rural divides in access and outcomes. Climate and cost-of-living stresses that are making mental health a national concern.

And looking to 2050, the stakes only get bigger.

By then, Canada's population will be older, more urban, more tech-integrated, and more climate-impacted than ever. AI-driven “personal health twins” could monitor our physiology in real time, simulating the impact of every meal, medication, or stressor before we even feel it. Homes may adjust light, air, and sound to optimize circadian rhythms. Wellness travel could extend to orbiting hotels or immersive virtual retreats that feel indistinguishable from reality. Food may be 3D-printed from microbiome data, balancing prevention and pleasure bite by bite.

71%

of Canadians agree that Canadians' health care needs will soon outpace what the public system can provide.

Source: Ipsos What The Future: Wellness study conducted August 11-13, 2025, among 1,000 Canadian adults

But the future won't just be about technology — it will be about trust and equity.

By 2050, Canadians may be getting more health guidance from AI systems, chatbots, and wearable algorithms than from human clinicians. The question will be: who do we believe, and who do we hold accountable, when our care is shaped by code? It could be a future of widening gaps between those who can afford bio-personalized wellness and those left with a fraying public safety net. Which path we take will depend on the trust we build, the guardrails we set, and the decisions we make today.

This future is already taking shape.

Wellness is moving far beyond the boundaries of health care. It's delivered through tech platforms that connect us to doctors 24/7/365, start-ups decoding our biology for longevity, mental health lifelines that operate more like tech companies than not-for-profits, homes that actively support healthier living, and grocery aisles that respond to increasingly individualized needs.

As our interviews reveal, wellness in the next decades will be shaped by intersecting forces: the science of prevention, the economics of access, the psychology of trust, and the cultural meaning we attach to health.

Unlocking DNA, Resisting AI: Canadians' Conflicted Path to the Future of Health

Q: Please indicate how much you agree or disagree with the following statements about the future of health, data, and technology.

If I had access to my full genetic profile, I would use it to guide every aspect of my health, from what I eat to how I plan for retirement.



I would trust AI to make a medical diagnosis, if it had access to more and better accuracy than a human doctor.



■ Agree ■ Neither agree nor disagree ■ Disagree ■ Don't know

Source: Ipsos What The Future: Wellness study conducted August 11-13, 2025, among 1,000 Canadian adults

Some questions loom large across sectors:

- As wellness becomes ambient, will our homes, workplaces, and cities become our primary caregivers?
- If food is central to prevention, how do we make it both affordable and personalized?
- Can AI be a trusted partner in care — and who sets the rules?
- How will we close the care gap for rural, Indigenous, and other underserved communities?
- If wellness becomes the goal of how we spend our free time, will fun still feel like freedom — or start to feel like work?
- In a hyper-connected 2050, how do we protect the human connection at the heart of care?

Wellness in Canada's future will be built by many hands — doctors and designers, policymakers and product developers, employers and entrepreneurs. The challenge is not just to extend life, but to ensure that more of it is healthy, connected, and worth living. Because in Canada's future, wellness won't just be a goal — it will be the currency that buys us time, connection, and possibility.



Diane Ridgway-Cross leads Ipsos Strategy3's Canadian practice and is the managing editor for *What The Future Canada*



67%

of Canadians agree there is so much conflicting health information online that it's difficult to know what to trust.

Source: Ipsos What The Future: Wellness study conducted August 11-13, 2025, among 1,000 Canadian adults

Shifts: How Longevity, Access and Cost Will Shape Future Care

NOW: From routine care to holistic investment



Rising public interest in holistic wellness reflects a broader cultural shift toward more mindful and intentional living. People are increasingly prioritizing mental well-being on par with physical health — and seeking ways to extend their long-term vitality. This shift is fueling investment in cutting-edge approaches like longevity treatments, therapeutic nutrition, and mental performance tools.

NEXT: From final chapters to sequel adventures



Increasing longevity will unlock innovation in later-life planning. Technologies will boost health care efficiency, containing long-term costs through more personalized treatments. The insurance and financial sectors will respond with new products for extended lifespans. At the same time, longevity opens fresh marketing potential in health care and pharma — as employers seek smarter ways to support an aging, but still ambitious, workforce.

FUTURE: From local treatments to international therapies



Frustration with Canada's overburdened health care system is accelerating a shift toward self-directed, tech-enabled care. Virtual platforms are becoming everyday substitutes for in-clinic visits, while digital diagnostics and medical tourism move from fringe to familiar. As wait times grow, more people will bypass the system in search of faster, more personalized solutions — building parallel wellness ecosystems outside traditional care.



Mercedes Bender is a Principal at Ipsos Strategy3.

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Ipsos What the Future custom presentations give you **personalized insights** for your business



When you imagine possible tomorrows,
you ask better questions today.

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How Tech-Enabled Care Is Taking Pressure Off The System — And Putting Power In Patients' Hands



Daniel Shearer

Chief Marketing Officer, Maple

Daniel Shearer has built his career tackling complex brand and business challenges. He is now Chief Marketing Officer at Maple, where he helps lead one of Canada's most transformative health care companies. Maple is the country's largest provider of health care by volume, shaping how Canadians access care: virtually, rapidly, and proactively. In this conversation, Shearer unpacks what's broken in the current system, where technology can make the biggest difference, and why the public-versus-private debate may be missing the point.

75%

of Canadians agree that the Canadian health care system needs a major overhaul.

Source: Ipsos What The Future: Wellness study conducted August 11-13, 2025, among 1,000 Canadian adults

What the Future interview with Daniel Shearer

Diane Ridgway-Cross: What drew you to Maple, and how do you describe your role?

Daniel Shearer: I initially joined as a consultant, but within weeks, I knew I couldn't walk away. The mission, the urgency and the scale of the opportunity were too compelling. As CMO, I oversee brand, communications, digital, CRM, product marketing and how the Maple experience shows up across partner ecosystems. A big part of my job is amplifying what already exists. The stories are here — my role is to tell them at scale.

Ridgway-Cross: For those less familiar, what exactly is Maple?

Shearer: Maple is the leading virtual health care provider in Canada. We operate across three channels: B2C, where families subscribe to membership for 24/7 access to virtual care; B2B, where employers include Maple in their employee benefits; and B2I, where we partner with provincial governments and other institutions to support the public health system as a software provider.

Ridgway-Cross: Why is that role so critical right now?

Shearer: Our health care system is governed by the Canada Health Act, a framework that predates the internet. But expectations have changed. People want care that's on demand, on their terms and aligned with

how they live and access everything today. And at the same time, the strain on the system has become untenable. About 6.5 million Canadians don't have a family doctor. Even those who do might wait two weeks to get their child or themselves seen. Maple is designed for the reality of today and tomorrow, in a way that's accessible and sustainable.

Ridgway-Cross: How is Maple able to deliver care so quickly and consistently when the system as a whole is struggling with capacity?

Shearer: It's a great question, and one we hear often. The doctor shortage is real, but what's often overlooked is that a lot of physician capacity goes underutilized, especially for things like after-hours care or flexible work. We've created a platform that allows doctors to work how and when they want, whether they're balancing hospital shifts, working from home, or easing into retirement. Maple doesn't take doctors from the system but taps into their excess capacity that would otherwise go unused and ultimately get patients the help they need faster.



Our health care system is governed by the Canada Health Act, a framework that predates the internet. But expectations have changed.”

Ridgway-Cross: How is Maple partnering with governments to address the gaps in the system?

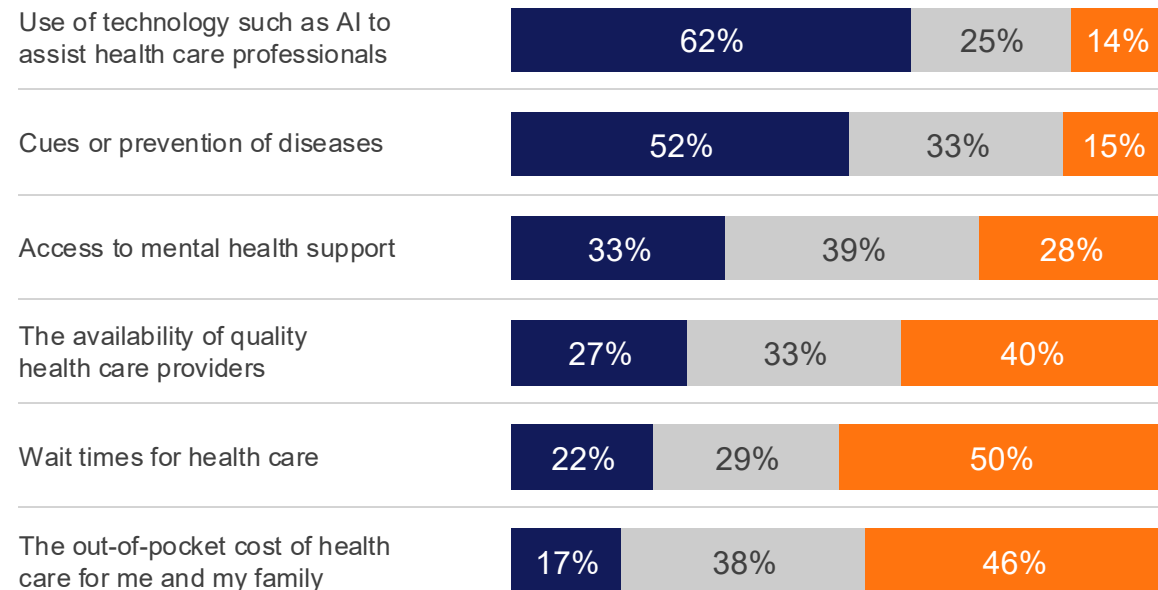
Shearer: Let's take Nova Scotia. They're evolving and innovating how care is delivered to better serve their population. We've partnered with the provincial government to make virtual care available through Maple's software as part of the publicly funded health system. That means people in Nova Scotia can access care on Maple whether they have a family doctor or not. For those waiting for a primary care provider, it helps fill an important gap. And for those who are already connected to the system, it offers another entry point. We're not replacing in-person care, we're complementing it, helping to extend the reach of the public system, and making it easier for people to get timely support when and where they need it.

Ridgway-Cross: Some critics describe Maple as “private care.” How do you respond to that?

Shearer: That binary — public vs. private — is outdated. Canadians access components of care through privately operated facilities. Radiology, electronic medical records, X-ray clinics and more are examples of how private providers are seamlessly integrated into our system. Yet they're considered integral to the health care system. Maple is no different. The real question isn't whether something is public or private. It's: Does the system work? The best global models don't get stuck in ideology; they focus on delivering modern care that meets people's needs. That's the lens we operate from.

From Breakthroughs to Bottlenecks: What Canadians Expect from health care Over the Next Decade

Q: How do you think the following will change over the next 10 years



■ Will get better ■ Will stay the same ■ Will get worse

Source: Ipsos What The Future: Wellness study conducted August 11-13, 2025, among 1,000 Canadian adults

Ridgway-Cross: You've said Maple "fills the cracks" in the system. Can you share an example?

Shearer: One story that really stayed with me: A hospital in Prince Edward Island was considering closure due to doctor shortages. It was a critical facility, the next option was hours away, and the local population was aging, so access to close care was essential. That hospital reached out to our CEO, Brett Belchetz, and he said, "Leave it with us. We'll figure something out." And we went to work on the problem.

We developed a model of "tele-rounding" where Maple practitioners, using digital tools, provided the same service that doctors typically deliver during hospital rounds. The rest of the hospital functioned as usual — but now with virtual physician support — provided by Maple. That hospital was able to stay open and serve its community with the same level of care, just with a different modality. That's what I mean by filling the cracks. We're not here to replace the system, we're here to help it work, especially where it's strained.

Ridgway-Cross: There is a lot of talk in the industry about a need to shift from reactive to proactive care. Does Maple play a role in that?

Shearer: One of the biggest drivers of cost in health care is that the system is largely designed to serve people

after they become very sick, rather than supporting them earlier. This, combined with Canadians' tendency to be polite and put others first, often delaying care so that those perceived as sicker can be seen first, means nearly 30% won't seek care unless it feels urgent. That has major downstream consequences. More visits to the ER, more complex health care issues, etc. With Maple, care is always accessible. We enable earlier conversations, earlier interventions. We're seeing a marked mindset shift, with more people wanting to take charge of their health. Maple gives them the tools to do that.

Ridgway-Cross: What role does AI play for Maple?

Shearer: It's already central to how we deliver care. One example is our AI-powered intake process. When patients log in, they describe their symptoms and AI organizes that information so that by the time a doctor sees the case, there's a clear, structured summary. That improves efficiency and satisfaction. It doesn't replace doctors, it equips them. And we're just getting started. We're exploring how AI can support patients proactively, connect across specialties, and serve as a constant partner in care.

Ridgway-Cross: So, is Maple a health care company or a tech company?

Shearer: Our "why" is health care. Our "how" is

technology. That's how we scale. It's why we invest so deeply in AI. Because it enables better access, quality and efficiency for patients, providers, and partners. Technology is the means. health care is the mission.

Ridgway-Cross: Fast forward to 2035. What does the future of care look like and what's Maple's role in that future?

Shearer: I hope by then we've fully shifted to proactive, patient-led health care. That change alone would have enormous ripple effects, not just for Maple, but across health care in Canada. Maple will play a central role in that shift: scaling our platform, partnering with governments, and using AI to deliver smarter, faster, more personalized care. We'll still be doctor-led, but we'll also be empowering a new kind of patient: one with agency, access, and support at every step of the journey.

Diane Ridgway-Cross leads Ipsos Strategy3's Canadian practice

53% of Canadians agree that virtual health care plays an important role in the health care system

Source: Ipsos What The Future: Wellness study conducted August 11-13, 2025, among 1,000 Canadian adults

Canada's AI Health Revolution Is Happening Without Canadians

The Canadian government and Canadian businesses are betting billions on AI to save health care — but the plan may be doomed to fail if they don't bring Canadians along for the ride.

While Ottawa commits \$2.4 billion to AI initiatives and health care leaders race to implement automated solutions, Ipsos data reveals a striking disconnect: 64% of Canadians are nervous about AI, and only 25% believe it will improve their health over the next five years.

This isn't just consumer skepticism. Even physicians are wary — 79% lack confidence in AI's ability to protect patient confidentiality. Yet Canada's Drug Agency declares AI adoption in health care "inevitable," particularly consumer-led technologies that will be "added to the system whether the system is ready or not."

The push is undeniable. Canada's innovation cluster, DIGITAL, has invested over \$200 million in AI health solutions since 2018, with July's \$15.3 million Health Compass II marking its largest health care AI commitment.

Minister of AI Evan Solomon recently announced the Regional AI Initiative which allocates another \$200 million for AI adoption across sectors including health care.

Meanwhile, the very people these systems are meant to serve remain unconvinced. While 85% of Canadians don't want to fall behind other countries in health care technology, they're simultaneously the most skeptical among 30 nations surveyed about AI's benefits.

This disconnect signals opportunity and risk. Your Canadian workforce and customers aren't anti-innovation — they're demanding transparency, privacy protection, and proof of value before embracing AI health tools. Companies that bridge this trust gap, acknowledging legitimate concerns while demonstrating tangible benefits, will unlock a market desperate for solutions but wary of Silicon Valley-style disruption. In Canada's cautious health care revolution, winning means earning permission, not assuming it.



Paul Acerbi is Senior Vice President and Lead of the Canadian AI Adoption Team at Ipsos

Sources: [Ottawa's Commitments](#) | [CDA-AMC - Horizon Scan 2025 Watch List: Artificial Intelligence in Health Care](#) | [Ipsos AI Monitor](#) | [Doctors Call for AI Regulation](#) | [Regional Artificial Intelligence Initiative](#)

How AI, Gaming, and Real-Time Data Are Shaping the Future of Youth Mental Health



Katherine Hay

President & CEO, Kids Help Phone

Katherine Hay leads one of Canada's most trusted lifelines for youth — and one that operates more like a tech start-up than a decades-old nonprofit. Under her leadership, Kids Help Phone (KHP) has evolved into a fast-moving digital platform, delivering personalized, always-on mental health support to millions of young people across the country. In this conversation, Hay shares how AI, gaming platforms, and real-time data are helping KHP meet kids where they are and why the future of youth wellness depends on building connection, not just care.

73%

of Canadians agree that mental health is one of the biggest challenges facing young people today.

Source: Ipsos What The Future: Wellness study conducted August 11-13, 2025, among 1,000 Canadian adults



What the Future interview with Katherine Hay

Mike Colledge: Can I start by asking you about your role as CEO of Kids Help Phone?

Katherine Hay: It is the most important role I have ever had. My journey to get here was not a linear path. I started my career as a banker. When we moved to Sao Paulo, Brazil, I gained a keen interest in doing something less corporate. Alongside the Consul General, I co-founded the Canadian Foundation to raise money for children affected by HIV/AIDS. I discovered that raising \$1,000 for this cause was infinitely more fulfilling than closing million-dollar deals as a banker. When I returned to Canada, that experience set my path firmly in the not-for-profit charitable sector.

Colledge: For those who don't know much about Kids Help Phone can you tell us about the mission?

Hay: Many people think we're just a helpline for youth mental health, but the depth and breadth of Kids Help Phone are far greater. Everything we do is through technology and virtual care, and our work is changing at warp speed because of technological advancements and an increasingly complex world. We've been doing this work for 36 years, but we run like a 36-year-old start-up, in a state of constant evolution.

In short, Kids Help Phone is Canada's only 24/7, coast-to-coast-to-coast, multi-lingual e-mental health solution for young people. At 2:00 in the morning, we are the only game in town for a young person in crisis.

Colledge: Can you tell us a little bit more about the evolution of Kids Help Phone?

Hay: A pivotal moment came seven years ago when we began leveraging our extensive data holdings—the real-language conversations we were having with youth—and integrated AI and machine learning into our operations. We transformed into an innovation-driven technology charity with a laser-sharp focus on youth mental health. Our access to real-time data gives us a profound understanding of what is happening, allowing us to play a significant role in the broader mental health ecosystem. We now sit at policy-making tables, not just on behalf of a helpline, but as the voice for the thousands of kids we talk to every day.

This shift in our thinking in 2018 changed everything, from how we organized our front lines to our approach to reaching equity-seeking populations. What we didn't realize at the time was that we were preparing for COVID-19. When the world shut down, we were ready to scale, and we scaled again and again.



Since the beginning of the pandemic, we have had more than 22.5 million interactions with young people from every corner of the country.”

Colledge: Why do you think mental health has become such a widespread and urgent issue, not just in Canada, but globally? How did the pandemic play into this?

Hay: The crisis existed long before COVID-19. In 2019, we interacted with young people 1.9 million times, a 30% increase from the previous year. That same year, Canada had the third-highest youth suicide rate in the industrialized world; today, we are fourth. When we talked to leaders in 2019 about the youth mental health crisis, we never called it a new phenomenon. This country and the world have been dealing with these challenges for decades.

Answering *why* we have a mental health crisis is almost impossible. People ask for a reason because they believe if we know the cause, we can fix it. But the "why" is far more complicated. These mental health challenges are a fact of modern life, which is why services like Kids Help Phone are so critical. Today, these challenges are embedded in every single community. We hear it every day from Canadians aged 5 to 28. The issues range from "I failed a test today" or "I can't get along with my parents" to "I think I'm gay," "I'm being sex-trafficked," to "I'm self-harming."

We are here for absolutely everything, and that is our unique proposition. We're not just a bully line or a suicide line; we're an everything line. We then underpin our services with incredible technology and a clinical methodology that nobody else is using right now.

Colledge: What do you see as the forces shaping emotional well-being and mental health today? Any thoughts on gaming or social media?

Hay: Gaming is a challenge. It can be a creator of isolation, but it is also a powerful point of connection. Removing it isn't realistic, just like the "just say no to drugs" campaign didn't work. For many young people, gaming is their language and taking it away could isolate them further. Our philosophy has always been to go where young people are, so we are working with gaming companies to embed mental health support directly inside their games.

We know that boys and young men don't reach out to services like ours in the same way young women do, and they certainly aren't going to leave a game mid-match if they are feeling bullied. As a pilot, we placed a non-playable character in Roblox that offered words of hope and encouragement. It generated over 100,000 interactions. Now, we are working with

companies to build our full services directly into their platforms.

As for social media, many young people contact us because of their interactions there. Social media runs on algorithms, and some of those algorithms point directly to the issues we help young people with, such as body image. The algorithms are simply doing what they were designed to do. I know companies are working on this, and I appreciate the efforts of those trying to solve these problems. I believe social media companies can and must be part of the mental health solution by using their own powerful designs. It's not only a moral imperative but also a good business decision—the kids of today are their future clients and employees.



We are here for absolutely everything, and that is our unique proposition. We're not just a bully line or a suicide line; we're an *everything* line."

Colledge: You mentioned technology and that Kids Help Phone was never just a phone line. Can you talk more about this?

Hay: Yes, that's our 36-year-old start-up mentality. You can't be afraid of digital, social media, or AI. We know that if we don't keep evolving with technology, we will no longer be relevant.

However, it's not that hard to build a chatbot for mental health; someone could code one in their basement. That is why it is critical that these services are built on the latest clinical knowledge. Kids Help Phone was the first to launch a "stepped-care model" in Canada's e-mental health space. We organize our services across different steps, where the highest step corresponds to the highest acuity needs and the lowest offers more self-directed content.

But just like the technology, the care itself must evolve. Ultimately, we believe we should be able to build a unique, personalized wellness environment for each user, where they can assemble what they need. This is another area where we are working with gaming companies—to build a platform for youth to create their own support system. They may need Kids Help Phone, but they might also want a program from Big Brothers Big Sisters. If a major stressor is paying

for university, they could add a financial literacy component. We must build this in a way that ensures clinical efficacy, proper oversight, confidentiality, and data sovereignty are all in place. This is the future, and it's not 10 years out; it's closer to three years away.

Colledge: One final question, what does success look like in the future?

Hay: Mental health challenges are not going to disappear. While not every young person in Canada will need intensive mental health services, almost every one of them will need some help at some point. For us, success is about our reach. It's about making sure that every single kid in Canada knows that if they need help, they know how to reach us. That would be success for Canada.



Mike Colledge is Sustainability and Executive Insights Lead at Ipsos Canada



To help young people find the support they need, Kids Help Phone recently launched Resources Around Me — Canada's largest navigation tool, connecting youth, families, and communities to over 40,000 trusted programs and services online and in their area.

Your Biology Holds The Blueprint For Aging Well. How Tech Is Finally Decoding It.



Sameer Dhar

Founder & CEO, NiaHealth

Sameer Dhar's mission is deeply personal — born from an experience that gave him a profound perspective on the end of life: living for 12 months in nursing homes to inform his first start-up. That journey sparked a desire to help people live healthier for longer.

Today, Edmonton-born-and-bred Dhar is the founder and CEO of NiaHealth, a start-up using advanced diagnostics, longevity-trained clinicians, and personal health data to help shape the future of health in Canada and beyond — a future centered on prevention, personal empowerment, and scalable, tech-enabled care.

In this conversation, Dhar shares the catalyst behind NiaHealth, its role as a responsible actor within Canada's proactive health care landscape, and his vision for a globally relevant "Health Nation" — starting from Canadian roots.

What the Future interview with Sameer Dhar

Rama Zuñiga: What was the catalyst that made you realize aging well was a problem you wanted to solve?

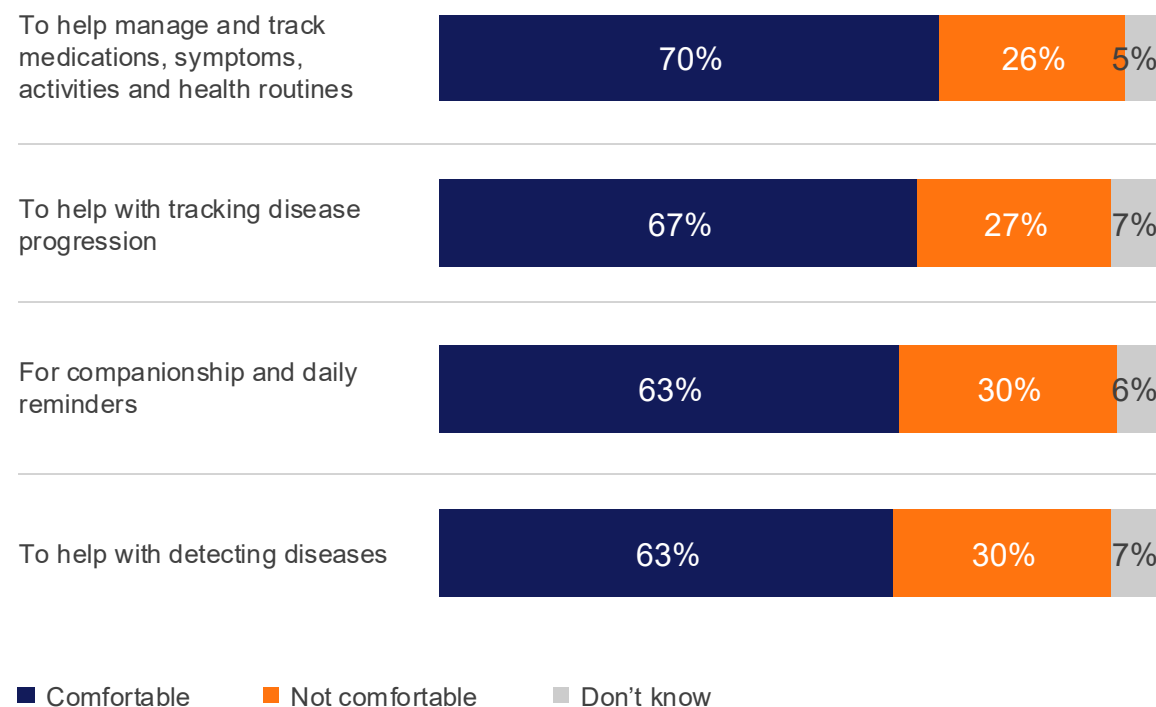
Sameer Dhar: I previously built and sold a company in the elder tech space and, as part of that journey, I lived in nursing homes across North America for 12 months. That experience sparked a fundamental question for me: "How do we keep people healthy as long as possible so that maybe there's no need for that kind of end-of-life institutional-type living?"

Another catalyst was reading the book *Outlive* and realizing this was a convergence of multiple movements. You've got the longevity movement, which Peter Attia did a great job of translating into consumer-friendly language backed by credible, evidence-based science. You've got an increasingly engaged consumer who's looking for solutions now. And post-COVID, people globally have shown that they want to own their health outcomes. In Canada alone, we know that 39% of Canadians own/use fitness wearables. That confluence made me want to go deeper.

Zuñiga: Tell me about NiaHealth and how it addresses the gap between reactive care and proactive health?

Dhar: We've built what we believe is Canada's leading proactive health platform. It starts with making advanced diagnostics — like blood panels, DEXA scans, and even continuous glucose monitoring — truly accessible. We then combine that with wearable data and medical history to create a full picture. But the key is our 'clinician-in-the-loop' model. Every report is reviewed by a licensed nurse practitioner, who helps translate data into action. Our platform is designed to answer the big question: "How do you not only start a health journey but sustain it for life?"

Q: How comfortable, if at all, would you be using technology (e.g., wearables, AI tools, smart devices, etc.) in the following ways related to your health care as you age?



Source: Ipsos What The Future: Wellness study conducted August 11-13, 2025, among 1,000 Canadian adults

Zuñiga: You emphasize the "clinician-in-the-loop." How does that human element make NiaHealth different from other platforms?

Dhar: A common piece of feedback we get from customers who have tried competitors in the U.S. is, 'I got a whole bunch of numbers, but I didn't know where to begin.' Our experience is fundamentally different. We start by having a human clinician prioritize your results into the top three or four actionable recommendations, explained in a human way. Then, we provide a 30-minute one-on-one signature consult with that same clinician to co-create your health plan. That human clinician-in-the-loop approach is the special unlock that turns information into real change.

Zuñiga: Building a health start-up in Canada comes with unique challenges, especially within a single-payer system. How have you approached being a "responsible actor" in this space?

Dhar: We knew from day one that we couldn't just exist outside the system; we had to work with it in the best interests of Canadians. We designed our platform to bridge the gap. When a client's results require medically necessary attention, we provide them with a letter for their doctor that outlines the findings from accredited labs, all based on Canadian guidelines. This empowers the patient to have a more informed conversation with their provider.

It's not about replacing the system but complementing it, to make it work better for the individual. That was part of our ethos from the start.

Zuñiga: You've successfully raised capital in a challenging market, with your lead investor starting out as a customer. What does that say about your vision and the opportunity for Canadian start-ups?

Dhar: Matt Golden was a customer from the moment we began as an organization. He saw the evolution of the product and experienced the personal impact of proactive care. That lived experience shaped his conviction and his decision to lead the round.

We're proudly building a Canadian-first story, but our vision extends beyond our borders. Canada isn't always known for exporting its homegrown innovations, but we want to change that. It would be an amazing thing if, 10 years from now, something built in Canada was benefiting people globally. I want Canada to be a 'Health Nation.'



I was always healthy, but NiaHealth helped me highlight unknown health risks — and as a result, I worked with the NiaHealth clinician team to make lifestyle interventions that ended up reducing my risk of diabetes by more than half upon retesting.

The data was powerful, but it was the human clinical guidance that made it sustainable. That's when I knew: this isn't just another health start-up. It's a movement that should benefit all Canadians and Golden Ventures needs to be a part of it."

– Matt Golden
Investor, NiaHealth

Zuñiga: What does the future of wellness look like to you?

Dhar: The future is about empowering people with the information they need to make decisions about their health and prevent disease before it happens. It means taking matters into your own hands before your health begins to decline. This isn't just a trend; we see it as an inevitable evolution in how we manage our well-being.

Tracking health should be as easy as tracking a bank account. Canadians track their finances in real-time — credit scores, investments, spending. Health data should be just as intuitive and actionable. A single dashboard. Real-time trends. Smart alerts. No confusion. We plan for everything, except our health. Life is full of plans: retirement savings, mortgages, major milestones. But long-term health planning is still missing. The future demands tools that help people forecast and shape their health trajectory with the same intention.

Zuñiga: A big part of that future seems to be about sustained change. How does NiaHealth help people stay on track?

Dhar: That's the core of the challenge. Getting a report

with numbers isn't enough to drive behaviour change. We focus on making the next steps clear and achievable. By prioritizing the top three or four most impactful actions — and supporting them through ongoing consultations with our nurse practitioners who provide coaching and accountability — we reduce complexity and increase follow-through.

For example, 25% of our members were flagged for prediabetes. In response, we introduced continuous glucose monitoring as a way to make metabolic health visible and actionable. Every feature we build is designed to help people take the next step and the one after that.

Zuñiga: Looking ahead, what is the ultimate vision for NiaHealth's impact on the future of wellness?

Dhar: In the next ten years, we want to have made a material impact on millions of people's lives. Millions of stories of individuals owning their health in a way they never thought possible — regaining energy, preventing disease, and fundamentally improving their quality of life.

At the same time, we're committed to working with the public system. We want to prove that a responsible, patient-first, tech-enabled proactive health model can

scale. And ultimately, we want to help write the next chapter of health — one that starts in Canada and benefits people everywhere.

Zuñiga: Finally, when you talk about your mission, you often mention accessibility. What does that mean to you?

Dhar: I'm not excited about building something for rich people. What gets me up in the morning is the chance to move the needle on population health proactively. Our goal is to reach millions of people. That's why we're laser-focused on driving access — using technology to become the most efficient prevention provider in the country, ensuring the human clinician is in the loop, and offering our services at the most accessible price point possible. That's the journey — and the future — we're committed to building.

Rama Zuñiga is a Senior Engagement Lead for Ipsos Strategy3 in Canada

From Waiting Rooms to Early Warnings: The Cultural Shift Toward Prevention

The centre of gravity in health care is shifting from treatment to prevention, with proactivity increasingly shaping decisions in Canadian households and clinics alike.

Nearly eight in ten Canadians (79%) now see lower costs as directly linked to early, preventative action — reframing health less as repair and more as planning.



79%

of Canadians say the best way to reduce health care costs is to invest more in prevention

Source: Ipsos What The Future: Wellness study conducted August 11-13, 2025, among 1,000 Canadian adults

This shift is already visible in behaviour. Visits to primary care remain steady, but adoption of continuous monitoring and AI-assisted detection is rising. Canadians are comparison-shopping wait times, saving transcripts from virtual consults, and using home devices to track sleep, blood pressure, and glucose. Pharmacies are becoming first stops for vaccines and minor ailments, while family group chats now double as informal care dashboards.

Prevention is also moving beyond the clinic. Canadians increasingly frame diet, exercise, and sleep as frontline health care, while growing interest in genetic testing and biomarker panels points to earlier, more personalized risk detection. Employers and insurers are reinforcing this trend, offering incentives for wellness programs and screenings to curb downstream costs.

Anticipating delays, many are “pulling care forward” — from at-home tracking to virtual check-ins — to improve outcomes. Headlines often highlight acute crises, but the quieter trend is cumulative: Canadians are not opting out of the system; they are moving upstream within it.

Together, these behaviours signal a cultural inflection: Canadians are redefining health not as a moment of crisis, but as an ongoing act of prevention. The prevention mindset is no longer peripheral — it is steadily reshaping expectations of care, and in time, the very architecture of the health system.



Rama Zuñiga is a Senior Engagement Lead at Ipsos Strategy3 in Canada.

How The Best Companies Are Putting Care At The Core Of Productivity



Paula Allen

Global Leader of Research, Insights & Strategic Communications at TELUS Health

As the boundary between work and life continues to blur, and as health risks grow more complex, employers are facing a new mandate: care for the whole person. Paula Allen has spent her career tracking that evolution — from clinical mental health to corporate well-being to global research. Today, as Global Leader of Research, Insights, and Strategic Communications at TELUS Health, she's helping organizations navigate the future of work and well-being.

TELUS Health now supports more than 150 million people across more than 200 countries and territories, making it one of the largest providers of employer-based well-being services in the world. With a focus on prevention, personalization, and research-backed care, the company is helping reshape how health care is accessed and understood.

In this conversation, Allen shares why benefits as we used to know them are losing relevance, what's driving the next wave of innovation, and how AI and mental health will redefine what it means to care for employees in the years ahead.

What the Future interview with Paula Allen

Diane Ridgway-Cross: You've worked at the intersection of mental health, corporate wellness, and now global research. What perspective does that give you on where workplace care is headed — and what needs to change?

Paula Allen: My career started in mental health, working with kids and families. That gave me a systems lens early on, which I carried through as I moved into disability management, well-being strategy and now research. What I see today is that health isn't something we can treat by isolating a specific issue when a problem occurs anymore. The work environment, life circumstances, access to tools — it's all connected. The future of care, especially in the workplace, has to reflect that. It needs to be whole-person, personalized and proactive.

Ridgway-Cross: That systems view feels especially urgent now — not just because of what we've been through, but what's ahead. What's driving the broader shift in how employers are thinking about their role in health?

Allen: The pandemic was a turning point. During COVID-19, the connection between well-being and business performance became undeniable — and that truth still holds today. If your people aren't well, your business won't be either.

At the same time, employee expectations are rising. Employees today want more than a safety net — they want to feel better because they work for you. And employers are realizing that when they invest in real support — mental health, financial tools, caregiving resources — they get more back. Not just in retention and illness cost prevention, but in innovation, energy, and creativity.

Ridgway-Cross: What does that mean for traditional benefits models? Are they keeping pace?

Allen: We're seeing a sharp decline in satisfaction with conventional benefits. Dental and paramedical benefits are still important, but they've come to be expected. What people want now is tangible, everyday support that reflects the realities of their lives like emergency savings, caregiver flexibility, tools for mental health and resilience. And not just for themselves, but for their families.

Ridgway-Cross: Caregiving feels like a pressure point that's only going to intensify. How should organizations be thinking about that?

Allen: Caregiving is absolutely a pressure point. We have an aging population, longer life expectancies and people having fewer siblings. That means more people caring for aging parents, often while raising kids and managing full-

time jobs. Employee support for caregiving needs to go beyond flexible hours. It means benefits that cover caregiving expenses, mental health support for the caregiver and recognizing that this is a long-term trend, not a temporary strain. If organizations don't plan for this, they will lose people — especially women and younger workers.

Wellness at Work: Gen Z Expected to Raise the Bar on Employer Benefits

Q: How much do you agree or disagree with the statement:

I believe Gen Z will push employers to expand health and wellness benefits beyond what's offered today



■ Agree ■ Neither agree nor disagree
■ Disagree ■ Don't know

Source: Ipsos What The Future: Wellness study conducted August 11-13, 2025, among 1,000 Canadian adults

Ridgway-Cross: When employees are carrying an invisible load — whether it's caregiving stress, financial worry, or mental strain — it's not just a personal issue. It affects how they show up at work.

Allen: Exactly. You can't expect people to innovate, collaborate, or operate at their full potential if their mental energy is consumed by anxiety. One of the smartest things an organization can do right now is invest in psychological safety — removing unnecessary clutter from the work culture so people can think clearly, connect and perform at their best.

That's why we at TELUS Health advocate for mental health globally — because it's the foundation. We're now the largest provider of employer-based mental health and well-being services in the world, operating in over 200 countries and territories. In every one of these regions, we see how good mental health unlocks everything else, from productivity to retention to long-term health outcomes.

Ridgway-Cross: Your global footprint gives you a unique vantage point. Are you seeing differences in how mental health is valued across regions or is the world converging around a new baseline?

Allen: Around the world, different regions prioritize different facets of health, but mental well-being is

increasingly cutting across all of them. Mental health is foundational. You can't optimize any other aspect of well-being if that piece is missing.

Ridgway-Cross: Meeting people where they are requires a new kind of responsiveness and, increasingly, that's where technology comes in. How do you see AI shaping the future of care?

Allen: AI is already transforming how we deliver care — it's improving intake, triage, even helping match people to the right kind of support. But AI's real potential is in prevention. There is technology to detect early signs of mental or physical strain before someone even realizes they need help — through communication patterns, movement data, even writing style. The key is putting that power in the hands of individuals. When someone can get an early signal and take action or be nudged toward support — that's where AI becomes a true health partner, not just a tool.

Ridgway-Cross: That really shifts the model — from care delivered to someone, to something they participate in. What will it take for organizations to enable that shift?

Allen: I believe we're moving toward a future where care isn't something done to you — it's something you co-create, using the right resources to shape what truly

works for you. With the right insights, the right support and the right environment, people can take more ownership over their health.

Employers are part of that environment. In many cases, they're the front line. And that's where we see the biggest opportunity: to shift from reacting to crisis, to building a culture where people are empowered to thrive.

Ridgway-Cross: Looking ahead to 2035, what does that culture look like? What becomes the new baseline?

Allen: I hope we've moved fully beyond the old model of "benefits as a checklist." I see a world where well-being is truly built into one's life and culture of business — where personalization, mental health, financial wellness, and AI-driven prevention are table stakes. Where support is continuous, not episodic. And where the role of the employer isn't just to cover the basics, but to help people optimize their potential at work and in life.

Diane Ridgway-Cross leads Ipsos Strategy3's Canadian practice

71%

of Canadians agree that employers should offer more support for workers who are also providing caregiving to loved ones.

Why The Menopause Revolution Matters



Monica Christmas, M.D.

Associate medical director, The Menopause Society

Menopause, when women stop having a full period for a full year because their ovaries stop making estrogen, has vaulted from taboo to hot topic. It's sparking widespread discussions and celebrity-endorsed products that could create a \$600 billion market by 2030. Dr. Monica Christmas, Associate Medical Director for The Menopause Society, welcomes this shift as an opportunity to advance women's health care by addressing misinformation and developing personalized care.

22%

of Canadians agree that the health care industry is investing sufficiently in women's health.

Source: Ipsos What The Future: Wellness study conducted August 11-13, 2025, among 1,000 Canadian adults





What the Future interview with Dr. Monica Christmas

Kate MacArthur: What do we know about menopause today?

Dr. Monica Christmas: It's a natural process that 50% of the population is going to go through if they are lucky to live long enough. By age 55, 95% of women will have reached the definition of natural menopause. We start to experience symptoms related to hormonal fluctuations up to seven to 10 years before those periods actually stop. And that time frame is called perimenopause.

MacArthur: Besides our aging population, why are we talking about menopause so openly now?

Christmas: Social media plays a big role. Unfortunately, there's not a lot of regulation around who's disseminating that information and not enough checks and balances. So much of the information out there is not all true.

MacArthur: What's the biggest myth you've heard?

Christmas: I get patients who are perimenopausal and they're demanding hormone therapy. That's where the myth part comes in: That hormone therapy is being withheld from us, that it's got all these magical properties. It's the antidote to aging. It's going to make me skinny. It's going to make my hair stop thinning. It's going to make my skin less wrinkled. I'm going to have more energy. I am a

strong proponent and prescribe a lot of hormone therapy, but it is not a magic jellybean.

MacArthur: Is this new awareness shaping how people think about long-term health care?

Christmas: It should be. It's not just one thing or looking at people in a silo, but comprehensively assessing an individual patient, looking at what their other risk factors may be and what their symptoms are.

MacArthur: What's the opportunity for understanding how menopause affects women's long-term health?

Christmas: It's very difficult to disentangle what is truly due to menopause versus what is due to chronological aging. And that's an important part of this because men experience things, too. This is a natural part of aging, and we don't have a way to halt or stop the aging process. And there's not one menopause syndrome that every single person gets. There are some people who get very few, if any, symptoms and sometimes only during that menopause transition. Then there are other people who have every possible symptom under the sun.



It's very difficult to disentangle what is truly due to menopause versus what is due to chronological aging."

MacArthur: How can technology help?

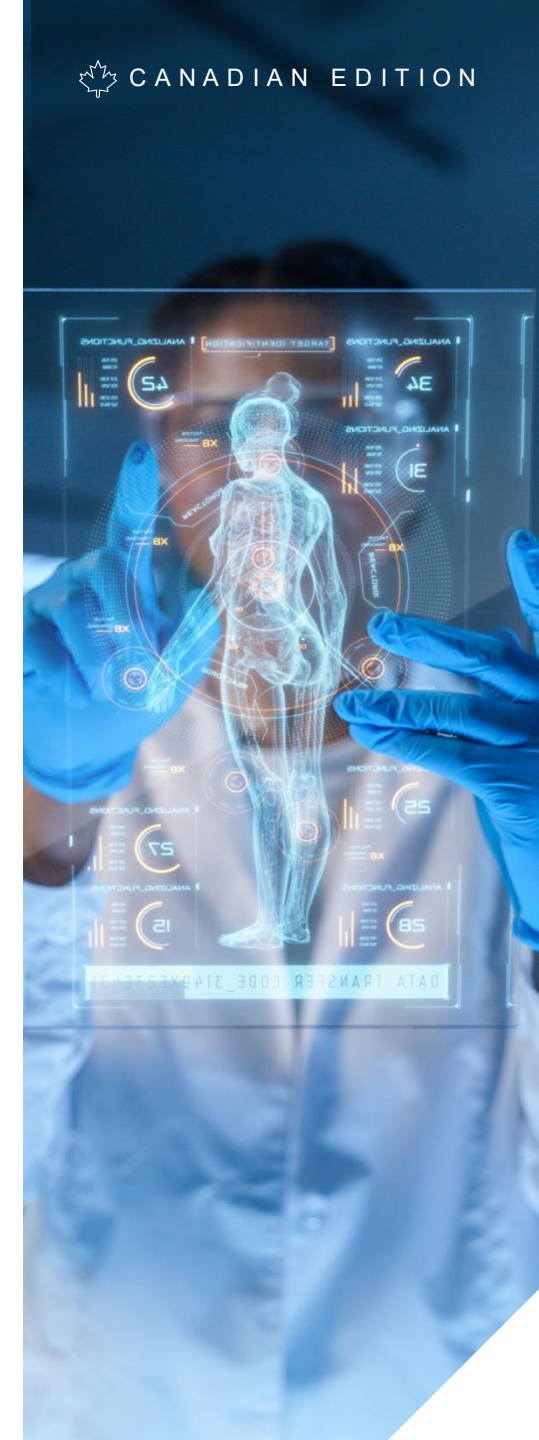
Christmas: Is there opportunity for the tech world to create whatever to help motivate people or to help them continue to track exercise or novel ways of burning fat or address that known issue that is just a normal fact of aging? How do we prevent osteoporosis by using weight-bearing exercise to maintain our good muscle, our bone density? Is there some device that gives you in real time what your bone density is? I've seen a device that could be attached to the skin that measured body temperature and emitted a cool stimulus throughout the body before the hot flash happened. Is there a way to preserve ovarian function? Can we freeze parts of the tissue and then reimplant them later?

MacArthur: What role could businesses have?

Christmas: I can offer somebody treatments for whatever they're experiencing. However, if their insurance doesn't cover any of the treatment options, and they're cost-prohibitive, then everything we just discussed was for naught. Especially for midlife women's health, hormone therapy, for example, isn't always covered for a woman.

As for products, I recently was sent information on a non-hormonal, moisturizing device to help vaginal dryness and painful intercourse. The company also made an apparatus to help with urinary incontinence and uterine prolapse. Both were over-the-counter and could be purchased without a prescription. New non-hormonal treatments for hot flashes and night sweats are being developed, one of which will be on the market soon. Genomics is opening a new world of treatment and preventative strategies. With funding and support, the opportunity for women's health care advancement is endless.

Kate MacArthur is Managing Editor of What the Future in the U.S.



In Case You Missed It... You're Already in the Wellness Business

Brands that act with intention will thrive. The rest risk irrelevance.

Wellness is no longer confined to gyms, spas, or supplements — it now extends to banks, department stores, and tech companies alike. From creating in-store relaxation spaces to designing financial tools that ease anxiety, brands across unexpected sectors are waking up to a powerful reality: they are part of the global wellness economy. Already worth more than 6% of the world's total output, this market is projected to grow 7.3% annually — far outpacing global GDP (Global Wellness Institute, Wellness Economy Report, 2024).

The pandemic accelerated this shift, forcing a collective reckoning with health and bringing mental, physical, and emotional well-being into sharp focus after years of gradual buildup.

Whether you sell software, clothing, or coffee, your brand leaves a mark on people's well-being. A cluttered store layout raises stress; a thoughtful one creates calm. A customer service call can drain someone's energy — or restore their confidence. Every touchpoint tips the balance of a customer's mental and emotional load.

With the rise of the wellness economy, consumers have become far more discerning. They don't just want to buy a product — they want to feel better for having engaged with your brand. And wellness-washers beware: superficial gestures no longer cut it. People can spot the difference between a marketing campaign and a genuine commitment in an instant.

This is no longer a marketing play; it's a mandate. Every brand already leaves a wellness footprint, and in an era of scrutiny, consumers are measuring it. Loyalty won't be built on transactions, but on proof that you make people's lives better. The choice is simple: lead with intent — or risk being left behind.



Karen Tilley is a Senior Vice President and Senior Client Officer with Ipsos Canada.

From Sleep to Sanctuary: How Home Is Becoming the New Wellness Destination



Danyal Syed Ali

Consumer & Customer Insights Lead, IKEA Canada

Danyal Syed Ali is in his fourth year leading the Consumer and Customer Insights team at IKEA Canada, with a broad mandate: fill any gaps in the organization's understanding of the consumer, spanning from the online shopping experience to the evolving role of customer support. In this conversation, he explores IKEA's commitment to democratic design, its growing focus on sleep, and how the company is approaching health and well-being — both in Canadians' homes and within its own walls.

87%

of Canadians who agree "My home environment has a big impact on my mental and physical health."

Source: Ipsos What The Future: Wellness study conducted August 11-13, 2025, among 1,000 Canadian adults

What the Future interview with Danyal Syed Ali

Charles Leech: Let's begin with the role of the home. The pandemic radically reshaped how we relate to our personal space — but now that the dust has settled, how do you see the home continuing to evolve, especially in supporting well-being?

Danyal Syed Ali: We've been running our Life at Home study across global markets for more than a decade now. It's designed to deepen our understanding of how people are living today and to track changes over time.

When it comes to emotional needs, what's interesting is how consistent those needs have been. In our most recent Canadian results, the top three emotional needs people seek from their home are still comfort, enjoyment, and nurturing — just as they were before COVID.

That tells us something. Whether it's a global pandemic or an affordability crisis, people continue to rely on their home as a safe haven. So, the challenge for IKEA becomes: How do we help the home live up to that role? How can we ensure our products, design, and services continue to deliver on those core needs through the home? That's where our focus is.

Leech: Wellness is such a broad concept. Does IKEA have a formal definition or a shared philosophy for what it means to support well-being?

Ali: We don't have a formal, fixed definition and I think that's intentional. It would be too limiting. But what we do have are two strong pillars that guide us: the customer and the co-worker.

For the customer, we focus on how we help people create spaces that support their emotional, physical, and mental well-being. For our co-workers, we are always thinking about how we show up as an employer to support the health and wellness of our people.

We want to be perceived as a company that promotes wellness externally but also lives it internally. If we're going to be that kind of company for customers, we need to be that same company for our 7,000+ employees here in Canada and around the world. Not just in one store or one region — but across all our markets, globally. That consistency matters.

Leech: Once upon a time, status symbols tended to be luxurious consumable consumer goods, but of course now, when we think about the status symbol of 'wellness', we do tend to think in terms of the more holistic, almost spiritual aspects that are coming to the fore. Tell me a little bit about how IKEA engages with that idea, and any expectations it might set in your particular world.

Ali: One of the central components of our ethos is what we call democratic design. It's the foundation for how we develop our products — ensuring they integrate across five core dimensions: function, form, quality, low prices, and sustainability.

These principles aren't just part of product design — they flow through how we design our spaces, how we communicate in-store, and even how we approach delivery and fulfillment. Because sustainability is baked into the model, wellness and environmental impact are naturally embedded, too.

This philosophy has been part of IKEA for a long time — not just the last five or ten years — and it's how we make good design accessible to many people, not just a few.

84%

of Canadians agree that they see their home as a sanctuary for recovery and well-being.

63%

of Canadians agree that, in the future, they would like their home to include more features that support their health.

Source: Ipsos What The Future: Wellness study conducted August 11-13, 2025, among 1,000 Canadian adults

Leech: One of the most tangible — and universal — aspects of well-being is sleep. IKEA has been leaning into sleep in a big way. What prompted that focus?

Ali: Yes, there has been a very conscious focus on sleep — and with good reason. It's a global issue. Poor sleep doesn't discriminate — it affects people of all ages, cultures, and backgrounds.

What's exciting is how uniquely positioned IKEA is to help. We're not just offering a mattress or a pillow — we're offering a complete ecosystem for better sleep. From blackout blinds to air purifiers, we're working to make IKEA a true one-stop shop for sleep wellness. And importantly, at a price point that keeps it accessible.

Leech: You mentioned earlier that wellness isn't just for customers — it also needs to be reflected in how you support employees. What does that look like in practice at IKEA?

Ali: It's something I care about deeply and something we've been investing in more actively. Most recently, I've been involved in launching a new Co-Worker Resource Group focused specifically on wellness. It builds off our annual iShare survey, which gives employees a voice on everything from workload to psychological safety to having the right tools and support. We take that feedback seriously. We want to be transparent about what's working, what's not, and what we're going to do about it.

What's encouraging is that despite having 16 stores across very different communities, we've built a remarkably consistent culture. We have one of the lowest co-worker turnover rates in Canadian retail — and I think our wellness program plays a meaningful role in that.

Charles Leech is a Senior Vice President in the IUU Qualitative practice with Ipsos Canada

95%

of Canadians agree that getting enough quality sleep is just as important for your health as diet.

50%

of Canadians say that sleep is one of the areas of their health that they struggle with the most.

Source: Ipsos What The Future: Wellness study conducted August 11-13, 2025, among 1,000 Canadian adults



If Wellness Is A Place, Could Canada Be Where The World Comes To Find It?



Susan Dong

Executive Director of Brand, Destination Canada

Susan Dong joined Destination Canada in May 2022, just as the world — and the tourism industry — was emerging from the pandemic. Her mandate: help re-establish Canada's role in the world, defining how the country shows up as a global tourism brand.

In this conversation, Dong shares how the organization's new brand platform, *Canada Naturally*, reflects on Canada's "openness" and how that ethos is shaping the evolution of wellness travel and the rise of regenerative tourism that helps travellers and communities thrive together.

44%

of Canadians say that when they travel, they try to prioritize destinations that support their health and well-being.

Source: Ipsos What The Future: Wellness study conducted August 11-13, 2025, among 1,000 Canadian adults

What the Future interview with Susan Dong

Carla Flamer: You stepped into Destination Canada at a pivotal moment for the industry — the world was just reopening, and the rules of travel were being rewritten. How did you go about redefining Canada’s global brand, and where have you concentrated your efforts so far?

Susan Dong: I joined early post-pandemic, just as people were finding their way back to travel and the industry was regaining its footing. It was a moment to redefine and re-establish Canada’s role in the world — thinking about how we position the country for global tourism and global travellers. My focus from the start was on articulating our brand positioning and guiding how we present ourselves in the nine global markets where we actively engage.

In my first couple of years, we did a lot of internal reflection, clarifying what makes this brand both uniquely Canadian and distinctive in the world. Over the past year, the focus has shifted to asking: now that we know who we are and what we’re about, how do we make sure we’re showing up in ways that are truly relevant to the travellers who are interested in Canada?

Flamer: Beyond brand positioning, what’s your view on the state of Canada’s tourism industry

today? Where are we emerging strongest, and where do we have work to do?

Dong: Tourism in Canada is an incredible industry that is seeing rapid growth and high returns. In fact, Canada’s tourism sector grew twice as fast as the broader economy last year. It’s our job to sell Canada to the world by bringing together provinces, territories, cities, and sectors as a unified “Team Canada” on the global stage. Our greatest strength as an industry: our openness and ability to collaborate. That collaboration allows us to make the most of our national reputation and punch far above our weight in international markets.

As for where we have work to do, we must create brand differentiation in a highly competitive and unstable global marketplace. From a brand perspective, there is a lot of noise out there that consumers are sifting through every moment of their lives. How do we show up in places that matter to people who care? The media landscape is ever-evolving, at a faster rate than ever before. We don’t want to just keep up — we are poised to lead the global tourism industry by demonstrating how travel can be a force for good.

Flamer: As you’ve refined the brand, what’s the core ambition you’re trying to capture — the feeling or mindset that’s uniquely Canadian?

Dong: We believe Canada’s openness is what makes us truly distinctive. It’s found in our open minds, our incredibly warm-hearted people, and our open spaces — both within our cities and in the landscapes all around us. Our new brand platform, Canada Naturally, is rooted in that openness. It’s about creating a feeling that resonates with travellers who come to Canada — the warmth you experience when you’re here, the sense of connection to the land and the people. We want visitors to feel that and, perhaps, leave feeling a little more open themselves.

78%

of Canadians agree that spending time in nature is one of the best ways to improve one’s physical and mental health.

Source: Ipsos What The Future: Wellness study conducted August 11-13, 2025, among 1,000 Canadian adults

Flamer: You've described openness as central to Canada's brand. One of the fastest-growing areas of travel — wellness tourism, projected to surpass \$1 trillion globally this year — feels like a natural fit for that idea. How do you see wellness shaping the Canadian travel experience?

Dong: Wellness is definitely a trend in tourism; interestingly, our research shows it means different things to different travellers. For refined globetrotters, it might be a high-end spa experience. For outdoor explorers, it's about adventure — being in the great outdoors, taking on a natural challenge, both physically and mentally. For culture seekers, it's slowing down to connect with people and local culture — talking with Indigenous communities, learning history, and discovering stories they didn't know before. In many ways, that variety reflects Canada's openness — creating space for travellers to define wellness in a way that's meaningful to them.

Flamer: You're describing wellness in a way that goes far beyond the traditional emphasis on rest and exercise. How has that definition evolved?

Dong: Traditionally, wellness in tourism meant spa treatments and active pursuits. Now it's about feeling grounded, connected, and restored — and how you get there depends on who you are. For some, wellness is a

"drop and flop" vacation. For others, it's being guided through the mossy forests and rugged coastline of Haida Gwaii by someone sharing Indigenous stories passed down through generations.

Flamer: How has this broader view of wellness influenced the way you bring Canada's brand to life?

Dong: We prioritize stories that go much further and deeper than simply providing a list of spas. Even if it is a spa, that's just the starting point. It's about where it's located, how it connects you to the land and the community, and the ingredients or traditions surrounding that experience that make it unique. It's about going beyond the surface and really digging into what makes an experience authentic.

We also think about the supply side — we can't drive tourism demand without making sure the right kinds of experiences are here. That's where regenerative tourism comes in. It's not just about sustaining the status quo; it's about building back better, creating experiences that restore travellers while also leaving destinations better than they were before. That way, people find the renewal they're seeking, and communities are able to thrive for years to come.



For some, wellness is a 'drop and flop' vacation. For others, it's being guided through the mossy forests and rugged coastline of Haida Gwaii by someone sharing Indigenous stories passed down through generations."

Flamer: What gaps or challenges do you see in Canada's wellness tourism offering? If Canada wants to be a leader, what do we still need to work on?

Dong: One challenge is the definition of luxury. We don't have the same depth of five-star, white-glove luxury that some destinations offer. I think we're redefining what luxury means to the modern traveller. In Canada, luxury isn't about glitter or excess. It's about rare access to what the world has less and less of: space, openness, authenticity, and meaningful human connection.

Flamer: And what do you see as Canada's biggest strengths in wellness tourism today?

Dong: Wellness can come through culture, nature, food, or physical relaxation — and more often now, it's a combination. You might take on a challenging hike, then share a locally sourced meal prepared by the person who grew the ingredients, and you leave feeling... human. That's a truly holistic approach to wellness, and Canada is uniquely positioned to offer it.

Flamer: I'm going to change topics because I have to ask — recently, pop culture gave Saskatchewan

an unexpected spotlight. In her hit, *The Subway*, singer Chappell Roan name-checked the province, sparking a wave of online curiosity and tourism buzz. How do moments like that factor into your strategy?

Dong: We call that “trend-jacking.” It's fantastic to see Canada mentioned in popular culture — and the impact can be immediate. After *The Subway* was released, social media mentions of people toying with moving to Saskatchewan jumped 1,700%, and interactions with Tourism Saskatchewan's social channels rose 1,800%, generating nearly a million global impressions from the song.

If something like that fits our brand and what we want to be known for, we join the conversation. In this case, our partners in Saskatchewan hopped on it, and we invited her to visit. It's about showing up where people want to hear from us in a way that feels really authentic.

Flamer: Looking 10 years ahead, where do you see travel — and wellness travel in particular — headed?

Dong: I think destinations will become clearer about who they want to be and who they want to serve.

Travellers will have more tools — including AI — to find places that match exactly what they're looking for. That means stronger alignment between traveller and destination, and more opportunities for lesser-known places to shine.

When it comes to wellness travel, as the world stays stressful, people will keep seeking ways to step outside of it. Tourism is incredibly responsive, and I think we'll see experiences that meet travellers' wellness needs in ways they haven't even imagined yet — and Canada's diversity of landscapes, cultures, and communities will keep it uniquely positioned to deliver.

Carler Flamer is Chief Client Officer at Ipsos Canada

Is Food the Frontline of Future Wellness?

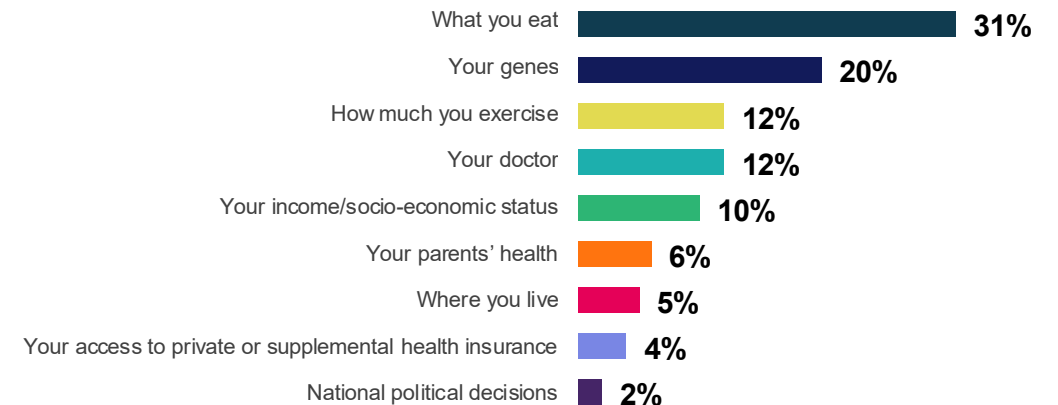
Over the next decade, nutrition will become more personalized, more functional, and more inclusive — reshaping how consumers, brands, and retailers define value.

Food has always been central to human health, but its role is expanding in new ways. For Canadians, eating well is the single most important factor influencing health and wellness — outranking genetics, exercise, income, and even access to doctors. Diet is not just one variable among many; it is viewed as the foundation on which other aspects of health are built.

This signals a profound shift in how people think about food. It is no longer seen as just fuel, but as a tool of prevention and performance, a measure of trust in how it is made, and a reflection of personal values and daily choices. Canadians are questioning not just *what* they eat, but *how* food is produced, how it supports long-term well-being, and how it connects to their identity. In doing so, they are positioning food as the front line of wellness — the most immediate and controllable way to take charge of their health.

Canadians Rank Diet as the Top Factor Influencing Personal Health

Please rank the following factors based on how important you think they are to your personal health.



Source: Ipsos What The Future: Wellness study conducted August 11-13, 2025, among 1,000 Canadian adults

6 Trends We're Watching in the Future of Food & Wellness

1/ Personalization at the Plate

What we eat may soon be dictated less by culture or taste and more by blood sugar spikes, DNA markers, and microbiome readouts. Tools like epigenetic tests, smart kitchen devices, and AI-driven nutrition apps are moving from the lab into everyday life, empowering consumers to tailor diets to their own biology.

This marks a pivot from “recommended daily allowance” to “recommended for me.” The challenge will be separating actionable insights from data noise, and ensuring personalized nutrition doesn’t become an exclusive luxury but a tool for broader health equity. That shift raises a sharper question: *Could personalized diets make the idea of a “shared meal” obsolete?*

2/ Tech-Enabled Nutrition

Increasingly, food is no longer just bought and eaten — it’s tracked, optimized, and shared. Younger consumers, in particular, are approaching nutrition through a digital lens, where continuous health monitoring, AI-driven meal planning, and TikTok recipe trends shape daily choices.

Grocery apps are syncing with wearables, smart kitchen devices are nudging healthier habits, and

biometric data is beginning to feed directly into shopping carts. Food is becoming less of a static product and more of a dynamic feedback loop — one that actively manages health. Which raises a provocative question: Will food decisions soon be outsourced to algorithms — and if so, who writes the code?

3/ Functional Foods: Far Beyond Fuel

Brain fuel, gut boosters, immune shields — once niche promises now line almost every aisle. Food is no longer just about taste or calories; it’s expected to perform.

Probiotics, nootropics, and other once-niche claims have moved from the fringe to the centre of the grocery store. Pantry staples, ready-to-drink beverages, and even snacks and sweets now carry functional claims, making “food as health tool” an everyday reality. The opportunity is clear, but so is the risk: as claims multiply, how can consumers — and retailers — separate credible science from empty promises? That tension prompts a bigger question: *If every food makes a health claim, how will consumers know what — or who — to trust?*

4/ Plant-Forward as the New Normal

Meat is no longer the unchallenged centre of the plate. Flexitarianism is steadily reshaping diets as plant-forward choices move from the margins into the mainstream. Dairy alternatives crowd refrigerated cases, frozen meals feature plant-based proteins, and quick-service restaurants are expanding menus beyond meat.

Lentils, chickpeas, and vegetables are also sharing the stage with next-generation proteins — from fermentation-derived ingredients to meat analogues that now compete directly with traditional staples. The question is not whether plant-forward eating will grow, but how deeply it will redefine what consumers consider “healthy” on the shelf. That shift raises a bigger provocation: *Could plant-forward diets reshape not just what we eat, but how we define health itself?*

**This marks a pivot from
‘recommended daily allowance’
to ‘recommended for me.’**

6 Trends We're Watching in the Future of Food & Wellness

5/ Rethinking Processing

Consumers are no longer just asking *what's in their food* — they're asking *how it was made*. “Ultra-processed” has become a red-flag label, drawing scrutiny from regulators and suspicion from consumers. Companies are racing to clean up ingredient lists, simplify formulations, and market foods that feel closer to the kitchen than the factory.

But reformulation may be only a first step. The bigger opportunity lies in reinvention — from cold-pressed juices and fermented products to regenerative agriculture and clean-label packaging — reimagining how foods are produced, packaged, and experienced in ways that align with modern health expectations. Which raises a sharper question: *Will the future of food be defined less by ingredients and more by the integrity of its process?*

6/ The GLP-1 Effect

Drugs like Ozempic and Wegovy are dominating headlines — and reshaping how people think about food. With satiety now pharmacological, consumers may prioritize nutrient density, protein quality, and simplicity over sheer volume.

Smaller portions could become the norm, while expectations for quality rise. Protein-rich snacks, portion-controlled indulgences, and ready-to-eat mini-meals may see new momentum, while categories tied to volume alone could feel pressure. For retailers and brands, this means rethinking formats, value propositions, and even how meal occasions are defined. Which raises a sharper question: *If less food is eaten, how will value be measured — and what categories will thrive when volume no longer rules?*



Asad Amin is Senior Vice President, Head of Ipsos' syndicated research and a leading voice on food trends

Looking Ahead: Food as the Next Frontier of Wellness

In the next 10 years, food will remain at the centre of the health and wellness economy — but with new responsibilities.

Advances in science, shifts in culture, and pressures on affordability will collide to redefine what “healthy eating” means. The winners will be those who can bridge trust and technology: making nutrition more personalized, more functional, and more inclusive, while ensuring food remains not just a prescription, but a pleasure.

Questions for the future



Public health

Who will be the future gatekeepers of health information, and will public institutions still have a voice?

As private platforms fill care gaps, will public health play catch-up or risk becoming irrelevant?

How far are we from universal coverage of not just care but prevention, from nutrition to mental health to climate impacts?

What happens when personalized AI health advice outpaces the speed and credibility of official guidance?



Technology/AI

As AI becomes the first line of care, how will human providers redefine their role in the health journey?

In an AI-led system, will patients care who's making the decision, or just that it works?

As tech decodes our biology, will insurance and employment systems keep pace, or penalize the newly "known"?

Could AI-designed wellness plans make healthy living feel more like compliance than choice?



Aging

With 1 in 4 Canadians soon over 65, can the public system afford to age us, or will aging become a private responsibility?

As the caregiver crunch deepens, will employers treat eldercare like childcare, or risk losing their mid-career talent?

Will digital health bridge the care gap for aging Canadians — or deepen the divide?

As longevity becomes a market, who will own the aging experience: doctors, designers, or data platforms?



Consumer health

If food is the first medicine, should health systems start prescribing it?

If drugs like GLP-1s are the future of prevention, what happens to the role of lifestyle in staying well?

As health advice floods our feeds, who will help consumers separate evidence from aesthetic?

As health data gets captured by apps, wearables, and loyalty cards, who really owns your wellness profile — and who profits from it?



Wellness everywhere

As wellness becomes a competitive advantage, which industries will lead, and which will be left behind?

Will the next frontier of wellness be your daily commute: a mobile sanctuary rather than a mode of transport?

As wellness becomes ambient, will appliances be the silent caretakers of our everyday health?

If wellness becomes the goal of how we spend free time, will fun still feel like freedom — or start to feel like work?

See What's Next

The future of wellness is just one piece of a much bigger story. **Ipsos Strategy3's Trends & Foresight practice helps organizations decode the forces shaping tomorrow, anticipate disruption, and activate new growth strategies.**

From global trend scans to future scenarios to activation workshops, we work with organizations to translate foresight into action. Let's explore what the future holds for your customers, your category, and your business.

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