



Canadian Nutrition Society  
*Société canadienne de nutrition*

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#### **WELCOME REMARKS**

HELLO EVERYONE. THANK YOU FOR JOINING US TODAY AT THE FOOD FOR HEALTH CONNECTION WORKSHOP: BUILDING A DEEPER COLLABORATION.

I AM LEAH GRAMLICH, A GASTROENTEROLOGIST AND PHYSICIAN NUTRITION SPECIALIST, AND PRESIDENT OF THE CANADIAN NUTRITION SOCIETY.

IT IS MY GREAT PLEASURE TO OFFER YOU THIS UNIQUE FORUM ON BEHALF OF OUR PARTNERS OMAFRA --THE ONTARIO MINISTRY OF AGRICULTURE, FOOD AND RURAL AFFAIRS – AND CIHR – THE CANADIAN INSTITUTES OF HEALTH RESEARCH – INSTITUTE OF NUTRITION, METABOLISM, AND DIABETES (INMD) WHO HELPED DEVELOPED TODAY’S PROGRAM.

WE WOULD ALSO LIKE TO RECOGNIZE PULSE CANADA WHO WORKED CLOSELY WITH CNS TO PREPARE A GRANT FOR THE NATURAL SCIENCES AND ENGINEERING RESEARCH COUNCIL OF CANADA ... WHO HAVE BEEN VERY IMPORTANT TO SPONSORING THIS EVENT.

I WOULD ALSO THANK OUR OTHER SPONSORS --- FOOD AND CONSUMER PRODUCTS OF CANADA, GAY LEA FOODS, ULTIMA FOODS, ONTARIO PORK, THE GRAIN GROWERS OF CANADA AND THE GRAIN FARMERS OF ONTARIO.

WITHOUT THE SUPPORT OF THOSE WHO I HAVE JUST MENTIONED, THIS WORKSHOP WOULD NOT HAVE HAPPENED.

#### **WHY ARE WE ALL HERE TODAY?**

WHEN WE LOOK AROUND THE ROOM TODAY AND SEE WHO IS IN ATTENDANCE ...WE HAVE CLOSE TO A 100 ATTENDEES FROM ALL SECTORS – FROM GOVERNMENT, INDUSTRY, HEALTH CARE ...

IT UNDERSCORES THAT WE ALL SHARE A COMMON CONCERN AND UNDERSTANDING THAT “FOOD AND NUTRITION” IS PERHAPS THE MOST IMPORTANT ISSUE ON CANADA’S HEALTH CARE AGENDA TODAY.

CLEARLY THERE IS A SERIOUS POPULATION HEALTH CRISIS INCLUDING CHRONIC DISEASE ... WHICH ON THE RISE -- OBESITY RATES HOVER AT 60% AFFECTING SOME 14 MILLION ADULT CANADIANS --

THE WORLD HEALTH ORGANIZATION PREDICTS THAT THE PREVALENCE OF CHRONIC DISEASES WILL INCREASE IN CANADA BY 15% OVER THE NEXT 5 YEARS AND ACCOUNT FOR ALMOST 90% OF ALL DEATHS.

THESE ARE STAGGERING PROJECTIONS AND THE PRESSURE ON HEALTH COSTS IS ENORMOUS.

ACCORDING TO CIHI, TOTAL HEALTH CARE EXPENDITURES IN CANADA ARE NEARLY \$200 BILLION ANNUALLY AND IT IS PROJECTED THAT BY 2017, WE CANNOT SUSTAIN THIS.

MEDICAL CARE COSTS ARE RELATED TO PEOPLE WITH CHRONIC ILLNESS . THEY RELATE TO DOCTOR COSTS, HOSPITAL COSTS, DRUG COSTS.

THERE IS ALSO A SIGNIFICANT NEGATIVE IMPACT FOR CANADIANS – QUANTITY OF LIFE ... QUALITY OF LIFE ... PRODUCTIVITY ... MISSED WORK.

AND IN FACT, THE QUESTION IS: CAN WE USE A FOOD HEALTH STRATEGY TO IMPROVE HEALTH?

MAYBE WE CAN IMAGINE THE SAVINGS TO THE HEALTH CARE SYSTEM THROUGH REDUCTION OF CHRONIC ILLNESS ... THROUGH BETTER IMPLEMENTATION OF PREVENTION AND WELLNESS STRATEGIES.

**THAT IS WHAT WE ARE HERE TO TALK ABOUT TODAY.**

WHILE A NEW PARADIGM FOCUSED ON PREVENTION AND WELLNESS ... FOOD, NUTRITION AND DIET SEEMS TO BE EMERGING ... THE VAST MAJORITY OF CANADIANS HAVE NOT YET BOUGHT IN.

SO WHILE IT MAKES A LOT OF SENSE TO THE PEOPLE IN THIS ROOM, BUT THE MAJORITY OF CANADIANS OUT THERE IN THE PUBLIC HAVEN'T ADOPTED THIS STRATEGY.

LET ME GIVE YOU SOME EXAMPLES:

ACCORDING TO THE MOST RECENT COMMUNITY HEALTH SURVEY:

- OVER 25% OF CANADIANS 31 TO 50 GET MORE THAN 35% OF THEIR TOTAL CALORIES FROM FAT; THE THRESHOLD BEYOND WHICH HEALTH RISKS INCREASE.

SO WE HAVE TO ASK OURSELVES ... WHY THERE IS THIS DISCONNECT BETWEEN DIET AND HEALTH?

IS IT A KNOWLEDGE TRANSFER PROBLEM? SEEMS TO BE RELEVANT...

GREAT WORK IS BEING DONE ACROSS THE ENTIRE CONTINUUM – BY EVERYONE IN THIS ROOM.

GROWERS, PRODUCERS AND PROCESSORS ARE WORKING ON NOVEL PRODUCTS AND INGREDIENT INNOVATIONS TO IMPROVE FOOD QUALITY.

RETAILERS ARE PROMOTING HEALTHY FOODS.

EVIDENCE-BASED RESEARCH IS BEING UNDERTAKEN IN THE HEALTH CARE SECTOR TO PROMOTE NUTRITION AS PART OF THE STANDARD OF HOSPITAL CARE.

GOVERNMENTS ARE SUPPORTING IMPORTANT INITIATIVES.

BUT INSPITE OF THIS GOOD WORK, IT IS NOT TRANSLATING INTO CANADIANS EATING MORE APPROPRIATELY TO IMPROVE HEALTH. MAYBE IT IS THE FRAGMENTED NATURE OF THIS WORK...

MAYBE IT IS BECAUSE A PIECEMEAL APPROACH DOES NOT ENCOURAGE STAKEHOLDERS TO COLLABORATE, IDENTIFY SYNERGIES, LEVERAGE RESOURCES, OR CAPITALIZE ON EXPERTISE.

THE IVEY SCHOOL OF BUSINESS LAST YEAR FOLLOWING ITS FORUM TO ADVANCE FOOD-HEALTH POLICY CONCLUDED IN THEIR SUMMARY REPORT THAT:

“AN EXPANDING BODY OF RESEARCH HAS PROVIDED NEW MODELS FOR LINKING FOOD AND HEALTH, SHIFTING THE FOCUS TO PREVENTION RATHER THAN TREATMENT. TO DATE CANADA HAS NOT BEEN ABLE TO CAPITALIZE ON THIS RESEARCH. AND WE HAVE MUST IMPROVE... [THAT].”

TODAY WE HOPE TO TAKE A STEP IN THAT DIRECTION.

THE AGRI-FOOD SECTOR HAS BEEN OUT IN FRONT SHOWING STRONG LEADERSHIP ON THE FOOD – HEALTH CONNECTION ... EXPLORING NEW DIRECTIONS, RECOMMENDING CHANGES TO THE WAY WE WORK, THE WAY WE COLLABORATE , CONNECT AND PARTNER, AND FUND INNOVATION.

EARLIER THIS YEAR, THE CANADIAN AGRI-FOOD POLICY INSTITUTE IN ITS “DESTINATION” REPORT CALLED FOR A NEW COLLABORATIVE APPROACH TO HELP IMPROVE THE DIETS AND HEALTH OF CANADIANS. THEY RECOMMENDED THE CREATION OF A FRAMEWORK BODY – A CENTRE FOR GOOD FOOD CITIZENSHIP –TO ENABLE STAKEHOLDERS TO COME TOGETHER TO WORK ON COMMON ISSUES AND PROJECTS.

THIS KIND OF MECHANISM COULD IN FACT PROVE TO BE A GREAT ENABLER OF THE KIND OF ACCELERATED KNOWLEDGE TRANSFER WE NEED TO EXPERIENCE IN THIS FIELD TO SEE IMPROVEMENT IN HEALTH THROUGH FOOD AND THROUGH ACTIVITY.

THAT IS THE ROLE THAT WE ENVISION FOR CANADIAN NUTRITION SOCIETY.

FOR THOSE OF YOU ARE NOT AWARE, CNS IS A RELATIVELY NEW ORGANIZATION FORMED TWO YEARS AGO BY THE MERGER OF THE CANADIAN SOCIETY FOR NUTRITIONAL SCIENCES AND THE SOCIETY OF CLINICAL NUTRITION.

WE ARE A MULTI-DISCIPLINARY ORGANIZATION. OUR MEMBERS ARE MANY OF THE LEADING EXPERTS IN CANADA IN NUTRITION SCIENCE, POLICY AND PRACTICE. THEY ARE THE SCIENTISTS, RESEARCHERS, CLINICIANS LIKE DIETITIANS AND PHYSICIANS, AND EDUCATORS WHO WORK ACROSS THE ENTIRE FOOD –HEALTH CONTINUUM.

THIS MERGER OF THE TWO SOCIETIES WAS DESIGNED HELP ENABLE MORE EFFECTIVE KNOWLEDGE TRANSLATION ... TO MARRY RESEARCH AND FRONTLINE PRACTICE IN ORDER TO BETTER PROMOTE THE ROLE OF FOOD AND NUTRITION SHOULD PLAY IN IMPROVING THE HEALTH OF CANADIANS AND IN PREVENTING AND TREATING DISEASE.

THIS CALL FOR A NEW KIND OF COLLABORATION REALLY MANDATES THAT BRING TOGETHER RESEARCH AND PRACTICE TO FACILITATE CHANGE.

SO THE GOAL OF TODAY'S WORKSHOP REFLECTS THAT COMMITMENT ... IT IS THE BEGINNING OF A PROCESS TO FORGE NEW PARTNERSHIPS ACROSS THE FOOD-HEALTH SPECTRUM ... BUILD A PLATFORM FOR STRONGER CONNECTIONS ... CLOSER LINKAGES AMONG PRODUCERS, PROCESSORS, INDUSTRY, GOVERNMENT, RESEARCHERS AND THE HEALTH CARE COMMUNITY TO EFFECT CHANGE IN THE DIETARY PATTERNS OF CANADIANS AND IMPROVE THEIR HEALTH.

... A NEW TYPE OF COLLABORATION THAT WILL ACCELERATE INNOVATION, KNOWLEDGE TRANSFER.

THE FIRST STEP HAS BEEN TRY TO GET AS MANY OF THE IMPORTANT STAKEHOLDERS FROM ACROSS THE ENTIRE SPECTRUM IN THE SAME ROOM ... TO ADDRESS CORE QUESTIONS.

WE ARE PARTICULARLY PLEASED TO WELCOME FRONT LINE PRACTITIONERS WHO INTERFACE WITH CONSUMERS AND PLAY A CRITICAL ROLE. TODAY WE HAVE BOTH DIETITIANS, AND, FOR THE FIRST TIME, THE COLLEGE OF FAMILY PHYSICIANS OF CANADA WHICH REPRESENTS CANADA'S 22,000 PRIMARY CARE PHYSICIANS WILL TAKE PART IN THE DISCUSSION.

THIS WORKSHOP FORMAT IS A DESIGNED TO ENCOURAGE DIALOGUE. WE HAVE TRIED TO BALANCE THE EXCHANGE OF NEW INFORMATION WITH OPPORTUNITIES FOR YOU TO ASK QUESTIONS. .

SOME OF THE AREAS WHERE WE HOPE TO SPARK DISCUSSION ARE: WHAT ARE THE BARRIERS TO INNOVATION AND MARKET INTRODUCTION OF NEW PRODUCTS? WHAT KINDS OF RESEARCH ARE NEEDED AND HOW WILL IT BE FUNDED? WHAT ARE INNOVATIVE NEW DIRECTIONS IN RESEARCH PARTNERSHIPS? HOW CAN WE MOBILIZE THE HEALTH CARE COMMUNITY AND ENGAGE FRONTLINE PRACTITIONERS LIKE FAMILY DOCTORS? WE EXPECT THAT MANY OTHER ISSUES WILL EMERGE.

IT IS OUR HOPE THAT TODAY'S DIALOGUE WILL BE A SPRINGBOARD FOR FUTURE ACTION AND JOINT INITIATIVES WHERE PARTNERS CAN WORK TOGETHER ON PRACTICAL SOLUTIONS.

AN OUTCOME OF TODAY'S DIALOGUE WILL BE A REPORT OUTLINING THE DAY'S DISCUSSION AND PROVIDING RECOMMENDATIONS FOR NEXT STEPS AND FURTHER COLLABORATION.

WITH RESPECT TO TODAY'S AGENDA

I WOULD LIKE TO TAKE YOU THROUGH THE PROGRAM. OUR MORNING IS DEVOTED TO KEY NOTE SPEAKERS PROVIDING UPDATES ON WHAT HAS HAPPENED OVER THE PAST YEAR BECAUSE THIS GROUND IS RAPIDLY CHANGING AND WE WANT TO UNDERSTAND IN A BROADER PERSPECTIVE ... LEVEL THE PLAYING FIELD SO THAT ALL OF US ARE ON THE SAME PAGE SO WE CAN COME UP WITH A COMMON VISION OR A COMMON STRATEGY.

TODAY CIHR AND OMAFRA WILL EXPLORE INNOVATIVE NEW APPROACHES ... NEW RESEARCH DIRECTIONS, MODELS OF INDUSTRY-SUPPORTED RESEARCH, NEW TYPES OF PARTNERSHIPS AND NEW FUNDING OPPORTUNITIES.

TO BUILD RELEVANCE, THE WORKSHOP IS VERY HEAVILY FOCUSED ON PRACTICAL, REAL WORLD ISSUES AND KNOWLEDGE TRANSFER.

WE HAVE TWO PANELS AND WE HAVE TASKED THESE PANELS WITH VERY SPECIFIC QUESTIONS. AND WE HAVE CHOSEN OUR PANELISTS CAREFULLY. .

THE FIRST PANEL IS ON HEALTH CARE COMMUNITY ENGAGEMENT – WHAT SHOULD OUR NUTRITION PRIORITIES BE GOING FORWARD? WHAT ARE THE BARRIERS TO PARTICIPATION AND KNOWLEDGE TRANSFER?

AND THE SECOND PANEL IS DEDICATED TO RESEARCH PROVIDING EXAMPLES OF DIVERSE MODELS FOR RESEARCH SUPPORT AND PARTNERSHIP THAT HAVE BEEN SUCCESSFUL AND YOU MIGHT FIND INSPIRING.

AT THE END OF THE WORKSHOP, WE HAVE PLANNED BREAKOUT SESSIONS TO GET YOUR IDEAS AND INPUT ON WHAT HAS BEEN PRESENTED AND DISCUSSED DURING THE COURSE OF THE DAY.

I WANT TO CONCLUDE MY REMARKS BY AGAIN THANKING YOU ALL FOR COMING AND CHALLENGE YOU TO THINK ABOUT HOW WE CAN BUILD COLLABORATIONS THAT ARE STRONG.

WE DON'T WANT TO FOCUS SOLELY ON THE BARRIERS. WE NEED TO WORK ON WHAT NEEDS TO BE DONE. WHAT NEEDS TO BE PUT IN PLACE SO THAT WE CAN WORK TOGETHER IN A MORE UNIFIED, COHESIVE MANNER TO OFFER CANADIANS HEALTHIER FOOD CHOICES AND EFFECT CHANGE?

WE WANT YOU TO THINK ABOUT PRACTICAL SOLUTIONS ... POTENTIAL SUCCESS STORIES ... OPPORTUNITIES FOR COLLABORATION.

BECAUSE AT THE END OF THE DAY, WE WANT TO IMPROVE THE HEALTH OF CANADIANS THROUGH ONE OF THE MODIFIABLE RISK FACTORS – FOOD.

THANK YOU