

Legislative
Assembly
of Ontario



Assemblée
législative
de l'Ontario

**Official Report
of Debates
(Hansard)**

No. 128B

**Journal
des débats
(Hansard)**

N° 128B

1st Session
43rd Parliament

Thursday
29 February 2024

1^{re} session
43^e législature

Jeudi
29 février 2024

Speaker: Honourable Ted Arnott
Clerk: Trevor Day

Président : L'honorable Ted Arnott
Greffier : Trevor Day

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House Publications and Language Services
Room 500, West Wing, Legislative Building
111 Wellesley Street West, Queen's Park
Toronto ON M7A 1A2
Telephone 416-325-7400
Published by the Legislative Assembly of Ontario



Service linguistique et des publications parlementaires
Salle 500, aile ouest, Édifice du Parlement
111, rue Wellesley ouest, Queen's Park
Toronto ON M7A 1A2
Téléphone, 416-325-7400
Publié par l'Assemblée législative de l'Ontario

ISSN 1180-2987

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LEGISLATIVE ASSEMBLY
OF ONTARIO

Thursday 29 February 2024

ASSEMBLÉE LÉGISLATIVE
DE L'ONTARIO

Jeudi 29 février 2024

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PRIVATE MEMBERS'
PUBLIC BUSINESS

GENDER AFFIRMING HEALTH CARE
ADVISORY COMMITTEE ACT, 2024

LOI DE 2024 SUR LE COMITÉ
CONSULTATIF DES SOINS DE SANTÉ
AXÉS SUR L’AFFIRMATION DE GENRE

MPP Wong-Tam moved second reading of the following bill:

Bill 42, An Act to establish the Gender Affirming Health Care Advisory Committee / Projet de loi 42, Loi créant le Comité consultatif des soins de santé axés sur l’affirmation de genre.

The Deputy Speaker (Ms. Donna Skelly): Pursuant to standing order 100, the member has 12 minutes for their presentation.

MPP Kristyn Wong-Tam: I’m honoured to rise here today to speak in support of my private member’s bill, the Gender Affirming Health Care Advisory Committee Act, Bill 42, a bill first introduced by MPP Suze Morrison, my predecessor, who is back in the House to watch the debate. Thank you very much for all your support.

I also know that I did not get here alone, and neither did Suze. We both stand on the shoulders of Rev. Cheri DiNovo, the former MPP, who is also joining us today. We have many members here today from the two-spirit, trans, non-binary, intersex and gender-diverse community. They are friends and allies all here in support of this bill. I want to give a very special thank you and a shout-out to the amazing labour organizations who came into the chamber this morning as well as this afternoon and this evening to support this bill. It’s been a long day for you. Thank you for all that you do. Thank you for letting us be allies with you in this fight.

So let’s start: What is gender-affirming care? To quote a researcher and respected trans advocate, Jordan Zaitzow of the Trans PULSE Canada survey, gender-affirming care simply “creates conditions for people to have the optimal health and mental health outcomes for themselves and society.” It can include procedures, medical treatments and referral processes that align a patient’s body and physical presentation with their gender identity. Sometimes it includes surgeries, hormone replacement therapy,

puberty blockers, as well as other kinds of care that affirms one’s gender.

Gender-affirming care is not only for trans people. Cis people also receive this type of care. Cisgender people, or simply “cis,” which is a way for us to describe people whose gender identity aligns with their sex they were assigned at birth, is something that we want to talk about today. Gender-affirming care is not about a patient walking into a doctor’s office and then picking from a menu list of things that they can choose and getting whatever they want without medical support or expertise. That is exactly the opposite of what happens. Gender-affirming care begins with listening and asking questions so that trans folks and their health care professionals and providers can help them make the most informed decisions and decide the best next steps for them.

I want to explain, Speaker, what is contained in the bill. This bill creates an advisory committee to provide advice on expanding and improving gender-affirming health care. This committee should be comprised of transgender, two-spirit, non-binary, intersex and gender-diverse people, as well as health care professionals who have demonstrated experience and expertise working with gender-diverse communities. The majority of community members should be, of course, trans and gender-diverse. This committee should be working with people from all walks of life: people who are from the north, people who are living on reserves, people living in rural communities.

This committee will make recommendations, Speaker, about how to enhance gender-affirming care, including prerequisites to care like general health care services, improving wait times, improving equity across the province, expanding the kinds of care covered, adopting the informed consent model and defining gender-affirming procedures as life-saving procedures. This is intended to overhaul and improve—improve, Speaker—how Ontario delivers gender-affirming health care from the ground up. It is about letting trans community members and the experts who support them actually help lead this conversation.

The committee would be struck within 60 days of the bill passing, and then that committee will have six months to do their work as quickly as possible. They will then table a report to the Minister of Health, and the Minister of Health will then have 90 days to bring her own recommendations back into the House on how she would like to proceed. That, Speaker, is accountability, that is partnership and that’s how we need to improve gender-affirming care for Ontarians.

In Ontario, trans folks can access care in many different ways, but some of this care is not prioritized by the health care system, and it oftentimes results in long wait times. We've seen people travel out of province and pay out of pocket simply because they can't get that care in Ontario. This is wrong, Speaker, and it's shameful, and it's something that we must correct.

Gender-affirming care is life-saving care. When we say that, it's not to overstate it; gender-affirming care can actually improve mental health outcomes. It reduces depression and anxiety. It increases general life satisfaction and gender congruence. We need to be able to pass this bill so we can go ahead and support Ontarians in the way that they deserve. It also reduces and shields them from transphobic violence, something that we know can be very, very deadly.

One of the main negative impacts that folks feel when they are denied gender-affirming care is gender dysphoria. It is a particular kind of mental anguish and distress felt by people for whom their physical bodies and their internal understanding of their gender do not align. It is a very difficult experience, and this is experienced by gender-diverse folks. The medical system currently does not accommodate that. We need to expand that and make sure that it is improved.

Cisgender women who undergo mastectomies, lumpectomies and other breast surgeries because they are receiving cancer treatment are immediately eligible for breast reconstruction surgery, something that my own wife is going through. She didn't have to petition for it. She didn't have to sign up for a debate. She didn't have to fight for funding. She didn't have to debate it here. She was just offered it, Speaker. That is why we are seeing gender-affirming health care for some individuals, for cisgender individuals, and not for all individuals. That must also be corrected.

These surgeries and others offered by OHIP are not often covered. They are necessary for the physical survival of a patient. We know this to be true because we are seeing the deaths of young people as they are not getting their care in a timely fashion.

And what happens, Speaker, when people are denied gender-affirming care? Let's take a look at a story from a woman named Michelle, a trans woman who reached out to me about her support for this bill. Michelle collected over 8,000 signatures in support of this bill, and this is her story: "Thirty years ago I was subjected over a three-month period to conversion therapy believing that this was going to get me on a transitioning program." This was somehow going to cure her, but instead, it was wrong. It was "pure mental torture, so painful that" Michelle wanted to kill herself. With all these things, she then had to bury herself into work because she was covering the pain and the harm. She worked 60 to 80 hours a week trying to forget all of that tragic trauma. It was so difficult for her.

Years later, she then developed something called critical dysphoria. It had gotten so bad that she was prepared to literally just jump off a bridge. Today, we know that she is better because she was able to get the

gender-affirming care, but you know where she had to go to get it? She had to go to Thailand, to Bangkok. In Thailand, she was able to get the surgery and the care that we couldn't provide for her in Ontario. Because of that, she is now able to rebuild her life. She is grateful for the care that she got overseas, and she has never known such happiness.

1810

We know that the vast majority of trans folks who receive gender-affirming care are pleased with their decision. They are happy that they were able to take that step forward, and this trend is not just in surgical outcomes. We also know that of trans youth who have received hormone therapy, 98% of them are very happy they were able to receive that treatment and they continue that treatment into adulthood. Study after study shows that trans folks have a deep, deep understanding of their gender and their health needs. They need to be supported. They need to be seen. They need to be respected.

There are all sorts of lies being spread about trans individuals in Ontario and right across the country. There are Premiers standing up in New Brunswick, as well as Alberta, saying very damning things about the trans community and the gender-diverse community, and it is wrong. They are putting out so many lies that have to be countered, I don't have enough time to debunk them all, but I want everyone to hear at least this: No medical interventions are offered to children before they enter puberty—none. No one under 18 gets surgery, not a single person.

We also know that children receiving the social and medical support that they need to affirm their gender serves as a very powerful protection for their mental health. We have to do better. Ontario is in a health care crisis, and if you think it's bad for Ontarians across every sector of society, take a look at what happens to trans and gender-diverse people. They are being left behind.

And this is not the first time we are tabling this bill. This is a bill that is being tabled the second time. But every time we don't take a step forward, every time we don't take any action to support this community, someone dies and families are broken. It is as simple as that.

Today we have people who have driven in from across Ontario, and I can tell you, Speaker, if this bill gets to committee and the members get to hear the stories from the families themselves, you will want to do right by them. You will do everything you can to protect their children, their students and the future workforce of Ontario. You will do everything you can to make sure that trans rights are human rights, and human rights means that you deserve access to health care.

Interruption.

The Deputy Speaker (Ms. Donna Skelly): I'd like to remind our guests in the gallery that we love to have everyone here supporting our debaters, our presenters today, but we do not cheer in the gallery.

I would also like to point out that a former member, Suze Morrison, from the riding of Toronto Centre in the 42nd Parliament, is also joining us this evening.

Further debate?

MPP Jill Andrew: On behalf of every member of our 2SLGBTQIA+ community in St. Paul's—including an amazing mother, an ally who couldn't be here in person but is watching online, Kristie Kennedy, who has stood by her incredible trans child, Alexis, for years as they struggle to receive their own gender-affirming care—I wholeheartedly support Bill 42, An Act to establish the Gender Affirming Health Care Advisory Committee, and I'm incredibly proud to co-sponsor this. I thank MPP Kristyn Wong-Tam, our official opposition 2SLGBTQIA+ critic, and Suze Morrison, former MPP, for their dedication and commitment to our queer, trans, non-binary and gender-diverse communities across Ontario. I thank all of you—our community leaders, our allies, our students, our health professionals—for your leadership.

Representation matters, and during these times of significant vitriol against our community especially targeting our trans children and youth and other non-binary, gender-diverse community members, it is incredibly important that we support legislation in this House that allows us to be seen, heard and represented. We must protect the physical, mental health and wellness of our community.

Bill 42 literally places our community members at the decision-making table where they will advise and provide recommendations to the Ministers of Health and Long-Term Care, their ministries and other government decision-makers on how to enhance access and extend insurance coverage for gender-affirming health care; how to ensure coverage of gender-affirming and transition-related prerequisites and procedures, both surgical and non-surgical—including electrolysis, for goodness' sake; and how to reduce wait times for gender-affirming health care in Ontario. Gender-affirming health care must require solely a health card, for goodness' sake, and never a wallet.

Gender-affirming health is health care, and any Ontarian who needs it should be able to have access to it without homophobia, without transphobia, without shame and stigma, as is often the experience for too many accessing care here in Ontario. Most importantly, gender-affirming health care procedures are life-saving procedures—life-saving procedures.

I want to say this: Bill 42—if the government does not support it, they are literally saying that they do not care to hear from 2SLGBTQIA+ community members about their own health of which they are experts. Please stand by this bill. The Children's Health Coalition letter to the Premier and Deputy Premier is signed by every major children's hospital. They are standing by evidence-based practices and policies like Bill 42. Stand by it.

I'm going to end with the words of Kristie Kennedy, that amazing mom I told you about: "Gender-affirming health care literally saved my child's life. Timelier access would have made their life much more bearable during a stressful time."

Conservatives, do the right thing, do it here tonight and pass Bill 42.

The Deputy Speaker (Ms. Donna Skelly): Further debate?

Mr. Terence Kernaghan: I rise today as an out and proud co-sponsor of the member for Toronto Centre's Bill 42, the Gender Affirming Health Care Advisory Committee Act.

As I start off my remarks, I think of all the people we've lost and all the people who have suffered violence and hate simply for living their authentic self or for daring to be themselves in a world that has not allowed them to exist. I hope that the government today will honour all of the lives we've lost by voting in favour of this life-saving and life-changing bill.

In our health care system, two-spirit, trans and non-binary patients experience microaggressions, misgendering and possible harassment from providers, medical staff or fellow patients. They experience drastic disparities in self-harm, depression, anxiety, substance abuse, malignancy and victimization by violence.

This bill would establish a committee tasked with making recommendations to the Minister of Health on ways to improve access to gender-affirming care and transition-related procedures. What could possibly be objectionable in such a policy? The gender-affirming health care advisory committee would help everyone so that our health care system provides care that recognizes and acknowledges a person's gender identity and expression. It takes an incredibly brave person to first disclose their truth, and transitioning should not be harmful and negative because of what our health care system does not know and does not acknowledge.

Today in Ontario, many barriers remain for those who seek gender-affirming care. My friend Stevie has long advocated to reduce arbitrary barriers which many people face. Stevie was a birth and postpartum doula throughout their own transition, and now supports trans folks, first with their reproductive journeys and then with gender-affirming care as well.

I want to quote the former MPP for Toronto Centre who brought this bill forward, the wonderful Suze Morrison, who said: "Together, we can ensure that Ontario is a province where everyone has access to the health care they need, to the life-saving procedures that they need and to health care that is safe, is affirming and respects people's gender identities."

1820

I commend my colleague the current MPP for Toronto Centre for bringing this legislation back. It should never have been stalled by the Conservatives and it should never have died on the order paper when the Legislature dissolved before the last election. That's what you get with the NDP, Speaker. When this government fails to act, we will never stop fighting.

I urge the members across the way to vote in favour of this bill, pass it through committee. In doing so, you will save lives.

The Deputy Speaker (Ms. Donna Skelly): Further debate?

Ms. Peggy Sattler: As many of my colleagues have said, gender-affirming care is life-saving care. It is certainly life-saving for the young people who are two-spirit,

trans, non-binary, gender-diverse or intersex, but it can also be a huge game-changer for the parents who love them, who feel anguish as they watch them struggle and who want them to be able to be their authentic selves.

While far too many of these youth do not have such families, today I want to share a story of a supportive parent, my former employer Rod Skinkle, a well-known and respected member of London's business community. I worked with Rod prior to my election as MPP and we became friends over the 10 years that I was part of his team. At one point, I met his teenaged child who dropped by the office. Rod later told me how worried he was watching this incredibly bright young person struggle with severe depression and self-harm. Rod sought desperately to get help from the health care system and finally had to travel to the US to access the gender-affirming health care his child urgently required.

In 2015, Rod was a keynote speaker at the annual Youth Opportunities Unlimited Breakfast for YOU. His powerful and emotional remarks were co-written with his son, Sean, and the speech is posted on YouTube. I watched it again today and I cried just like I cried the morning I heard Rod speak. If you are a parent, I challenge you to watch that video and not be moved.

Rod's son Sean was born biologically female, and Rod spoke about the pressure of gender expectations from birth on and how difficult and confusing it can be for gender-diverse children from a very young age. When Sean hit puberty, his feelings of being an alien in his own body became suffocating. In Rod's words, Sean felt he had no place, that he was living a lie every single day. He endured unimaginable bullying and assault at school, and his confusion and anger led to serious self-harm and substance abuse. His frantic parents did not understand and did not know what to do. Neither did Sean because, as Rod said, how could he when the systems in place around him were unable to provide guidance or direction?

At age 17, Sean left school, moved out on his own and began the process of transitioning—a process that required him to leave the country. With Sean's support for Rod, the uncertainty and loss that his father initially experienced was replaced with a new and profound sense of hope for Sean's future.

Today, Sean is happy and successful, living his true and authentic life, and Rod couldn't be prouder of him. We need gender-affirming health care in Ontario because everyone deserves to feel hope. I call on all members to support this bill.

The Deputy Speaker (Ms. Donna Skelly): Further debate?

Ms. Jessica Bell: I'm here today to rise and speak in support of the Gender Affirming Health Care Advisory Committee Act, Bill 42. I want to thank the friends and the allies in the LGBTQ+ community here today. I want to thank the former MPP for Toronto Centre, Suze Morrison, for your work. And I want to thank the current member for Toronto Centre, my friend and colleague Kristyn Wong-Tam, for championing this issue. This is your Legislature. I am here to stand in solidarity.

There is a lot of information about gender-affirming care and what this bill is. This bill calls for the Minister of Health to create an advisory committee that will make recommendations for improving access to and coverage for gender-affirming care. We expect that the people who sit on this committee will include people from the health care sector and people who intend to and who have used gender-affirming health care. That is what this bill is asking for.

I want trans and non-binary people to receive excellent public health care like everyone else, and to be treated with respect and acceptance when they visit a primary care provider clinic or a hospital. I want careful and thoughtful evidence-based decisions to be made about gender-affirming health care, and I want decisions to be made by the health care sector and by people who use and intend to use these health care procedures. These are thoughtful and careful conversations that need to be had.

What I don't want, and what I fear, is what happens when decisions for health care and who gets it and who doesn't get access to it are made by politicians who seek to target trans people for political power and political gain. What kind of health care a young trans person gets is becoming an issue that's getting discussed down south and here on the national sphere by politicians who have inserted themselves into this health care conversation to stoke fear among parents that somehow in some way, a trans person, who's going about living their own life in their own way in some other city, is going to harm their kids. It is a myth. It's not true.

I believe this misinformation is designed to divide, to create an us and a them; that we're good, and you're not; that we're better, and you're less than. That can and does and is creating a climate that gives rise to discrimination and taunts and bullying, assaults and, in some cases, the killing of people. There are politicians who are winning elections on this wave of misinformation, oppression and discrimination.

This is what we do know: Study after study shows that trans people have a deep understanding of their gender and their health care needs. They're not being hoodwinked. We know that the mental health of trans children and youth improves when their gender is respected and accepted. We know the suicide rate among trans youth who don't have a supportive family is at 57%. These are the Children's Aid Society of Toronto's numbers. We know that for those who do have the support of their parents, their rate of attempt drops to 4%. That's what we want.

The role of supportive parents is critical in the lives of trans youth and non-binary people. The role of an excellent public health care system that provides accepting care to trans people is also essential.

The Deputy Speaker (Ms. Donna Skelly): Further debate?

Ms. Aislinn Clancy: Gender-affirming care plays a crucial role in promoting the health and well-being and dignity of transgender and gender-diverse individuals. When people have access to the health care they need and

deserve in a timely manner, they have the opportunity to thrive.

As a school social worker, I supported many young people in their journeys through adolescence of coming out and transitioning. I think of one young person; they were going through this as an adolescent. They weren't open and honest with the adults in their life. They got into messy stuff online. It caused a great deal of mental health concerns. Luckily, they felt safe with our school principal, and we were able to get them the psychiatric care they need to keep them alive. They are thriving today. Now, they are getting gender-affirming care. They're able to live as their authentic self. They don't battle mental health in the same way they did when they were going through this.

I think we all need to build a system of support through all our institutions, whether it be our education system or our health care, in our society.

I do believe that gender-affirming care is truly suicide prevention. A study was published in 2014 stating that 67% of transitioning people thought about suicide pre-transition. When people had access to gender-affirming care, that number dropped to 3% post-medical transition. Trans and non-binary people have twice the likelihood of cisgender people to think about and attempt suicide. This number goes up for young people as two in five trans youth consider suicide, and one in 10 attempt suicide.

As somebody who has worked in social work, being there with a parent whose child has attempted suicide is something I wish upon no one. No parent should ever have to experience a child attempting suicide or completing suicide. It's one of the most awful experiences I think I have ever faced as a school social worker. Yet, trans youth in the States and now in our own country are being denied timely access to life-saving care.

We also know that research supports that there is an absence of formal education for health care providers on providing care to transgendered people, which is an issue identified both by parents and by care providers. One in three trans and non-binary people report that their primary health care provider had no knowledge about their health needs. Only 40% were comfortable discussing their gender-affirming health needs with their provider.

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The burden is then placed on trans and gender-diverse people to educate their health care providers, leaving room for providers to refuse the support of gender-affirming care or delivering mediocre care even though it's best intended. Consequently, this increases the burden on 2SLGBTQAI+ providers to disproportionately support the trans community, which increases wait times to already limited 2SLGBTQAI+ providers.

We must acknowledge the systemic challenges that act as barriers to accessing gender-affirming care. One of the many barriers is this practice of gatekeeping as individuals seeking gender-affirming care have to jump through hoops and wait on numerous wait-lists even to get a specialist. Our current system for gender-affirming surgeries requires a gender dysphoria diagnosis, mental health supports, letters for surgeries, completing referrals, funding applica-

tions, waiting for approval and then waiting on more lists to actually get the access to care. This doesn't happen for any other kinds of health care that we have in our province.

The trans and gender-diverse community has told us time and again that improving access to gender-affirming care and respecting chosen names and pronouns is life-saving. Ontario has the highest population of trans and gender-diverse people in Canada, so it's time we take the opportunity to be the nation's leader in providing timely and equitable access to gender-affirming care by supporting the Gender Affirming Health Care Advisory Committee Act.

Let's be sure that all young people and adults and trans and gender-diverse people in our province can live as their authentic selves, not waiting and putting their lives on hold. I hope that you'll vote to support this bill.

The Deputy Speaker (Ms. Donna Skelly): Further debate?

Mrs. Robin Martin: I am pleased to have the opportunity to stand in the House today and take part in the debate on Bill 42. This proposed legislation seeks to establish an advisory committee, just like the bill proposed earlier this week with respect to the Northern Health Travel Grant, that would make recommendations to the Minister of Health regarding access and coverage for gender-affirming health care in the province.

While opposition members continue to vote against improving health care for Ontarians, our government has been hard at work taking bold action to improve the health care experience for all Ontarians, at every stage of life. Our government believes everyone should be treated with respect and dignity, and we are creating an environment where all Ontarians have the tools and opportunities that they need to succeed.

Discrimination has no place in our province or in our health care system, and we believe that everyone should have equal access to health care services. That's why our government has taken action to build a connected and more convenient health care system that provides all Ontarians with appropriate care, where and when they need it.

We're bringing health system partners together to focus on closing gaps in health outcomes, increasing accountability and transparency in health care programming across the province, and we have made significant advancements over the last few years on population-specific initiatives like the First Nations health transformation, the integrated Black health and social services hub and in the provision of gender-affirming health care in Ontario.

The 2021-24 physician services agreement, negotiated with the Ontario Medical Association, was implemented on December 1, 2022, and it resulted in, for the first time ever, the permanent integration of virtual care within our OHIP-insured framework, which ensures all patients can access medically necessary physician services provided by video telephone, using their OHIP card and never their credit card, whenever it is necessary.

Our government has also taken additional steps to provide funding for team-based care, such as community

health centres and family health teams, to improve access to primary care. Many primary care teams run programs as part of their LGBT+ services and they offer specific clinics for gender-diverse populations, which provide interdisciplinary primary care services for their clients, as well as mental health services.

Speaker, more generally, as you know, to further support the delivery of mental health care in the community, we have invested \$525 million in new base annual funding for mental health care services and a 5% increase in funding over 500 community-based mental health providers across the province. This funding is supporting a range of services, including evidence-based services and innovative supports for LGBT+ populations, including youth.

Through Youth Wellness Hubs Ontario, our government is providing an integrated model of care for young people aged 12 to 25, improving access to age-appropriate primary care and other services in a walk-in, youth-friendly setting. Since 2020, our government has opened 22 youth wellness hubs across the province, and we're on track to open up five more. Through our website that provides information about publicly funded child and youth health care services across the province we also provide information on where to find services targeted to the LGBT+ children and youth.

Speaker, Ontario has existing safeguards and appeal processes in place that are designed to ensure access and fairness for medical procedures in the province for all Ontarians. For example, every hospital in Ontario is required under the Excellent Care for All Act to have a patient-relations process for addressing patient and caregiver concerns. The legislation establishes standards for hospital management of patient complaints to ensure all persons with complaints have a fair opportunity to have their concerns addressed with hospital patient-relations offices as the first point of contact in addressing any patient complaints.

If these concerns cannot be resolved through the hospital's patient-relations process, people can contact the Patient Ombudsman, who plays a critical role in ensuring that patients receive high-quality care, as it can both help patients and their families find a resolution to a complaint and provide recommendations to the government that will improve the health care experience for all. This office is helping to strengthen the voice of patients and their families in the Ontario health care system.

Speaker, these are just a few examples of how our government is continuing to address the health care needs of all Ontarians and how we are ensuring that all people in every corner of the province have access to more connected and convenient care. We recognize that there are different health care issues in our province that impact people differently and that it's important that everyone has a voice on these matters and that no one feels left behind. That is why we're continuing to listen to patients and their families and work closely with local communities and those on the front lines of our health care system to ensure our health care system is patient-centred and continues to meet the needs of all Ontarians for years to come.

The Deputy Speaker (Ms. Donna Skelly): Further debate?

M^{me} Dawn Gallagher Murphy: I appreciate the opportunity to join this debate on Bill 42, An Act to establish the Gender Affirming Health Care Advisory Committee.

My colleague the member for Eglinton–Lawrence and the parliamentary assistant to the Minister of Health has discussed some of the steps our government has taken to improve health equity in our province, as we work to build a comprehensive and connected health care system that strengthens all aspects of our health care, particularly where it is accessed most frequently.

While others want to have endless conversations by forming more committees and advisory tables, our government, under the leadership of Premier Ford, is taking action, making record investments to strengthen our health care system. We are building a health care system that puts people at its heart. We're continuing to address the health care needs of all of Ontario's communities, ensuring that there are resources and supports available to those who need them and that all Ontarians are provided with access to the health care services they deserve.

Our government is supporting our health care sector partners in the delivery of gender-affirming care so that they can better serve their communities because we know that when we work together with our sector partners, we can deliver real results and better health outcomes.

For example, the province has been working with the Centre for Addiction and Mental Health to support their Gender Identity Clinic program, which offers services to both individuals and their primary care providers in Ontario on issues related to gender identity. Services offered through the program may include diagnostic assessments in support of transition-related surgeries, individual support and treatment, surgical and hormone eligibility assessments and group-based services from a team of experts consisting of social workers as well as psychiatry and psychology staff with specialized expertise in trauma-informed care.

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We are also supporting projects like Sherbourne Health's Rainbow Health Ontario program to promote better health outcomes for 2SLGBTQI+ populations by improving access to relevant and appropriate care and offering training for health care providers across the province to feel more clinically competent in caring for their 2SLGBTQI+ patients.

Rainbow Health Ontario also serves as a partner in Ontario's Trans Health Expansion, a partnership formed with Women's College Hospital and the Centre for Addiction and Mental Health to improve access to transition-related surgeries and post-surgical care.

As the member for Eglinton–Lawrence had previously stated, we have made sure measures are in place to support the virtual delivery of medically necessary physician services for transgender patients. For many people, there is no better place to receive care than from the comfort of their own home. When people have health care available in their communities and in ways that are convenient for

them, they are more likely to seek and receive the care they need when they need it and stay healthier.

Speaker, while we have made progress, we know there is still more to be done. With *Your Health: A Plan for Connected and Convenient Care*, our government continues to be clear that our priority is to make it easier for people and families to connect to the care they need whether that's by expanding access to services at home or in the community, giving people the choice to book or take an appointment virtually or ensuring a hospital bed is there when it is needed most.

Over the next several years, as we continue to roll out this plan, we will remain focused on one thing and that's connecting people to the health care they need when and where they need it most. We will continue to support initiatives that improve patient experiences, increase confidence and trust in the health care system, reduce gaps in health outcomes and improve the performance and the sustainability of the health care system for years to come.

Ontario is proud to be home to people from a wide array of backgrounds, cultures and faiths, and the people of our province deserve nothing less than a sustainable health care system for years to come. And we are making critical investments in health care so all can access the care and the help they need. Thank you.

The Deputy Speaker (Ms. Donna Skelly): The member for Toronto Centre now has two minutes to respond.

MPP Kristyn Wong-Tam: I have been listening intently to my colleagues across the House and across the aisle just to hear about your opinions of this particular bill. I am incredibly discouraged by what I am hearing. I think that you're making up a lot of excuses and I'm hearing recycled government talking points about the failed health care system. Ontarians right now are struggling to get access to high quality health care. And as I mentioned, trans Ontarians even more so. So nothing that has been said today is going to be helpful to us, especially not to trans Ontarians who deserve better from this House, who deserve better from this government.

The committee to be formed is what you actually need, because you clearly need to be better educated about the needs of the trans community. You need to listen. You need to centre the patient care around them. And without this committee, I know, we all know in this House, everybody sitting in this chamber knows that you're going to continue down the road of same old, and that is simply not good enough.

November 20 is the Transgender Day of Remembrance. Can you imagine? Trans people actually have a day, Speaker, one day around the world where everybody takes a moment—politicians from all stripes—to acknowledge that trans people have died because of transphobia and trans violence. No other community, no other member, no other human being has that day. But the trans community members have that day because of the trans people who have died in the past. We remember them and we also think about the trans people who will die in the days and the months and the years ahead.

You can stop that. You can reverse that trend. You can support the gender-affirming health care bill.

The Deputy Speaker (Ms. Donna Skelly): The time provided for private members' public business is now expired.

MPP Wong-Tam has moved second reading of Bill 42, An Act to establish the Gender Affirming Health Care Advisory Committee.

Is it the pleasure of the House that the motion carry? I heard a no.

All those in favour of the motion, please say "aye."

All those opposed to the motion will please say "nay."

In my opinion, the nays have it.

A recorded vote being required, it will be deferred until the next instance of deferred votes.

Second reading vote deferred.

The Deputy Speaker (Ms. Donna Skelly): All matters relating to private members' public business having been completed, this House stands adjourned until Monday, March 4, 2024, at 9 a.m.

The House adjourned at 1847.

LEGISLATIVE ASSEMBLY OF ONTARIO
ASSEMBLÉE LÉGISLATIVE DE L'ONTARIO

Lieutenant Governor / Lieutenant-gouverneure: Hon. / L'hon. Edith Dumont, OOnt

Speaker / Président de l'Assemblée législative: Hon. / L'hon. Ted Arnott

Clerk / Greffier: Trevor Day

Deputy Clerk / Sous-Greffière: Valerie Quioc Lim

Clerks-at-the-Table / Greffiers parlementaires: Julia Douglas, Meghan Stenson,

Christopher Tyrell, Wai Lam (William) Wong

Sergeant-at-Arms / Sergent d'armes: Tim McGough

Member and Party / Député(e) et parti	Constituency / Circonscription	Other responsibilities / Autres responsabilités
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Armstrong, Teresa J. (NDP)	London—Fanshawe	
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Bethlenfalvy, Hon. / L'hon. Peter (PC)	Pickering—Uxbridge	Minister of Finance / Ministre des Finances
Blais, Stephen (LIB)	Orléans	
Bouma, Will (PC)	Brantford—Brant	
Bourgouin, Guy (NDP)	Mushkegowuk—James Bay / Mushkegowuk—Baie James	
Bowman, Stephanie (LIB)	Don Valley West / Don Valley-Ouest	
Brady, Bobbi Ann (IND)	Haldimand—Norfolk	
Bresee, Ric (PC)	Hastings—Lennox and Addington	
Burch, Jeff (NDP)	Niagara Centre / Niagara-Centre	
Byers, Rick (PC)	Bruce—Grey—Owen Sound	
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Cho, Hon. / L'hon. Stan (PC)	Willowdale	Minister of Long-Term Care / Ministre des Soins de longue durée
Clancy, Aislinn (GRN)	Kitchener Centre / Kitchener-Centre	
Clark, Steve (PC)	Leeds—Grenville—Thousand Islands and Rideau Lakes / Leeds— Grenville—Thousand Islands et Rideau Lakes	
Coe, Lorne (PC)	Whitby	
Collard, Lucille (LIB)	Ottawa—Vanier	Third Deputy Chair of the Committee of the Whole House / Troisième Vice-Présidente du Comité plénier de l'Assemblée législative
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Cuzzetto, Rudy (PC)	Mississauga—Lakeshore	
Dixon, Jess (PC)	Kitchener South—Hespeler / Kitchener-Sud—Hespeler	
Dowie, Andrew (PC)	Windsor—Tecumseh	
Downey, Hon. / L'hon. Doug (PC)	Barrie—Springwater—Oro-Medonte	Attorney General / Procureur général
Dunlop, Hon. / L'hon. Jill (PC)	Simcoe North / Simcoe-Nord	Minister of Colleges and Universities / Ministre des Collèges et Universités
Fedeli, Hon. / L'hon. Victor (PC)	Nipissing	Chair of Cabinet / Président du Conseil des ministres Minister of Economic Development, Job Creation and Trade / Ministre du Développement économique, de la Création d'emplois et du Commerce
Fife, Catherine (NDP)	Waterloo	

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Flack, Hon. / L'hon. Rob (PC)	Elgin—Middlesex—London	Associate Minister of Housing / Ministre associé du Logement
Ford, Hon. / L'hon. Doug (PC)	Etobicoke North / Etobicoke-Nord	Leader, Progressive Conservative Party of Ontario / Chef du Parti progressiste-conservateur de l'Ontario
		Premier / Premier ministre
		Minister of Intergovernmental Affairs / Ministre des Affaires intergouvernementales
Ford, Hon. / L'hon. Michael D. (PC)	York South—Weston / York-Sud—Weston	Minister of Citizenship and Multiculturalism / Ministre des Affaires civiques et du Multiculturalisme
Fraser, John (LIB)	Ottawa South / Ottawa-Sud	
French, Jennifer K. (NDP)	Oshawa	
Gallagher Murphy, Dawn (PC)	Newmarket—Aurora	
Gates, Wayne (NDP)	Niagara Falls	
Gélinas, France (NDP)	Nickel Belt	
Ghamari, Goldie (PC)	Carleton	
Glover, Chris (NDP)	Spadina—Fort York	
Gretzky, Lisa (NDP)	Windsor West / Windsor-Ouest	
Grewal, Hardeep Singh (PC)	Brampton East / Brampton-Est	
Hardeman, Ernie (PC)	Oxford	
Harden, Joel (NDP)	Ottawa Centre / Ottawa-Centre	
Harris, Mike (PC)	Kitchener—Conestoga	
Hazell, Andrea (LIB)	Scarborough—Guildwood	
Hogarth, Christine (PC)	Etobicoke—Lakeshore	
Holland, Kevin (PC)	Thunder Bay—Atikokan	
Hsu, Ted (LIB)	Kingston and the Islands / Kingston et les Îles	
Jama, Sarah (IND)	Hamilton Centre / Hamilton-Centre	
Jones, Hon. / L'hon. Sylvia (PC)	Dufferin—Caledon	Minister of Health / Ministre de la Santé
		Deputy Premier / Vice-première ministre
Jones, Trevor (PC)	Chatham-Kent—Leamington	Deputy Government House Leader / Leader parlementaire adjoint du gouvernement
Jordan, John (PC)	Lanark—Frontenac—Kingston	
Kanapathi, Logan (PC)	Markham—Thornhill	
Karpoche, Bhutla (NDP)	Parkdale—High Park	First Deputy Chair of the Committee of the Whole House / Première Vice-Présidente du Comité plénier de l'Assemblée législative
Ke, Vincent (IND)	Don Valley North / Don Valley-Nord	
Kernaghan, Terence (NDP)	London North Centre / London-Centre-Nord	Deputy Opposition House Leader / Leader parlementaire adjoint de l'opposition officielle
Kerzner, Hon. / L'hon. Michael S. (PC)	York Centre / York-Centre	Solicitor General / Solliciteur général
Khanjin, Hon. / L'hon. Andrea (PC)	Barrie—Innisfil	Minister of the Environment, Conservation and Parks / Ministre de l'Environnement, de la Protection de la nature et des Parcs
		Deputy Government House Leader / Leader parlementaire adjointe du gouvernement
Kusendova-Bashta, Natalia (PC)	Mississauga Centre / Mississauga-Centre	
Leardi, Anthony (PC)	Essex	
Lecce, Hon. / L'hon. Stephen (PC)	King—Vaughan	Minister of Education / Ministre de l'Éducation
Lumsden, Hon. / L'hon. Neil (PC)	Hamilton East—Stoney Creek / Hamilton-Est—Stoney Creek	Minister of Tourism, Culture and Sport / Ministre du Tourisme, de la Culture et du Sport
MacLeod, Lisa (PC)	Nepean	
Mamakwa, Sol (NDP)	Kiiwetinoong	Deputy Leader, Official Opposition / Chef adjoint de l'opposition officielle
Mantha, Michael (IND)	Algoma—Manitoulin	
Martin, Robin (PC)	Eglinton—Lawrence	
McCarthy, Hon. / L'hon. Todd J. (PC)	Durham	Minister of Public and Business Service Delivery / Ministre des Services au public et aux entreprises
McCrimmon, Karen (LIB)	Kanata—Carleton	
McGregor, Graham (PC)	Brampton North / Brampton-Nord	
McMahon, Mary-Margaret (LIB)	Beaches—East York	
Mulroney, Hon. / L'hon. Caroline (PC)	York—Simcoe	President of the Treasury Board / Présidente du Conseil du Trésor
		Minister of Francophone Affairs / Ministre des Affaires francophones
Oosterhoff, Sam (PC)	Niagara West / Niagara-Ouest	
Pang, Billy (PC)	Markham—Unionville	

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Parsa, Hon. / L'hon. Michael (PC)	Aurora—Oak Ridges—Richmond Hill	Minister of Children, Community and Social Services / Ministre des Services à l'enfance et des Services sociaux et communautaires
Pasma, Chandra (NDP)	Ottawa West—Nepean / Ottawa-Ouest—Nepean	
Piccini, Hon. / L'hon. David (PC)	Northumberland—Peterborough South / Northumberland—Peterborough-Sud	Minister of Labour, Immigration, Training and Skills Development / Ministre du Travail, de l'Immigration, de la Formation et du Développement des compétences
Pierre, Natalie (PC)	Burlington	
Pirie, Hon. / L'hon. George (PC)	Timmins	Minister of Mines / Ministre des Mines
Quinn, Nolan (PC)	Stormont—Dundas—South Glengarry	
Rae, Matthew (PC)	Perth—Wellington	
Rakocevic, Tom (NDP)	Humber River—Black Creek	
Rasheed, Kaleed (IND)	Mississauga East—Cooksville / Mississauga-Est—Cooksville	
Rickford, Hon. / L'hon. Greg (PC)	Kenora—Rainy River	Minister of Northern Development / Ministre du Développement du Nord Minister of Indigenous Affairs / Ministre des Affaires autochtones
Riddell, Brian (PC)	Cambridge	
Romano, Ross (PC)	Sault Ste. Marie	
Sabawy, Sheref (PC)	Mississauga—Erin Mills	
Sandhu, Amarjot (PC)	Brampton West / Brampton-Ouest	
Sarkaria, Hon. / L'hon. Prabmeet Singh (PC)	Brampton South / Brampton-Sud	Minister of Transportation / Ministre des Transports
Sarrazin, Stéphane (PC)	Glengarry—Prescott—Russell	
Sattler, Peggy (NDP)	London West / London-Ouest	
Saunderson, Brian (PC)	Simcoe—Grey	
Schreiner, Mike (GRN)	Guelph	
Scott, Laurie (PC)	Haliburton—Kawartha Lakes—Brock	
Shamji, Adil (LIB)	Don Valley East / Don Valley-Est	
Shaw, Sandy (NDP)	Hamilton West—Ancaster—Dundas / Hamilton-Ouest—Ancaster—Dundas	
Skelly, Donna (PC)	Flamborough—Glanbrook	Deputy Speaker / Vice-Présidente Chair of the Committee of the Whole House / Présidente du Comité plénier de l'Assemblée législative
Smith, Dave (PC)	Peterborough—Kawartha	
Smith, David (PC)	Scarborough Centre / Scarborough-Centre	
Smith, Hon. / L'hon. Graydon (PC)	Parry Sound—Muskoka	Minister of Natural Resources and Forestry / Ministre des Richesses naturelles et des Forêts
Smith, Laura (PC)	Thornhill	
Smith, Hon. / L'hon. Todd (PC)	Bay of Quinte / Baie de Quinte	Minister of Energy / Ministre de l'Énergie
Stevens, Jennifer (Jennie) (NDP)	St. Catharines	
Stiles, Marit (NDP)	Davenport	Leader, Official Opposition / Chef de l'opposition officielle Leader, New Democratic Party of Ontario / Chef du Nouveau Parti démocratique de l'Ontario
Surma, Hon. / L'hon. Kinga (PC)	Etobicoke Centre / Etobicoke-Centre	Minister of Infrastructure / Ministre de l'Infrastructure
Tabuns, Peter (NDP)	Toronto—Danforth	
Tangri, Hon. / L'hon. Nina (PC)	Mississauga—Streetsville	Associate Minister of Small Business / Ministre associée déléguée aux Petites Entreprises
Taylor, Monique (NDP)	Hamilton Mountain / Hamilton-Mountain	
Thanigasalam, Hon. / L'hon Vijay (PC)	Scarborough—Rouge Park	Associate Minister of Transportation / Ministre associé des Transports
Thompson, Hon. / L'hon. Lisa M. (PC)	Huron—Bruce	Minister of Agriculture, Food and Rural Affairs / Ministre de l'Agriculture, de l'Alimentation et des Affaires rurales
Tibollo, Hon. / L'hon. Michael A. (PC)	Vaughan—Woodbridge	Associate Minister of Mental Health and Addictions / Ministre associé délégué au dossier de la Santé mentale et de la Lutte contre les dépendances
Triantafilopoulos, Effie J. (PC)	Oakville North—Burlington / Oakville-Nord—Burlington	
Vanthof, John (NDP)	Timiskaming—Cochrane	Opposition House Leader / Leader parlementaire de l'opposition officielle

Member and Party / Député(e) et parti	Constituency / Circonscription	Other responsibilities / Autres responsabilités
Vaugcois, Lise (NDP)	Thunder Bay—Superior North / Thunder Bay—Supérieur-Nord	
Wai, Daisy (PC)	Richmond Hill	
West, Jamie (NDP)	Sudbury	
Williams, Hon. / L'hon. Charmaine A. (PC)	Brampton Centre / Brampton-Centre	Associate Minister of Women's Social and Economic Opportunity / Ministre associée des Perspectives sociales et économiques pour les femmes
Wong-Tam, Kristyn (NDP)	Toronto Centre / Toronto-Centre	
Yakabuski, John (PC)	Renfrew—Nipissing—Pembroke	
Vacant	Lambton—Kent—Middlesex	
Vacant	Milton	