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LEGISLATIVE ASSEMBLY OF ONTARIO

ASSEMBLÉE LÉGISLATIVE DE L'ONTARIO

Tuesday 16 May 2023

Mardi 16 mai 2023

Report continued from volume A. 1736

BUILDING A STRONG ONTARIO ACT (BUDGET MEASURES), 2023 LOI DE 2023 VISANT À BÂTIR UN ONTARIO FORT (MESURES BUDGÉTAIRES)

Continuation of debate on the motion for third reading of the following bill:

Bill 85, An Act to implement Budget measures and to amend various statutes / Projet de loi 85, Loi visant à mettre en oeuvre les mesures budgétaires et à modifier diverses lois.

The Acting Speaker (M^{me} Lucille Collard): We're going to move to further debate.

Ms. Teresa J. Armstrong: I want to bring some local perspective on housing, and I want to set the stage of what's missing in the budget and maybe for the members to reflect on how they can strengthen the housing laws.

In my riding, this is what people have received on their doorstep:

"Dear Tenants,

"You may be aware that the building has been in disrepair for many years.

"Under new ownership of ... Webster Street will be undergoing an extensive renovation. We are in the beginning stages and following an in-depth review of the scope of work involved, it has been determined that this will be a serious health and safety matter. During the renovation your unit will not be reasonably fit for habitation. Please take this seriously as we care about ... your family.

"Therefore, we have no choice but to terminate your lease effective August 31, 2023. Attached you will see the appropriate N9 and N13 forms issued by the Landlord and Tenant Board.

"Under the Residential Tenancies Act we are only obligated to offer" you "a maximum of 3 months' rent in compensation ($$1,000.00 \times 3 = $3,000.00$). However, if you decide to vacate and terminate the lease on or before May 31 ... we are in good faith willing to give you a lump sum payment of \$5,000.00.

"While we understand this letter may come as a surprise, we are well within our rights as building owners to terminate your tenancy and do the necessary improvements as required. We expect the renovations to last 7-10 months

"Should you have any questions or concerns, please contact Sarita" and they give the number.

That's what the tenants received at Webster Street.

Now, I'm going to explain or describe to you how that was received by those tenants, some local stories here: "I was at home after working on Friday, April 28, and stepped out to shop for groceries when I found a letter on the floor outside my door. I read that it was an N13 eviction letter, and immediately started crying and panicking in the hall, causing a commotion that alarmed two neighbours to come out and ask me what was wrong. I could barely speak, and just kept saying, 'I don't understand what is going on.' They tried to console me, but I was an emotional wreck. I called the superintendent that I have had for over five years, and he did not know about the content of the letter nor the eviction.

"The following day I found out that 10 units in my building"—Webster Street, London—"had received the exact same letter as well as 10 units in the adjacent building. The eviction notices came from the new Toronto owner of the property that was purchased approximately 20 days prior. The notices said that renovations were to take place as the 'building is in disrepair.'

"My unit is a two-bedroom apartment that is in excellent condition and I have never had any rent or maintenance issues in the five-plus years I have lived here. When I moved in with my then teenage son, I paid what was then the current market" rate. "My home was affordable, safe and friendly. This community and my neighbours have offered a decent quality of life and I had hoped I would live out my pending senior years in comfort.

"All that has been shattered. This is not the London or Ontario that I have known for the past seven decades. Having your home threatened and the thought of being homeless, while trying to be employed is a devastating future. I have been physically sick with dread and emotionally grieving the fact of losing my shelter. I am unable to sleep and function due to the worry and stress. Where will I go that is affordable and safe? How can the city of London allow this to happen to modest income tenants? Many of my neighbours are on pensions and/or are elderly and/or vulnerable, and some of those have also received N13 notices. One elderly couple, that did not receive the N13 notice, are so frightened about what could take place in the months to come that they have asked for a \$5,000.00 buyout to leave immediately (this option was offered with the N13 eviction notice). Is this how we now treat our seniors in London, and Ontario, with fear and bullying? Is this the Canada we want for our growing families?

"This is my home. As a tenant I pay rent, that rent pays for the property taxes for the owner. I live and work in this community, and I have value as a community member. To have to live in fear that someone can decide that I will lose my shelter, my home, because the rental market has changed post-COVID is cruel and not the Ontario I have known. Having a modest roof over your head should not fill us with fear, nor should it be a part of Canadian culture.

"Signed,

"A 65 year-old woman destined to be an unhoused statistic. Please understand I have left out my personal information, as I fear future targeting. Other tenants are already being 'warned,' because of their approach to the media."

Speaker, this is the kind of housing crisis that's happening not just in London but throughout the province, and this is not the first time this has occurred in my area. King Edward is one. Sandringham is another. Belmont is another. Speculators are coming into London and all throughout this province, and these corporate landlords using the law loopholes to evict tenants who are paying belowmarket rent, because, in London, London's rents have spiked 25% over the past year. So the people who are paying below-market rent, they're not profitable in these units, so they're looking for every way they can evict them.

This building is a vulnerable situation, and this government hasn't put in the budget areas to protect tenants. There is no new funding for social housing or to protect existing social housing for maintenance. There's no funding to help struggling tenants afford the skyrocketing rents.

But the government can make legislative changes to close these loopholes, hold corporate landlords accountable for their actions and make them responsible for these tenants, because in seven to eights months, I can guarantee you, Speaker, that they will not—and even if they ask for a right of refusal to come back, they won't be able to do that. As I'm speaking right now, this corporate landlord on their website is actually advertising rental apartments for \$1,800, and they're showing them already renovated. They're actively already asking people to apply for an empty unit at \$1,800, so the people who are having these eviction notices sent to them—why aren't they offered that unit? That's the law.

The other problem with landlords quoting laws and giving tenants advice is that they're not giving the full picture. They've completely forgotten that they're supposed to offer them an additional unit; right? They also don't tell them they can appeal it, and this is not a good way to operate for corporate landlords and tenants. If landlords are going to act as lawyers and give advice to tenants, they should be giving them the right advice. That's a piece in our legislation—it's Bill 58, which is on illegal evictions—where it says that landlords are supposed to give the proper information, and if they don't and the Landlord and Tenant Board sees that, that termination is gone; they cannot evict that tenant.

We know that when we get to the Landlord and Tenant Board, the balance of scales is tipped because tenants don't have access to legal representation. Legal aid is overwhelmed with clients, and then even if you get to the Landlord and Tenant Board, if you make a little bit more than the bar, which is so low, for the poverty line to get legal aid, you can't afford legal representation. It's very expensive. That's another piece in Bill 58, that we say everyone should have legal representation at the Landlord and Tenant Board.

And holding these Zoom meetings? Come on. That is such a disadvantage to people when it's a legal matter. People don't usually have the legal means or language, and when you thrust them into the Landlord and Tenant Board on Zoom and their housing is at stake, that's just not right, Speaker.

We need to do better, and in this budget, I don't see anything that helps tenants. You may have "prosperity" all over the place, but if you're going to worry about prosperity here, you have to bring the people along with it. You can't pick and choose which ones you're going to take up the road, up the stream, and leave the other ones at the bottom of the bank.

I'm happy to have questions about this, but the reason I bring this up, Speaker, is because housing is so important to everyone. I know the government wants to build housing and prioritize housing, but you can't have people who are already housed lose their housing because the Landlord and Tenant Board laws aren't accurate. The residential tenancy laws aren't closing the loopholes that these corporate landlords are wiggling through and evicting people, and this is what's happening in London–Fanshawe.

The Acting Speaker (M^{me} Lucille Collard): We're going to move to questions, and I'll recognize the member for Flamborough–Glanbrook.

Ms. Donna Skelly: I sat and listened intently to the member from London–Fanshawe, to her comments this afternoon, but I want to ask the member across the aisle, on the other side, in opposition, about whether or not she is aware—through you, Madam Chair—that yes, there is money in this budget for our most vulnerable. We have increased funding for homelessness by \$200 million, so \$700 million in this budget is directed towards homelessness. A number of the mayors from municipalities across Ontario—I know that the mayor in Oakville, Mayor Burton, was thrilled to have an increase, and also in Brampton, in Hamilton. They appreciate the additional funding. I know Hamilton received 18% more than last year.

My question is, are you aware that this government has allocated unprecedented amounts of funding, of monies, for homelessness in this budget?

Ms. Teresa J. Armstrong: I appreciate what the member is saying, and I understand they do talk about wanting to help homelessness, but the homelessness that we're experiencing—this money is going to be allocated to people who are already homeless. What I'm talking about today is people who have homes, and then they're being forced out of their homes, and you're creating more homelessness because people cannot afford the market rent with the kind of incomes that people have in these buildings. There are people who are on CPP, ODSP, OW. This woman in particular doesn't want to give her name; she doesn't make enough to pay the market rent.

So having that money in the budget is to help homelessness for people who are already homeless, who need to be

housed, but we have to protect the people who are already housed, so that they're not homeless, and we're just having a funnel effect and not fixing the problem.

The Acting Speaker (M^{me} Lucille Collard): Next question?

Ms. Peggy Sattler: I want to commend my colleague the member for London–Fanshawe for her advocacy on behalf of those tenants who live in those buildings on Webster Street. I know she attended the rally on Friday that was organized by ACORN. I saw some of the media footage from that rally, and it was absolutely heartbreaking to see people in wheelchairs, seniors, some of the most vulnerable people in our community, who are completely devastated by the prospect of losing their homes and becoming unhoused.

I wanted to ask my colleague, what would she have liked to see in this budget to protect people like those tenants who live in those Webster Street apartments?

Ms. Teresa J. Armstrong: Thank you. I appreciate that. I think I've spoken about this in the Legislature. What we need to do is protect people who are already housed, and one of the things we can do—the NDP has brought Bill 28, which removes rent controls. We don't want rent controls—we want rent controls in this province, but this government—excuse me. We want to remove rent controls—so that landlords are only allowed to raise the rent one time, as per the inflationary rate. Right now, landlords can raise the rents as much as they want, as long as the building is 2018—or someone has moved in within 2018. So rent controls are very important.

The other thing that needs to happen is, we need to pass Bill 58, which prevents illegal evictions, like the renovictions that are happening right now at Webster Street, and holds landlords accountable. There are so many pieces in that; it's very detailed. What it really does is hold landlords accountable for bad actions, and it eliminates the fact that they can evict someone if they acted in bad faith. But we have to find those through investigating it, and not let the landlords get away with those laws.

The Acting Speaker (M^{me} Lucille Collard): Next question?

Mr. Graham McGregor: I want to thank my colleague from the London area for her speech. I listened intently, and listening to the member speak, you can tell that the member has her heart in the right place.

One of the things that I really like about this budget that the government has put forward is the ability to find winwin situations—not having a decision where we have "or," but using the word "and" instead. So we can invest in jobs and growth and protect the environment through the first urban provincial park. We can build highways for commuters, and we can invest in transit. We can do record levels of health care spending—including a hospital in my own neck of the woods, the second hospital for Brampton, Peel Memorial—and be fiscally responsible and get down to a balanced budget.

I just want to ask the member: Looking at all these winwin situations, could she point out any others that maybe we should bring in next time? **Ms. Teresa J. Armstrong:** Thanks to the member for the question.

I think where the win-win situations come in when it comes to housing—the government wants to make sure they look at homelessness, and they're building new houses, and that's what their statements are. But the other—building new housing, building affordable housing, addressing the homeless situation, and protecting tenants, making sure that there is real rent control for tenants, making sure that we fix the wait times at the Landlord and Tenant Board so that there isn't that delay and people get displaced, having the minister either empower the Minister of Municipal Affairs and Housing or designate someone in the rental housing enforcement unit to actually investigate these bad-faith evictions—that it is a win-win situation, that we're correcting the problem of housing but we're not having people being evicted and creating more of a problem in housing.

The Acting Speaker (M^{me} Lucille Collard): Question? MPP Lise Vaugeois: Thank you for your presentation.

I share your concerns with the lack of rent control on new builds, and also the ability to evict people through renovictions. And even if it were possible, if the rents were still affordable for people to come back six or seven months later, where the heck are they supposed to go in the interim? Imagine being in a wheelchair and trying to find another place to live in the midst of a housing crisis where there are very, very few accessible buildings in the first place.

Ms. Teresa J. Armstrong: That's exactly it. People have medical conditions. They have financial barriers. And the seven- to eight-month renoviction—where are people going to go? Offering them three months' rent because they're legally obligated to or dangling a \$5,000 payout so that you can leave early—these tactics are forcing people to make these decisions that are not advantageous to them. They're being disadvantaged. And they will not be able to afford the rents that are market rents right now for seven to eight months.

So we need to make sure that when these corporate landlords are taking over these buildings, they have to be accountable to the Landlord and Tenant Board for badfaith evictions, and make sure they work with tenants—because that's the other thing: During that rally, tenants were asking the landlord to work with them, because they didn't want to lose their homes.

The Acting Speaker (M^{me} Lucille Collard): Another question?

Mr. Todd J. McCarthy: The member opposite talks about the need of assistance for those who face struggles. I assume she is talking in part about the high inflation and the precarious state for some in dealing with rising costs, due in large part to the carbon tax, which your federal party seems to support.

But if the best social program is a job, if the dignity of work is what we should be promoting, then when over the next decade we're going to need hundreds of thousands of workers in construction alone, why will the opposition not support this proposed legislation which would invest \$224

million to expanding training centres, including union training halls, and leverage private sector union expertise to train more workers in the skilled trades?

Ms. Teresa J. Armstrong: With all due respect, most of the people who are on ODSP or on fixed incomes don't have cars, so the carbon tax isn't really going to affect them. They can't afford the insurance and they can't afford the gas—a lot of them. It's an affordability issue.

If people can work, I'm sure they would be happy to work, but the people who can't work are the ones who are the most vulnerable. They're going to be the ones that can't afford the market rents. They are the ones that can't afford the cost of living, and that's why we have to protect them where they are right now and pass laws—the Residential Tenancies Act laws—that actually protect them when they are in that unit. You can't just kick them out because you want to increase the rent. That's not the way it should operate. There should be rent controls, and landlords should not be allowed to wiggle those loopholes and kick people out that can't afford the rent today.

The Acting Speaker (M^{me} Lucille Collard): We're out of time. We're going to move to further debate.

M. Andrew Dowie: Je ferai mon possible dans les trois minutes.

Lors de la deuxième lecture de ce projet de loi, j'ai eu le privilège de citer l'appui des mesures budgétaires de notre gouvernement du maire de Windsor, Drew Dilkens; du PDG de l'hôpital régional de Windsor, David Musyj; du PDG de l'Hôtel-Dieu Grace Healthcare, Bill Marra; de la D^{re} Sonja Grbevski, PDG de l'Association canadienne pour la santé mentale; de Rukshini Ponniah-Goulin, directrice générale de la mission centre-ville de Windsor; de Rakesh Naidu, président de la Chambre de commerce régionale de Windsor-Essex. Ce budget est soutenu par un grand nombre d'organisations qui desservent les populations vulnérables de Windsor et du comté d'Essex.

Ce budget ajoute 202 millions de dollars supplémentaires par année pour les services de soutien pour les personnes vulnérables, dont 16 698 400 \$ pour Windsor-Essex, une augmentation de 34 %, pour la prévention de l'itinérance. C'est un changement incroyable qui, je le sais, signifiera que nous amènerons beaucoup plus d'Ontariens au succès.

Madame la Présidente, je suis également ravi que notre gouvernement réduise de 700 millions de dollars par année ses frais de remboursement de la dette. C'est maintenant de l'argent qui n'entre pas dans les bénéfices des banques; cela va dans nos services.

Notre gouvernement a soutenu la prise en charge de notre infrastructure hospitalière locale, de santé et de soins de longue durée. Cela signifie le nouvel hôpital régional, des soins aigus de Windsor-Essex. Dans ma communauté, cinq foyers de soins de longue durée sont en cours de reconstruction: Brouillette Manor, Banwell Gardens, Berkshire, Regency Park et Chateau Park.

Notre gouvernement a ainsi appuyé la lutte contre la stagnation économique. Plus de 16 milliards de dollars d'investissements sont maintenant apportés dans notre province par des constructeurs automobiles mondiaux, des fournisseurs de batteries de véhicules électriques et de

matériaux de batteries, et ça positionne l'Ontario comme chef de file mondial dans la chaîne d'approvisionnement des véhicules électriques. Chez moi à Windsor-Tecumseh, notre gouvernement a signé et a honoré son engagement de soutenir l'usine de batteries de véhicules électriques de NextStar Energy avec un engagement de 500 millions de dollars. Ce même engagement a été pris envers Volkswagen à St. Thomas en Ontario.

Notre gouvernement a aussi tenu son engagement de doubler les voies de la route 3. Les habitants du comté d'Essex ont attendu 10 ans avant de voir des mesures.

Je vais de plus ajouter les écoles de Windsor-Tecumseh dans ce budget, le soutien pour la santé, nos praticiens—

La Présidente suppléante (M^{me} Lucille Collard): Je suis désolée d'interrompre le député. Nous devons maintenant passer au private members' public business.

Third reading debate deemed adjourned.

1800

PRIVATE MEMBERS' PUBLIC BUSINESS

ADDICTION SERVICES

Mr. Stephen Crawford: I move that, in the opinion of this House, the Minister of Colleges and Universities should work with the Associate Minister of Mental Health and Addictions to take the necessary steps to engage with relevant stakeholders to consider the development of a process for the certification of addiction peer support specialists.

The Acting Speaker (M^{me} Lucille Collard): Pursuant to standing order 100, the member has 12 minutes for his presentation.

Mr. Stephen Crawford: It's an honour to be able to speak to everyone here in the Legislature tonight. This is my first private member's motion in this Parliament. I hope we'll be able to highlight the important work that peer support workers do for our health care system. The addiction peer support specialists provide a vital service in support of individuals recovering from substance use disorders, addictions and mental illness.

To begin, let me take a quick moment to thank and acknowledge the many people who have helped me make this private members' motion possible. Thank you to my caucus colleagues who will be speaking on this shortly. Thank you to the deputy government House leader, the deputy government whip, the PA to the Minister of Intergovernmental Affairs, the member for Barrie-Innisfil. Thank you to the PA to the Minister of Tourism, Culture and Sport, the member for Peterborough-Kawartha. Thank you to the Associate Minister of Mental Health and Addictions, the member from Vaughan-Woodbridge, and to the member from Simcoe North, the Minister of Colleges and Universities. Also, a special thanks to some of the hard-working staff: Thank you, George, Brock, Suzanne, Scott, Scott, Nick, and Jad. I really appreciate all your work in helping make this happen tonight.

Today, I want to talk about an important problem that impacts our province and its people. The addiction peer support specialist motion focuses to combat a complex and often misunderstood issue that affect millions of people: addiction. Addiction not only affects individuals, but it has a ripple effect on families and communities.

This motion would help signal to the Minister of Colleges and Universities to work with the Associate Minister of Mental Health and Addictions to take the necessary steps to engage with relevant stakeholders to consider the development of a process for certification of addiction peer support specialists. This proposed motion aims to improve the lives of those recovering from addiction and create a better, more consistent system for addiction support across Ontario.

Education, community programs and peer addiction worker strategies play a crucial role in preventing addiction and supporting those at risk. These approaches are essential in addressing the root causes of addiction and providing support to vulnerable individuals.

By teaching healthy ways to deal with problems, telling people about positive relationships, and assisting people to be stronger, these actions help stop addiction from repeating: education, local programs and help, let people make good choices, build good friendships and relationships, and find help when they need it. By doing this, these methods make a big difference for people who might become addicted and help make our communities better.

First, let me provide some context. Currently, addiction peer support workers in Ontario are entirely unregulated. This lack of regulation leads to inconsistent services and programs. Additionally, without a recognized certification process, people with lived experience in recovery sometimes face barriers to employment as peer support workers. This motion seeks to change that by establishing a process for certification.

Recovery from addiction is possible, and addiction peer support workers play a vital role in this process. These professionals, often with lived experiences of addiction themselves, provide empathy, understanding and guidance to individuals navigating their recovery journey. By sharing their personal experiences and insights, peer support workers create a sense of connection and hope for those facing similar challenges. Their unique perspective allows them to offer practical advice and support based on first-hand knowledge of the recovery process, reinforcing the belief that change is achievable.

Peer support workers serve as role models, demonstrating that long-term recovery is attainable and inspiring those in treatment to maintain their progress. The presence of addiction peer support workers in various settings such as in-patient units, community organizations and outpatient programs ensures that individuals in recovery have access to consistent, compassionate support throughout their journey. By fostering a sense of belonging and providing essential guidance, addiction peer support workers contribute significantly to the recovery process, helping individuals reclaim their lives and build a healthier, more helpful future.

The Ministry of Colleges and Universities will engage with relevant stakeholders to develop the best possible certification process. This collaboration will ensure that everyone who works in addiction peer support is qualified and adheres to the same standards.

There are two main reasons for this motion. The first reason is to help individuals recovering from addiction reintegrate into the workforce. Gaining provincial accreditation and recognition in the currently unregulated field of addiction peer support specialists will help make this possible. The second reason is the alignment with our government's priorities. The government of Ontario is committed to building a comprehensive system of care for mental health and addictions. Peer support is a key wraparound service for those in community and residential addiction treatment programs. Furthermore, the government has invested heavily in reintegrating and upskilling individuals to address critical labour shortages, reduce the number of individuals on social assistance, and help workers transition to better-paying, meaningful careers.

Mental illness and addiction are big problems in Canada, costing over \$90 billion per year. They affect health care, businesses and, of course, people's lives. Businesses lose about \$6 billion because of lost productivity from these issues. In the next 30 years, the total cost could reach \$2.5 trillion. Substance use alone costs nearly \$40 billion per year. Alcohol and tobacco make up most of these costs, with opioids and cannabis also having a very large impact.

Mental illness makes workplace disability leaves cost twice as much as those for physical illness.

In 2020, substance use led to 74,000 deaths, including 24,346 deaths of people under the age of 65; this means many years of productive life were lost. Opioids caused the most years of life lost, even though tobacco and alcohol caused more deaths overall. Between 2007 and 2020, the cost of lost productivity per person went up by 16.2%. The biggest increase was from opioid use, which doubled in cost per person during that time.

Addiction peer support workers can help address these issues. By creating legislation for them, we can make sure they have the right training and certification. This can lead to better support for people in recovery and improve their chances of success. As more people recover, the costs related to mental illness and addiction will go down. Investing in peer support addiction support workers can make a real difference in the lives of people struggling with these issues and help our society in the long run.

Let's quickly examine, in the limited time I have left, what other provinces in Canada have done.

In British Columbia, for example, BCcampus and the Ministry of Mental Health and Addictions recently launched the provincial peer support worker training curriculum to the public. The process involves formal training, a practical course and ongoing professional development. This approach ensures a consistent level of service and expertise among peer support workers, further strengthening the support system for individuals in recovery.

In Prince Edward Island, the Canadian Mental Health Association PEI Division provides certification for specialized peer support workers by completing a 119-hour program that includes two weeks of in-person training, a practical course, and a written and oral exam. This training will help equip individuals to use their personal experience to support others by providing specific education, tools, skills and exposure.

1810

The New Brunswick department of health subsidizes the cost to participants attending peer support intervention training programs put out by the Canadian Mental Health Association. In Newfoundland and Labrador, there is no legislated or certified training course for peer support or mental health and addictions workers, however, CHANNAL, a community agency funded by the Department of Health and Community Services in Newfoundland has developed their own local training, Today and Tomorrow, Too. This is an extensive program that also includes on-the-job training and job shadowing to become a trained support worker in mental health and addictions. The training has also been used by the community agency U-Turn that led substance use peer support worker for the province.

The private member's motion is vital for all of our communities in Ontario. No corner in this province of Ontario is immune from the devastating impact of the opioid crisis. By engaging in meaningful efforts to strengthen the continuum of care and to reintegrate individuals into recovery, we can make a real difference in the lives of our residents. As we have seen in other provinces, integration of peer support workers has yielded positive results. It's time for Ontario to follow suit and ensure those in need receive help from qualified professionals.

Of course, there may be concerns from existing individuals working as addiction peer support specialists and unrecognized credentialing bodies. Rest assured, this proposed legislation is designed to begin stakeholder consultations, and the minister will explore and engage with relevant stakeholders to address any concerns that may arise.

The Associate Minister of Mental Health and Addictions summed it up perfectly: "This (motion) will create opportunities for those in recovery to become part of the solution for others. This is another step forward in our work to build a recovery-oriented continuum of care here in Ontario."

By establishing a certification process, we can make a clear, more consistent and effective approach to addiction peer support workers across the province. I urge all members of the assembly to join me in supporting the addiction peer-support specialist motion. Together, we can build a better future for those recovering from mental health issues and addiction.

The Acting Speaker (M^{me} Lucille Collard): Further debate?

M^{me} France Gélinas: I cannot tell you how happy I am that the member brought this motion forward. I have been here for 16 years, and we have never talked about peer support workers in the 16 years that I have been here;

although I hope we all recognize how valuable they are. For hundreds and thousands of people who have faced mental health and substance use issues, the peer support worker was the person who they trusted, was the person who spoke their language, was the person who they established the first relationship of trust that allowed them to go into treatment to get the support that they needed.

Don't get me wrong, peer support workers have tough jobs. We had a few where I used to work at the community health centre. We opened up the first homelessness clinic. The Corner Clinic, it was called, and it didn't take long to realize that the great majority of people who were facing homelessness in my community had severe mental health and substance use issues. What made the program successful were the peer support workers. They were people who had gone through recovery. Many of them had gone through the hardship of being homeless themselves, of spending time in jail, of being accused of all sorts of stuff, and they had recovered and they were able to connect and they were able to show others that there is help.

Mental health and substance use are illnesses like every other illness that can affect me, that can affect you, that can affect any of our loved ones, and there are treatments available. But in order to get over the stigma, because there is still lots of stigma in our community against people who are mentally ill or who deal with substance issues, this trusting relationship is really difficult to establish between—we had some really good nurses and really good physicians and really good occupational therapists and all of this who know their stuff and know how to offer the treatment. But the first link, this trusting relationship—the most successful workers to do that were the peer support workers.

We had Nicole. I'm not sure I'm allowed to share her full name, but I worked with her. She had gone through the hardship. She had a way to communicate with people that made it really easy to show that she had empathy. It's often difficult for people facing mental illness and substance use issues to keep their appointments. She would go down—it didn't matter if it was the middle of the winter and cold out there—and find them and convince them that it was time to come to your appointment, and you had to come.

I see that my time is running out. I thank you for bringing this forward. I thank you for getting an opportunity to say thank you to all of the peer support workers out there. You do fantastic work. We need more of you. Thank you for what you do.

The Acting Speaker (M^{me} Lucille Collard): Further debate?

Mr. Dave Smith: I want to thank—I'm not sure why can't think of his riding now; I was going to say the member from Crawford.

Mr. Stephen Crawford: Oakville.

Mr. Dave Smith: —the member from Oakville for bringing this motion forward. When I was first elected, I thought that, coming into government, I would be dealing with challenges around the cost of electricity, the challen-

ges around the cost of housing going up and some education things. I didn't actually fully appreciate the challenges that I was going to see and the amount of work that I would be putting in on the mental health and addictions side. It has been a massive eye-opener for me with some of the challenges that various people in our communities face.

I started looking at a number of different things. The opioid challenge is obviously something that is pretty much in everyone's face. It doesn't matter what community you are in; there are significant challenges around opioid addictions. I started looking at a number of different programs that were available, a number of different plans that had been put in place, and I kept coming back to things like Alcoholics Anonymous.

With Alcoholics Anonymous, it was all about those shared experiences where people would stand up and they would talk about their experience that they had gone through. They would share what worked for them and what didn't work for them. It makes sense, because you have that empathy. You've gone through something. You understand what someone else is going through. We see now that there are a lot of advocacy groups that step forward and talk about how we need to have more people who have that lived experience. We need to have more people who have that level of empathy.

I conceptually agree with it, that we need to have those individuals stepping forward and sharing what they have gone through, but what we're missing is some of that formal training. What this motion does is—it's not putting in any kind of a barrier. It's not saying, "Those who have lived experience can't do these things." What it's doing is saying that sometimes you have to craft your message a little bit differently. Sometimes, you have to accept that your experiences are different than what someone else's experiences were. How can you make adjustments, then, yourself, when you're giving that counselling?

What this motion would do for us, then, is promote the idea that sharing that lived experience is a good thing, but it would be a much better thing if it was structured, if it was put in a way that there is faith that the peer counsellor that you're going to actually is a counsellor. Because, at the moment, what we've got is anyone who has a lived experience, anyone who has gone through this can stand up and say, "I could be a peer counsellor," without any kind of formal training. It's not to say that lived experience isn't valuable, because it absolutely is very, very valuable, but so is having that ability to have some formal training to be able to say, "Yes, I am recognized as a peer counsellor. Yes, I am recognized as a professional or someone who has some training behind it," to give that confidence that when you're taking one of your loved ones to someone to help them deal with that addiction, you have faith that that individual actually has the ability to help them.

The Acting Speaker (M^{me} Lucille Collard): Further debate?

Mr. Joel Harden: I rise today to thank the member for Oakville for this motion. I have someone else to thank too as I get started. I do want to thank the Associate Minister

for Mental Health and Addictions for noticing a program in our community in Ottawa that I brought to the associate minister's attention that I think is very much in keeping with the spirit of the motion the member has put on the floor today. It's called the Drug Overdose Prevention and Education program. It's run out of Somerset West Community Health Centre. What it does, as members of this House have been talking about, is draw from people with lived experience. Not only people who had been struggling with additions, people who are currently struggling with addictions are also brought into this program as a wellness initiative to try to help them find their journey out of addiction, out of trauma, and into making their community better. I recommended this to the government. It had won funding from the federal government since 2019. Having brought it to the government's attention, I'm very glad to know that the government has taken interest in this program in our community. I think programs like it will save lives, and let me explain why in the time I have.

What I know is that, since this program has existed, since 2009, there have been 31,114 engagements with people in our community in Ottawa Centre who live with addictions, and 84% of the people who have interacted with this program have said they've learned skills and gained knowledge that have helped them find a path to make their lives better. Those are astounding figures, and I think those figures exist because when you're in that deep well of difficulty, who do you trust to get out of it? That is a really important question that people who I have talked to have said when they think about how we help our neighbours who use drugs, who are struggling with drug addiction. "You will trust someone who has walked a mile in your shoes" is what I hear again and again.

I think about people like Bobby Jamison back home, someone who has worked in this program, who I almost refer to as a street philosopher because Bobby is someone who every single day saves a life back home. Every single day, he walks the streets in our community, looks in on neighbours—not just people who are in the street, but goes into rooming houses, goes into apartment buildings, tries to figure out people who are struggling. He was doing it in the pandemic too.

What Bobby tells me is that when he had his own journey, the journey wasn't from addiction to sobriety. He often says that the opposite of addiction is not sobriety; it's connection to yourself and connection to your community, and discovering what makes you get up in the morning and want to put one foot in front of the other and do something with your life. That's what Bobby said. His first overture into wellness was \$20 and pizza at the Somerset West Community Health Centre, where he was brought into a room with harm reduction workers to talk about why he was living with the trauma of the St. Joseph's residential school in the Thunder Bay area, and how that school had hurt him at such a deep and visceral level that he was selfmedicating through drug use. When he found his way out through spirituality, through connection with neighbours, through connection with other folks who were struggling with addiction, it wasn't just an investment in saving one person's life, Bobby has gone on to save dozens, I think probably hundreds of lives in our community.

What I tell the honourable member in this motion is that you're on the right track, but I would invite the associate minister, I would invite the minister, to bring street experts like Bobby into that conversations, and our community health centres. They will help make this motion have great teeth, have great insight.

I want to end, because I don't often get to do it, by thanking the government for taking an interest in people like Bobby Jamison and folks in communities across Ontario who are there for our neighbours in need.

The Acting Speaker (M^{me} Lucille Collard): Further debate?

Mr. Michael Mantha: I want to start by informing the House that just last week, on May 6, I celebrated my fourth year of sobriety.

I'm actually quite proud of that, as I've seen some of my close friends and family members who have benefited from the services and the peer helper support programs that are established at these centres that are available in Algoma–Manitoulin.

I want to mention Benbowopka Treatment Centre out of Blind River, the Rainbow Lodge, Dan Pine Healing Lodge out of Garden River First Nation and Ngwaagan Gamig Recovery Centre out of Wiikwemkoong First Nation, which just opened up last year. It's a beautiful home welcoming individuals to address some of their addictions. Also, Benbowopka Treatment Centre out of Blind River—their statement is, "A spiritual base has provided an answer for many Anishnawbek, and could be an answer for more. We need to get back to our culture ... We have to look to our beliefs, not to the books of others for solutions to alcoholism."

I wanted to touch on this because I know I spoke to the member earlier today that we always need to keep in mind the traditional ways of healing that First Nations communities have as well. It's so important, what those lived experiences that you have could bring to one's recovery, because the first step that an individual must take is to acknowledge that I need the help, but there needs to be somebody there. There needs to be somebody there and the option and a home and a place for that person to go to be accepted and pulled in for those services.

I also wanted to talk about some of the services that are provided over at the Oaks Centre in Elliot Lake. Dawn, the manager out there, Tatum, the coordinator, and the counsellors that they have there, KA, Mary, Gary, Kathie and Jen, provide such beautiful work. What they provide over at the Oaks Centre—and I know I've pestered the associate minister for mental health on this centre. The invitation is always open to you. Come and join us in Elliot Lake. I will bring you down to the waters down by my camp and we will tour this facility. You will see it has the gold standard of peer helper support and certified counsellors who are there

Why I want the minister there is one of the things that happens when people go to these centres is they get there because there's a huge need. They walk in and they get provided with the tools that they need in order to cope with certain stressful situations when they leave there. When they leave there, they leave on a high because they've been provided with all of these tools by the peer helpers who are there, by the counsellors who are there. They've identified some of their traumas that they're going to continue to have to get treatment for, which is why ongoing training needs to be done, and certification and specialized certification, so that individuals have those tools to recognize those traumas that are within those individuals—to have the empathy, to have the caring tools, to have the ear to the pulse of what is being provided to them, in front of them, through these individuals.

But what also is really needed is, once they leave this centre, there needs to be a continuum of care. It can't just stop here at these centres. There has to be more, because the individual is affected, yes, but also, the family is affected. Every person in this individual's life is affected by this, whether it's your mother, brother, father, sister, aunt or uncle. They need supports as well.

We need to have those programs for those individuals because once you leave these centres on a high, you are filled with energy: "I've got the coping tools." Slowly and surely, once you get into that environment away from these facilities, you start feeling the pressures. You start being exposed to temptations. So relapse programs are also absolutely necessary. Again, we really need to make sure that we provide that continuum of care to those individuals.

The certification is an absolutely needed tool. I came out of a workforce program; I went through a certification as a peer helper. I benefited from the Ministry of Training, Colleges and Universities, which provided me with the tools to be that peer support helper so that I had the ear and I can recognize the signs and I can see the visual indications that people are in need.

I want to commend the member from Oakville for bringing this forward. I was really happy to be provided the opportunity to speak to this today.

1830

The Acting Speaker (M^{me} Lucille Collard): Further debate?

Hon. Michael A. Tibollo: I want to thank the member from Oakville for inviting me to speak to this today. It clearly is a very important piece, an important motion informing the work that I do. I want to thank the member from Nickel Belt, the member from Ottawa Centre, the member from Algoma–Manitoulin and, of course, my colleagues the member from Peterborough–Kawartha and, soon to speak, the member from Barrie–Innisfil for speaking about this so positively and why it's so important.

I couldn't have said it better myself, and I don't know if I can say it any better, but I want to speak to this, because it is important. As the minister responsible for mental health and addictions, I have experience prior to coming here of working with many front-line health care workers to address the intricate challenges involved with addiction. In fact, as many of you know, I'm completing my doctorate in clinical psychology, with a focus on residential therapeutic communities.

Therapeutic communities do not work—will not work—without significant inclusion of peer-to-peer supports. I've heard and I've found in my research that while every person's journey is different when it comes to recovery, the struggle towards wellness is a shared experience. There exist significant experiences in the lives of individuals battling addiction that can be understood and empathized with on a distinct level by those who have walked on the same path in the same shoes of those individuals. Put simply, the lived experience of addiction can offer valuable lessons, particularly for others seeking recovery. That's why the member from Oakville's motion is so important. Peer support is a key component of recovery.

We are building a recovery system in the province of Ontario. Alcoholics Anonymous relies almost entirely on this belief as well, that through reflection and sharing and learning from other similar experiences, one can strengthen their resolve in recovery. It builds a foundation that serves to protect against episodes of relapse.

It's been said that in theory there is no difference between theory and practice; in practice, there is. In this case, practical realities create barriers between someone who desires to become a peer support worker and their ability to become one. The truth of the matter is many individuals who struggle with addiction have had brushes with the law, and criminal records too often serve as a barrier to employment. But what a wonderful thing if those barriers all of a sudden became lived experience that could be relied on as an asset in providing supports and services in therapeutic communities or in an addiction setting.

The truth of the matter is that the mistakes of the past should not dictate a person's future. At some point on their journey through the recovery process, they begin to realize that their addiction cannot and should not define them. As a government, we have stood firm on this belief. Under the leadership of the Minister of Labour, Immigration, Training and Skills Development, we're building a province where everyone, regardless of their past mistakes, can rebuild their lives, enter meaningful careers and contribute to the health and wellness of our communities.

What we're discussing here today is precisely that. By establishing a system where those with lived experience can become certified addiction peer support workers, we create a pathway for those in recovery to turn their past mistakes and their struggles into meaningful careers—careers that in turn build foundations on which others can also build a life of recovery.

Thoreau wrote, "Not until we are lost do we begin to find ourselves."

Speaker, I thank the MPP for Oakville for his recognition of this and for his work in bringing this to the floor of the House. I'm pleased to support this motion and will work with our colleagues from the Ministry of Colleges and Universities to develop a system and build a system that truly will make a difference and allow those who have found themselves the opportunity to guide others in the road to recovery.

The Acting Speaker (M^{me} Lucille Collard): Further debate?

Ms. Peggy Sattler: I rise today to participate in the debate on this motion that was brought forward by the member for Oakville to start working on a process with the Ministry of Colleges and Universities and the Ministry of Mental Health and Addictions to look at certification of addiction peer support specialists.

I first want to acknowledge and recognize the expertise of our post-secondary institutions in this province to be responsive to identified community needs and to work to ensure that the programming is there to address those needs. So I have full confidence that, when this process is undertaken, the Ministry of Colleges and Universities, our college sector, our university sector understand how to ensure programming that is responsive to identified needs.

I do want to urge both ministers, however, to look at who are going to be the relevant stakeholders who are going to be consulted in this process. Peer support, as many people have talked about, is so powerful because it relies on the lived experience of peers to support others who are going through a similar struggle with mental health or substance use issues and are on a similar journey to personal wellness and recovery. Engaging people with lived experience, which is at the very core of peer support, is going to be critical in ensuring the success of any certification process.

I also want to recognize the incredibly valuable role that CMHA Thames Valley Addiction and Mental Health Services plays in my community. They have a very robust offering of peer support programs through that agency, and they are very proud of the services and supports that they offer.

I was surprised when I went to the website of CMHA to look at the peer support programming that they state: "Of importance, many of CMHA's peer support workers have their national certified peer supporter designation through Peer Support Canada...." The values of Peer Support Canada are hope and recovery; empathetic and equal relationships; self-determination; dignity, respect and social inclusion; integrity, authenticity and trust; health and wellness; and lifelong learning and personal growth. So I think it's really important, if this motion goes ahead, to look at that certification process that is already offered by Peer Support Canada and many of our current peer support workers who are providing support through agencies like CMHA, who are already certified, to ensure that those two processes are going to align with each other and not conflict or duplicate.

I also think that one of the questions that may be raised is, is certification going to be mandatory to work as a peer supporter? That's a fundamental question that has to be asked because some of the most effective peer supporters may not be people who can go through a certification process.

Thank you to the member for the motion. I'm happy to participate in the debate.

The Acting Speaker (M^{me} Lucille Collard): Further debate?

Ms. Andrea Khanjin: I'm pleased to rise in the House today to speak in favour of motion 51 and the certification

of addictions peer support specialists. I want to thank the member for Oakville for his leadership on this particular idea, and the Associate Minister of Mental Health.

In Barrie, Ontario, we have the 705 Barrie, an incredible organization in the heart of downtown Barrie that does a lot of peer support help today. I know this is going to be very exciting for them—to be participating in such consultations, to talk about how they can certify some of their members who have lived experience. They've helped people, anywhere from—whether it's drug addictions to alcohol addictions to eating disorders to any type of mental health supports. During noon lunch hours, they do a mental health wellness walk. And they understand the importance of continuing to check in on one another. They have this incredible fundraiser—and the 705 Barrie is all run by volunteers, all peer support, and they fundraise to keep in operation. They do this fundraiser—they just finished one up on May 6—where it's a 24-hour window raise-a-thon. They have musicians play in a window and people donate. The last few years they've had this fundraiser they were able to fundraise over \$60,000 for this support group. They've shown how they can help people in the community and how the peer support is working.

1840

There are many people, as mentioned in this Legislature, who have been through professional programs but they just need that group of people who know where they've come from, what walk of life, to help them keep going on that track, that support system. You can really see that really helping the heart of Barrie. You have people anywhere from professionals to people with lived experience.

This motion also makes me think of my friends like Natalie Harris. I know the minister knows her very well as well. She had a great career as a paramedic but unfortunately, she did fall upon tough times and she did overdose. She spent her whole life helping a lot of people with addictions, doing a lot of speaking engagements and whatnot, and she has become a really great advocate and a peer support helper, amongst many others in the community.

Just a few weeks ago, I was with Candice Thomas. She is our big champion locally for Flora's Walk. She's a huge ambassador and advocate for prenatal mental health. I just wanted to put on the record: Moms, no matter where we're going through life, we're all each other's peer supports. This will make sure we don't need a certification to be a mom. For any moms watching, you're certified if you're a mom. This is not going to be regulating you. It certainly brings that serious lens to folks who do have the lived experience and can pass it on to others.

I do want to thank the Associate Minister of Mental Health and Addictions because when we first did a round table on the Roadmap to Wellness in Barrie with the Attorney General, we did have a lot of people with lived experience around the table and this is something that they brought up at that round table. I know this is going to go a long way, to know that their voices have been heard and that the government is moving forward with this plan,

through the leadership of the member from Oakville as well, again, building on that continuum of care that we know is so important. We know that continuum of care is helping for prenatal mental health, which is so vital. I recognize the federal government has stepped up to that, but I think it echoes the efforts of our minister here, who has also pushed his federal counterparts and others around the table to really embrace that continuum of care, because we could all do better, Speaker.

The Acting Speaker (M^{me} Lucille Collard): The member for Oakville has two minutes to reply.

Mr. Stephen Crawford: Thank you to all the speakers today: the member from Peterborough–Kawartha; the Associate Minister of Mental Health and Addictions; the members from Barrie-Innisfil; from Algoma–Manitou-lin—thank you for sharing your personal stories—the members from Nickle Belt; Ottawa Centre; and London West—all great communities, I might add.

My background is in the financial business. It's a fortunate thing, I don't have a lot of experience with drug addiction or alcohol addiction, although I have seen it, but I saw it in my travels around the province with the Standing Committee on Finance as well as in my consultations with the Ministry of Finance, as the PA to finance, travelling around the province from Thunder Bay to Sudbury to Toronto, Ottawa and everywhere in between.

There were a few things that were different in certain communities and some things that were similar. One of the unfortunate situations I heard in multiple communities—in every community, in fact; particularly in some of the northern communities—was the problems with addictions. As a province, I think we're on a great trajectory. We've got a strong economy, we've got a great future, but there are those that are left behind. There are those that are in dire need. I think giving some sort of certification to people that play such a critical role in the lives of people with addiction problems, the people with lived experience, I think is going to be so critical.

The reason this is a motion is, we need to fill in the details. I don't have the answers to how this process is going to work, but I think we need to start a conversation. The people that have the expertise—which is not me, but it's the people like the member from Ottawa Centre mentioned, the people who walk the streets. Those are the people we need to consult with and get their take on how we can do this. I think with that, it will have a great positive effect on the people of this province.

The Acting Speaker (M^{me} Lucille Collard): The time provided for private members' public business has expired.

Mr. Crawford has moved private members' notice of motion number 51. Is it the pleasure of the House that the motion carry? Carried.

Motion agreed to.

The Acting Speaker (M^{me} Lucille Collard): All matters related to private members' public business having been completed, this House stands adjourned until tomorrow, Wednesday, May 17, at 9 a.m.

The House adjourned at 1845.

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Lindo, Laura Mae (NDP)	Kitchener Centre / Kitchener-Centre	
Lumsden, Hon. / L'hon. Neil (PC)	Hamilton East—Stoney Creek /	Minister of Tourism, Culture and Sport / Ministre du Tourisme, de
	Hamilton-Est-Stoney Creek	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	Official
Martin, Robin (PC)	Eglinton—Lawrence	
McCarthy, Todd J. (PC)	Durham	
McGregor, Graham (PC)	Brampton North / Brampton-Nord	
McMahon, Mary-Margaret (LIB)	Beaches—East York / Beaches—East	
wicivianon, iviary-iviargaret (Lib)	York	
McNaughton, Hon. / L'hon. Monte (PC)	Lambton—Kent—Middlesex	Minister of Labour, Immigration, Training and Skills Developmen Ministre du Travail, de l'Immigration, de la Formation et du
Mulroney, Hon. / L'hon. Caroline (PC)	York—Simcoe	Développement des compétences Minister of Francophone Affairs / Ministre des Affaires francophone
viun oney, from / L non. Caronne (1 C)		Minister of Transportation / Ministre des Transports
Oosterhoff, Sam (PC)	Niagara West / Niagara-Ouest	Minister of Transportation / Ministre des Transports

Member and Party / Député(e) et parti	Constituency / Circonscription	Other responsibilities / Autres responsabilités
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	Minister of the Environment, Conservation and Parks / Ministre de l'Environnement, de la Protection de la nature et des Parcs
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, Hon. / L'hon. Kaleed (PC)	Mississauga East—Cooksville /	Minister of Public and Business Service Delivery / Ministre des
Rasneed, Hon. / L non. Raiced (1 C)	Mississauga-Est–Cooksville	Services au public et aux entreprises
Rickford, Hon. / L'hon. Greg (PC)	Kenora—Rainy River	Minister of Indigenous Affairs / Ministre des Affaires autochtones Minister of Northern Development / Ministre du Développement du Nord
Riddell, Brian (PC)	Cambridge	
Romano, Ross (PC)	Sault Ste. Marie	
Sabawy, Sheref (PC)	Mississauga—Erin Mills	
Sandhu, Amarjot (PC)		
• • •	Brampton West / Brampton-Ouest	D 11 4 64 T D 1/D/11 41 G 11 T/
Sarkaria, Hon. / L'hon. Prabmeet Singh (PC)	Brampton South / Brampton-Sud	President of the Treasury Board / Président du Conseil du Trésor
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	Chair of the Committee of the Whole House / Vice-présidente et présidente du comité plénier de l'Assemblée Deputy Speaker / Vice-présidente
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, Hon. / L'hon. Todd (PC) Smith, Laura (PC)	Bay of Quinte / Baie de Quinte Thornhill	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 Housing / Ministre associée du Logement
Taylor, Monique (NDP)	Hamilton Mountain / Hamilton- Mountain	Associate (vimiste) of Housing / (vimistic associec du Eogenene
Thanigasalam, Vijay (PC)	Scarborough—Rouge Park	
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
	Oakville North—Burlington /	•
Triantafilopoulos, Effie J. (PC)	•	
Triantafilopoulos, Effie J. (PC) Vanthof, John (NDP)	Oakville-Nord—Burlington Timiskaming—Cochrane	Opposition House Leader / Leader parlementaire de l'opposition officielle
	Oakville-Nord—Burlington	••
Vanthof, John (NDP)	Oakville-Nord—Burlington Timiskaming—Cochrane Thunder Bay—Superior North /	••

Member and Party / Député(e) et parti	Constituency / Circonscription	Other responsibilities / Autres responsabilités
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	Kanata—Carleton	
Vacant	Scarborough—Guildwood	