

















SUBMISSION TO ONTARIO'S PROPOSED BILL 171, AN ACT TO ENACT THE VETERINARIAN PROFESSIONALS ACT, 2024 AND AMEND OR REPEAL VARIOUS ACTS

The Matawa Chiefs Council, on this day of May 23, 2024 are providing this submission the Honourable Lisa Thompson, Minister of Agriculture, Food and Rural Affairs and to the Ontario government Committee on the Interior on the above proposed Act which currently sits in 3rd Reading (May 16, 2024). In summary, we are calling for it not to be moved to Royal Assent in its current form as amended on March 7, March 21 and May 16, 2024.

Introduction:

Established 35 years ago, Matawa First Nations Management (MFNM) is a Tribal Council with nine (9) member First Nations from the Cree, Oji-Cree and Ojibway Nations within the James Bay and the Robinson-Superior Treaties (though the Long Lake #58 First Nation is not a signatory). Five Matawa First Nations are accessible by air and winter road, while the other four are accessible by all-season roads. MFNM provides a variety of advisory and program delivery services to respond to our Nations' needs. The Matawa Chiefs Council (MCC) provides overall direction to MFNM and engages in broad decision making on collective issues.

Through this submission, we are sharing the realities of our communities and highlight the need for a different approach that acknowledges us and provides equity in the delivery of veterinary professional services for all Ontarians.

Background:

Funded by Indigenous Services Canada (ISC), MFNM is delivering an animal services pilot-project to develop a community-of-practice and achieve several objectives including advocacy toward improving animal wellness in our First Nations.¹ Unlike municipalities across Ontario, Matawa First Nations **do not have animal services in their communities** nor are they in the immediate vicinity of a veterinary hospital (the closest is +300 kms).² The lack of services has resulted in poor animal health and dog overpopulation which negatively impacts community public health through dog bites, pack aggression, dog mauling deaths, and increased potential for

¹ Some animal wellness clinics are being provided as a result of the pilot-project, see media article: https://www.snnewswatch.com/local-news/webequie-spay-and-neuter-clinic-shines-a-light-on-new-pilot-project-8751582. First Nations in Matawa are waiting over 8+ years to have their pets spayed and neutered in their communities (see pictures on page 2). It is our hope that the ISC funding will act as a catalyst for future programming after March 31, 2025.

² There are no veterinarians north of the Pickle Lake area. The primary vets in Northwestern Ontario are in Thunder Bay, Sault Ste. Marie travelling vet, Dryden, and Fort Frances. These vets are not interested in travelling to remote/northern communities to offer services and required by the College of Veterinarians of Ontario to have a Remote Area Companion Animal Mobile. If there is a shortage of veterinarians with this licence other alternatives need to be found and made available.



















zoonotic disease transmission.³ The lack of veterinary professional services has a direct impact on community safety as dog populations grow. In one of our communities a child was mauled to death. The youth of our communities are particularly vulnerable and need humane dog population management services to ensure children's safety and mental well-being.

First Nations' response to external interventions has been varied. Recently, some of the challenges/lessons learned (anecdotally identified by external animal groups/service providers) are summarized as follows:

- Ad-hoc and intermittent spay/neuter clinics in First Nations are not enough to control the animal population and that a different, de-colonized approach is needed
- Some groups go in, all efficient and mean well but do not take the time to engage in any
 way with the community and its members they go in, set up surgery tables, get the
 animal-job done, and not involve the people as a result they are seen as 'white saviours,'
 this only reinforces the power differential
- First Nations need to be part of the solution and need the resources to drive the plans
- At the same time, sustainable capacity needs to be built
- Formal/sustainable points-of-contact are required in communities in order to develop partnerships
- External animal groups/service providers are viewed as outsiders (and are not completely trusted)
- The issue is not an 'animal problem' but a 'people problem'
- There is a need for change in narratives and language (ie. dogs from First Nations don't need to be "rescued")
- While well-intentioned, many groups/service providers who have worked in First Nations
 are recognizing that they are creating a dependency and are recognizing that rescuing is
 not the solution to addressing overpopulation⁴







For years, external animal groups/service providers coming into our First Nations have tried to address the animal population. What has taken place since colonization is the development of a spectrum of allies with respect to how animal welfare is viewed (see next page). Considering that

³ In March of 2024, the community of Nibinamik First Nation lost 25+ dogs due to a parvovirus outbreak. Hear CBC interview here: https://www.cbc.ca/listen/live-radio/1-391-superior-morning/clip/16053599-lisa-marie-esquega-parvo-outbreak?share=true.

⁴ 45 non-profits speaking out on animal overpopulation in Manitoba: https://globalnews.ca/news/10355271/non-profits-speaking-out-animal-overpopulation-manitoba/ (the situation is the same in Ontario)











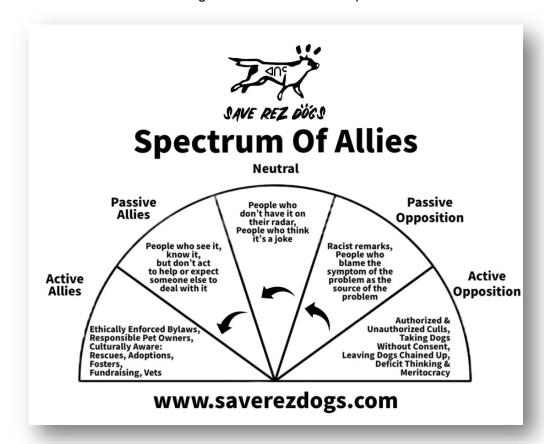








the word "First Nation" exists in only one sentence of the proposed Bill 171—Matawa First Nations are left to wonder where the Ontario government sits in this spectrum.⁵



The lack of access to veterinary care in Ontario is disproportionately experienced in Indigenous communities, particularly in the north. Currently, a veterinarian team must overcome many regulatory barriers to provide service to families in our communities that do not exist in southern Ontario. These inequities must be addressed, and all legislative veterinary professional service delivery barriers must be removed in Bill 171 and its regulations.

MFNM is focused on supporting a One Health approach for our communities, where they proactively care for their animals, their Peoples, and the environment as they are all interconnected. In northern remote communities, veterinary professional service delivery models and animal needs are different. As such, Bill 171 must acknowledge and address this and ensure equitable service access.

⁵ The proposed amendment is in relation to adding First Nations Officer. As of April 1, 2024, the Chiefs of Ontario is pursuing litigation against Ontario over the said *Community Safety and Policing Act*: https://chiefs-of-ontario.org/chiefs-of-ontario-org/chiefs-of-ontario-to-pursue-litigation-against-ontario-over-exclusion-of-first-nations-laws-in-new-policing-act/



















Most northern Indigenous community dogs are not vaccinated against rabies due to the lack of veterinarian services. This disease can be fatal in humans, and this situation requires an immediate solution to ensure community safety. The World Health Organization has a global strategic plan to reduce human deaths by 2030. There is a great inequity in northern Indigenous communities in rabies surveillance and vaccination programs that other areas of Ontario do not experience. This service gap for animals and people must be acknowledged and addressed in Bill 171.

In some remote communities, dog culls are used as a form of population control because of the lack of veterinary services. This is traumatic for the Peoples, particularly the community youth, animal welfare partner groups, and the public. The community will always support spay/neuter clinics as a form of humane population control if they are available.

One of our communities only had a veterinary service once in eight years. This had devastating consequences on the dog population and Peoples' mental and physical well-being and can have generational trauma implications. The deep roots of the human-animal bond cause people to feel distressed when they see animals' needless and preventable suffering.

The MCC supports the Competition Bureau of Canada's April 23, 2024, letter to the Standing Committee on the Interior, Legislative Assembly of Ontario. Pet parents must have competitively priced animal medication; this is especially true in remote Indigenous communities where access to medication can only be found online due to the lack of veterinary clinics. MFNM echoes the Competition Bureau of Canada's concerns about Bill 171 exclusive distribution practices, which can lead to a monopoly, higher prices, and conflicts of interest. Regulatory changes are necessary to increase prescription portability and address these barriers, promoting competition, reducing prices, and expanding consumer's access to pet medication.

The MCC acknowledges the dramatic shortage of veterinarians and registered veterinary technicians across Ontario. We further recognize their mental and physical stress while supporting animals and families. To this end, the need to alleviate workloads is critical and new modern models must be created.

To address the needs of all communities fairly and equitably, new solutions need to be created, all legislative barriers removed, and new models designed to deliver consistent veterinary professional services.

Bill 171 equally impacts People in the Matawa communities and their animals. The two are interconnected via our bond and shared ecosystem. Our First Nations community members love their pets as much as other Ontarians. They have deep relationships spiritually and in our traditional teachings. Culturally, our communities need veterinary professional services to support the traditional teachings of caring for animals.



















We acknowledge and are grateful for the veterinarian partners who serve our communities through our pilot-project. We appreciate the veterinarian teams' kindness, understanding of the culture and Peoples, and the life-saving service they deliver for pets and families.

Call for Amendments to Proposed Bill 171:

In consideration of the above, and after having taken an opportunity to review proposed *Bill 171*, an Act to enact the Veterinarian Professionals Act, 2024 and amend or repeal various acts—the Matawa Chiefs Council initially call for the following:

Section of Proposed Bill 171		Recommended Change in Approach/Amendments
1	General (overall) – This proposed bill will have multiple long-standing impacts for First Nations animal welfare in Matawa and continues the status quo . Animal health will continue to suffer and the system will perpetuate animal overpopulation due to lack of services. Regulatory barriers to deliver unique veterinary professional service delivery models in northern Indigenous communities need to be removed.	We call on the Ontario government, specifically the <i>Ministry of Agriculture, Food and Rural Affairs</i> , to make a paradigm shift when it comes to how animals in First Nations in Matawa receive wellness services. A change in legislation and regulations is needed.
2	General (overall) – Ontario did not engage in meaningful consultation with First Nations in Matawa as required by both provincial laws and applications. ⁶	We call on the Minister and Standing Committee of the Interior to not pass Bill 171 or move to Royal Assent until such time as the Ontario government has meaningfully discharged its duty to consult to ensure there is fair and equitable access to veterinary professional services in remote northern communities (through Hansard we are aware that the Ontario SPCA as well as the Toronto Humane Society have been consulted).
2	General (overall) – This proposed bill does not meet First Nations' needs in Matawa	We call on Ontario to acknowledge and remove all regulatory barriers to deliver unique veterinary professional service models in MFNM communities to address their specific needs.

⁶ The United Nations Declaration on the Rights of Indigenous Peoples (2007 provides a short list that establishes the basis for parties to engage with First Nations based on First Nations Inherent and Treaty rights and jurisdictions seeking their free, prior and informed consent.



















3	Preamble – The proposed bill says it is "supporting the health and well-being of animals in Ontario and creating conditions to increase access to care" but in First Nations, this is not the case	Bill 171 offers opportunities to acknowledge the Truth and Reconciliation Commission's (TRC) Calls to Action and weave new positive outcomes into this legislation and regulations. We call on Ontario to support the One Health model and the TRC Calls to Action regarding the health-care rights of Indigenous people, especially our children and youth who are more at risk of being impacted by poor animal health.
4	Part II Governance (College) – The College of Veterinary Professionals in Ontario (CVO) say they "embrace diversity, equity, inclusion and accessibility as fundamental to full and meaningful participation in the College's mandate to serve the public interest." Yet, it does little for First Nations in Matawa and creates barrier to animals receiving the kind of care they need in our First Nations. ⁷	We call on Ontario to review the CVO's service to First Nations in Matawa, work with/provide resources to MFNM to develop strategies ensure health is optimized recognizing the connections between people, animals in the shared environment of Indian reserves.
5	Part II Governance (Council) – there are no provisions for First Nations participation	We call on Ontario to allow for the College's Council to have fair and equitable representation by adding one non-member who represents the voice of the northern Indigenous communities and one member who represents the voice of the northern Indigenous communities and ensure these representatives report to Matawa.
6	Part III (Authorized Activities, Risk of Harm and Restricted Titles)	We call on the Ontario government to consider allowing veterinarians and veterinarian technicians from other provinces or countries to fill this gap.
7	Part XV (Regulations, Council) – 7. iv.	We call on the Ontario government to allow trained non-members in remote northern communities to vaccinate animals to protect animals and people from diseases, particularly zoonotic diseases

⁷ Access to parvo and distemper vaccines is almost impossible in the First Nations in Matawa. We have people in communities who are trained and capable of giving injections, but getting the drugs is the issue. Alternatives to having a veterinarian actually go to a community need to be explored especially for distemper and parvo outbreaks.



















		such as rabies. Other countries have paved the way with these modern models, where trained lay people vaccinate community dogs to avoid disease outbreaks and potential human and animal deaths. Without this modern approach utilizing innovative technologies, northern communities will remain unprotected and at increased risk for human death.
8	Part XVI	We call on the Ontario government to allow two representatives for northern Indigenous communities on the Transition Council to ensure their voices can be heard for fair and equitable access to veterinary professional services in Matawa communities. These representatives should be mandated to report to MNFM.
9	Schedule 1 (Authorized Activities)	We call on the Ontario government to follow the two pro-competitive recommendations by the Competition Bureau Canada aimed at improving access to pet medications and reducing prices for pet owners across Ontario: Ensure regulations respect pharmacists' ability to dispense and compound pet medication and Consider mandating pharmacists' access to the supply of pet medications in Ontario
10	Schedule 1 (Exceptions 2.)	We call on the Ontario government to consider how these may not apply to certain Indigenous cultural beliefs. Some communities do not believe an animal can be owned, or the community at large can own or care for animals.



233 S. Court Street | Thunder Bay, ON P7B 2X9 | Tel: (807) 344-4575 | Fax: (807) 344-2977 | Toll Free: 1-800-463-2249 www.matawa.on.ca