Appearance before the Standing Senate Committee on Legal and Constitutional Affairs:

Review of Bill S-250

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My name is Dr. Kathleen Ross. I’m a family doctor and cardiovascular surgical assistant in British Columbia. As president of the Canadian Medical Association, I represent the convictions and interests of the country’s physicians, those they care for, and those who don’t have access to care. Joining me is Dr. Paula Cashin, a board member with the Canadian Medical Association and Canada’s first Indigenous radiologist and nuclear medicine physician.

It is a pleasure to be here in Ottawa, on the unceded territory of the Algonquin and Anishinaabe nations. I appreciate the invitation to appear at committee.

The Canadian Medical Association has strongly denounced the abhorrent acts of forced and coerced sterilization, including surgical procedures to permanently prevent conception, including any method that alters the fallopian tubes, ovaries, or uterus, or any other action taken with the primary goal of stopping conception permanently. These practices are rooted in systemic discrimination and racism. They have inflicted irreversible harm on predominantly Indigenous women and perpetuated cycles of inequality and injustice. The dark legacy of sterilization under coercion is woven into the fabric of our country’s history and is not yet far enough in our rear-view mirror.

Those supporting these practises in history – in both government and the medical community – sought to reduce births in First Nations, Inuit and Métis communities, Black communities, and among people with intersecting vulnerabilities related to social and structural determinants of health, ethnicity and disability.

And so we meet today, the medical profession and members of the government to address this inequity, this injustice.

The Canadian Medical Association, representing physicians and medical learners, is deeply committed to upholding the highest standards of medical ethics and patient care. Despite this commitment as medical professionals, we must acknowledge our profession’s historical role in these unethical practices.

It is the duty of government to uphold the highest standards of an ethical health care system. It is critical that Canada pledges its unwavering commitment to safeguarding patient rights and dignity, for all patients, for all people in Canada.

The introduction of Bill S-250, aimed at amending the Criminal Code to criminalize sterilization procedures performed without free and informed consent, represents a commendable and crucial step toward remedying longstanding injustices. The CMA fully supports the Senate committee’s recommendation to prohibit these practices, recognizing the importance of ensuring stringent safeguards and informed consent in all medical procedures.

Our work together is not done with this one endorsement of an overdue amendment to the Criminal Code. It is a single, critical step forward.
Together, we must eradicate explicit and systemic racism against First Nations, Inuit and Métis Peoples in our hospitals and in our publicly funded health system. Together, we can commit to transform our healthcare system into one that truly respects and protects the rights and autonomy of every patient, particularly the most vulnerable and marginalized.

Canadian health care is in need of modernization, as it is not meeting the needs of many residents. As we seek reform through our entire health system, we cannot lose sight of the pillars of medical ethics. The CMA possesses a code of ethics and professionalism which can guide us in designing a system that is truly universal, offering support to all who seek care. These guiding principles could also bring value to you and your peers as the government leads this work. These principles emphasize the treating of all patients with dignity and respect, regardless of their circumstances or conditions; prioritizing the health and well being of patients; building relationships with the patient rooted in trust with a recognition of vulnerabilities, supporting patients’ autonomy to make informed decisions about their own health care according to their own values and preferences; and social justice, addressing disparities in health care and advocating for the rights of marginalized and underserved populations.

The CMA fully endorses the changes to the Criminal Code as outlined in Bill S-250. We look forward to a future where every individual’s rights are protected. We look forward to a Canada that assures the sanctity of patient consent is held paramount in our health system. We bear the responsibility of paving the way for a future where every person in Canada experiences healthcare as a place of safety, dignity and care.

On behalf on the CMA, I thank you for the opportunity to share our perspective on this critical issue and contribute to necessary change in our healthcare system.