



**The Wilson Moot 2016**  
*Alex Ghorbani v. Attorney General (Ontario)*

**Clarifications to the Official Problem**

1. The facts are as found by Justice Stern. Mooters may conduct any research they see fit in the course of developing their arguments. Mooters are also permitted to refer to any domestic or foreign law in their written and/or oral arguments, aside from Appendix D to the current Schedule of Benefits under RRO 1990, Reg 552. However, no reference shall be made, in written or oral arguments, to any facts (legislative or adjudicative) beyond those found by Justice Stern.
2. Unless otherwise specified, the word “transgender,” when used in the Official Problem, includes both individuals who have undergone SRS and individuals who have not.
3. The frequency of appointments for patients enrolled in the GDP at the Carter Institute varies based on individual patient needs, although on average patients attend in person at the Carter Institute once per month during treatment. The care provided through the GDP is an insured service (aside from the cost of hormones), but OHIP does not cover any travel costs associated with attendance at the clinic.
4. In assessing whether a patient has met the Carter Institute’s criteria for an SRS recommendation, physicians at the Institute do not consider time that the patient has undergone hormone therapy or RLE under the care of another specialist.
5. The overwhelming majority (90%) of patients who enroll in the GDP do so because they are seeking a referral for SRS. The 15% approval rate cited in subparagraph 23(d) of the Official Problem relates to the overall population of patients enrolled in the GDP. Of the 90% of patients who enter the GDP seeking approval for SRS, approximately 10% decide against proceeding with SRS over the course of their treatment and choose to manage their gender dysphoria by other means.