



# Justice Centre

for Constitutional Freedoms

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Two weeks to flatten the curve,  
Two years to flatten our freedoms

March 15, 2022

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## Executive summary

Two years ago, in mid-March of 2020, Canada's provincial governments ordered school closures and imposed other lockdown measures for a two-week period, in order to "flatten the curve" and protect the health care system.

Two weeks turned into two years as federal, provincial and municipal governments violated the *Charter* freedoms of Canadians to move, travel, associate, assemble, worship, express themselves, and exercise control over their own bodies.

Two years into this "two weeks to flatten the curve," Canadians cannot fly on an airplane unless they have taken the correct number of Covid vaccine doses as determined by the federal government, which is currently two. Most provinces have done away with the discriminatory vaccine passports that turned the vaccine-free into second-class citizens, but provincial governments can re-introduce this vicious discrimination at any time, without warning.

Nothing undermines public confidence in government as quickly as changing objectives, the arbitrary enforcement of inconsistent regulations, rules that are self-evidently ridiculous and the unscientific perpetuation of failed policies. Unfortunately, since the panic-inducing prediction of Dr. Neil Ferguson of Imperial College London in March 2020 two years ago, the federal and provincial governments of Canada have imposed upon Canadians perverse, *Charter*-violating, unscientific and ill-considered responses to a virus that shares many of the symptoms of Influenza.

In this paper, we present an illustrative sample from the communications of Canadian government agencies and political leaders responsible. It is supplemented by a lengthy appendix drawn from news reports over the past two years.

As health administrations in Canada are informed by the United Nations' World Health Organization (WHO) and the U.S. Center for Diseases Control (CDC), we also include some notable examples of orders and recommendations that influenced and may have further confused policy in Canada.

Limiting ourselves to the events as they occurred, we pass no judgement on the intent and motives of our governments over the past two years. However, repeated disregard of *Charter* rights and freedoms and failure to justify demonstrably those infringements in a court of law reveal that our authorities lack respect for the Canadian constitution.

In this paper we analyze the degree of risk presented by Covid, both from the initial frenzied viewpoint and from the perspective actually informed by the real-world data.

We examine the lockdown policies, heralded into effect with the slogan, "flatten the curve." These policies were imposed and then reimposed again and again, bringing widespread economic, physical, and psychological damage upon Canadians, all without an honest consideration of the costs compared to the benefits.

We analyze the heavily enforced and monitored “social distancing” policies, which not only separated family, friends, and neighbours, but promoted an active fear of one another.

We highlight the changing narrative and changing government policies surrounding masks and their effectiveness.

We assess the vaccination campaign against Covid, from the changing of the very definition of a vaccine, to the lack of efficacy and safety of the injections.

We examine the two years of arbitrary enforcement of health mandates, contradictory at times depending on time or location, as well as the censoring and punishing of medical professionals across the country who dared to ask reasonable questions.

For two years, governments and health agencies have infringed the *Charter*, sinking our beloved country into an irrational health tyranny. The *Emergencies Act* was used to crush peaceful protests in Ottawa that posed no serious threat to the ability of the Government of Canada to preserve the sovereignty, security and territorial integrity of Canada. Doctors across Canada face discipline at the hands of their Colleges of Physicians and Surgeons, simply for having challenged or questioned the government's narrative about Covid, lockdowns or vaccines.

We conclude that the violations of Charter freedoms have gone on for two years too long.

We conclude that:

- i. Canadians have been persuaded to fear Covid too much;
- ii. Governments in Canada have, with their confused and arbitrary approach, engendered significant lack of trust amongst the Canadian public;
- iii. Lockdown strategies have proven to be ineffective, and governments have failed to justify the ongoing violations of Charter rights and freedoms;
- iv. Personal agency over one’s own body is a core Canadian value, which should be restored by repealing mandatory vaccination polices;
- v. Health policy in Canada should be adjusted to “living with the virus”:
- vi. Infrastructures of compulsion, in particular that needed to support so-called vaccine passports, should be dismantled;
- vii. Canada's federal and provincial politicians should apologize for demonizing dissent and promoting disunity among Canadians.

## Introduction

It has now been two years since lockdown measures were imposed by governments across Canada in mid-March of 2020.

Canadians have typically behaved as though their love of freedom was deeply ingrained. Between our annual tributes to our ancestors who fought fascism and later stood on guard against Communism, it was easy to believe that when people sang about “our land, glorious and free,” they meant it. As the recent protests across the country against mandatory vaccination show, many certainly still do appreciate freedom.

But a seeming majority of our neighbours apparently did not understand freedom or did not value it, as they were easily frightened into surrendering their *Charter* freedoms to move, travel, assemble, associate, worship, and exercise autonomy over their own bodies.<sup>1</sup> Many did so not only without complaint, but accepting their governments’ assurance that politicians and public servants were reliable arbiters of the community best interest. Even school closures, a massive disruption for families with children, was met with quiet resignation. Two weeks to flatten the curve didn’t seem too much to ask: There were no riots or demonstrations.

Then as substances became available promising the benefits of immunization, that same majority stampeded to receive them. This was a choice they were free to make of course. That’s what freedom means. But as they did so, they bitterly condemned those who, for whatever reason, made other choices.<sup>2</sup>

It made no difference why. Like freedom itself, a person’s right to agency over their own body was always thought of as a signature Canadian value and fiercely defended as such in other contexts. But now, a person’s unwillingness to be injected with an unproven substance became *prime facie* evidence of poor citizenship and much else besides – misogyny, racism and unacceptable opinions. People who had proven medical constraints – those suffering from Guillain-Barr Syndrome,<sup>3</sup> for example – received no more consideration than those who pointed out that some people were dying not of Covid, but of the vaccine.

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<sup>1</sup> Sections 2 and 6.

<https://laws-lois.justice.gc.ca/eng/const/page-12.html#:~:text=1%20The%20Canadian%20Charter%20of,a%20free%20and%20democratic%20society.>

<sup>2</sup> Among many others, a Maru opinion poll registered strong support for jailing the unvaccinated.

[https://static1.squarespace.com/static/5a17333eb0786935ac112523/t/61e77919672c5a0fc0148e8b/1642559771161/Unvaccinated+Factum+19+02+22.pdf?utm\\_source=north%20shore%20news&utm\\_campaign=north%20shore%20news%3A%20outbound&utm\\_medium=referral](https://static1.squarespace.com/static/5a17333eb0786935ac112523/t/61e77919672c5a0fc0148e8b/1642559771161/Unvaccinated+Factum+19+02+22.pdf?utm_source=north%20shore%20news&utm_campaign=north%20shore%20news%3A%20outbound&utm_medium=referral)

<sup>3</sup> [https://www.thelancet.com/article/S1474-4422\(21\)00416-6/fulltext](https://www.thelancet.com/article/S1474-4422(21)00416-6/fulltext)

Appallingly however, politicians sensing a popular cause, went further as time went by. Not only could the vaccine-free not be out in public, they would be progressively barred from earning an income.<sup>4</sup> Millions of workers were affected by the federal government's mandate that all its employees, and those of federally regulated industries, must be vaccinated or lose their jobs.<sup>5</sup> In December 2021, the federal government announced its intentions to embed this requirement within the Canada Labour Code.<sup>6</sup> Many private employers, driven by the fear of suits alleging failure to provide a safe workplace, followed the federal example. Schools and universities, famously timid and woke, immediately introduced vaccine passports: Students who would not take vaccination were threatened with expulsion.

In Canada then, governments constructed two classes of person, the vaccinated who believed and obeyed the country's governments and the vaccine-free, who maintained that there were certain lines that the government could not cross. Meanwhile, we found that in Canada there were plenty of people prepared to denounce their neighbours if they suspected that they were not in scrupulous compliance with public health regulations.<sup>7</sup> Some governments – that of Alberta for example – established snitch lines.<sup>8</sup>

Canadian officials have bombarded their fellow countrymen for two years with conflicting advice, contradictory instructions and decisions based on information that was sometimes just plain wrong.

Masks didn't work.<sup>9</sup> Then they did.<sup>10</sup> (Studies meanwhile are never so certain.)<sup>11</sup>

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<sup>4</sup> <https://www.canada.ca/en/treasury-board-secretariat/news/2021/08/government-of-canada-to-require-vaccination-of-federal-workforce-and-federally-regulated-transportation-sector.html>

<sup>5</sup> <https://www.nortonrosefulbright.com/en-ca/knowledge/publications/5ac54903/shift-towards-mandatory-vaccine-policies-in-canada>

<sup>6</sup> <https://www.canada.ca/en/employment-social-development/news/2021/12/government-of-canada-will-require-employees-in-all-federally-regulated-workplaces-to-be-vaccinated-against-covid-19.html>

<sup>7</sup> <https://www.nytimes.com/2021/02/21/world/canada/coronavirus-public-shaming.html>

<sup>8</sup> <https://ephisahs.microsoftcrmporals.com/create-case/>

<sup>9</sup> <https://www.cbc.ca/news/politics/covid-19-pandemic-coronavirus-masks-1.5515526>

<sup>10</sup> <https://www.theglobeandmail.com/opinion/article-dr-tams-about-face-on-masks-damages-trust-at-a-crucial-time/>

<sup>11</sup> For example, British Medical Journal: <https://www.bmj.com/content/371/bmj.m4586/rr-6>

We have to flatten the curve.<sup>12</sup> No, we must achieve Covid Zero.<sup>13</sup>

Vaccines will solve the problem. No, actually even when the overwhelming majority of people are vaccinated, social distancing and masks will still be required.<sup>14</sup>

Vaccines work:<sup>15</sup> Three quarters of people hospitalized for Covid are unvaccinated. (So what were the other 25 percent? That number continues to climb.)

And so on. People were prosecuted for using outdoor recreation equipment,<sup>16</sup> some for merely being outdoors.<sup>17</sup> In Ontario, a couple sitting in their van in a church parking lot, playing Pokémon Go, were fined \$880 because they were out of their house for a non-essential reason.<sup>18</sup>

For two years, chaos and folly have had their day.

What now? At this writing, provincial governments have largely rolled back the most visible and offensive symbol of Covid, their mask mandates. Nobody bothers with

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<sup>12</sup> Dr. Antony Fauci. <https://www.statnews.com/2020/03/11/flattening-curve-coronavirus/>

<sup>13</sup> <https://www.thestar.com/news/canada/2021/09/28/move-over-antimaskers-the-covid-zero-movement-has-something-to-say-to-canadas-health-officials.html>

<https://torontosun.com/opinion/columnists/gunter-its-the-covid-zero-zealots-who-will-howl-against-reopening>

Chris Selley: 'For months, many Canadian public health experts insisted Australia's COVID-zero approach should be Canada's as well.'

<https://nationalpost.com/opinion/chris-selley-now-that-the-covid-zero-fallacy-is-toast-canada-needs-a-real-exit-strategy>

<sup>14</sup> <https://torontosun.com/opinion/columnists/gunter-its-the-covid-zero-zealots-who-will-howl-against-reopening>

<sup>15</sup> <https://twitter.com/justintrudeau/status/1480668044095631364>

<sup>16</sup> <sup>16</sup> [https://nationalpost.com/opinion/dylan-finlay-on-covid-19-enforcing-social-distancing-with-fines-is-one-step-too-far?video\\_autoplay=true](https://nationalpost.com/opinion/dylan-finlay-on-covid-19-enforcing-social-distancing-with-fines-is-one-step-too-far?video_autoplay=true)

<sup>17</sup> <https://www.independent.co.uk/news/quebec-toronto-ontario-gyms-covid-b1984723.html>

<https://montreal.ctvnews.ca/quebec-has-issued-45m-in-fines-during-the-pandemic-but-only-a-fraction-of-them-have-been-paid-1.5755180>

<https://montreal.ctvnews.ca/montreal-police-hand-out-nearly-200-tickets-for-illegal-outings-in-the-first-weekend-under-curfew-1.5262009>

<sup>18</sup> <https://www.cbc.ca/news/canada/windsor/couple-pokemon-fined-covid-order-1.5901388>

social distancing. Proof of vaccination is seldom required, BC excepted.<sup>19</sup> Only on public transport and in purviews of the federal government are these things still insisted upon. Presumably here too, common sense will eventually return.

So, back to normal? Alas no. Only if Canadians never cared about freedom, always secretly yearned for authoritarian government, were comfortable with having their cellphones tracked,<sup>20</sup> their bank accounts frozen<sup>21</sup> and their neighbours ready to turn them in, could we say things are back to normal. But, we have no evidence that in 2019, a majority of Canadians would have said yes to any of this.

This is new. And the new normal is that when the decision is clear, a majority of Canadians will choose security over freedom and a government that will give them the one, while taking the other from somebody else.

What have we become over these two years? Good citizens of the Soviet? Canada not strong in other words, and not free.

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<sup>19</sup> <https://www2.gov.bc.ca/gov/content/covid-19/vaccine/proof>

<sup>20</sup> <https://nypost.com/2021/12/25/canada-secretly-tracked-33-million-phones-during-lockdown/>

<sup>21</sup> <https://www.ctvnews.ca/politics/at-least-76-financial-accounts-frozen-since-emergencies-act-invoked-mendicino-1.5788396>

<https://www.nationalreview.com/corner/trudeau-claimed-emergency-powers-were-temporary-but-some-are-already-permanent/>



## Changing objectives, moving goalposts

When given information, people don't always retain details for long. But they usually retain an impression of what they were told. Thus, if a newspaper reports a person being associated with fraud, the reader will typically forget the nature of the fraud but will probably retain a perception of the individual based on the story. If that person is mentioned a second time in a fraud story, the reader may still not recall the details of the first case. But his impression that this person is probably a fraud, is reinforced.

It is how reputations are lost.

This process of persuasion explains how many Canadians have lost confidence in officials, both elected and unelected, as they set public policy regarding Covid.

That is, when they are told one thing today and another thing tomorrow, when one thing is mandatory in one province and illegal in another, and when "trusting the science" turns out to be more slogan rather than policy, they may not remember everything that changed. But they do remember that the official narrative always seems to be changing. When the changing narrative leads to foolish rules and unjust prosecutions, they don't know what to believe, doubt everything and become cynical. That is, unless they have embraced a cognitive dissonance to such a degree that the idea "governments are infallible" is so ingrained as to ignore the non-sensical and damaging mandates and narrative flip-flopping of the authorities.

There are five areas in which Canadian officials, elected and unelected, have squandered the goodwill with which they began to respond to the Covid epidemic, two years ago.

- 1) The degree of risk presented by Covid
- 2) Flattening the curve
- 3) The utility of masks
- 4) Social distancing
- 5) The utility of vaccination

In each case, public officials have served up conflicting information as the months went by, speaking with great assurance even when the "facts" had completely changed.

### ***1) The degree of risk presented by Covid***

When Covid arrived on the world scene, more than 57 million people in Hubei province<sup>22</sup> were for 76 days in early 2020 subjected to vigorous,<sup>23</sup> even draconic

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<sup>22</sup> <https://edition.cnn.com/2020/01/26/asia/wuhan-coronavirus-update-intl-hnk/index.html>

<sup>23</sup> <https://www.theguardian.com/world/2020/mar/19/chinas-coronavirus-lockdown-strategy-brutal-but-effective>

lockdown measures<sup>24</sup> to keep people apart from each other.<sup>25</sup> This was well reported in Canada: Setting aside reasonable suspicions about the accuracy of information coming out of China, a reasonable reader should have concluded that Chinese authorities viewed Covid as a dangerous risk.

Here in Canada, Chief Public Health Officer Dr. Theresa Tam<sup>26</sup> took a different view. Speaking on January 29, 2020, to the House of Commons Health Committee, she said the risk posed by Covid to Canada was “low.” Dr. Tam, (who is also a special adviser to the World Health Organization) testified:

Right now, the cases are in China. Very few are exported. Yes, there’s human-to-human transmission, but those are generally for close contacts. With regard to the severity of illness, there are some severe cases, but the deaths have occurred in older people with underlying medical conditions. With all of that pulled together, for the general public who have not been to China, the risk is low in Canada.<sup>27</sup>

Possibly, Dr. Tam had the right idea. Our position at the Justice Centre has consistently been that the risk of Covid is less the disease than our response to it – something Dr. Tam herself also alluded to.

I think we have to be reasonable in our public measures and just balance out the risks and benefits. In terms of the impacts, they are not simply health impacts, but psychological and other health impacts, as well as non-health impacts, those being societal and economic as well.<sup>28</sup>

She added:

We do know that even people with mild symptoms don’t transmit very readily. Could they? It’s possible, but that’s not what drives an actual epidemic...

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<sup>24</sup> <https://www.ft.com/content/f04fc6e6-4ed7-11ea-95a0-43d18ec715f5>

<sup>25</sup> [https://en.wikipedia.org/wiki/76\\_Days](https://en.wikipedia.org/wiki/76_Days)

<sup>26</sup> [https://www.canada.ca/en/public-health/corporate/organizational-structure/canada-chief-public-health-office/We have therefore made the assessment that #COVID19 can be characterized as a pandemic"-@DrTedros #coronavirus.r.html](https://www.canada.ca/en/public-health/corporate/organizational-structure/canada-chief-public-health-office/We%20have%20therefore%20made%20the%20assessment%20that%20%23COVID19%20can%20be%20characterized%20as%20a%20pandemic%20-%20%40DrTedros%20%23coronavirus.r.html)

<sup>27</sup> <https://openparliament.ca/committees/health/43-1/1/dr-theresa-tam-9/?singlepage=1>;  
<https://www.who.int/emergencies/diseases/novel-coronavirus-2019/events-as-they-happen>.

<sup>28</sup> *Ibid.*

Many people, including the World Health Organization and the U.S. media reporting on them, were saying the same thing. Covid had yet to be even recognized by the World Health Organization (WHO) as a pandemic.<sup>29</sup> (That did not come until six weeks later.)<sup>30</sup>

Then the story changed. On March 11, the WHO *did* declare a pandemic.

A few days later on March 15, 2020, Dr. Tam altered her message, calling Covid,

“a serious public health threat. . . . Today, I am asking everyone to take strong action to help us delay the spread of Covid.”<sup>31</sup>

Public authorities operating in good faith may, confronted by novel and challenging circumstances, reasonably claim some goodwill and public patience while they measure the risk. Nor was Dr. Tam entirely wrong in her assessment: Her remarks to the health committee were spot on, that the greater danger was to older people with comorbid health conditions, and that the virus was spread by close contact, such as within households.

However the public had just been whipsawed: There was a risk in China, but not much of a risk in Canada, then suddenly Canadians faced a “serious public health threat.”

## **2) *Flattening the curve***

For sheer national impact, the single most devastating bait-and-switch was selling lockdowns to Canadians on the basis of two weeks to flatten the curve, then continuing with them for nearly two years to reach the goal of total eradication of the virus. Anybody who suggested that the harms of the lockdowns were worse than the harms of Covid, or that Covid was not nearly as bad as the Spanish Flu of 1918, or that it was futile to try to stop a virus from spreading,<sup>32</sup> was ignored at best, or vilified as “anti-science” at worst.

The fear started when the Government of Canada’s passionately embraced what turned out to be an irresponsibly alarmist prediction from Dr. Neil Ferguson, Imperial College London’s celebrity epidemiologist. Based on modelling, Ferguson predicted Covid

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<sup>29</sup> <https://www.scientificamerican.com/article/who-says-coronavirus-is-not-yet-a-pandemic-but-urges-countries-to-prepare/>

<sup>30</sup> <https://www.who.int/director-general/speeches/detail/who-director-general-s-opening-remarks-at-the-media-briefing-on-covid-19---11-march-2020>

<sup>31</sup> CBC News <https://www.youtube.com/watch?v=VG83vVr3Oqc>.

<sup>32</sup> <https://ottawacitizen.com/news/local-news/covid-is-going-to-be-with-us-for-the-foreseeable-future-ottawa-health-budget-assumes-pandemic-costs-for-the-duration-of-2021>

would kill more than 326,000<sup>33</sup> Canadians in a few months unless the nation implemented “*radical physical distancing of the entire population,*” or in plain English, lockdowns.<sup>34</sup>

Which is what Canada’s governments did. In order to protect Canada’s just-in-time health-care system, which plausibly would have been overwhelmed by an exponential curve increase in Covid cases requiring hospitalization, the decision was taken to “flatten the curve,” by shutting down much of the economy and society. If Covid-sufferers were fed into the system more slowly, perhaps it wouldn’t crash.

This was Ferguson’s recommendation, also Dr. Fauci’s,<sup>35</sup> and to make room for the expected influx, hundreds of thousands of surgeries and diagnostic procedures were cancelled or postponed.

Canadians were told that it would take two weeks to flatten the curve. While never explicit, the implication was that thereafter, normal economic activity would resume.

Almost immediately, it was obvious that the problem (mercifully) had been grossly exaggerated. The hype notwithstanding, by June 30, 2020, Canada had still registered only 103,918 Covid cases – approximately one quarter of one per cent of the Canadian population, and 8,566 Covid deaths<sup>36</sup> in the context of a country with 38 million people where about 300,000 die each year. The word “case” was redefined from its previous and long-standing reference to a sick person, and was now applied to anyone testing positive on a PCR test, even if perfectly healthy. Most Canadians who heard media proclaim “one thousand new cases in the past week” would assume incorrectly that another one thousand people had fallen ill with Covid; the redefinition of “case” made it easy to perpetuate fear. Two years after the first Canadian Covid death, total Covid

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<sup>33</sup> <https://www.iedm.org/the-flawed-covid-19-model-that-locked-down-canada/>

<sup>34</sup> Suppression: “...a combination of social distancing of the entire population, home isolation of cases and household quarantine of their family members. This may need to be supplemented by school and university closures, though it should be recognised that such closures may have negative impacts on health systems due to increased absenteeism. The major challenge of suppression is that this type of intensive intervention package – or something equivalently effective at reducing transmission – will need to be maintained until a vaccine becomes available (potentially 18 months or more) – given that we predict that transmission will quickly rebound if interventions are relaxed.”

<https://www.imperial.ac.uk/media/imperial-college/medicine/sph/ide/gida-fellowships/Imperial-College-COVID19-NPI-modelling-16-03-2020.pdf>

<sup>35</sup> <https://www.statnews.com/2020/03/11/flattening-curve-coronavirus/#:~:text=%E2%80%9CIf%20you%20look%20at%20the,would%20ultimately%20have%20less%20deaths.>

<sup>36</sup> <https://www.canada.ca/en/public-health/news/2020/06/statement-from-the-chief-public-health-officer-of-canada-on-june-30-2020.html>

deaths stand at 36,244,<sup>37</sup> or slightly more than ten percent of the number of deaths Ferguson had predicted for only the first three months of Covid. The vast majority of these deaths – more than 90 percent – were in the demographic that Dr. Tam had identified (before anybody had even died of Covid in this country) as vulnerable: the elderly who suffered from comorbidities.

Yet, inexplicably, when the theorised problem of “runaway” Covid had been revealed to be flawed, the proposed flawed solution was retained and rebranded.

The justification for massive economy-killing government intervention, and the shredding of the fabric of civil society, would no longer be “flattening the curve.” It was the total elimination of Covid.

As Prime Minister Trudeau told the UN in September 2020, “...we understand how important it is to eradicate the virus at home and everywhere at the same time.”<sup>38</sup> The Prime Minister contemplated in the same speech that Covid had provided a good opportunity to advance another political agenda.

The elimination or eradication of Covid is an entirely different and infinitely more ambitious – some would say unachievable – goal that would require permanent restrictions on the *Charter* rights and freedoms of citizens in their day-to-day affairs.

Whatever chance there might have been for Dr. Tam’s “*reasonable public measures*” with a “*balance*” of risks and benefits, evaporated in a moment. Instead, the federal and provincial governments immediately suspended a wide range of economic activity considered non-essential, pushed millions of Canadians into isolation and loneliness, and began borrowing money on an unprecedented scale.

For a full account of Canada’s lockdown harms, social as well as medical, see the Justice Centre paper, *Are lockdowns worth their cost?*<sup>39</sup> Briefly however, the Justice Centre’s lockdown harm study quotes expert opinion that “lockdown will go down as one of the greatest peacetime policy failures in Canada’s history.” In April 2021, Douglas Allen, an economics professor at BC’s Simon Fraser University, reviewed<sup>40</sup> more than 80 Covid cost/benefit studies published in the previous 12 months. He concluded that

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<sup>37</sup> <https://health-infobase.canada.ca/covid-19/epidemiological-summary-covid-19-cases.html#a5>

<sup>38</sup> <https://www.un.org/sg/en/content/sg/press-encounter/2020-09-29/secretary-generals-joint-press-conference-the-high-level-event-financing-for-development-the-era-of-covid-19-and-beyond-pm-justin-trudeau-of-canada-and-pm-andrew>

<https://www.globalcitizen.org/en/content/canada-220-million-covax/>

<sup>39</sup> [https://www.jccf.ca/wp-content/uploads/2021/12/2021-12-14-Lockdown-harms-\\_JC6.pdf](https://www.jccf.ca/wp-content/uploads/2021/12/2021-12-14-Lockdown-harms-_JC6.pdf)

<sup>40</sup> <http://www.sfu.ca/~allen/LockdownReport.pdf>

many relied upon false assumptions that tended to over-estimate the benefits of lockdown and underestimate its costs.

And, unusually for a senior public servant, Canada's Chief Statistician Anil Arora commented in March 2021 that the year 2020 had "inflicted untold grief"<sup>41</sup> on Canadians. Statisticians don't usually talk like that.

But two reports from Statistics Canada in March 2021 revealed that it was simply the truth. During 2020, the Canadian economy experienced its sharpest annual decline in real gross domestic product since 1961.<sup>42</sup> In what can only be the result of Covid lockdowns, and despite some recovery in the fourth quarter, "real GDP (in 2020) shrank 5.4%."<sup>43</sup> In cash terms last year's GDP reduction was worth about \$90 billion, or a little less than \$5,000 for every one of Canada's 18.6 million labour force.

By June of 2020, experts had uncovered serious flaws in the original Imperial College paper. Furthermore, evidence had emerged that Professor Ferguson himself had an abysmal record of making terrifying but wildly inaccurate predictions about earlier epidemics, among them BSE (Mad Cow Disease) and bird flu and a long history of overpredicting deaths by a wide margin—a concern confirmed by data from countries that never locked down in the present crisis.<sup>44</sup>

Even the World Health Organization had softened its enthusiasm for lockdowns. Dr. David Nabarro, the World Health Organization's Special Envoy on Covid-19, told *The Spectator* in October 2020:

We in the World Health Organization do not advocate lockdowns as the primary means of control of this virus. The only time we believe a lockdown is justified is to buy you time to reorganize, regroup, rebalance your resources; protect your health workers who are exhausted. But by and large, we'd rather not do it.<sup>45</sup>

Canadians have paid a huge price for their governments' violations of *Charter* freedoms by way of lockdown policies. It therefore beggars belief that this strategy has survived despite a massive and known flawed assumption, and that focussed protection for the most vulnerable populations was available but not implemented immediately.

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<sup>41</sup> <https://www150.statcan.gc.ca/n1/pub/11-631-x/11-631-x2021001-eng.htm#a5>

<sup>42</sup> <https://www150.statcan.gc.ca/n1/daily-quotidien/210302/dq210302a-eng>.

<sup>43</sup> <https://globalnews.ca/news/7671568/canadian-economy-gdp/>

<sup>44</sup> <https://www.iedm.org/the-flawed-covid-19-model-that-locked-down-canada/>

<sup>45</sup> <https://www.abc.net.au/news/2020-10-12/world-health-organization-coronavirus-lockdown-advice/12753688>

Obviously, as implemented in Canada, the lockdown strategy was a mistake. Canadians, we suspect, will wait in vain for anybody to admit it. Meanwhile, they are that much less inclined to give governments the benefit of any doubts they have.

### **3) *The utility of masks***

Few Non-Pharmaceutical Interventions have caused such bitter resentment as the requirement to wear masks. There has been inconsistent messaging regarding them too however – not to mention a few noble lies – and for all the heated emotions around them, their usefulness is still hotly debated.

In Canada, Dr. Tam was an early naysayer on the usefulness of masks. Asked in January 2020 to comment on reports that masks were selling out in Vancouver, she told reporters that simply wearing a mask is not an effective preventative measure:

It can sometimes make it worse, if the person puts their finger in their eye or touches their face under their mask. We would only recommend putting a mask on if you were sick and were entering a medical facility, such as a hospital. We have no recommendation for people to wear a mask (when) going about their daily business.<sup>46</sup>

As late as the end of March 2020, she was still telling newspaper reporters that she didn't see much point in masking for most people, who she *said "hadn't learned how to use them,"* adding that there was *"no need to use a mask, for well people."* A few days later, she told reporters that *"putting a mask on an asymptomatic person is not beneficial."*<sup>47</sup>

But, in April, she recanted<sup>48</sup> – somewhat – saying that,

Wearing a non-medical mask is an additional measure that you can take to protect others around you.

However, she also warned that a non-medical mask doesn't necessarily protect the person wearing it.

A non-medical mask can reduce the chance of your respiratory droplets coming into contact with others or landing on surfaces. The science is not

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<sup>46</sup> <https://www.cbc.ca/news/politics/non-medical-masks-covid-19-spread-1.5523321>  
<https://edmontonjournal.com/news/national/the-road-to-canadas-covid-19-outbreak-pt-3-timeline-of-federal-government-failure-at-border-to-slow-the-virus>.

<sup>47</sup> <https://www.cbc.ca/news/politics/non-medical-masks-covid-19-spread-1.5523321>

<sup>48</sup> <https://www.cbc.ca/news/politics/non-medical-masks-covid-19-spread-1.5523321>

certain but we need to do everything that we can and it seems a sensible thing to do.

It was something less than a full-throated endorsement of masks as a preventative health measure.

In the U.S, it was even less so. In March 2020, Dr. Anthony Fauci, Chief Medical Advisor to the President of United States, stated publicly that masks were “not effective in preventing” Covid.<sup>49</sup>

Of course, that narrative changed too and Dr. Fauci was asked why. He explained that his initial advice was an intentional deception, offered merely to prevent a run on personal protective equipment.<sup>50</sup> (He then briefly recommended double masking.<sup>51</sup>)

A noble lie, then. But, a lie nevertheless.

So masks... no, yes, double-masks, wear them outside, no not necessary, single worn inside is sufficient... get vaccinated and we'll be back to normal... well no, even after you have been vaccinated you should still mask up...

Here indeed was another noble lie from Dr. Fauci: He stated that only 60 percent of Americans needed to be immune for “normality” to be restored but later upped the number to 85 percent. He explained that he had offered the lower number to encourage more Americans to get the vaccine.<sup>52</sup>

Health Canada and the Center for Disease Control recommend masks. But several studies suggest they make very little difference. See for example, Canmask-19.<sup>53</sup>

Meanwhile, Dr. Fauci says that despite the efficiency of aircraft air purification systems masks will be required for air travel indefinitely.<sup>54</sup>

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<sup>49</sup> [https://www.youtube.com/watch?v=PRa6t\\_e7dgl](https://www.youtube.com/watch?v=PRa6t_e7dgl)

<sup>50</sup> <https://www.businessinsider.com/fauci-mask-advice-was-because-doctors-shortages-from-the-start-2020-6?r=US&IR=T>

<sup>51</sup> <https://www.youtube.com/watch?v=vN6FHBhFKRY>

<sup>52</sup> <https://www.nytimes.com/2020/12/24/health/herd-immunity-covid-coronavirus.html>

<https://www.axios.com/fauci-goalposts-herd-immunity-c83c7500-d8f9-4960-a334-06cc03d9a220.html>

<sup>53</sup> <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7884659/>

<sup>54</sup> <https://www.dailymail.co.uk/news/article-10326691/Fauci-says-face-masks-worn-planes-now.html>



#### **4) Social distancing**

“Man by nature is a social animal,” Aristotle once observed. Social distancing, the practice of physically separating from friends and neighbours by an arbitrary amount of distance (or better yet, not seeing them at all), is therefore, according to the philosopher, a government mandate which actually runs contrary to our nature.

In Canada, our health authorities imposed the two-metre (six feet) physical distancing rule without providing any substantial evidence to back up that number, which the World Health Organization said should be one metre<sup>55</sup> not two. What replaced science was fearmongering. Prime Minister Trudeau warned that those not falling in line with the mandate would not be tolerated.<sup>56</sup> “You all think you’re invincible. You’re not. Enough is enough [...] Go home and stay home.”

An article put up on the University of Waterloo website dated March 26, 2020, and titled “Q&A with the experts: Physical Distancing” was light on data and heavy on scare-tactics.<sup>57</sup> The question, “*What happens if we don’t practice physical distancing?*” was posed to Professor Shannon Majowicz of the School of Public Health and Health Systems. “Things will get very bad – very, very quickly. COVID-19 is a serious issue – one of the most serious diseases we’ve faced in our lifetimes, and it demands our attention and action. Everyone is vulnerable.” No links to any peer-reviewed studies were posted.

Dr. Jeff Kwong, an infectious disease specialist and associate professor in the Department of Family and Community Medicine at the University of Toronto offered this message of fear to Canadians, “If people don’t do this, we’re going to keep seeing more and more cases, and then our hospitals being filled and people are going to die because there aren’t enough beds or enough ventilators.”<sup>58</sup> Kwong insisted that the two meter distance be strictly kept even when walking outside. However, his colleague Colin Furness, an infection control epidemiologist and assistant professor at the University of Toronto, admitted there was no “hard science” on the matter.<sup>59</sup>

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<sup>55</sup> <https://www.who.int/westernpacific/emergencies/covid-19/information/physical-distancing>

<sup>56</sup> <https://globalnews.ca/news/6717166/what-is-physical-distancing/>

<sup>57</sup> <https://uwaterloo.ca/news/news/q-and-experts-physical-distancing>

<sup>58</sup> <https://globalnews.ca/news/6717166/what-is-physical-distancing/>

<sup>59</sup> <https://globalnews.ca/news/7070456/coronavirus-canada-physical-distancing-rules/>

China, Denmark, France, Hong Kong, and Singapore adopted the World Health Organization's one-metre physical distancing policy.<sup>60</sup> Countries like Australia, Italy, and Spain opted for 1.5 meters, while South Korea went with 1.4 meters.

But former Food and Drug Administration commissioner in the United States, Scott Gottlieb, frankly confessed that nobody knows where the six feet rule actually came from and that it was indeed arbitrary.<sup>61</sup>

Regardless of the actual measurement, it was our governments that ruled that citizens could not be trusted to make their own judgements as to who we could shake hands with or even visit. Children were separated from their grandparents and other family members for months and even years. An essential aspect of humanity – physical contact and interaction – was suddenly outlawed, without concrete evidence that doing so would actually prevent Covid deaths. We were told to fear one another; that any one of us could become a killer. We could not trust our neighbours and we could not trust ourselves. The policy could be better described as “anti-social” distancing.

### **5) *The utility of vaccination***

Viruses lose their force when their target population achieves herd immunity. That is, when enough people – the herd – have achieved immunity it simply becomes harder for infected people to find others to infect, and the virus hence withers.

Immunity can be achieved through exposure to a disease and recovery from it. It can also be achieved through vaccination.

For the government of Canada, the selling feature of vaccination was that it seemed to offer a faster route to the critical level of herd immunity that would allow life to go “back to normal.” It was also, of course, intended to stop the vaccinated from getting the virus.

Vaccines were declared to be safe and effective.

In October 2021 for example, Prime Minister Trudeau tweeted enthusiastically to Canadians, “Vaccines work. That’s why we’re going to make them mandatory for workers in the federal public service and for people boarding planes and trains.”<sup>62</sup>

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<sup>60</sup> <https://theprint.in/theprint-essential/1m-1-5m-2m-the-different-levels-of-social-distancing-countries-are-following-amid-covid/449425/>

<sup>61</sup> <https://www.msn.com/en-us/news/us/gottlieb-nobody-knows-origins-of-six-foot-social-distancing-recommendation/ar-AAOBQm5>

<sup>62</sup> <https://twitter.com/JustinTrudeau/status/1445770428950069248>

Provincial premiers chimed in. “Get vaccinated!” In Alberta<sup>63</sup> and Manitoba,<sup>64</sup> governments set up lotteries to give vaccine-recipients a chance at winning large cash prizes. Alberta offered \$100<sup>65</sup> to entice those not yet injected. In Quebec, Premier Francois Legault declared that a special tax would be imposed on citizens refusing the Covid vaccine. Carrot or stick, senior politicians were in violent agreement that becoming vaccinated was the right thing to do.

All of this depended on two assumptions: that the vaccines were safe, and that the vaccines were effective.

### *A very different kind of vaccine*

The now-familiar Moderna and Pfizer substances offered as vaccines were developed on the orders of then-President Trump under his “Operation Warp Speed” program. They are not a vaccine as the term had been understood prior to 2020.

As the Centers for Disease Control and Prevention (CDC) put it,<sup>66</sup> the familiar vaccines against childhood diseases “*work by putting a weakened or inactivated germ into our bodies. Messenger RNA vaccines use mRNA created in a laboratory use to teach our cells how to make a protein—or even just a piece of a protein—that triggers an immune response inside our bodies. That immune response, which produces antibodies, is what protects us from getting infected if the real virus enters our bodies.*” (sic.)

This being so, and because these “vaccines” were issued under Emergency Use Orders, and excused the lengthy testing procedures normally required, the definition of vaccine was changed to reflect the new reality.

The CDC had for many years defined a vaccine as:

*“A product that stimulates a person’s immune system to produce immunity to a specific disease, protecting the person from that disease.”<sup>67</sup>*

Since September 2, 2021, this definition has appeared on the CDC website:

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<sup>63</sup> <https://www.alberta.ca/open-for-summer-lottery.aspx>.

<sup>64</sup> <https://protectmb.ca/covid-19-vaccine/lottery/>.

<sup>65</sup> <https://www.alberta.ca/vaccine-debit-card.aspx>.

<sup>66</sup> <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/different-vaccines/mrna.html>

<sup>67</sup> <https://web.archive.org/web/20210901163633/https://www.cdc.gov/vaccines/vac-gen/imz-basics.htm>

*“A preparation that is used to stimulate the body’s immune response against diseases,”*<sup>68</sup> which is what mRNA vaccines are supposed to do.

Strictly speaking, this new 2021 definition is accurate. It also allowed government agencies to answer vaccination sceptics who complained that mRNA vaccines aren’t really vaccines. If the CDC defined it as a vaccine, it was.

And when it came to measuring success, this was also a lower threshold to clear.

The revised definition<sup>69</sup> switches the goal from producing “immunity” to “protection.” That is, you may actually get what you’re immunized against but you won’t get it as badly. That means vaccination is now defined as, *“The act of introducing a vaccine into the body to produce protection from a specific disease.”*<sup>70</sup>

### *Now providing “protection” not immunity*

As the public eventually (and in many cases grudgingly) accepted officialdom’s enthusiastic boosterism, it became clear that the vaccines, however they were defined, were not performing exactly as promised.

Notwithstanding safety assurances, approximately 300 people died after vaccination.<sup>71</sup> The Public Health Agency of Canada (PHAC) that collects the numbers says most of these deaths cannot be causally linked to the vaccines.

In its February 20, 2022, epidemiological summary, PHAC also concedes a less-than-perfect record of protection for the vaccinated. It reported that of 1.8 million Covid cases for which it had full information, there have been 14,566 deaths since vaccination began in December 2020. Of those, nearly two thirds were unvaccinated but 2,397 had been fully vaccinated and 1,286 were fully vaccinated and boosted – together more than a quarter of deaths.<sup>72</sup>

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<sup>68</sup> <https://www.cdc.gov/vaccines/vac-gen/imz-basics.htm>

<sup>69</sup> The revised definition sparked social media controversy: In response, a CDC spokesman told a newspaper that the previous definitions could have been “interpreted to mean that vaccines were 100% effective, which has never been the case for any vaccine, so the current definition is more transparent, and also describes the ways in which vaccines can be administered.” Neither definition mentions controlling spread, but the CDC also warned the *Miami Herald* that there remained the misconception that Covid vaccines were designed to prevent infections entirely, leading people to believe the vaccines aren’t working as they should when they learn about breakthrough infections among the vaccinated. <https://www.miamiherald.com/news/coronavirus/article254111268.html>

<sup>70</sup> *Ibid.*

<sup>71</sup> <https://health-infobase.canada.ca/covid-19/vaccine-safety/>

<sup>72</sup> <https://health-infobase.canada.ca/covid-19/epidemiological-summary-covid-19-cases.html>

Meanwhile, increasing numbers of vaccinated Canadians are contracting Covid anyway, as confirmed by PHAC:

While the COVID-19 vaccines are highly effective at preventing severe outcomes, a percentage of the population who are vaccinated may become infected with COVID-19 if they are exposed to the virus that causes it. This means that even with high vaccine effectiveness, a percentage of people who are vaccinated against COVID-19 will still get sick and some may be hospitalized or die. Since the start of the vaccination campaign on December 14, 2020, PHAC received case-level vaccine history data for 72.3% (n=1,841,797) of COVID-19 cases aged 5 years or older.<sup>73</sup>

Of these cases, 42.7% were fully vaccinated with two or more doses:

- 916,475 (49.8%) were unvaccinated at the time of their episode date
- 51,466 (2.8%) were not yet protected by the vaccine
- 87,698 (4.8%) were only partially vaccinated
- 647,438 (35.2%) were fully vaccinated
- 138,720 (7.5%) were fully vaccinated with an additional dose

### *What were we not told?*

For more than a year Canadians were told by people they had been encouraged to trust for accurate information, that vaccination was the panacea. They were urged, browbeaten, and coerced – into receiving two jabs, because “it worked.”

But, months before Prime Minister Trudeau was asserting with great confidence that “vaccines work,” it was well known and publicised that although they might ameliorate the symptoms, they would not prevent infection. For full details, we refer the reader to the Justice Centre paper, *Covid vaccines do not stop Covid spread*.<sup>74</sup>

Here however is a sampler from that work of those competent individuals who said the complete opposite, months before.

More than a year ago, WHO Director General Tedros Adhanom Ghebreyesus said that while vaccines were essential complements to other pandemic-fighting tools, “a vaccine on its own will not end the pandemic.”<sup>75</sup>

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<sup>73</sup> <https://health-infobase.canada.ca/covid-19/epidemiological-summary-covid-19-cases.html>

<sup>74</sup> <https://www.jccf.ca/wp-content/uploads/2021/12/2021-12-21-Vaccines-do-not-stop-Covid-spread-FINAL.pdf>

<sup>75</sup> <https://www.youtube.com/watch?v=rXyO1l3VdTc>

When Center for Disease Control (CDC) Director Rochelle Walensky suggested during an MSNBC interview in March 2021, that vaccinated individuals “do not get sick, do not carry the virus, and it’s not just in the clinical trials, it’s also in the real-world data,”<sup>76</sup> a CDC spokesman was scrambled to issue a correction. The newly confirmed Walensky was described as “speaking broadly... It’s possible that some people who are fully vaccinated could get COVID-19.”<sup>77</sup>

Walensky got the message. Asked about spread in August 2021 by CNN’s Wolf Blitzer, she stated, “What they [the vaccines] can’t do any more is prevent transmission.”<sup>78</sup>

In the U.S., the CDC stated, “A vaccine breakthrough infection happens when a fully vaccinated person gets infected with COVID-19. People with vaccine breakthrough infections may spread COVID-19 to others.”<sup>79</sup>

Vaccine manufacturers were also more cautious than some elected officials.

In a November 2020 interview with HBO’s *Axios* news-documentary program, Moderna’s chief medical officer Dr. Tal Zaks said that while the company’s product was effective in stopping people from getting sick with Covid, there was no hard evidence that it prevented those infected from infecting others.

“I think we need to be careful as we get vaccinated, not to over-interpret the results. When we start the deployment of this vaccine, we will not have sufficient concrete data to prove that this vaccine reduces transmission.”<sup>80</sup>

A year later on its website, Moderna reported a “lower risk of breakthrough infection in participants vaccinated more recently (median 8 months after first dose) than participants vaccinated last year. (Median 13 months after first dose.)”<sup>81</sup>

While it may be a lower risk, as all persons diagnosed with Covid are considered infectious, there is nonetheless a risk of spread despite vaccination.

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<sup>76</sup> <https://www.msnbc.com/transcripts/transcript-rachel-maddow-show-3-29-21-n1262442>

<sup>77</sup> <https://www.nytimes.com/2021/04/01/health/coronavirus-vaccine-walensky.html>

<sup>78</sup> <http://www.cnn.com/TRANSCRIPTS/2108/05/sitroom.02.html> 5th August 2021

<sup>79</sup> <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/effectiveness/why-measure-effectiveness/breakthrough-cases.html> 9th Nov. 2021

<sup>80</sup> <https://www.youtube.com/watch?v=po7qt9BZz0s>

<sup>81</sup> <https://investors.modernatx.com/news/news-details/2021/Moderna-Highlights-New-Clinical-Data-on-its-COVID-19-Vaccine-09-15-2021/default.aspx>

Pfizer board member Dr. Scott Gottlieb made the case for booster shots to *CNBC* in November 2021, arguing they were necessary to prevent a spread that was developing in the vaccinated population, not the unvaccinated population:

“At this point I think we need to accept that there’s a lot of breakthrough infections happening, particularly people who are out a significant portion of time from their original vaccination. There’s probably more infection happening among the vaccinated population, more spread happening in that population, the unboosted portion of that population, than what we’re picking up because we’re just not systematically tracking this.”<sup>82</sup>

During a Facebook briefing in September 2021, Anna Durbin, director of the Center for Immunization Research at Johns Hopkins Bloomberg School of Public Health<sup>83</sup> commented, “Vaccines are designed to prevent serious illness, not to prevent infection or prevent any symptoms.”

### *No scientific basis for mandatory vaccination policies*

Any policy that segregates populations by means of mandatory vaccination policies, requires at a minimum that those vaccines are effective in removing the risk of transmission. This is especially so, when the vaccination issue has been used by vote-seeking politicians to cut a deep division between Canadians. Unfortunately, and contrary to government-led narratives and media coverage in both Canada and the U.S., the evidence strongly suggests vaccinations do not stop the spread of Covid – not the original strains, and not the later Delta and Omicron variants. Indeed, when pressed by competent journalists, policy makers frequently concede that vaccines are intended only to reduce the severity of illness, not to prevent its spread.

Thus, whatever value vaccines may have in reducing hospitalization and mortality, they do not “work” with the thoroughness government leaders claim,<sup>84</sup> and certainly not to the degree that mandatory enforcement could ever be justified in Canada as a reasonable limitation upon individual rights to bodily autonomy and *Charter* freedoms.

It is hard to believe that Canadian leaders were unaware of this. Even Bill Gates was saying it.<sup>85</sup> It becomes therefore, one more explanation for the growing confusion

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<sup>82</sup> <https://www.cnn.com/2021/11/22/gottlieb-breakthrough-covid-infections-are-more-common-than-people-realize.html>

<sup>83</sup> <https://m.facebook.com/ABC15/videos/johns-hopkins-university-provides-latest-information-about-covid-19-pandemic/388548672833223/>

<sup>84</sup> In this paper, we do not examine possible collateral and unintended harms of vaccination.

<sup>85</sup> <https://www.youtube.com/watch?v=CZpIF4qdwll&t=1540s> 5<sup>th</sup> November 2021

amongst the Canadian public – the uneasy feeling that although the details are hazy, something seriously doesn't make sense.

## **Arbitrary enforcement, inconsistent and unreasonable regulations**

It seems fair that some goodwill and public patience ought to be afforded to public authorities confronted by novel and challenging circumstances as they measure and assess the risk in the initial phases of an apparent crisis.

However, as weeks turn into months (and years), governmental failure to produce reasonable, consistent regulations and fairly apply them quickly frustrates those who are being regulated. Governments have always been known for their clunky bureaucracy with seemingly contradictory proclamations coming from different departments. But we are not concerned here with mere frustrations from over-burdensome administration. No, it was the quickly changing and irrational mandates and rules done at whim and radically affecting all aspects of public life which were and remain a serious threat to the free society.

For the past two years, the parliamentary process has been disregarded and dictatorial power has been given to a few in the name of "science." No time was given to debate. No time was given to consider if the emergency measures were appropriate or reasonable. Most Canadians may have been too polite to speak up when a public health rule seemed to defy common sense. But groundless infringements upon Canadians' *Charter* rights and freedoms demand reproach and justice.

### *Ontario*

In Ontario, Premier Doug Ford repeatedly extended the state of emergency issued in March of 2020, keeping even outdoor recreational facilities, playgrounds, outdoor community gardens, dog parks, and beaches closed. "Following the science" led to citizens being heavily fined for sitting on park benches (\$750),<sup>86</sup> rollerblading in an empty parking lot (\$880),<sup>87</sup> and for exercising outside alone.<sup>88</sup> Criminal lawyer Dylan Finlay told his own story in the National Post:<sup>89</sup>

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<sup>86</sup> <https://www.theglobeandmail.com/canada/toronto/article-critics-say-charging-people-for-lingering-on-torontos-park-benches/>

<sup>87</sup> <https://globalnews.ca/news/6810568/coronavirus-oakville-ontario-rollerblading-fine/>

<sup>88</sup> <https://www.cbc.ca/news/canada/ottawa/compliants-fines-parks-covid-19-1.5537814>

<sup>89</sup> [https://nationalpost.com/opinion/dylan-finlay-on-covid-19-enforcing-social-distancing-with-fines-is-one-step-too-far?video\\_autoplay=true](https://nationalpost.com/opinion/dylan-finlay-on-covid-19-enforcing-social-distancing-with-fines-is-one-step-too-far?video_autoplay=true)



I stopped at a chin-up bar in the park and did some chin-ups. A bylaw officer drove by and ticketed me for the activity (he made it clear that I was not being ticketed for being in the park.) The fine was \$880. There was no signage on the chin-up bar saying that it was a 'recreational amenity,' or that it was off limits to the public, despite signage on nearby playgrounds clearly marking them as being closed.

The government's failure to produce any evidence demonstrating a heightened risk of outdoor transmission in relation to the fines is itself evidence of their violation of the rule of law and citizens' rights and freedoms.

### *British Columbia*

On the west coast, the enforced health mandates were no less bewildering. A provincial health order issued by Provincial Health Officer Dr. Bonnie Henry enforced the closure of churches and other places of worship in an attempt to stop the spread of Covid, all the while allowing restaurants and bars to remain open at 15 percent capacity.<sup>90</sup> Does praying together constitute a significant risk above that of dining out with friends? Dr. Henry (subjectively) deemed that to be the case.

The Catholic Archbishop of Vancouver J. Michael Miller commented, "To limit the religious freedom of believers to worship is a very serious matter since such freedom is specifically protected in Canada's *Charter of Rights and Freedoms*."

"The reason why gathering for worship in limited numbers where all safety precautions are met is not allowed, while bars and restaurants and gyms can remain open with measures that are no more safe, is simply baffling,"<sup>91</sup> said Miller.

And all the more baffling is the fact that just next door in Alberta a few weeks later, it was churches that were allowed to remain open as restaurants and bars were shuttered.<sup>92</sup> Surely there must be some medical literature or evidence to back either province's decision? Maybe the mandate to stop serving alcohol by 10 p.m.<sup>93</sup> actually somehow worked to stop transmission of the virus in B.C. yet failed to work across the border.

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<sup>90</sup> <https://globalnews.ca/news/7477970/vancouver-catholic-covid-service-bar/>

<sup>91</sup> <https://globalnews.ca/news/7477970/vancouver-catholic-covid-service-bar/>

<sup>92</sup> <https://calgary.ctvnews.ca/alberta-bars-restaurants-closed-to-in-person-dining-at-12-01-a-m-sunday-1.5222416>

<sup>93</sup> <https://bc.ctvnews.ca/why-10-p-m-liquor-industry-reps-ask-b-c-to-extend-alcohol-service-to-midnight-1.5101965>

Perhaps in B.C., Dr. Henry's absurd health mandate<sup>94</sup> enforcing that the level of music, televisions, and other background sounds in bars, pubs, and restaurants, must not exceed the volume of normal conversation succeeded and these places were indeed safer than churches. Then again, perhaps not.

### *Alberta*

Not to be outdone in non-sensical health mandates, the Alberta health authorities issued new restrictions on May 4, 2021, for social and religious gatherings in communities with more than 50 Covid infections per 100,000 people. Chief Medical Officer of Health Dr. Deena Hinshaw ordered that outdoor social gathering be limited to no more than five people; that places of worship be limited to no more than 15 persons regardless of the size of the building; and that no more than ten people can attend a funeral service.<sup>95</sup>

So to be clear, under these mandates 15 people could be inside of a church, unless one of them was deceased. In that case, only ten would be permitted. And once they proceed to the cemetery outside, an additional five people would have to be excluded. Of course, if they chose to hold the same ceremony inside of a big box retail store or shopping mall with 10 percent capacity, then hundreds of people could attend.

Whatever the scientific justification was for these capacity numbers – if indeed there ever was one – it was not passed along to the public.

### *Atlantic Canada*

The science available to provincial governments to inform their decisions was accessible and ubiquitous across Canada. Did not Newfoundland have access to the same studies available to British Columbia? It is puzzling therefore, why some provinces would enforce a mandate and others would not.<sup>96</sup> Surely the “science” would dictate a common and consistent approach.

In June of 2020, British Columbia, Alberta, Saskatchewan, Ontario, and Quebec did not require interprovincial travellers to quarantine for 14 days. Manitoba, the Atlantic provinces, and the northern territories, on the other hand were apparently following a different science and therefore imposed the mandatory isolation.

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<sup>94</sup> <https://news.gov.bc.ca/releases/2020HLTH0049-001688>

<sup>95</sup> <https://www.alberta.ca/release.cfm?xID=780944289E67F-AB21-1393-1723D64CDEC6F61D>

<sup>96</sup> <https://globalnews.ca/news/7106284/coronavirus-provincial-travel/>

In the “Atlantic bubble” in particular, Covid checkpoints were established at borders ensuring compliance with self-isolation.<sup>97</sup> “COVID-Zero” was enforced in an attempt to quash every case of the virus by severely limiting the *Charter*. In the end, the policy only succeeded in infringing Canadians’ rights.<sup>98</sup>

One could legitimately question why interprovincial travel restrictions would be of any benefit when the virus was already present in each province. But that would be a reasonable question, and reason was at a premium during the past two years.

## **Unscientific perpetuation of failed policies**

For two years, Canadians have been told to “trust the science.” Repeated with religious fervour by elected officials (though less frequently by scientists) it was supposed to paint people who questioned the official narrative as ignorant, incredulous and deeply anti-social. Information that didn’t fit the official narrative was by definition “misinformation.” Governments appropriated to themselves the role of sole arbiters of truth. In one spectacular act of hubris, New Zealand Prime Minister called on New Zealanders to take their information on Covid, “only from the government.”

As the preceding pages show, Canada’s governments have hardly been agreed on “the science.” And in any case, it is the nature of science to argue and discuss: Declaring certain questions off limits is inimical to the spirit of fact-based enquiry. The Justice Centre has no opinion on alternative treatments for Covid, such as Ivermectin and hydroxychloroquine. We do, however, have an opinion about governments that make that decision for us, and declare the matter closed, and take action against experienced and capable physicians whose reputations were impeccable up until the day they questioned the government’s narrative.

Doctors, surgeons, and other health care practitioners across Canada have been silenced and punished for asking rational questions and proposing reasonable ideas. These are individuals whose lives are directed by medicine and science. So why do governments and health authorities reject out-of-hand any question or suggestion raised by these medical professionals? Would not the logical thing to do be to compare each side’s evidence and reasons in order to determine the truth?

Dr. Charles Hoffe,<sup>99</sup> a physician in the rural community of Lytton, B.C., was investigated by the College of Physicians and Surgeons of British Columbia and the Interior Health Authority (IHA) for allegedly promoting “vaccine hesitancy.” IHA then suspended Dr. Hoffe’s emergency room privileges, resulting in the loss of half his income. Under Dr.

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<sup>97</sup> <https://www.cbc.ca/news/canada/prince-edward-island/pei-public-heath-checkpoints-screening-covid-19-1.5507473>

<sup>98</sup> <https://ca.news.yahoo.com/atlantic-canadas-vaunted-covid-zero-205200109.html>

<sup>99</sup> <https://www.visiontimes.com/2021/04/27/first-nations-vaccine-adverse-reactions-charles-hoffe.html>

Hoffe's care, 900 First Nations' people were injected with the Moderna vaccine at the start of the vaccine rollout in Lytton in January 2021. Not long after, he saw many of his patients exhibit serious adverse effects and reported to provincial health authorities: One patient died, two patients suffered anaphylactic reactions, and numerous others suffered lasting neurological and pulmonary injuries.<sup>100</sup> For merely speaking about the evidence he witnessed and calling into question the safety of the vaccines Dr. Hoffe was reprimanded.

Nova Scotia physician Dr. Chris Milburn was removed as head of emergency medicine for the Eastern zone for expressing concerns about the decisions of the health authorities of his province.<sup>101</sup> "What I'm for is science and what I'm for is personal choice. Patient autonomy is one of the basic, ethical foundations of our modern health care system," stated Dr. Milburn.

Medical professionals in Alberta have also faced harsh treatment for not following in lockstep with the narrative and supporting what was once commonly accepted knowledge. Four Alberta doctors lost their jobs or had their medical privileges restricted due to the vaccine mandate of Alberta Health Services.<sup>102</sup> No thought is given by the ruling health authorities to the fact that each of the doctors already had Covid and had acquired natural immunity. The doctors, one of whom was previously the personal doctor to the Nelson Mandela family, simply advocate for returning to basic medical principles: recognition of natural immunity, doctor-patient privilege, informed consent, personal autonomy and duty to disclose; principles that weren't considered controversial before 2020.

As one example of the unscientific nature of the doctors' punishments, Dr. Tyler May in Manning, Alberta, is being allowed access to his hospital (after it was deemed one of the critical sites in AHS' second revision of the vaccine mandate) but not his clinic. Dr. May had this to say, "AHS' decision is completely arbitrary and absurd, as the facilities are intimately linked, and it provides another example of AHS putting ideology and policy over patient care – much like the [vaccine mandate] itself."<sup>103</sup>

There are, unfortunately, too many examples for our comfort. However, the case of Saskatchewan physician Dr. Francis Christian portrays a common experience for many. Dr. Christian describes himself as "pro-vaccine" and up until the time that he questioned the advisability of vaccinating children, he was the Clinical Professor of General Surgery at the University of Saskatchewan and a practising surgeon in Saskatoon. In June

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<sup>100</sup> [https://www.jccf.ca/court\\_cases/hoffe-vs-bc-college-of-physicians-and-surgeons/](https://www.jccf.ca/court_cases/hoffe-vs-bc-college-of-physicians-and-surgeons/)

<sup>101</sup> <https://atlantic.ctvnews.ca/cape-breton-doctor-removed-as-head-of-emergency-medicine-for-eastern-zone-1.5473738>

<sup>102</sup> <https://www.jccf.ca/four-alberta-doctors-sue-ahs-over-vaccine-mandate/>

<sup>103</sup> <https://www.jccf.ca/four-alberta-doctors-sue-ahs-over-vaccine-mandate/>

2021, he released a statement<sup>104</sup> to parents and physicians, outlining his medical (not political) concerns. In particular, he pointed out that mRNA vaccines had not been fully authorised by either Health Canada or the CDC, and were offered under an “emergency use authorization.”

In order to qualify for “emergency use authorization” there must be an emergency. For the elderly population, for the vulnerable, for health care workers, there is of course an emergency – several thousand people in Canada have died of Covid-19. But the mean age of those who have died is 83.8. There is therefore a strong case for vaccinating the elderly, the vulnerable and health care workers. Covid-19 does not pose a threat to our kids. The risk of them dying of covid is less than 0.003% - this is even less than the risk of them dying of the flu. There is no emergency in children.

He urged that informed consent be required of children as young as 12 years old, before they accepted the vaccine. For that, he lost his job.<sup>105</sup> Even uninformed Canadians have a constitutional right to speak their opinions: It is a sorry day indeed for Canadians, when officialdom will not hear the opinions of qualified professionals.

Canadians also have reason to be in uproar that their governments remove the free choice of individuals wishing to use or try medications that, even if they don’t provide the desired healing or help, do no harm or do very little harm. It is a matter of free choice.

The ultimate rejection of science – in the name of trusting the science – is of course, the continuation of lockdowns in the face of evidence that lockdown harms may exceed the harms of Covid. Once more, for a full account of Canada’s lockdown harms we refer the reader to the Justice Centre paper, *Are Lockdown harms, worth the cost?*<sup>106</sup>

Briefly, thousands of Canadians have died due to hundreds of thousands of surgeries and diagnostic procedures being cancelled. Precise numbers will not be known for some time. However, in a December 2021 report,<sup>107</sup> the Canadian Institute for Health Information estimated that 560,000 surgeries were cancelled nation-wide between March 2020 and the end of June 2021. Meanwhile, scattered death estimates suggest a substantial number.

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<sup>104</sup> <https://www.jccf.ca/wp-content/uploads/2021/06/17-June-press-conference-statement-Dr.-Christian.pdf>

<sup>105</sup> <https://www.jccf.ca/surgeon-fired-by-college-of-medicine-for-voicing-safety-concerns-about-covid-shots-for-children/>

<sup>106</sup> [https://www.jccf.ca/wp-content/uploads/2021/12/2021-12-14-Lockdown-harms-\\_JC6.pdf](https://www.jccf.ca/wp-content/uploads/2021/12/2021-12-14-Lockdown-harms-_JC6.pdf)

<sup>107</sup> <https://www.cihi.ca/en/covid-19-resources/impact-of-covid-19-on-canadas-health-care-systems/the-big-picture>

For example, Global News in Saskatchewan used the freedom of information request to establish that after cancellation of surgeries due to Covid, 479 people died on the waiting list.<sup>108</sup> The think tank Second Street calculated, also on the basis of FOIPs, that 2,367 people died on the waiting lists in 2020 alone.<sup>109</sup> Statistics Canada<sup>110</sup> estimates that between March 2020 and September 2021, there were 26,750 deaths attributed to Covid, but 27,585 “excess” deaths.<sup>111</sup> However, age group analysis shows many of the excess deaths are concentrated in younger age groups in which Covid deaths are low but in which deaths many believe are Covid collateral – unintentional drug overdoses for example – are emphasized.

A respected Alberta physician, Dr. Ari Joffe, makes the case for lockdown harms in a paper he published in 2021 to that effect. In the abstract he writes:

- In this narrative review I explain why I changed my mind about supporting lockdowns. First, I explain how the initial modeling predictions induced fear and crowd-effects [i.e., groupthink].
- Second, I summarize important information that has emerged relevant to the modeling, including about infection fatality rate, high-risk groups, herd immunity thresholds, and exit strategies.
- Third, I describe how reality started sinking in, with information on significant collateral damage due to the response to the pandemic, and information placing the number of deaths in context and perspective.
- Fourth, I present a cost-benefit analysis of the response to COVID-19 that finds **lockdowns are far more harmful to public health than COVID-19 can be.**<sup>112</sup> (Emphasis added.)

In other words, if Covid kills, lockdowns also kill. This is well known. It is published. It is in the data, it is fact, it is science. Canadians who have no particular connection to public health know it. For nearly two years, it has been obvious that Dr. Ferguson’s scientific modelling (upon which the lockdown policy was explicitly based) failed the test stage in the scientific method.

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<sup>108</sup> <https://globalnews.ca/news/8509321/saskatchewan-deaths-waiting-surgery-covid-pandemic/>

<sup>109</sup> <https://nationalpost.com/news/canada/more-than-2000-patients-in-canada-died-while-waiting-for-medical-care-in-2020-report>

<sup>110</sup> <https://www150.statcan.gc.ca/n1/daily-quotidien/220124/dq220124a-eng.htm>

<sup>111</sup> <https://www150.statcan.gc.ca/n1/daily-quotidien/220124/dq220124a-eng.htm>

<sup>112</sup> <https://edmontonjournal.com/opinion/columnists/david-staples-lockdowns-will-cause-10-times-more-harm-to-human-health-than-covid-19-itself-says-infectious-disease-expert>.

Governments, we must assume know it but manifestly, have not allowed it to influence policy and do their best to silence anybody who raises the matter.

When faith and authority replace enquiry and research, we have left the realm of science and entered that of religion. Canadians may not have committed all the details to memory. But when medical professionals with off-message views are cancelled rather than debated, and when governments continue to base policy on a discredited theory, Canadians are rightly suspicious that something is wrong.

## Conclusion and Recommendations

### *How bad was it?*

As viral infections go, Covid could be severe. Like the influenza which has pestered us every winter for centuries and millennia, it hit some people hard. Hardest hit of all over the two-year period surveyed, were the roughly 37,000 Canadians whose deaths were associated with it – or rather more than twice the number who died of influenza over a similar two-year period, the winters of 2017 and 2018.<sup>113</sup> A bad one, then.

But, in the context of more than 600,000 Canadians dying of all causes over two years, more than half from cancer and heart disease, Covid is certainly not the Black Death of the Middle Ages, or the Spanish Flu of 1918. The absence of widespread testing for Covid antibodies makes it unclear how many Canadians have been infected with Covid. One study by Ichor Labs<sup>114</sup> suggests that over 40% of people have had Covid, including many with mild symptoms or no symptoms at all.

Notwithstanding the enormous attention paid to Covid by government and the media, it was not until the comparatively mild but highly infectious Omicron variant arrived in

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<sup>113</sup> <https://www150.statcan.gc.ca/t1/tbl1/en/tv.action?pid=1310080101>

Flu 2017     7,445

Flu 2018     8,592

Flu 2 years 16,037

<https://health-infobase.canada.ca/covid-19/epidemiological-summary-covid-19-cases.html>

Covid     37,157

<sup>114</sup> <https://www.newswire.ca/news-releases/ichor-blood-services-scales-alberta-operations-to-manage-strong-demand-for-quantitative-covid-19-antibody-testing-offered-in-partnership-with-mayo-clinic-laboratories-894976874.html>

December, that a positive test for Covid became unsurprising. As of January 11, 2022, 92.7 percent<sup>115</sup> of Canadians had never tested positive for Covid in nearly two years.

### *Lockdowns did not work*

Governments, of course, would ascribe Covid's minor impact (a small fraction of the impact of the Spanish Flu of 1918 that Neil Ferguson warned us about) as the result of their sensible, scientific and highly effective lockdown measures. But, they would do so in error.

Had that been so, the effects of Covid would have been more evenly distributed throughout the population. However in fact, Covid's reach was spectacularly one-sided. One particular demographic paid the Covid price: the elderly and the infirm. As of March 4, 2022, 82 percent of Canadians who died with Covid were over the age of 70: A further 10 percent were between the ages of 60 and 69.<sup>116</sup> As Statistics Canada reports,<sup>117</sup> "approximately 90% of COVID-19 related deaths among seniors 65 years and older occurred among individuals with pre-existing chronic conditions, with dementia as the most prevalent comorbidity."

Lockdowns obviously did not prevent Covid from getting into Canada's long-term care facilities (nursing homes), where more than 80% of Covid deaths occurred. Some lockdowns in some places at certain times may well have temporarily slowed the spread of the virus, but obviously the virus still spread throughout Canada. Beyond the bare assertion that "lockdowns have saved lives," governments have not provided evidence to support that bald claim.

### *A culture of fear leads to hatred, division and government control*

We were instructed to be inordinately fearful of a virus that would not inflict serious harm on about 90% of the population.<sup>118</sup>

We were all stripped of our *Charter* rights to travel, assemble, worship and exercise control over our own bodies, in order to combat a virus whose most severe effects were felt by a single demographic: elderly and infirm Canadians. Governments have yet to provide persuasive evidence that lockdowns spared the lives of those belonging to this vulnerable minority. Better, more effective protocols to protect residents of nursing

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<sup>115</sup> <https://www.jccf.ca/how-many-people-have-actually-had-covid-was-it-ever-a-pandemic-at-all/>

<sup>116</sup> <https://health-infobase.canada.ca/covid-19/epidemiological-summary-covid-19-cases.html#a5>

<sup>117</sup> <https://www.canada.ca/en/public-health/services/diseases/coronavirus-disease-covid-19/epidemiological-economic-research-data/excess-mortality-impacts-age-comorbidity.html>

<sup>118</sup> <https://www150.statcan.gc.ca/t1/tbl1/en/tv.action?pid=1710000501>



homes could have been implemented without inflicting lockdown harms on the 90% of Canadians not threatened by the virus.<sup>119</sup>

And we were taught to fear and even hate each other. We were encouraged to report our friends and neighbours, if we suspected they might be in breach of public health regulations. Friends and families quarrelled bitterly over masks and vaccinations.

Vote-seeking elected officials, sensing a potential fear-premium, created a two-tier society in which only the good – people with vaccine passports – would have access to public facilities. The others, the bad, the unvaccinated, should stay home.

Eventually, even this was not enough; these deplorables should not be allowed to earn an income or attend university. In Quebec and New Brunswick, the deplorables were briefly banned from retail stores including supermarkets. Quebec proposed a “significant” health surcharge on unvaccinated Quebecers.<sup>120</sup>

The prime minister himself condemned the unvaccinated as racist, misogynist, anti-science extremists, saying their fellow Canadians were “frustrated” by them and “angry” with them.<sup>121</sup> This, even when it became clear that vaccination was no bar to infection by Omicron.

Not surprisingly, given the language and the position of those using it, support grew for penalization of those who remained vaccine-free. In January 2022, a Maru poll<sup>122</sup> reported that 27 percent of those questioned supported jail-time for Canadians who refused vaccination.

It was discrimination based upon obedience to people who relied on "science" that proved to be unscientific, who while mesmerized by the potential costs of Covid would not consider the actual costs of their response to it and who when unsure what to do

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<sup>119</sup> The Science Table COVID-19 Advisory for Ontario reports:

The COVID-19 pandemic has led to significant education disruption in Ontario. This has included mass and localized school closures, multiple models of educational provision and gaps in support for students with disabilities. The unequal distribution of school closures and pandemic-associated hardships, particularly affecting low-income families in which racialized and Indigenous groups, newcomers and people with disabilities are overrepresented, appear to be deepening and accelerating inequities in education outcomes, wherever data have been collected. Further, there are health risks associated with closures including significant physical, mental health and safety harms for students and children. Modelling suggests long-term impacts on students’ lifetime earnings and the national economy. <https://covid19-sciencetable.ca/sciencebrief/covid-19-and-education-disruption-in-ontario-emerging-evidence-on-impacts/>

<sup>120</sup> <https://www.bbc.co.uk/news/world-us-canada-59960689>

<sup>121</sup> <https://www.cbc.ca/news/politics/trudeau-unvaccinated-canadians-covid-hospitals-1.6305159>

<sup>122</sup> <https://nationalpost.com/news/canada/more-than-one-in-four-canadians-support-jail-time-for-unvaccinated-poll>

next, doubled down on their last mistake... all the while condemning those who questioned their wisdom.

This was Canada in the spring of 2022.

Canadians have been persuaded to fear Covid too much and as a result, endured a two-year national trauma of human rights violations. Governments in Canada have by their confused and arbitrary approach, failed to justify their many infringements of Canadians' *Charter* freedoms.

The Justice Centre recommends:

- 1) Promoting true scientific discourse without censorship. Rationality must replace fear.
- 2) A return to the parliamentary process and a rejection of "emergency" authoritarian powers. Violations of *Charter* rights and freedoms by the arbitrary will of government officials and unelected health official must never again be allowed to happen.
- 3) Lockdown strategies are unjust and don't work. All governments should repudiate them. Never again.
- 4) Personal agency over one's own body is a core Canadian value. Vaccine mandates must be repudiated.
- 5) Health policy in Canada be adjusted to "living with the virus."
- 6) Infrastructures of compulsion, in particular that needed to support so-called vaccine passports, be dismantled.
- 7) The federal government apologize for demonizing dissent and promoting disunity among Canadians.

## Appendix A

### 1) Arbitrary enforcement

- a. A Winnipeg man was fined for standing outside, maskless while drinking a coffee. At the time, masks were required in indoor public spaces, but no outdoor mask requirement existed.<sup>123</sup>
- b. In April 2021, Ontario Premier Doug Ford made a short-lived attempt to dramatically expand police powers during a stay-at-home order. Normally police must have a reasonable suspicion before detaining someone for questioning. However, police under the new order were permitted to randomly detain people outside of their residences for questioning. After 39 of 45 police agencies publicly refused to use their newfound powers, Ford backtracked.<sup>124</sup>
- c. Early in the pandemic, an Ontario man named Dylan Finlay received an \$880 fine after using an unmarked chin up bar in a Toronto park. Elsewhere in the park, signs on the various amenities warned off prospective users. In response to his experience he said, “This [has] a real risk of undermining, you know, the social goodwill everybody has for social distancing.”<sup>125</sup>
- d. Ottawa police, ticketed 17 year-old William Vogelsang who was playing basketball alone and outdoors. At the time, William mistakenly believed that the rules merely prohibited playing outdoors in groups.<sup>126</sup>
- e. In 2021, the City of Toronto famously walled off the High Park cherry blossoms to prevent crowds from gathering and admiring the blossoms when in peak bloom.<sup>127</sup>

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<sup>123</sup> <https://winnipeg.ctvnews.ca/it-s-ridiculous-winnipegger-says-he-was-fined-for-not-wearing-a-mask-outside-1.5224910>.

<sup>124</sup> <https://tnc.news/2021/04/17/ford-backtracks-on-covid-19-enforcement-powers-after-pushback-from-police/>.

<sup>125</sup> <https://www.ctvnews.ca/health/coronavirus/chin-ups-in-the-park-net-toronto-man-880-fine-as-provinces-enforce-stricter-measures-1.4897392>.

<sup>126</sup> <https://www.cbc.ca/news/canada/ottawa/compliants-fines-parks-covid-19-1.5537814>.

<sup>127</sup> [https://www.thestar.com/news/city\\_hall/2021/04/14/cherry-trees-in-high-park-to-be-fenced-off-during-blossom-season-but-the-park-will-be-open.html](https://www.thestar.com/news/city_hall/2021/04/14/cherry-trees-in-high-park-to-be-fenced-off-during-blossom-season-but-the-park-will-be-open.html)

## 2) Ill-conceived regulations

- a. Cities like Toronto closed parks to prevent people from gathering and from enjoying the outdoors.<sup>128</sup>
- b. Even drive-in church services were subject to enforcement from overzealous public officials. Worshippers attending the Aylmer Church of God were subjected to a visible police presence at the entrance of the church parking lot, who cataloged and recorded the actions and license plates of everyone who entered therein.<sup>129</sup> Drive-in worshippers in Saskatchewan were also subject to unwelcome enforcement attention from authorities.<sup>130</sup>
- c. Gyms, the frequent abode of the healthiest, least vulnerable demographic were closed,<sup>131</sup> even after epidemiological data suggested that the young and healthy faced a statistically insignificant risk of severe outcomes after contracting Covid.<sup>132</sup> An increase in obesity during the course of the pandemic is linked to a reduction in physical activity.<sup>133</sup>

## 3) Regulations at cross purposes.

- a. Between November 2020 and February 2021, British Columbia had a policy which closed *all* in-person religious services. At the same time, bars and restaurants were permitted to open under certain restrictions.<sup>134</sup> At roughly the same time between December 2020 and February 2021, Alberta closed restaurants for in-person dining but kept churches open at limited capacity.<sup>135</sup>

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<sup>128</sup> <https://nowtoronto.com/news/april-22-coronavirus-updates-toronto-news>.

<sup>129</sup> <https://lfpres.com/news/local-news/police-videotape-aylmer-churchs-drive-in-sunday-service-as-covid-19-clash-continues>.

<sup>130</sup> <https://www.discoverhumboldt.com/local/province-clarifies-rules-around-drive-in-worship>.

<sup>131</sup> See e.g. <https://toronto.ctvnews.ca/ontario-closes-schools-until-jan-17-bans-indoor-dining-and-cuts-capacity-limits-1.5726162>.

<sup>132</sup> See e.g. <https://www.alberta.ca/stats/covid-19-alberta-statistics.htm>.

<sup>133</sup> <https://www150.statcan.gc.ca/n1/pub/45-28-0001/2021001/article/00019-eng.htm>.

<sup>134</sup> <https://globalnews.ca/news/7477970/vancouver-catholic-covid-service-ban/>;  
<https://globalnews.ca/news/7667311/in-person-worship-ban-exemptions/>.

<sup>135</sup> <https://calgary.ctvnews.ca/alberta-bars-restaurants-closed-to-in-person-dining-at-12-01-a-m-sunday-1.5222416>; <https://calgary.ctvnews.ca/alberta-bars-restaurants-closed-to-in-person-dining-at-12-01-a-m-sunday-1.5222416>.

- b. In the second wave, Ontario closed small stores for in-person shopping while allowing big box stores to remain open, even while selling the same or similar non-essential items, all while entering the holiday season. The President of the Canadian Federation of Independent Business, Dan Kelly had this to say: “Doug Ford has unfortunately signed the death warrant of thousands and thousands of businesses.”<sup>136</sup>
- c. Similarly, gyms were closed while liquor stores remained open, many such comparable examples exist.<sup>137</sup>

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<sup>136</sup> <https://www.cbc.ca/news/business/small-business-retailers-big-box-lockdown-1.5812762>.

<sup>137</sup> <https://www.cbc.ca/news/canada/toronto/covid-ont-quicklist-1.6302972>.

- d. At one point or another, many provinces required travellers from other provinces to self-isolate for 14 days upon arrival.<sup>138, 139, 140, 141, 142</sup> The other half did not.<sup>143, 144, 145, 146, 147</sup>
- e. Some provinces shut down interprovincial travel.<sup>148, 149, 150, 151, 152, 153, 154</sup> While others did not shut down interprovincial travel.<sup>155, 156, 157</sup>

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<sup>138</sup> Manitoba imposed a 14-day quarantine requirement for out-of-province visitors on April 17, 2020. <https://www.cbc.ca/news/canada/manitoba/manitoba-covid-19-thursday-1.5534291>. While this restriction was eased at various times, it appears that it was not fully lifted until February 15, 2022. <https://globalnews.ca/news/7106284/coronavirus-provincial-travel/>; <https://www.gx94radio.com/2022/02/11/manitoba-lifting-more-covid-19-restrictions-starting-tuesday-feb-15/>.

<sup>139</sup> New Brunswick required 14 days of self-isolation for all out-of-province travelers on March 25, 2020. [https://www2.gnb.ca/content/gnb/en/news/news\\_release.2020.03.0155.html](https://www2.gnb.ca/content/gnb/en/news/news_release.2020.03.0155.html).

<sup>140</sup> Prince Edward Island, as part of the Atlantic Bubble, required all out-of-region travellers to self-isolate as of March 21, 2020. <https://www.princeedwardisland.ca/en/news/chief-public-health-officer-urges-self-isolation-following-interprovincial-travel>.

<sup>141</sup> Nova Scotia required 14 days of self-isolation for all out-of-province travelers on March 23, 2020. <https://novascotia.ca/news/release/?id=20200322001>.

<sup>142</sup> Newfoundland and Labrador ordered all out-of-province travelers to self-isolate for 14 days beginning March 20, 2020. <https://globalnews.ca/news/6707539/newfoundland-premier-health-minister-to-provide-covid-19-update/>. Later, travelers were permitted to take a PCR test. <https://www.cbc.ca/news/canada/provinces-territories-travel-restrictions-covid-1.6284713>.

<sup>143</sup> British Columbia did not impose a 14-day quarantine for interprovincial travellers. See <https://www.mccarthy.ca/en/insights/articles/covid-19-emergency-measures-tracker>; <https://globalnews.ca/news/7602893/premier-john-horgan-response-bonnie-henry-do-more-covid-19/>.

<sup>144</sup> Alberta did not impose interprovincial travel restrictions. See <https://www.mccarthy.ca/en/insights/articles/covid-19-emergency-measures-tracker>; <https://www.cbc.ca/news/canada/provinces-travel-restrictions-border-checkpoints-1.5561074>.

<sup>145</sup> Saskatchewan did not impose interprovincial travel restrictions. See <https://www.mccarthy.ca/en/insights/articles/covid-19-emergency-measures-tracker>; <https://www.cbc.ca/news/canada/provinces-travel-restrictions-border-checkpoints-1.5561074>.

<sup>146</sup> Ontario did not require interprovincial travelers to self-isolate. See <https://www.mccarthy.ca/en/insights/articles/covid-19-emergency-measures-tracker>.

<sup>147</sup> Quebec did not require interprovincial travelers to self-isolate. See <https://www.mccarthy.ca/en/insights/articles/covid-19-emergency-measures-tracker>. But Quebec did impose *intra*-provincial self-isolation requirements for those who returned home from certain regions at certain times. *E.g.* [https://cdn-contenu.quebec.ca/cdn-contenu/adm/min/sante-services-sociaux/publications-adm/lois-reglements/AM\\_numero\\_2020-013-anglais.pdf?1585753157](https://cdn-contenu.quebec.ca/cdn-contenu/adm/min/sante-services-sociaux/publications-adm/lois-reglements/AM_numero_2020-013-anglais.pdf?1585753157).

<sup>148</sup> British Columbia announced intra- and interprovincial travel restrictions on April 23, 2021, which were subsequently lifted June 15, 2021. <https://news.gov.bc.ca/releases/2021PSSG0029-000758>;

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<https://bc.ctvnews.ca/step-2-b-c-lifts-more-covid-19-restrictions-including-ban-on-travel-within-the-province-1.5469320>.

<sup>149</sup> Ontario closed the Manitoba and Quebec borders on April 16, 2021, and reopened the borders on June 16, 2021. <https://montrealgazette.com/news/quebec/quebec-ontario-border-will-close-monday-as-provinces-battle-variants>; <https://toronto.ctvnews.ca/ontario-announces-it-will-reopen-provincial-borders-on-june-16-1.5469525>.

<sup>150</sup> Quebec closed the Quebec/Ontario border on April 19, 2021, for all non-essential travel and reopened the border on June 16, 2021. <https://www.quebec.ca/nouvelles/actualites/details/covid-19-mesures-relatives-a-la-fermeture-de-la-frontiere-avec-lontario-30531>; <https://globalnews.ca/news/7948023/quebec-ontario-border-reopening-june-16/>.

Quebec imposed intra-provincial regional travel restrictions on March 28, 2020, and on April 1 and 7, 2020. <https://www.cbc.ca/news/canada/montreal/covid19-march28-1.5513555>; [https://cdn-contenu.quebec.ca/cdn-contenu/adm/min/sante-services-sociaux/publications-adm/lois-reglements/AM\\_numero\\_2020-013-anglais.pdf?1585753157](https://cdn-contenu.quebec.ca/cdn-contenu/adm/min/sante-services-sociaux/publications-adm/lois-reglements/AM_numero_2020-013-anglais.pdf?1585753157); [https://cdn-contenu.quebec.ca/cdn-contenu/adm/min/sante-services-sociaux/publications-adm/lois-reglements/AM\\_numero2020-016-anglais.pdf?1586302147](https://cdn-contenu.quebec.ca/cdn-contenu/adm/min/sante-services-sociaux/publications-adm/lois-reglements/AM_numero2020-016-anglais.pdf?1586302147). Many intra-provincial travel restrictions were lifted April 29, 2020. <https://globalnews.ca/news/6881493/quebec-coronavirus-april-29/>.

<sup>151</sup> New Brunswick closed the border to all non-essential travel on March 25, 2020. [https://www2.gnb.ca/content/gnb/en/news/news\\_release.2020.03.0155.html](https://www2.gnb.ca/content/gnb/en/news/news_release.2020.03.0155.html). The border later reopened to other Atlantic provinces in a four province 'free-travel' agreement called the Atlantic Bubble on June 24, 2020. <https://www.cbc.ca/news/canada/prince-edward-island/pei-atlantic-bubble-covid19-1.5625133>. The status of the Atlantic Bubble and the free travel status intra-Atlantic region went through many iterations through the course of the pandemic.

<sup>152</sup> Prince Edward Island first closed its border as part of the Atlantic Bubble on June 24, 2020. <https://www.cbc.ca/news/canada/prince-edward-island/pei-atlantic-bubble-covid19-1.5625133>. PEI suspended non-essential travel within the Bubble on November 24, 2020. <https://www.princeedwardisland.ca/en/news/pei-suspends-participation-atlantic-bubble-two-weeks>. Several iterations of the Atlantic Bubble continue thereafter throughout the pandemic. See note 150.

<sup>153</sup> Nova Scotia first insulated itself by forming part of the Atlantic Bubble, see note 150, but did not independently close its borders to interprovincial travel until May 10, 2021. <https://atlantic.ctvnews.ca/nova-scotia-s-borders-close-to-non-essential-travel-due-to-surge-of-covid-19-cases-1.5420939>.

<sup>154</sup> Newfoundland and Labrador restricted non-essential ferry travel on March 26, 2020, effectively closing the border for all but air travel. <https://www.gov.nl.ca/releases/2020/tw/0325n05/>.

<sup>155</sup> Manitoba did not ban travel from Ontario when Ontario closed its borders. <https://www.cbc.ca/news/canada/manitoba/ontario-border-covid-19-1.5993686>.

Manitoba had an intra-provincial regional travel ban. <https://winnipeg.ctvnews.ca/manitoba-considering-changes-to-interprovincial-travel-isolation-rules-under-draft-plan-1.4980235>.

<sup>156</sup> Alberta did not impose interprovincial travel restrictions. See <https://www.mccarthy.ca/en/insights/articles/covid-19-emergency-measures-tracker>.

#### 4) Charter flouting policies/practices

- a. At least three pastors were arrested in Alberta for the crime of opening their churches and preaching. Pastor James Coates of Grace Life Church was arrested on February 16, 2021, was denied bail and then was finally released on March 22.<sup>158, 159</sup> Pastor Tim Stephens of Fairview Baptist was arrested on June 14, 2021 and released on July 1.<sup>160</sup> Pastor Artur Pawlowski, a Polish immigrant who grew up behind the Iron Curtain, has been arrested, often in dramatic fashion, five times now.<sup>161</sup> At the time of writing, Pawlowski remains in jail in solitary confinement.<sup>162</sup>
- b. On February 12, 2021, the Prime Minister announced that air travelers to Canada would be required to quarantine at a hotel for up to three days, at a personal cost to the traveler of more than \$2000.<sup>163</sup> “Guests” of the hotels were subject to a lack of food and supplies, abduction by authorities, and even sexual assault.<sup>164</sup>
- c. In June 2021, Maxime Bernier, the leader of the People’s Party of Canada, was arrested after attending a political rally in Manitoba. Such an action against political speech is constitutionally unprecedented. A

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<sup>157</sup> Saskatchewan did not impose interprovincial travel restrictions. *Id.* The province did have an intra-provincial regional travel ban. <https://www.nationalobserver.com/2020/05/06/news/sask-premier-reverses-far-north-travel-ban-exemptions>.

<sup>158</sup> <https://www.jccf.ca/pastor-james-coates-to-be-released-from-jail-as-crown-withdraws-charges/>.

<sup>159</sup> <https://globalnews.ca/news/7711765/alberta-pastor-covid-19-released-jail/>.

<sup>160</sup> <https://www.jccf.ca/pastor-tim-stephens-freed-from-alberta-jail/>.

<sup>161</sup> <https://www1.cbn.com/cbnnews/world/2021/may/jailed-alberta-pastor-artur-pawlowski-out-on-bail-warns-fellow-canadians-they-are-going-to-come-after-you>; <https://globalnews.ca/news/8225866/calgary-artur-pawlowski-arrested/>; <https://calgaryherald.com/news/crime/well-known-anti-masker-artur-pawlowski-arrested-near-leduc>; [https://www.rebelnews.com/pastor\\_artur\\_pawlowski\\_arrested\\_again](https://www.rebelnews.com/pastor_artur_pawlowski_arrested_again); <https://calgaryherald.com/news/crime/calgary-street-church-minister-incited-protesters-to-continue-border-blockade-prosecutor-tells-court>.

<sup>162</sup> <https://westernstandardonline.com/2022/03/pastor-art-pawlowski-still-in-solitary-confinement-says-government-is-making-an-example-of-him/>.

<sup>163</sup> <https://globalnews.ca/news/7637180/coronavirus-travel-restrictions-canada-trudeau-announcement/>.

<sup>164</sup> <https://westernstandardonline.com/2021/01/edmonton-woman-forced-into-isolation-because-of-wrong-covid-test/>; <https://www.dailymail.co.uk/news/article-9426691/Guests-revolt-Canadas-2-000-quarantine-hotels-no-food-squalid-rooms-sexual-assaults.html>.



spokesman for Bernier stated “This isn’t about covid anymore. It’s political repression.”<sup>165</sup>

## **5) Policies where we have direct proof the government had no supporting evidence**

- a. On February 16, 2022, the Chief Medical Health Officer for Vancouver Coastal Health sent a letter to the President of the University of British Columbia strongly urging him cease and desist the planned de-registering of vaccine-free students that refused the mandatory testing alternative. Further, UBC was urged to drop the rapid testing regime for vaccine-free students entirely. “(W)e have no evidence that those who have not complied with UBC policies have posed any public health risk to their fellow students, faculty or staff, even during circulation of other variants.”<sup>166</sup>
- b. Only hours before the Premier of Quebec imposed a curfew on his residents, Dr. Horacio Arruda, the now former Public Health Director requested scientific justification from the province’s public health institute. The response he received indicated that the institute “did not have an existing analysis” and could not produce one in timely fashion. Further, emails show that Montreal Public Health officials were against the curfew stating “With the information at its disposal concerning the lack of robust data on efficacy and the demonstration of collateral impact, the (Montreal public health director) recommends the implementation of alternative measures to imposing a curfew.”<sup>167</sup>

## **6) Examples of the government acting in a manifestly evasive manner regarding supporting evidence**

- a. The Justice Centre challenged the constitutionality of Dr. Hinshaw’s health orders, with the litigation commencing in December 2020. The Alberta government repeatedly delayed the case over the next ten months. Shortly before the trial was finally scheduled to commence, the government requested another adjournment claiming that Dr. Hinshaw was simply too busy managing the fourth wave to attend court. The court granted the adjournment. The Justice Centre subsequently discovered

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<sup>165</sup> <https://www.theglobeandmail.com/canada/article-maxime-bernier-charged-after-attending-rally-opposing-covid-19/>.

<sup>166</sup> <https://bm-covid-19-2020.sites.olt.ubc.ca/files/2022/02/2022-02-16-Letter-from-VCH.pdf>.

<sup>167</sup> <https://nationalpost.com/pmnl/news-pmn/canada-news-pmn/quebec-reports-16-more-covid-19-deaths-as-hospitalizations-continue-to-fall>.

that Dr. Hinshaw booked a three-day vacation, which spanned the very two days she was scheduled to testify in court.<sup>168</sup>

## 7) Examples where the government blinked under pressure

- a. The Quebec Government imposed a vaccine mandate for all healthcare workers, effective November 15, 2021. Despite repeated claims that the deadline would not be pushed back, 22,000 health care workers remained vaccine-free only days before the deadline. Rather than face a shortfall in an already stretched system, Health Minister Dubé announced a thirty-day extension. This marked the first time that a government blinked under pressure during the covid era.<sup>169</sup>
- b. Several other provinces also announced a vaccine mandate for healthcare workers, but constantly pushed back the deadline or neglected enforcement as it became clear that too many healthcare workers refused to be vaccinated and their dismissal would cause undue stress on an already stretched healthcare system.

Alberta originally required that all healthcare workers to be vaccinated by November 30, 2021. However, on November 30, AHS CEO Verna Yiu indicated that some staff would be accommodated with a testing program to avoid shortfalls.<sup>170</sup> Starting March 15, 2022, Alberta is dropping the vaccination requirements for healthcare workers.<sup>171</sup>

Saskatchewan announced mandatory Covid vaccination for all healthcare workers; October 15, 2021 was the final date for workers to announce their intentions to vaccination.<sup>172</sup> More than three months later, in January 2022, Saskatchewan Health Authority had yet to enforce the mandate.<sup>173</sup>

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<sup>168</sup> <https://www.jccf.ca/dr-deena-hinshaw-takes-vacation-after-claiming-to-be-too-busy-for-trial/>.

<sup>169</sup> <https://montreal.ctvnews.ca/quebec-pushes-back-vaccine-deadline-to-nov-15-for-health-care-workers-1.5621081>.

<sup>170</sup> <https://edmonton.ctvnews.ca/ahs-to-accept-negative-covid-19-tests-from-unvaccinated-workers-at-sites-facing-staff-shortages-1.5687000>.

<sup>171</sup> <https://globalnews.ca/news/8651629/kenney-alberta-vaccine-mandate-healthcare-workers/>.

<sup>172</sup> <https://leaderpost.com/news/saskatchewan/as-deadline-arrives-98-of-sha-employees-choose-vaccines-over-tests>; <https://www.cbc.ca/news/canada/saskatoon/saskatchewan-health-authority-proof-of-vaccination-1.6237755>.

<sup>173</sup> <https://thestarphoenix.com/news/saskatchewan/vaccine-testing-mandate-for-sask-health-care-goes-unenforced>.

Manitoba mandated vaccination for all healthcare workers that have direct contact with vulnerable populations by October 31, 2021.<sup>174</sup>

- c. The Freedom Convoy Effect cannot be overstated. The convoy officially arrived in Ottawa on January 28, 2022 after a tremendously well attended trek across the country.<sup>175</sup> Although most provinces denied that the convoy had nothing to do with their dramatic shift in covid policy, correlation here was certainly causation. The trucker convoy dramatically and instantaneously changed Canadian culture and as a result, Canadian politics changed as well.

Saskatchewan, on February 1, 2022, was the first to announce that the vaccine passport system would end.<sup>176</sup> Premier Moe officially detailed the specifics of the rollback on February 8. Vaccine passports were lifted on the 14th. Masking expired at the end of February.<sup>177</sup>

Pre-convoy, Saskatchewan's plan was a wait-and-see approach. Some vague intention to eventually remove measures existed.<sup>178</sup>

Alberta beat Saskatchewan to the punch. The end of vaccine passports was both announced and enacted on February 8, 2022. Schools no longer required masking February 14, the following Monday. Almost all remaining restrictions were removed March 1.<sup>179</sup>

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<sup>174</sup> <https://news.gov.mb.ca/news/index.html?item=52163>.

<sup>175</sup> "Some have suggested they [the truckers/protesters] will not leave until all COVID-19 vaccine mandates are rescinded, something that has *virtually no chance* of actually happening as Canada continues to grapple with the Omicron wave." <https://globalnews.ca/news/8579463/protest-convoy-arrives-ottawa-multi-day-demonstration/> (emphasis added).

<sup>176</sup> <https://www.cbc.ca/news/canada/saskatoon/sask-premier-plans-to-scrap-proof-of-vaccination-requirement-by-end-of-february-1.6334882>.

<sup>177</sup> <https://www.cbc.ca/news/canada/saskatchewan/covid-19-update-feb-8-2022-1.6343563>.

<sup>178</sup> <https://paherald.sk.ca/blog/2022/01/12/nature-of-omicron-means-no-lockdowns-for-saskatchewan/>.

<sup>179</sup> <https://www.cbc.ca/news/canada/edmonton/covid-alta-edmonton-kenney-1.6343576>.

Previously, Alberta's plan to end restrictions January 20 was "hopefully soon."<sup>180</sup> By January 27, the plan was to end the vaccine mandates by the end of March.<sup>181</sup>

Manitoba announced, on February 11, 2022, the end of the vaccine mandates effective March 1. All other restrictions ended March 15.<sup>182</sup>

Quebec announced on February 8, 2022 that many restrictions would be eased, although Premier Legault insisted that he had no plans to end mask mandates or the vaccine passport.<sup>183</sup> But, on February 15, Health Minister Dubé announced the complete suspension of the passport, effective March 14, which later moved up to the 12th.<sup>184</sup> March 3 marked the announcement of the end of mask mandates, to come in mid-April.<sup>185</sup> The health tax on the vaccinated did not go forward either.<sup>186</sup>

Previously on January 6, Quebec announced plans to *expand* the vaccine passport to require three doses for continued validity, such was the turn-about in policy.<sup>187</sup>

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<sup>180</sup> <https://calgary.ctvnews.ca/when-will-alberta-s-covid-19-restrictions-end-hopefully-soon-says-kenney-1.5748540>.

<sup>181</sup> <https://calgaryherald.com/news/local-news/covid-19-update-three-cases-of-omicron-sub-variant-identified-in-alberta-protests-at-politicians-homes-could-lead-to-charges-say-police>.

<sup>182</sup> <https://www.thestar.com/news/canada/2022/02/11/cp-newsalert-manitoba-to-lift-mask-mandates-and-vaccine-passports-in-march.html>.

<sup>183</sup> <https://www.cbc.ca/news/canada/montreal/legault-restrictions-feb8-1.6343661>.

<sup>184</sup> <https://www.cbc.ca/news/canada/montreal/quebec-vaccine-passport-1.6352429>;  
<https://montreal.ctvnews.ca/weigh-your-own-risk-will-be-quebec-s-motto-this-spring-as-masks-become-optional-boileau-1.5803984>.

<sup>185</sup> <https://montreal.ctvnews.ca/weigh-your-own-risk-will-be-quebec-s-motto-this-spring-as-masks-become-optional-boileau-1.5803984>.

<sup>186</sup> <https://www.cbc.ca/news/canada/montreal/vax-tax-nixed-1.6334828>.

<sup>187</sup> <https://www.cbc.ca/news/canada/montreal/vaccination-passport-saq-sqdc-covid-hospitalizations-1.6305992>.

New Brunswick Premier Blaine Higgs announced a rollback of restrictions on February 9, 2022.<sup>188</sup> The end of mask mandates and vaccine passports was announced February 24, effective March 14.<sup>189</sup>

Prince Edward Island announced a rollback of restrictions on February 8, 2022.<sup>190</sup> The end of vaccine passports was announced February 23.<sup>191</sup>

Nova Scotia announced the easing of restrictions on February 9, 2022.<sup>192</sup> A further announcement was made on February 23 that all vaccine and mask mandates would be dropped by March 21.<sup>193</sup>

Newfoundland and Labrador announced plans to loosen restrictions on February 8, 2022.<sup>194</sup> A subsequent decision was made to remove vaccine passports and mask mandates by March 14.<sup>195</sup>

Ontario, at first, held out on the easing of restrictions.<sup>196</sup> But on February 14, 2022, Premier Doug Ford announced the end of vaccine passports, effective March 1.<sup>197</sup>

Back in 2021, Ford had announced his intention to lift all vaccine passport requirements by the end of March.<sup>198</sup> But by January 20, 2022, Ford

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<sup>188</sup> <https://www.cbc.ca/news/canada/new-brunswick/covid-19-new-brunswick-restrictions-level-1-protest-fredericton-1.6344932>.

<sup>189</sup> <https://atlantic.ctvnews.ca/n-b-to-drop-all-covid-19-restrictions-on-march-14-vaccine-passport-ends-monday-1.5794529>.

<sup>190</sup> <https://www.cbc.ca/news/canada/prince-edward-island/pei-covid-briefing-february-8th-1.6343463>.

<sup>191</sup> <https://atlantic.ctvnews.ca/p-e-i-to-end-covid-19-vaccine-passport-system-next-week-1.5792433>.

<sup>192</sup> <https://atlantic.ctvnews.ca/nova-scotia-will-begin-easing-covid-19-restrictions-on-monday-1.5774726>.

<sup>193</sup> <https://www.cbc.ca/news/canada/nova-scotia/covid-19-update-wednesday-february-23-1.6361084>.

<sup>194</sup> <https://www.cbc.ca/news/canada/newfoundland-labrador/nl-covid-19-feb-8-22-1.6343743>.

<sup>195</sup> <https://www.cbc.ca/news/canada/newfoundland-labrador/covid-nl-feb-16-2022-1.6353673>.

<sup>196</sup> <https://www.cbc.ca/news/canada/toronto/ontario-covid-19-trucker-protest-ottawa-windsor-doug-ford-1.6345774> (February 10, 2022).

<sup>197</sup> <https://financialpost.com/news/economy/ontario-announces-end-to-vaccine-passports-other-covid-19-restrictions-by-march-1>.

<sup>198</sup> <https://news.ontario.ca/en/release/1001027/ontario-releases-plan-to-safely-reopen-ontario-and-manage-covid-19-for-the-long-term>.

entirely scrapped his plans to remove them.<sup>199</sup> Therefore, the February 14 announcement represents a complete about face from the government's "pre-trucker" position.

Despite the Freedom Convoy, British Columbia stubbornly insisted on maintaining vaccine passports<sup>200</sup> and even announced an expansion<sup>201</sup> to vaccine mandates that would cover doctors. However, on March 8, the government ordered doctors to report their vaccination status but did not actually mandate vaccines.<sup>202</sup> Two days later, on March 10, almost the two-year anniversary of lockdown restrictions in Canada, Health Minister Adrian Dix and Provincial Health Officer Dr. Bonnie Henry announced that almost most capacity limits and mask restrictions would be removed the following day and that vaccine mandates would largely end on April 8.<sup>203</sup>

## 8) Absurd court outcomes

- a. Justice Adam Germain of the Alberta Court of Queen's Bench ordered Pastor Artur Pawlowski, his brother Dawid and restaurateur Chris Scott to preface any critiques of the government's position on Covid *with* a disclaimer favoring the government's position on Covid. Not only did the court infringe on the men's free speech rights, but Germain actually went so far as to compel speech, an even more grievous infringement.<sup>204</sup>
- b. The Justice Centre sued the federal government over the issue of quarantine hotels as detailed *supra* in this appendix. The Federal Court refused to find the quarantine hotels unconstitutional despite data showing the vast difference in transmissibility between asymptomatic and symptomatic individuals and the ability of travelers to simply quarantine at

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<sup>199</sup> <https://news.ontario.ca/en/release/1001451/ontario-outlines-steps-to-cautiously-and-gradually-ease-public-health-measures>.

<sup>200</sup> <https://www.theglobeandmail.com/canada/article-british-columbia-to-keep-covid-19-vaccination-passport-as-other/>.

<sup>201</sup> <https://www.cbc.ca/news/canada/british-columbia/bc-covid-19-update-dix-henry-feb-9-2022-1.6345019>.

<sup>202</sup> <https://bc.ctvnews.ca/b-c-order-for-health-workers-covid-19-immunization-status-lifts-mention-of-vaccine-deadlines-1.5810583>.

<sup>203</sup> <https://bc.ctvnews.ca/b-c-lifting-indoor-mask-mandate-friday-vaccine-passport-to-end-in-coming-weeks-1.5813738>.

<sup>204</sup> <https://www.christianpost.com/news/appeals-court-lifts-compelled-speech-order-on-artur-pawlowski.html>.

home or at their own chosen accommodations.<sup>205</sup> The Justice Centre Litigation Director Jay Cameron had this to say:

The permissive findings of Chief Justice Paul Crampton that the principles of fundamental justice would allow the government to put in place even more restrictive measures sets a dangerous precedent. When the state detains and forcibly confines a citizen in a federal facility, it doesn't matter if the facility is a fancy hotel, it is still a detention and a confinement, and therefore an infringement of the constitutional freedoms of Canadians. The decision of the Federal Court on this point is a judicial aberration that must be appealed.<sup>206</sup>

- c. The BC Supreme Court decided that it is constitutionally permissible to close churches entirely while allowing bars and restaurants to remain open, even in light of the fact that the *Charter* offers little to no protection of the right to own and operate a business and yet does protect freedom of religion, association, and peaceful assembly.<sup>207</sup>

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<sup>205</sup> <https://www.jccf.ca/wp-content/uploads/2021/06/JudgementJune-18-2021.pdf>.

<sup>206</sup> <https://www.jccf.ca/justice-centre-appeals-court-ruling-on-federal-isolation-facilities/>.

<sup>207</sup> <https://www.jccf.ca/bc-supreme-court-strikes-down-orders-restricting-outdoor-protests-but-maintains-prohibition-on-in-person-religious-services/>.