



May 9, 2022

Via Email: [REDACTED]

Alberta Human Rights Commission  
800 - 10405 Jasper Ave NW  
Edmonton, AB T5J 4R7

**Attn: Director of the Commission**

Dear Director:

**Re:** [REDACTED] *v. Northern Alberta Institute of Technology ("NAIT")*  
**Complaint #:** [REDACTED] (the "Complaint")  
[REDACTED] **Reply to NAIT's Response**

Our office has been retained by [REDACTED], in regard to the above-noted complaint. Please direct any future correspondence pertaining to this matter to our attention.

#### **A. Introduction**

On September 22, 2021, NAIT introduced its mandatory vaccination policy, which became effective on November 1, 2021. Under the mandatory vaccination policy, students were required to be fully vaccinated in order to attend campus.

The mandatory vaccination policy offered an exemption process that allowed for students to seek accommodation of their religious beliefs, which, if granted, required accommodated students to undergo rapid testing every three days in order to attend campus. Students awaiting a decision on their accommodation requests were also required to provide their rapid test results in order to attend campus.

On September 29, 2021, [REDACTED] submitted a request to NAIT for an accommodation of his religious beliefs under the mandatory vaccination policy. As part of his request, [REDACTED] established that his personal religious faith required him to preserve his body as a temple of the Holy Spirit and to not violate the sanctity of human life.

On October 25, 2021, NAIT informed [REDACTED] that his religious accommodation request was denied.

On November 3, 2021, [REDACTED] requested an appeal for the denial of his accommodation request.

On November 17, 2021, following the Appeal Accommodation Process, NAIT maintained its denial of [REDACTED] request for religious accommodation. [REDACTED] was further informed that he would have to be fully vaccinated in order to continue to his studies in the winter term.

As a result, [REDACTED] was withdrawn from his winter 2022 courses.

**The Justice Centre for Constitutional Freedoms**  
#253, 7620 Elbow Drive SW  
Calgary, AB T2V 1K2  
CRA registered charity number: 81717 4865 RR0001

**Phone:** (403) 475-3622  
**Fax:** (587) 352-3233  
**Email:** [info@jccf.ca](mailto:info@jccf.ca)  
**Website:** [www.jccf.ca](http://www.jccf.ca)

On December 3, 2021, [REDACTED] received a letter from the Department of Student Advising and Information Services informing him that NAIT was unable to confirm his full-time registration status with Alberta Student Aid for the period of 2021-09-07 to 2022-04-22.

On December 14, 2021, [REDACTED] received a letter from the NAIT Student Vaccine Appeals Team notifying him that his appeal was denied.

On December 23, 2021 the Alberta Human Rights Commission received [REDACTED] Complaint filed against NAIT.

On January 26, 2022, the Commission wrote to [REDACTED] informing him that it received the Complaint and requested a Response from NAIT.

On April 7, 2022, the Commission received NAIT's Response.

On April 8, 2022, [REDACTED] received a copy of the Response and was notified that the Complaint and Response have been referred to the Office of the Director.

#### **B. [REDACTED] Submissions in Reply to NAIT's Response**

On behalf of [REDACTED], we provide the following submissions in reply to the Response of NAIT, and its recommendation that [REDACTED] Complaint be dismissed.

[REDACTED] disagrees with the submissions of NAIT. Rather, [REDACTED] requests you exercise your discretion, pursuant to section 21(1)(c) of the *Alberta Human Rights Act*, to refer the Complaint to the Chief of the Commission and Tribunals for resolution by a Human Rights Tribunal.

[REDACTED] also respectfully requests that you exercise your discretion, in accordance with section 14.1 of the Bylaws of the Alberta Human Rights Commission, to amend the Complaint with respect to withdrawing the claim for compensation for the purposes of assisting in the fair, just, and expeditious resolution of the Complaint.

##### *i. The Use of Fetal Cells in the Development of the COVID-19 Vaccines Goes Against [REDACTED] Religious Beliefs*

NAIT submitted that [REDACTED] assertion that the COVID-19 vaccines contain fetal cells or use fetal cells in their development is inaccurate as it relates to the mRNA vaccines produced by Pfizer and Moderna. NAIT however is incorrect. Fetal cell lines were used in the early stages of the development of both the Moderna and Pfizer BioNTech vaccines. The fetal cell line that was used was HEK 293, which descends from cells acquired from aborted fetuses in the 1970s and 1980s.<sup>1</sup> [REDACTED] religious objection to the COVID-19 vaccines because of their use of fetal cells in the development of their development is based on established fact, contrary to NAIT's assertions.

[REDACTED] believes that to participate directly or indirectly in any vaccine that was derived directly or indirectly from aborted human fetal cell lines would be in violation of a core belief of his faith, which is to preserve the sanctity of human life.<sup>2</sup> This principle can be traced back to the Ten Commandments, where the historical roots of [REDACTED] Christian faith established that the killing of a human was forbidden.<sup>3</sup> [REDACTED] also cites the book of Psalms, where the Psalmist notes that, from the moment of his conception onward, is a full person.<sup>4</sup>

---

<sup>1</sup> <https://immunizebc.ca/ask-us/questions/do-covid-19-vaccines-contain-aborted-fetal-cells>

<sup>2</sup> Genesis chapter 9, verse 6.

<sup>3</sup> Exodus chapter 20, verse 13.

<sup>4</sup> Psalms 139: 13-16.

In other words, humans' personal identity are connected to them from the moment of their conception. Consequently, the abortion of an unborn child violates ██████ personal religious beliefs. ██████ is restricted by those beliefs taking vaccines derived from aborted human fetuses.

ii. *There is a Link Between the Risks of the Vaccines and ██████ Adherence to his Religious Beliefs*

NAIT asserted that it has not violated section 4 of the *Act* and that ██████ failed to establish any link between his religious beliefs and the decision to not get vaccinated, and also did not provide evidence to demonstrate that his faith prevented him from receiving the COVID-19 vaccine.

██████ disagrees. As part of his Christian faith, ██████ is instructed to view his body as the temple of God and that the Holy Spirit dwells within them.<sup>5</sup> Moreover, the Bible states that it is a sin for any person to defile that temple of God, for which the individual possessing the Holy Spirit represents.<sup>6</sup>

NAIT submits that ██████ assertion that the COVID-19 vaccine will harm his body is based on misinformation and inaccurate. Here again, ██████ disagrees.

On June 30, 2021, Health Canada updated the product labels for the Pfizer BioNTech and Moderna COVID-19 vaccines to describe reports of myocarditis and pericarditis following vaccination, with most of the reported cases involving younger male adults and adolescents.<sup>7</sup> On September 29, 2021, Ontario's Chief Medical Officer issued a statement cautioning against the use of the Moderna COVID-19 vaccine for individuals aged 18 to 24, which was based on the advice of Ontario's Children COVID-19 Vaccine Table, Ontario Vaccine Clinical Advisory Group, and Public Health Ontario. This followed after an analysis from Ontario's adverse events following immunization surveillance system and the observed increase in the province in cases of myocarditis and pericarditis "following vaccination with Moderna compared to Pfizer in the 18 to 24 year old age group, particularly among young males."<sup>8</sup>

More generally, a study found that risk of a "cardiac adverse event" in young males was significantly greater than their statistical risk of hospitalization from COVID-19.<sup>9</sup> Data from Ontario indicates that males aged 18-24 are at the highest risk of being diagnosed with myocarditis and pericarditis (very serious heart conditions) after vaccination, at a rate of 1 in roughly 20,000 after the first dose, and 1 in 5,000 after the second dose.<sup>10</sup>

██████ concern that taking the COVID-19 vaccines would expose his body to a risk of harm contrary to his religious beliefs is in fact grounded in scientific and medical data. ██████, as a young male 22 years of age when he requested a religious exemption to the vaccine mandate, places him particularly with a higher risk category. Whether NAIT or other share ██████ religious belief that based on this risk he should not get the COVID-19 vaccines is entirely irrelevant.

It is clear that there are risks associated with the COVID-19 vaccine, particularly to the category of young males in the age range of 18-24 of which ██████ falls under. In this context, it is discriminatory to require ██████ to take the COVID-19 vaccine in order to continue his education at NAIT. His knowledge of the health risks associated with the COVID-19 vaccine makes it impossible for him to take the COVID-19 vaccine and adhere to his religious faith.

---

<sup>5</sup> 1 Corinthians chapter 3, verse 16.

<sup>6</sup> *Idem* at verse 17.

<sup>7</sup> <https://recalls-rappels.canada.ca/en/alert-recall/health-canada-updates-pfizer-biontech-and-moderna-covid-19-vaccine-labels-include>

<sup>8</sup> <https://news.ontario.ca/en/statement/1000907/ontario-recommends-the-use-of-pfizer-biontech-covid-19-vaccine-for-individuals-aged-18-24-years-old>

<sup>9</sup> <https://www.medrxiv.org/content/10.1101/2021.08.30.21262866v1>.

<sup>10</sup> See [https://www.publichealthontario.ca/-/media/documents/ncov/epi/covid-19-aefi-report.pdf?sc\\_lang=en](https://www.publichealthontario.ca/-/media/documents/ncov/epi/covid-19-aefi-report.pdf?sc_lang=en) at page 25.

### C. Charter Rights Must be Protected by Administrative Decision Makers

The *Alberta Human Rights Act* must be interpreted in this fashion to prevent the *Act* from unjustifiably contravening *Charter* rights. The Supreme Court of Canada has made it clear that it expects administrative decision makers, including the Alberta Human Rights Commission, to carefully consider and respect the *Charter* protections at stake in their decisions. Thus, the Commission is enjoined to choose the “option or avenue reasonably open ... that would reduce the impact on the protected [*Charter*] right while still permitting [the Commission] to sufficiently further the relevant statutory objectives”.<sup>11</sup>

NAIT is a government entity,<sup>12</sup> and therefore is required to accommodate [REDACTED] religious beliefs not only under the *Act*, but also under sections 2(a) and 15(1) of the *Charter*, which protect [REDACTED] freedom of religion and right to be free from discrimination on the basis of his religion, respectively.

### D. [REDACTED] Complaint Meets the Test for a Valid Religious Complaint

The Commission in *Pelletier v 1226309 Alberta Ltd. o/a Community Natural Foods*,<sup>13</sup> referred to the Supreme Court of Canada’s decision in *Law Society of British Columbia v. Trinity Western University*, in regards to the elements required to establish a claim based on religious freedom.<sup>14</sup> First, a claimant must establish that they sincerely believe in a practice or a belief that has a nexus with religion. Secondly, the conduct of the state in question needs to interfere with the claimant’s ability to act in accordance with their belief in a manner that is more than trivial or insubstantial.<sup>15</sup> The Commission further added that a claimant must provide “a sufficient objective basis to establish that the belief is a tenet of a religious faith (whether or not it is widely adopted by others of the faith), and that is a fundamental or important part of expressing that faith.”<sup>16</sup>

[REDACTED] inability to take the COVID-19 vaccine was based on his religious beliefs, specifically his Christian beliefs with respect to not defiling the body or violating the sanctity of human life. The situation created from NAIT’s decision to implement a vaccine mandate without granting [REDACTED] a religious exemption, compelled [REDACTED] to violate the core principles of his faith in order to continue to be enrolled in his program.

### E. Conclusion

There is no justification for NAIT’s denial of [REDACTED] request for a religious exemption. Moreover, there is no justification for NAIT to argue that the Complaint is without merit and that there has been no contravention of the *Act*. We request that the Complaint proceed and be referred to the Chief of the Commission and Tribunals for resolution by a Human Rights Tribunal. [REDACTED] further argues that the contravention of the *Act* was not reasonable and justified as per Section 11 of the *Act*.

Yours truly,



Christopher Naimi

Marty Moore

Justice Centre for Constitutional Freedoms

Counsel for the Complainant

Enclosures

---

<sup>11</sup> *Law Society of British Columbia v Trinity Western University*, 2018 SCC 32 at paras 81-82.

<sup>12</sup> See *Douglas/Kwantlen Faculty Assn. v. Douglas College*, [1990] 3 S.C.R. 570.

<sup>13</sup> *Pelletier v 1226309 Alberta Ltd. o/a Community Natural Foods*, 2021 AHRC 192 (CanLII).

<sup>14</sup> *Idem* at para 35.

<sup>15</sup> *Supra* note 8 at para 63.

<sup>16</sup> *Supra* note 9 at para 36.

[Why Vaccinate ▼](#)

[When to Vaccinate ▼](#)

[Get Vaccinated ▼](#)

[Vaccine Safety ▼](#)

[Vaccines by Disease ▼](#)

[FAQ](#)

Browse by topic

## ? Question:

Do COVID-19 vaccines contain fetal cells? Were abortions performed to make the vaccines?

## Answer:

Vaccines do not contain fetal cells, and no abortions are performed to make vaccines. This includes COVID-19 vaccines.

Some vaccines are made by growing the vaccine viruses in human fetal cell lines. However, the vaccines themselves do not contain fetal cells or tissue. The purification process removes nearly all the cell components so that only trace amounts of DNA and protein may be present in the vaccine.

Fetal cell lines are used to test and develop many common over-the-counter and prescribed medications, including antacids and cold medications.

### **Are COVID-19 vaccines made using fetal cell lines?**

- Fetal cell lines were used to make the Janssen (Johnson & Johnson) vaccine and the AstraZeneca (Vaxzevria) vaccine. However, the vaccines themselves do not contain fetal cells or tissue. The purification process removes nearly all the cell components so that only trace amounts of DNA and protein may be present in the vaccine.
- Fetal cell lines were not used to make the Moderna (Spikevax) and Pfizer-BioNTech (Comirnaty) COVID-19 mRNA vaccines. However, the cell lines were used in the very early stages of research

and development of these vaccines to test 'proof of concept' (to test that the vaccines could work).

### **What fetal cell lines are used?**

- The AstraZeneca (Vaxzevria) vaccine uses the HEK 293 fetal cell line, and the Janssen (Johnson & Johnson) vaccine uses the PER.C6 fetal cell line. However, the vaccines themselves do not contain fetal cells or tissue. The purification process removes nearly all the cell components so that only trace amounts of DNA and protein may be present in the vaccine.
- The Moderna (Spikevax) and Pfizer-BioNTech (Comirnaty) COVID-19 vaccines used the fetal cell line HEK 293 in the very early stages of research and development. It was not used to make these vaccines.
- The HEK 293 and PER.C6 fetal cell lines descend from cells taken from fetuses aborted in the 1970s and 1980s. The fetuses were not aborted to make vaccines.

### **Why are fetal cell lines used?**

Fetal cell lines are used with some vaccines because viruses need to be grown in cells and human cells are often better than animal cells at supporting the growth of human viruses.

Vaccine manufacturers may use these fetal cell lines during the following two phases:

- Research and development
- Production and manufacturing

Fetal cell lines are used in scientific and medical research and in the research and development of most medical products available today.

### **What are fetal cell lines?**

Fetal cell lines are cells that are grown in a laboratory. They descend from cells taken from fetuses aborted in the 1970s and 1980s that have since multiplied into many new cells over the past four or five decades, creating the fetal cell lines. The fetuses were not aborted to make vaccines. Current fetal cell lines are thousands of generations removed from the original fetal tissue. They do not contain any tissue from a fetus.

### **What does the Catholic church say about the use of fetal cell lines in vaccines?**

The Vatican's Pontifical Academy for Life declared in 2005 (<https://www.immunize.org/talking-about-vaccines/vaticandocument.htm>) and reaffirmed in 2017 (<https://www.academyforlife.va/content/pav/en/the->



# Health Canada updates Pfizer-BioNTech and Moderna COVID-19 vaccine labels to include information on myocarditis and pericarditis

---

<b>Starting date:</b>	June 30, 2021
<b>Posting date:</b>	June 30, 2021
<b>Type of communication:</b>	Advisory
<b>Subcategory:</b>	Biologic/vaccine
<b>Source of recall:</b>	Health Canada
<b>Issue:</b>	Product Safety
<b>Audience:</b>	General Public
<b>Identification number:</b>	RA-75959

Last updated: 2021-06-30

## Summary

- Product:

Pfizer-BioNTech and Moderna COVID-19 vaccines

- Issue:

Health Canada has updated the product monographs (labels) for the Pfizer-BioNTech and Moderna COVID-19 vaccines to describe very rare reports of myocarditis and pericarditis following vaccination.

- What to do:

Seek medical attention immediately if you experience any of the following symptoms within several days of vaccination: chest pain, shortness of breath, or feelings of having a fast beating, fluttering or pounding heart.

# Issue

Health Canada has updated the product monographs (labels) for the PfizerBioNTech and Moderna COVID-19 vaccines to describe very rare reports of myocarditis (inflammation of the heart muscle) and pericarditis (inflammation of the tissue surrounding the heart) following vaccination.

Cases of myocarditis and/or pericarditis following immunization with COVID-19 vaccines have been reported in a small number of people in Canada and internationally. These reports are very rare. Health Canada and other international regulators are continuing to investigate the potential relationship between COVID19 vaccines and these rare events. Most reported cases to date have followed vaccination with an mRNA vaccine (P zer-BioNTech and Moderna) and, based on an analysis of international cases, have occurred more often after the second dose and in younger male adults and adolescents. The Canadian evidence is expected to evolve as more people in these populations are vaccinated. Available short-term follow-up data show that these events were typically mild and treatable; however, information on long-term outcomes is not yet available.

Myocarditis is an inflammation of the heart muscle, while pericarditis is an inflammation of the lining around the heart. Both conditions can result from an infection (including COVID-19), exposure to a toxic substance or radiation, or other health events. Symptoms can include chest pain, shortness of breath, or palpitations (feelings of having a fast-beating, uttering or pounding heart). In many cases, these conditions are mild and require little to no treatment. However, more severe cases can lead to heart muscle damage.

Health Canada has updated the product labels for the Pfizer-BioNTech and Moderna COVID-19 vaccines to inform Canadians and healthcare professionals of these possible side effects and to provide information about the signs and symptoms and when to seek prompt medical attention following vaccination.

Health Canada will continue to work with manufacturers, as well as domestic and international partners, to gain a better understanding of the relationship between



COVID-19 vaccines and these events. In addition, Health Canada and the Public Health Agency of Canada will continue to monitor Canadian and international reports of myocarditis and/or pericarditis, particularly as more adolescents and young adults are vaccinated and more second doses are administered. The Department will take appropriate action will be taken if any new safety issues are identified.

Health Canada reassures Canadians that COVID-19 vaccines continue to be safe and effective at protecting them against COVID-19. The benefits of COVID-19 vaccines continue to outweigh their potential risks, as scientific evidence shows that they reduce deaths and hospitalizations due to COVID-19. The Government of Canada encourages people to get vaccinated and to complete their vaccine series as soon as they are eligible.

For further information on COVID-19 vaccines in Canada, please visit [Health Canada's COVID-19 vaccines and treatments portal](#).

## **What you should do**

**If you have received the Pfizer-BioNTech and Moderna COVID-19 vaccines:** Seek medical attention immediately if you experience any of the following symptoms within several days of vaccination:

- chest pain shortness of breath feelings of having a fast-beating, uttering
- or pounding heart.
- [Report any adverse events](#) after immunization to your healthcare professional.

## **What industry professionals should do**

- Be alert to the signs and symptoms of myocarditis and pericarditis when individuals present with chest pain, shortness of breath, palpitations or other signs and symptoms following immunization with a COVID-19 vaccine. This could allow for early diagnosis and treatment. Cardiology consultation for management and follow-up should be considered.
- When deciding whether to administer the Pfizer-BioNTech or Moderna COVID19 vaccine to an individual with a history of myocarditis or pericarditis, consider the individual's clinical circumstances.
- Report any event potentially related to a vaccine. To report a side effect to Health Canada contact your local health unit or visit Health Canada's Web page on [Adverse Reaction Reporting](#) for information on how to report online, by mail or by fax.

## STATEMENT

# Ontario Recommends the use of Pfizer-BioNTech COVID-19 Vaccine for Individuals Aged 18-24 Years Old

September 29, 2021

[Health](#)

---

TORONTO — Today, Dr. Kieran Moore, Chief Medical Officer of Health, issued the following statement on COVID-19 vaccines for individuals aged 18-24 years old:

“Health Canada authorized COVID-19 vaccines are safe, effective and significantly reduce the risk of infection and serious illness, including hospitalization.

Out of an abundance of caution, Ontario is issuing a preferential recommendation of the use of Pfizer-BioNTech vaccine for individuals aged 18-24 years old effective immediately based on the current available analysis from Ontario’s adverse events following immunization (AEFI) surveillance system.

This recommendation was based on the advice of Ontario’s Children COVID-19 Vaccine Table, Ontario Vaccine Clinical Advisory Group, and Public Health Ontario and is due to an [observed increase in Ontario of the very rare heart condition called pericarditis/myocarditis](#) following vaccination with Moderna compared to Pfizer in the 18 to 24 year old age group, particularly among males. The majority of reported cases have been mild with individuals recovering quickly, normally with anti-inflammatory medication. Symptoms have typically been reported to start within one week after vaccination, more commonly after the second dose.

This decision is also based on the increased and reliable supply of the Pfizer vaccines and the fact that individuals who received Moderna for their first dose can safely take the Pfizer-BioNTech vaccine for their second dose. Mixing vaccines is safe and effective, and full vaccination with two doses of the mRNA vaccine offers the greatest protection you can have against COVID-19 and the Delta variant.

Based on the significantly higher risks of COVID-19 hospitalizations, ICU admissions and death among the unvaccinated, those who received a first dose of the Moderna vaccine absolutely did the right thing to protect themselves, their loved ones and communities. Vaccination is the best way to protect against COVID-19 related complications, and the risk of contracting myocarditis and other serious adverse events including pericarditis, arrhythmia, deep-vein thrombosis, pulmonary embolism, myocardial infarction, intracranial hemorrhage and thrombocytopenia is 18 times higher among patients with COVID-19. Should individuals aged 18 to 24-year old wish to receive Moderna they can continue to do so with informed consent. The province will continue using the Pfizer vaccine for youth ages 12-17 (including those turning 12 in 2021).

The health and safety of Ontarians remains our top priority, and we will continue to monitor the latest available data regarding the use of Moderna for this population moving forward.

As Ontario continues to respond to the fourth wave driven by the highly transmissible Delta variant, we encourage all eligible Ontarians to sign up to receive their first and second dose of the COVID-19 vaccine today.”

---

## Related Topics

### Government

Learn about the government services available to you and how government works. [Learn more](#)

### Health and Wellness

Get help navigating Ontario’s health care system and connecting with the programs or services you’re looking for. [Learn more](#)

---

## Media Contacts