

References and Other Details

Many Canadian lawyers and concerned citizens are signing the Free North Declaration: <https://www.freenorthdeclaration.ca/>

Canada is supposed to be a free country governed by the rule of law. Restore it now or risk losing it for good. ...

... In our country, civil liberties are under unprecedented attack. Governments, public health authorities, universities, public and private employers, municipalities, and businesses are trampling Canadians' rights and freedoms. Our free society is at risk. ...

Problems with COVID-19 vaccines:

Public Health Ontario report: www.publichealthontario.ca/-/media/documents/ncov/epi/covid-19-myocarditis-pericarditis-vaccines-epi.pdf?sc_lang=en "Myocarditis and Pericarditis Following Vaccination with COVID-19 mRNA Vaccines in Ontario: December 13, 2020 to August 7, 2021"

Look at the results found in adverse events databases, including deaths:

- US: vaers.hhs.gov/data.html
Summaries: www.openvaers.com/covid-data
- Europe: www.adrreports.eu/en/index.html
- Canada (COVID specifically) health-infobase.canada.ca/covid-19/vaccine-safety/

The actual product monographs for the COVID-19 vaccines can be found at <https://www.canada.ca/en/health-canada/services/drugs-health-products/drug-products/drug-product-database.html>. In the case of the Pfizer mRNA product, the document includes some severe reactions in the initial studies and also describes the nature of what this novel technology does. This information should be supplied to every member of the public, but it is not. (Earlier version: pdf.hres.ca/dpd_pm/00059112.PDF Later version: pdf.hres.ca/dpd_pm/00060921.PDF).

www.jpost.com/health-science/could-an-mrna-vaccine-be-dangerous-in-the-long-term-649253 “first-ever messenger RNA ... vaccines” “know virtually nothing about their **long-term effects**” “invade your cells and **hijack your cells’ protein-making machinery**” “runs a **certain program**” “unknown risks”

Many doctors and scientists have made statements critical of COVID-19 policies. Example of statement regarding the Pfizer COVID-19 vaccine from former Pfizer VP: www.scribd.com/document/487083552/Wodarg-Yeadon-EMA-Petition-Pfizer-Trial-FINAL-01DEC2020-en-Unsigned-With-Exhibits#from_embed

No Accountability: globalnews.ca/news/7521148/coronavirus-vaccine-safety-liability-government-anand-pfizer/ “The government has confirmed that coronavirus vaccine **manufacturers are protected from liability**”

Informed consent laws and treaties are being broken by universities, colleges, governments, employers and other institutions. Vaccine passports and mandates break laws and treaties:

globalnews.ca/news/7508640/ontario-to-issue-proof-of-coronavirus-vaccine/ Early on, Ontario’s health minister signals the government’s intention of bringing in proof of vaccination: “important for people to have for travel ... work for going to theatres or cinemas or ...”

Ontario Health Care Consent Act (and BC, for example, has a similar law) www.ontario.ca/laws/statute/96h02

11 (1) The following are the elements required for consent to treatment:

- 1. The consent must relate to the treatment.**
- 2. The consent must be informed.**
- 3. The consent must be given voluntarily.**
- 4. The consent must not be obtained through misrepresentation or fraud. ...**

Universal Declaration on Bioethics and Human

Rights: http://portal.unesco.org/en/ev.php-URL_ID=31058&URL_DO=DO_TOPIC&URL_SECTION=201.html

Article 6 – Consent

1. Any preventive, diagnostic and therapeutic medical intervention is only to be carried out with the prior, free and informed consent of the person concerned, based on adequate information. The consent should, where appropriate, be express and may be withdrawn by the person concerned at any time and for any reason without disadvantage or prejudice.

2. Scientific research should only be carried out with the prior, free, express and informed consent of the person concerned. The information should be adequate, provided in a comprehensible form and should include modalities for withdrawal of consent. Consent may be withdrawn by the person concerned at any time and for any reason without any disadvantage or prejudice. Exceptions to this principle should be made only in accordance with ethical and legal standards adopted by States, consistent with the principles and provisions set out in this Declaration, in particular in Article 27, and international human rights law.

3. In appropriate cases of research carried out on a group of persons or a community, additional agreement of the legal representatives of the group or community concerned may be sought. **In no case should a collective community agreement or the consent of a community leader or other authority substitute for an individual's informed consent.**

International Covenant on Civil and Political

Rights: <https://www.ohchr.org/EN/ProfessionalInterest/Pages/CCPR.aspx>

Article 7 No one shall be subjected to torture or to cruel, inhuman or degrading treatment or punishment. In particular, no one shall be subjected without his free consent to medical or scientific experimentation.

Death and Long-Term Care Home Policies

- The following *treatment-denial* policies introduced using COVID as a justification (“death panels”) – a justification to not treat the elderly and frail–signalled government intent to deny treatment–and the results were neglect and additional, unnecessary deaths
- Ontario: <https://www.thestar.com/news/canada/2020/03/29/ontario-developing-last-resort-guidelines-on-which-patients-to-prioritize-if-hospitals-are-overwhelmed-by-critical-covid-19-cases.html> “triage protocol” for doctors” “ethically fraught decisions over how to ration critical care beds” “**long-term-care patients ... no longer...transferred to hospitals**”
- Canada: <https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/health-professionals/covid-19-pandemic-guidance-health-care-sector.html> “LTC facilities ...admission of non-COVID-19 hospital patients” “If COVID-19 does develop ... cared for within the facility” “**palliative care and/or pain management**”
- CMA: https://policybase.cma.ca/en/viewer?file=%2Fdocument_s%2FPolicypdf%2FPD20-03.pdf “committees” “physicians receive legal protection” from “civil or criminal liability or professional discipline” “priority to **younger** patients”

These policies – in addition to strict isolation policies – were carried out and many media articles have details like this:

“**thousands** of seniors **discharged to nursing and retirement homes** as Ontario, Quebec and other provinces rushed to **clear beds**” “some hospitals, physicians” and LTC admins “**discouraging families from sending infected nursing-home residents to the hospital**” “most of ... residents who have succumbed to COVID-19... died inside the virus-stricken, understaffed facilities, while many ... beds opened for [covid] patients sat **empty**” <https://www.theglobeandmail.com/canada/article-how-shoring-up-hospitals-for-covid-19-contributed-to-canadas-long/>

Analysis regarding mortality rates in some jurisdictions like Ontario: See denisrancourt.ca/entries.php?id=9&name=2020_06_02_all_cause_mortality_during_covid_19_no_plague_and_a_likely_signature_of_mass_homicide_by_government_response and other papers at denisrancourt.ca/categories.php?id=1&name=covid

The overall picture of death policies in Ontario relating to the elderly (including some temporary policies, for example, about electronic death certificates and rushing families to choose a funeral home) is documented here: [off-guardian.org/2020/05/26/were-conditions-for-high-death-rates-at-care-homes-created-on-purpose](https://www.off-guardian.org/2020/05/26/were-conditions-for-high-death-rates-at-care-homes-created-on-purpose)

Increase in surplus hospital beds indicate no lack of resources and no real emergency contrary to the justifications required by the original emergency law used by the Ontario government:

FAO: fao-on.org/en/Blog/Publications/health-2020 Before, Ontario had "906 acute care beds, 357 critical care beds" unoccupied. Measures included "**cancelling elective surgeries**" and "**moving existing hospital patients to alternative places of care**" By Apr 23, "**9,345** unoccupied acute care and **2,191** unoccupied critical care beds"

www.ctvnews.ca/health/coronavirus/all-of-our-rooms-are-empty-hospital-ers-vacant-during-pandemic-1.4918208 "lights ... turned off in some ... corridors" "**not even staffing it with nurses**" "**more than 11 thousand unoccupied beds in hospitals** across Canada" "surgeries- almost 53 thousand-have been **cancelled**" Apr 29/20

Testing is very problematic but is used to count "cases" for alarming media reports

Dr. Barbara Yaffe, Ontario Assoc Chief Medical Officer "**false positives almost half the time**" "Testing will not ... achieve anything other than take resources" Press conference, Jul 30/20 36:30 youtu.be/bFMt9vedB1w

CDC on how PCR testing is to be phased out: www.cdc.gov/csels/dls/locs/2021/07-21-2021-lab-alert-Changes_CDC_RT-PCR_SARS-CoV-2_Testing_1.html

Report: cormandrostenreview.com/report

Daily

Mail: web.archive.org/web/20210816164320/https://www.msn.com/en-us/health/medical/experts-us-covid-19-positivity-rate-high-due-to-too-sensitive-tests/ar-BB18wE8B

New York

Times: www.nytimes.com/2020/08/29/health/coronavirus-testing.html

Other Points

Dr. Roger Hodkinson, Royal College-certified pathologist, CEO of COVID testing company, to Edmonton committee, Nov 13/20 "absolutely nothing that can be done to contain this virus" "positive test results do not ... mean a clinical infection" "**all testing should stop**" "scale of the response ... ridiculous ...All kinds of suicides, business closures, funerals, weddings etc." www.brighteon.com/42ace589-01fc-4a2b-9654-20b0bf0bc315

CDC statements on the seriousness of the illness: "Most people ... have **not gotten very sick**. Only a small group ... have had more serious problems" www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/talking-with-children.html "Most children with COVID-19 have mild symptoms or ... no symptoms at all" www.cdc.gov/coronavirus/2019-ncov/faq.html

Deaths:

WHO biased the count by changing the guidelines on determining cause of death: [www.who.int/classifications/icd/Guidelines Cause of Death COVID-19-20200420-EN.pdf](http://www.who.int/classifications/icd/Guidelines_Cause_of_Death_COVID-19-20200420-EN.pdf)

Statistics Canada:

<https://www150.statcan.gc.ca/n1/pub/91f0015m/91f0015m2021002-eng.htm> "The average age of Canadians who died of COVID-19 in 2020 is **83.8 years**. By comparison, the average age at death in Canada in 2019 was **76.5 years**."

People who have had comorbidities have been counted as COVID-19 deaths: Toronto: "Individuals who have died **with** COVID-19, but not as a result of COVID-19 are included in the case counts for COVID-19 deaths ..." twitter.com/TOPublicHealth/status/1275888390060285967

Perspective on deaths: Canada COVID-19 deaths by age (Aug 2/20) 0-19: 1 death (0.0%), 20-29: 9 (0.1%), 30-39: 15 (0.2%), 40-49: 49 (0.6%), 50-59: 208 (2.3%), 60-69: 635 (7.1%), 70-79: 1,616 (18.2%), **80+: 6,364 (71.5%)** health-infobase.canada.ca/covid-19/epidemiological-summary-covid-19-cases.html Causes of death for 2018: Cancer 79536 (218/day), "Flu/pneumonia" 8511 (23/d) www.finder.com/ca/what-are-the-top-10-causes-of-death-in-canada

Cashless policies by many companies are based on what!?

CDC: www.cdc.gov/media/releases/2020/s0522-cdc-updates-covid-transmission.html (May 22/20): "may be possible that a person can get COVID-19 by touching a surface or object ... but this **isn't thought to be the main way the virus spreads.**" www.cdc.gov/coronavirus/2019-ncov/faq.html "Although the virus **can survive for a short period on some surfaces, it is unlikely to be spread from domestic or international mail, products or packaging.** . ." (accessed Dec 18/2020).

Masks:

Information about the harm caused by masks and long list of scientific studies concluding that they do not prevent viral spread in a public health context, (making them a form of abuse).

See denisrancourt.ca/entries.php?id=8&name=2020_04_11_masks_dont_work_a_review_of_science_relevant_to_covid_19_social_policy

"There have been extensive randomized controlled trial (RCT) studies, and meta-analysis reviews of RCT studies, which all show that masks and respirators do not work to prevent respiratory influenza-like illnesses, or respiratory illnesses believed to be transmitted by droplets and aerosol particles."

And denisrancourt.ca/entries.php?id=11&name=2020_08_03_face_masks_lies_damn_lies_and_public_health_officials_quota_growing_body_of_evidencequot

Motives / Agenda:

"America's 614 billionaires **grew their net worth by a collective \$931 billion.**" "more than half a year later, more than 11 million Americans

remain unemployed and many shops and restaurants will never reopen” www.usatoday.com/story/money/2020/12/01/american-billionaires-that-got-richer-during-covid/43205617

Bill Gates, Apr 9/20: we “don’t have a choice” about lock-downs “normalcy only returns when we’ve largely **vaccinated the entire global population**” www.ft.com/content/13ddacc4-0ae4-4be1-95c5-1a32ab15956a

The **Gates Foundation** is the main donor to the **World Health Organization (WHO)**. www.gatesfoundation.org/about/committed-grants?q=World%20Health%20Organization www.who.int/images/default-source/infographics/budget/top-20.jpg, also funds **CDC** and **Imperial College** who produced this report early on: www.imperial.ac.uk/media/imperial-college/medicine/sph/ide/qida-fellowships/Imperial-College-COVID19-Global-Impact-26-03-2020v2.pdf

The Gates Foundation, along with the World Economic Forum, also helped fund a pandemic exercise in October 2019 called Event 201: <https://www.centerforhealthsecurity.org/event201/about> See “A Call to Action” <https://www.centerforhealthsecurity.org/event201/event201-resources/200117-PublicPrivatePandemicCalltoAction.pdf> – including point 7 about the intent to “flood media,” “work with trusted authorities and trusted community leaders” and suppress messages they consider false.

World Economic Forum’s Great Reset: “Now is the time for a ‘**great reset**’” Jun 3/20 Klaus Schwab, Founder and Executive Chairman, **World Economic Forum:** “world must act jointly and swiftly to revamp **all aspects of our societies** and economies” “silver lining of the pandemic . . . **radical changes** to our **lifestyles**” “rare but narrow window of **opportunity** to reflect, reimagine, and **reset our world**” Much information can be found in his books and on the WEF’s website: www.weforum.org/agenda/2020/06/now-is-the-time-for-a-great-reset

The Canadian Charter of Rights and Freedoms: laws-lois.justice.gc.ca/eng/const/page-12.html#h-40

Each of these has been under attack, affecting the sick and healthy alike:

Media and government messaging regarding the significance and details of COVID has been all-pervasive. Censorship and intimidation efforts have escalated.

Contrary beliefs and interpretation of events are not given public space, church services have been shut down, vaccine mandates are being imposed:

2(a) freedom of conscience and religion;

2 (b) freedom of thought, belief, opinion and expression, including freedom of the press and other media of communication;

Protests, church services, daily activities, businesses:

2 (c) freedom of peaceful assembly ...

Restrictions on travel, detaining travellers for “quarantine,” including workplace screening questions about travel:

6 (1) Every citizen of Canada has the right to enter, remain in and leave Canada.

Rights to earn a living: This has also been undermined by the concept of “essential workers”. Provincial checkpoints.

“Rights to move and gain livelihood”

6 (2) Every citizen of Canada and every person who has the status of a permanent resident of Canada has the right

- (a) to move to and take up residence in any province; and
- (b) **to pursue the gaining of a livelihood** in any province.

We should not be coerced into taking a vaccine using health status requirements and by lockdown policies and media narratives. Much harm is being done through COVID-19 vaccine adverse reactions. **Lives are also being endangered because people who refuse these injections will potentially be unable to access housing, transportation, and employment, or at least discouraged from accessing them even with the belief that they will be turned away:**

7 Everyone has the right to life, liberty and security of the person and the right not to be deprived thereof except in accordance with the principles of fundamental justice.

We should not be coerced into giving up private medical information, or subject to temperature checks, or other screening about private medical information:

8 Everyone has the right to be secure against unreasonable search or seizure.

Constant screening, constant social distancing, isolation! “Stay at home” orders:

9 Everyone has the right not to be arbitrarily detained or imprisoned.

Isolation, stay at home orders, destruction of business, constant single-message psychological abuse from fear-generating media:

12 Everyone has the right not to be subjected to any cruel and unusual treatment or punishment.

Courts were shut down for months in 2020:

24 (1) Anyone whose rights or freedoms, as guaranteed by this Charter, have been infringed or denied may apply to a court of competent jurisdiction to obtain such remedy as the court considers appropriate and just in the circumstances.

**[Criminal Code sections applicable in my opinion
laws-lois.justice.gc.ca/eng/acts/c-46/FullText.html](https://laws-lois.justice.gc.ca/eng/acts/c-46/FullText.html)**

With respect to the coercion of vaccinations—from government, corporations, media, employers, peers:

ASSAULT

- **265(1)** A person commits an assault when
 - (a) without the consent of another person, he applies force intentionally to that other person, directly or indirectly;
 - (b) he attempts or threatens, by an act or a gesture, to apply force to another person, if he has, or causes that other person to believe on reasonable grounds that he has, present ability to effect his purpose; or

- (c) while openly wearing or carrying a weapon or an imitation thereof, he accosts or impedes another person or begs.

....

- Marginal note: Consent

(3) For the purposes of this section, **no consent is obtained** where the complainant submits or does not resist by reason of

- (a) the application of force to the complainant or to a person other than the complainant;
- (b) **threats or fear of the application of force** to the complainant or to a person other than the complainant;
- (c) fraud; or
- (d) **the exercise of authority**.

CRIMINAL NEGLIGENCE

with respect to the elderly and others who were denied access to treatment:

- **219(1)** Every one is criminally negligent who
 - (a) in doing anything, or
 - (b) **in omitting to do anything that it is his duty to do,**

shows wanton or reckless disregard for the lives or safety of other persons.

220 Every person who by criminal negligence causes death to another person is guilty of an indictable offence and liable ...

FRAUD

380 (1) Every one who, by deceit, falsehood or other fraudulent means, whether or not it is a false pretence within the meaning of this Act, **defrauds the public or any person**, whether ascertained or not, of any property, money or valuable security or any service,

- (a) is guilty of an indictable offence ...

TERRORISM

83.01

- (b) an act or omission, in or outside Canada,

- (i) that is committed
 - (A) in whole or in part for a **political, religious or ideological purpose, objective or cause**, and
 - (B) in whole or in part **with the intention of intimidating the public**, or a segment of the public, **with regard to its security**, including its economic security, or compelling a person, a government or a domestic or an international organization to do or to refrain from doing any act, whether the public or the person, government or organization is inside or outside Canada, and
- (ii) that intentionally
 - (A) causes death or serious bodily harm to a person by the use of violence,
 - (B) **endangers a person's life**,
 - (C) **causes a serious risk to the health or safety of the public or any segment of the public**,
 - (D) causes substantial property damage, whether to public or private property, if causing such damage is likely to result in the conduct or harm referred to in any of clauses (A) to (C), or
 - (E) **causes serious interference with or serious disruption of an essential service, facility or system, whether public or private**, other than as a result of advocacy, protest, dissent or stoppage of work that is not intended to result in the conduct or harm referred to in any of clauses (A) to (C),

and includes a conspiracy, attempt or threat to commit any such act or omission, or being an accessory after the fact or counselling in relation to any such act or omission, but, for greater certainty, does not include an act or omission that is committed during an armed conflict and that, at the time and in the place of its commission, is in accordance with customary international law or conventional international law applicable to the conflict, or the activities undertaken by military forces of a state in the exercise of their official duties, to the extent that those activities are governed by other rules of international law. (activité terroriste)

FALSE INFORMATION and HARRASSING COMMUNICATIONS

- **372(1)** Everyone commits an offence who, with **intent to injure or alarm a person, conveys information that they know is false, or causes such information to be conveyed by letter or any means of telecommunication.**
- Marginal note: Harassing communications
*(3) Everyone commits an offence who, without lawful excuse and with **intent to harass a person, repeatedly communicates, or causes repeated communications to be made, with them by a means of telecommunication***

GENOCIDE

Wider perspective relating to COVID lockdown, isolation and health-related policies, COVID triage policies against seniors, also relating to other policies introduced in recent years such as euthanasia, destabilizing our society, undermining the Charter of Rights and other laws meant to protect human beings:

318 (1) *Every person who advocates or promotes genocide is guilty of an indictable offence and liable to imprisonment for a term of not more than five years.*

(2) *In this section, genocide means any of the following acts committed with intent to destroy in whole or in part any identifiable group, namely,*

- (a) killing members of the group; or
- (b) **deliberately inflicting on the group conditions of life calculated to bring about its physical destruction**

TORTURE

Isolation and other emotionally abusive policies used to coerce mass vaccination and other authoritarian policies

- **1(1)** Every official, or every person acting at the instigation of or with the consent or acquiescence of an official, who inflicts torture on any other person is guilty of an indictable offence

and liable to imprisonment for a term not exceeding fourteen years.

. . .

*torture means any act or omission by which severe pain or suffering, whether **physical or mental**, is intentionally inflicted on a person*

- (a) for a purpose including
 - (i) obtaining from the person or from a third person information or a statement,
 - (ii) punishing the person for an act that the person or a third person has committed or is suspected of having committed, and
 - **(iii) intimidating or coercing the person or a third person, or**
- (b) for any reason based on discrimination of any kind, *but does not include any act or omission arising only from, inherent in or incidental to lawful sanctions. (torture)*

KIDNAPPING AND FORCIBLE CONFINEMENT

Relating to lockdowns, stay-at-home orders, isolation of healthy people, curfews (in Quebec) in order to impose vaccination and other authoritarian policies

Kidnapping

- **279(1)** Every person commits an offence who kidnaps a person with intent
 - (a) to cause the person to be **confined or imprisoned against the person's will**;
 - (b) to cause the person to be unlawfully sent or transported out of Canada against the person's will; or
 - (c) to hold the person for ransom or to service against the person's will.

. . .

Forcible confinement

(2) Every one who, without lawful authority, confines, imprisons or forcibly seizes another person is guilty of

- (a) an indictable offence and liable to imprisonment for a term not exceeding ten years; or
- (b) an offence punishable on summary conviction

INVASION OF PRIVACY

Section of the Criminal Code

Relating to Contact Tracing – many are just being coerced by denial of services or are not aware of the need for consent:

184 (1) *Every person who, by means of any electro-magnetic, acoustic, mechanical or other device, knowingly intercepts a private communication is guilty of*

- (a) an indictable offence and liable to imprisonment for a term of not more than five years; or
- (b) an offence punishable on summary conviction.

...

184.5 (1) *Every person who intercepts, by means of any electro-magnetic, acoustic, mechanical or other device, maliciously or for gain, a radio-based telephone communication, if the originator of the communication or the person intended by the originator of the communication to receive it is in Canada, is guilty of*

- (a) an indictable offence and liable to imprisonment for a term of not more than five years; or
- (b) an offence punishable on summary conviction.

BODILY HARM

“Bodily Harm and Acts and Omissions Causing Danger to the Person”

. . .

Administering noxious thing

- **245** (1) Every person who administers or causes to be administered to any other person or causes any other person to take poison or any other destructive or noxious thing is guilty ...