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Barrister & Solicitor**

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October 5, 2021

**Health Sciences Association**  
180 East Columbia Street  
New Westminster, BC  
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**VIA EMAIL**

**Attention: President Kane Tse**  
**E: [kane.tse@hsabc.org](mailto:kane.tse@hsabc.org); [webpres@hsabc.org](mailto:webpres@hsabc.org)**  
**T: 1-800-663-2017**

**Dear President Tse and Board of Directors:**

**Re: *Public Health Orders issued on September 13, 2021, requiring health sciences professionals to be vaccinated by October 26, 2021***

I am writing to you on behalf of my clients, a large and growing group of health sciences professionals who are members of your union. My clients have retained my services to assist them in understanding the law and in presenting their requests to you for HSA's support and representation against the "vaccine"<sup>1</sup> mandate of a ruthless employer, the BC Government and its agencies and contractors.

My clients are not coming to HSA as adversaries, nor with the threat of litigation. Rather, they are hopeful that this discussion will result in a renewed solidarity and shared sense of purpose among the HSA membership.

My clients include both vaccinated and unvaccinated health sciences professionals, standing together for the right of all members to reject an involuntary, invasive medical procedure. They are not 'anti-vaxxers', having all received vaccinations in the past. But they are asserting their legal right personally, and HSA's legal right on behalf of the membership, to refuse injections of experimental medicines known to cause harm.

***Collective Agreement***

I acknowledge that in Article 6.01(a)(ii) of the [HSA collective agreement](#) the union has agreed that its members "*may be required to take [...] vaccination, inoculation and other immunization [...] unless the employee's physician has advised in writing that such a procedure may have an adverse effect on the employee's health.*" However, Article 6.01(a)(ii) had a context, definition, and necessary implications that are not subject to re-interpretation by the employer to suit its shifting purposes, as follows:

- a. *Vaccine re-defined* – The [dictionary definition of vaccine](#) has been changed in the SARS-COV-2 ("Covid-19") era, to now include mRNA medicines, such as Pfizer/BioNTech

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<sup>1</sup> The [dictionary definition of "vaccine"](#) has been changed in Covid-19 times, to include mRNA medicines. In this letter, the word "vaccine" and derivatives are sometimes used in their original definition and sometimes in their revised definition, which will be apparent from context of use.

(Comirnaty), and Moderna (Spikevax), which are claimed to function through an injection of mRNA molecules surrounded by a lipid nanoparticle. A vaccine of this definition was never contemplated by the drafters of HSA's collective agreement. It is not open to the employer to radically change the definition of vaccine and require HSA members to receive into their bodies any novel, untested vaccines.

- b. *Incomplete trials* – When Article 6.01(a)(ii) was agreed upon, the parties to the agreement never contemplated that the employer would mandate any vaccine for which clinical trials had not been completed. It is a necessary implication of Article 6.01(a)(ii) that any vaccine mandated upon union members, be proven safe and effective through completed clinical trials. Clinical trials only begin to be completed in 2023 for the vaccines being mandated by the employer, including the Pfizer and Moderna mRNA vaccines, as well as the AstraZeneca (Vaxzevria), and Johnson & Johnson (Janssen) non-mRNA vaccines.
- c. *Vaccine death and injury* – When Article 6.01(a)(ii) was agreed upon, the parties never contemplated that the employer could mandate union members to receive injections of any vaccine that has caused [astronomical death and injury](#). HSA members never agreed to that.
- d. *Doctor's Note* – Article 6.01(a)(ii) requires a member's physician to advise in writing of potential adverse effects. That requirement cannot remain in effect where the employer has changed the definition of vaccine, clinical trials have not been completed, excessive risk of death and injury has already been established – and the employer has [threatened the doctors with regulatory action](#) if they fail to promote the government's agenda.

Nevertheless, many doctors have voiced their opposition to the government's Covid-19 policies, such as the 500 doctors of the Canadian Covid Care Alliance in their publication of September 24, 2021, [Covid-19 Canadian Covid Care Alliance Declaration](#).

In these circumstances, it would be unreasonable, even unconscionable for the BCGEU, and the labour union movement generally, to lend their weight and influence to the BC government's abhorrent vaccine mandate policy. This government policy defies the very reason for BCGEU's existence – to protect workers' civil rights and liberties, including their health and safety in the context of employment.

***Key reference materials:***

For the purposes of this letter, I concur with and adopt the reasoning in the following documents, which also contains links to numerous scientific documents:

- a. [Covid-19 Canadian Covid Care Alliance Declaration](#);
- b. [“Open Letter to Dr. Bonnie Henry, Adrian Dix, and Premier John Horgan”](#) from a group of Okanagan health professionals,
- c. [“Open Letter to Dr. Bonnie Henry, Adrian Dix, Premier John Horgan and Attorney General David Eby- 2.0”](#) from the same Okanagan health professionals.

I encourage the reader to study this important scientific information.

***Request – My clients request that HSA:***

- a. Advocate – Support, represent, and advocate for them against the mandatory vaccination program of the BC government in relation to SARS-CoV-2.
- b. Refuse – Tell the employer plainly that the vaccine mandate is wrong by any standard, and refuse to comply.
- c. Bullying – Take action to end the severe harassment and bullying that unvaccinated employees are experiencing from management and non-supportive coworkers.
- d. Privacy – Remind all parties that members have a right to privacy with respect to their medical information, which must be respected.
- e. Meeting – Meet with my clients to discuss their concerns.
- f. Unite – Take coordinated action across the labour union movement to stop the employers’ abusive vaccine mandate program.

***Background*** – Historically, HSA has maintained a commitment to its members’ human rights and liberties. Clearly, the vaccine mandate violates the human rights and liberties of your members. This mandate attempts to legitimize a culture of harassment and discrimination – of coerced medical experimentation, and compelled thought, belief, opinion and expression – purportedly in relation to an urgent health and safety issue – and authorize the loss of career and livelihood for those of your members who exercise their rights and do not choose to consent the Provincial Health Officer’s illegal Orders.

The common law and statutory law of BC and Canada are categorical in their protection of HSA members from being constructively dismissed from their employment for refusing to receive the experimental vaccines. The labour union movement has always been categorical in its utter contempt and rejection of any such contrived reasoning that would crush its members underfoot.

The novel, transitory, and untested Orders of the Provincial Health Officer requiring vaccination or constructive dismissal are illegal. These Orders are ultimately bound to fail in the courts under the accumulating medical evidence.

Accordingly, my clients request that HSA undertake a reassessment of its current ‘pandemic’ policy, and recognize the irreconcilable conflict between:

- a. on one hand, its commitment to the civil rights and liberties of its members, and its duty to represent and defend its members against any illegal behaviour of the employer; and
- b. on the other hand, its acquiescence to the vaccine mandate, in deference to the Provincial Health Officer.

With respect, HSA contracted with its members when they joined the union to represent them against any unfair or illegal behaviour of employers – whether or not the union leadership aligns ideologically with a member’s cause. It is on the basis of that agreement between HSA and its members, that my clients, your members, seek HSA’s wholehearted support, representation and advocacy of their cause.

HSA’s vaccine policy is set out in a document dated September 13, 2021, which says the following:

- *“vaccination is a proven and essential tool for protecting each other at all times, but especially during a global pandemic [...]*
- *we recognize the need for a vaccine mandate at this time.”*

On behalf of my clients, I entreat HSA to reverse this vaccine policy. Turn back from these policies not based on sound and updated medical evidence. HSA's vaccine policy may have been reasonable in the past, before the definition of vaccine was changed to include novel, experimental mRNA vaccines, and other new, untested vaccines. But HSA's vaccine policy is not reasonable now.

In addition, with greatest respect, HSA is not a body of experts in epidemiology, immunology, virology, or even social policy that it could opine that “*we recognize the need for a vaccine mandate at this time*”, or that it could conclude that “*vaccination is a proven and essential tool for protecting each other at all times, but especially during a global pandemic*”. General opinions about the merits of traditional vaccines cannot assist us in understanding the merits of these experimental vaccines. **HSA should not be offering legal and medical opinions of this nature**. HSA's membership has never empowered its union to wander into this minefield of liability.

Pointedly, the vast preponderance of expert evidence now clearly shows the vaccines are [neither safe nor effective](#), despite the political-media narrative to the contrary, and despite the pressures placed upon you by the vaccine mandate advocates both inside and outside your union.

My clients are concerned that they not be subjected to PCR testing as an alternative to vaccination. PCR tests are another form of invasive medical treatment which nobody is legally obligated to receive. In addition, the preponderance of evidence is that [PCR testing is profoundly unreliable](#) – [in effect useless](#)<sup>2</sup> for determining Covid-19 infection. It's impermissible for the government to force this invasive, unsound and pointless PCR testing procedure on your members.

My clients are also concerned with the very limited parameters permitted under which a physician's exemption may be obtained, coupled with the condition that all such applications for exemption must be sent to the Provincial Health Officer – who has no prior history of care for each patient – but retains the authority to reject applications arbitrarily. This leaves scant room for a physician to properly exercise the duty of care when advising patients with complex medical histories – and even less room for a valid application for exemption to be approved.

My clients do draw some hope from, and commend HSA for its commitments expressed elsewhere in its vaccine policy document of September 13, 2021, as follows:

- *“However, mandatory vaccination does present a number of serious questions, and HSA is in discussion with employers, the Ministry of Health, and the Provincial Health Officer to ensure those concerns are factored into the application of the vaccine mandate.*
- *Further, personal privacy of workers subject to mandatory vaccination must be protected at all times, and accommodation must be made for those who cannot receive the vaccine due to medical or religious reasons.*
- *HSA does not believe that termination or threats of discipline are effective means to increasing vaccination rates. While we recognize the need for a vaccine mandate at this time, the union will defend the interests of our members and insist that employers respect collective agreement rights.”*

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<sup>2</sup> The links show that CDC has withdrawn its recommendation of PCR testing re Covid-19

My clients agree that “*termination or threats of discipline are [not] an effective means to increasing vaccination rates*”, and are grateful for HSA’s commitment to “defend the interests of [its] members.”

**Entreaty to HSA** – My clients entreat HSA to reassess its vaccine mandate policy against its core historical values, and recognize that its obligations lie in protecting its members who refuse the vaccine mandate, including booster shots, from the abrogation of their civil rights and liberties – in particular, from being coerced into receiving an invasive, potentially dangerous medical procedure, or else lose their employment and career.

### ***HSA members’ human rights and freedoms***

The principles of our [Canadian Charter of Rights and Freedoms](#) are well known:

- s. 2(a) freedoms of conscience and religion;*
- s. 2(b) freedoms of thought, belief, opinion and expression;*
- s. 7 right to life, liberty and security of person*

HSA’s vaccine policy recognizes that “*accommodation must be made for those who cannot receive the vaccine due to medical or religious reasons.*” However, this accommodation needs to be broadened to include all of the Charter rights and freedoms listed above.

Supreme Court of Canada Chief Justice Dickson wrote in the case [R. v. Big M Drug Mart Ltd., \[1985\] 1 SCR 295,](#)

*“... belief itself [is] not amenable to compulsion. Attempts to compel belief or practice denied the reality of individual conscience ...”* (para. 120)

*“... an emphasis on individual conscience and individual judgment also lies at the heart of our democratic political tradition. The ability of each citizen to make free and informed decisions is the absolute prerequisite for the legitimacy, acceptability, and efficacy of our system of self-government [...] It is because of the centrality of the rights associated with freedom of individual conscience both to basic beliefs about human worth and dignity and to a free and democratic political system [...] They are the [essential conditions] of the political tradition underlying the Charter.* (para. 122) (my underlining added)

The “*individual conscience*” of each of your members is bound together with their *freedoms of religion, thought, belief, opinion, and expression*. None of these matters of conscience are “*amenable to compulsion*”, nor may anyone attempt to compel or deny them. For the government to threaten your members’ employment for failing to “consent” to its vaccine experiment is a denial of their freedoms of “*individual conscience*” and “*individual judgment*” in *thought, belief, opinion, and religious conviction*, and of their right to *conscientious consent or refusal*.

In respect of your members section 7 Charter “right to life, liberty and security of person”, LaForest JJ wrote in the case [R. v. Beare; R. v. Higgins, \[1988\] 2 SCR 387,](#) that nobody may be deprived of these rights, except in accord with “... *the principles of fundamental justice* ...” There are absolutely no principles of fundamental justice that would force your members to receive an experimental medicine, already known to be harmful, and that will surely harm some of them.

Notwithstanding any legal advice HSA may have received to the contrary, all of these *Charter* rights and freedoms have real application to my clients' cause. These rights and freedoms are not going away.

Any opinions offered by human rights tribunals or commissioners – as distinct from superior courts – which may have led HSA to believe it to be legal for the employer to trample its members' human rights and freedoms under the pretext of emergency – will not in the end stand up against the common law of the judges, which flows from the “superior” courts, has been carefully forged over centuries, and emphatically contradicts such opinions.

The [\*International Covenant on Civil and Political Rights\*](#) says at Article 7:

*“... no one shall be subjected without his free consent to medical or scientific experimentation.”*

ICCPR Article 7 clearly rules out the coerced participation of HSA members in this government “medical or scientific experiment”.

The vaccines are experimental by definition. This current experimental trial now in Phase 4, continues to be only a study, irrespective of regulatory approval, and the current Phase 4 is uncovering serious side effects not previously seen in Phase 3. These studies will only begin to be completed in 2023, and later. The global vaccination program is undeniably a medical experiment.

Any company or organization, including HSA, that embraces and promotes information from a merely partially completed trial to encourage or coerce an invasive medical treatment such as the vaccines, is likely to incur serious liability in relation to the vaccine injured (be it psychological, moral or physical injury) who follow their advice and become injured. And those administrators in place at the time the coercive decisions were made will be exposed to personal liability.

The [\*Universal Declaration of Human Rights\*](#) reminds us in its preamble:

*“Whereas disregard and contempt for human rights have resulted in barbarous acts which have outraged the conscience of mankind, and [...]*

*Whereas it is essential, if man is not to be compelled to have recourse, as a last resort, to rebellion against tyranny and oppression, that human rights should be protected by the rule of law.”*

This is the language adopted by the nations and peoples of the world in our [\*Universal Declaration of Human Rights\*](#), in response to the wicked tyrannies of the day. This foundational international law underscores the imperative that HSA must maintain the highest regard for its members' human rights, whatever the cost.

The current “*contempt for human rights*” being effected by the BC government and its Provincial Health Officer, is playing out in the “*barbarous acts*” of coercing people like your HSA members into receiving vaccines which are known to have injured and killed thousands of people worldwide. Such inhumanity has “*outraged the conscience of [people]*” worldwide – and in particular your union members, my clients.

HSA's support for its members, my clients, in these circumstances is imperative, not optional.

***Human rights scholarship*** – Leading human rights scholars have weighed in on these questions. I quote some of these opinions below, from the *Ontario Civil Liberties Association*. I commend their counsel and cautions to you, as you undertake a reassessment of where HSA, and the labour union movement generally, must stand in respect of the derogation and abrogation of their members’ human rights.

The writers quoted below are not extremists, or “anti-vaxxers”, or “science-deniers”, or any of the other pejoratives thrown about. They are eminent scholars, who in ordinary times HSA would look to and ally with in heart and mind – they may even share HSA’s political stripe. These scholars, and many others like them, ‘hold the ropes for society’ as we pass through these difficult valleys, helping us to hold true to who we are and what we really believe, even when inconvenient or costly.

The applicability of these writings from the *Ontario Civil Liberties Association* to the vaccine mandate, will be self-evident.

***Ontario Civil Liberties Association – Letter to the Unvaccinated – August 2, 2021***

by Angela Durante, PhD; Denis Rancourt, PhD; Claus Rinner, PhD; Laurent Leduc, PhD; Donald Welsh, PhD; John Zwaagstra, PhD; Jan Vrbik, PhD; Valentina Capurri, PhD:

*“It is entirely reasonable and legitimate to say ‘no’ to insufficiently tested vaccines for which there is no reliable science. You have a right to assert guardianship of your body and to refuse medical treatments if you see fit. You are right to say ‘no’ to a violation of your dignity, your integrity and your bodily autonomy. It is your body, and you have the right to choose. You are right to fight for your children against their mass vaccination in school.*

*You are right to question whether free and informed consent is at all possible under present circumstances. Long-term effects are unknown. Transgenerational effects are unknown. Vaccine-induced deregulation of natural immunity is unknown. Potential harm is unknown [...]*

*You are justified in demanding independent peer-reviewed studies, not funded by multinational pharmaceutical companies [...] none of the study data have been made public or available to researchers who don’t work for these companies. [...]*

*You are correct in your calls for a diversity of scientific opinions. [...] Choosing not to take the vaccine is holding space for reason, transparency and accountability to emerge. You are right to ask, ‘What comes next when we give away authority over our own bodies?’”*

***Ontario Civil Liberties Association – Letter to the Vaccinated – August 29, 2021***

by Angela Durante, PhD; Denis Rancourt, PhD; Jan Vrbik, PhD; Laurent Leduc, PhD; Valentina Capurri, PhD; Amanda Euringer; Journalist Claus Rinner, PhD; Maximilian C. Forte, PhD; Julie Ponesse, PhD; Michael Owen, PhD; Donald G. Welsh, PhD:

*“Prime Minister Trudeau recently warned that “there will be consequences” if federal employees do not comply with vaccine mandates. This is a voice of tyranny that has reverberated fear and heightened agitation across our country. [...] What are the consequences of mandating such an insufficiently tested medical intervention? [...]*

*And now, mounting evidence worldwide shows that these vaccines cannot stop the transmission of the virus and variants, yet vaccination mandates continue. [...]*

*The meaning of “fully vaccinated” is rapidly changing as leaders demand the next booster upgrade and threaten ousting us from public spaces if we don’t comply. [...]*

*History has taught us that one-sided arguments and outlawed dissent are signs of totalitarianism lurking at the doorstep. [...] Mandating vaccines is a breaking point. [...]*  
*The consequences of following Prime Minister Trudeau’s current orders are greater than his threatened consequences. [...]*” (my underlining added)

On behalf of my clients, I implore you to heed the wisdom and warnings of the Ontario Civil Liberties Association.

### ***HSA members’ rights of informed consent***

The Supreme Court of Canada case [Hopp v. Lepp \[1980\] 2 SCR 192](#), sets out what “informed consent” means with respect to a treatment such as the vaccination, as follows:

*“The term “informed consent” [...] reflects the fact that although there is, generally, prior consent by a patient to proposed surgery or therapy, this does not immunize a surgeon or physician from liability for battery or for negligence if he has failed in a duty to disclose risks of the surgery or treatment, known or which should be known to him, and which are unknown to the patient.*

*The underlying principle is the right of a patient to decide what, if anything, should be done with his body [...] a patient’s consent, whether to surgery or to therapy, will give protection to his surgeon or physician only if the patient has been sufficiently informed to enable him to make a choice whether or not to submit to the surgery or therapy.*” (my underlining added).

This case, *Hopp v. Lepp*, makes it clear that a healthcare provider who fails to obtain the “informed consent” of a patient to a treatment, can be found liable for “battery” (assault) or “negligence” – either civilly or criminally. The authorities in BC are making no attempt to obtain “informed consent” even from willing patients, and purport to mandate the “consent” of the unwilling. HSA should avoid any association with these errors.

The [Canadian Covid Care Alliance](#) accurately summarizes the law of “informed consent” arising out of the *Hopp v. Lepp* case and subsequent case decisions, in a document entitled “[What is Informed Consent and How Does It Apply to COVID-19 Vaccination?](#)”:

*“Healthcare providers are responsible for presenting patients with clear and complete information about proposed medical interventions, and for answering all questions related to treatment. The information must be contextualized for each patient’s individual situation, taking into account variables such as age, gender, and medical history. The information must be adequate, true and include an explanation of treatments benefits, side effects, risks, alternatives and the consequences of not receiving treatment. In some cases, information about the clinical trials that support the safety and effectiveness of the treatment is also necessary, particularly when specific groups of people have been excluded from the trials. [...] Informed consent must be voluntary. After receiving adequate information about a recommended treatment, a person must be in a position to express his or her free will without any controlling influence or coercion.”*



Everyone has the right to consent or refuse any medical treatment. Coerced consent is no consent at all. Consent must be voluntary. HSA members did not consent via Article 6.01(a)(ii) of their collective agreement to receiving these vaccines which to the best of their knowledge did not exist at the time the agreement was made.

If the BC government does not withdraw its vaccination coercion program, I anticipate receiving instructions to send a demand letter to the employer requiring complete and accurate disclosure about the vaccines in respect of each element of “informed consent” – contextualized to each individual client, including: an explanation of the benefits, side effects, risks, alternatives, consequences of not receiving treatment – along with information about clinical trials and the vast death and injury toll.

It will be apparent to you that accurate answers to these questions about ‘side effects’ and ‘risks’, do not exist. Nobody has these answers regarding these untested, experimental vaccines. And nobody should pretend to offer answers.

“Informed consent” is impossible in these circumstances, in that these vaccines are still under study, and as such, not all the side effects have been discovered let alone published. It is likely that even those side effects that become known will not be published any time soon, due to the fear of speaking out in a vicious cancel culture, and due to the well-known issue of under-reporting at the best of times, and due to publication biases. Moreover, there are no known long-term studies on the long-term effects of these vaccines (i.e. cancers, infertility, neurological injury), in that the vaccine roll-out only started 9 months ago.

So, I anticipate that my clients’ employer, the BC government, will not even attempt to provide answers to these questions. Instead, they will attempt to steamroll all of us, including HSA. They will continue to demand that your members provide involuntary, uninformed “consent” to their vaccines, or lose their jobs. Some of your members will submit to their demands, or have done so already. Statistically, some of your members will die from the vaccines and others will be permanently injured. The full nature of their suffering cannot yet be known.

HSA cannot in good conscience stand for this. My clients appeal to HSA to take up their cause and represent them against this extreme injustice.

### ***The science around the vaccines***

It is important that BCGEU examine the scientific basis for the vaccine mandate. The following are only a few of many scientific issues around the Covid-19 vaccines:

- a. *Pandemic of the unvaccinated?* – “It’s certainly untrue ... that the unvaccinated are somehow driving the emergence of the novel variants. This goes against every scientific principle that we understand.”<sup>3</sup>
- b. *Vaccine death and injury* – The Government of Canada reports 17, 079 adverse reactions to the Covid-19 vaccines as of October 4, 2021, including:<sup>4</sup>
  - (i) Thrombosis, myocarditis;
  - (ii) Guillain-Barré Syndrome;
  - (iii) Capillary leak syndrome;
  - (iv) Facial paralysis/Bell’s Palsy;

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<sup>3</sup> <https://undercurrents723949620.wordpress.com/2021/08/16/the-lies-behind-the-pandemic-of-unvaxxed/>

<sup>4</sup> <https://health-infobase.canada.ca/covid-19/vaccine-safety/summary.html>

- (v) But the Canadian government conceals the number of deaths, which is imperative information for people in giving “informed consent”.
- c. *Vaccine death and injury* – European Union Database for Adverse Drug Reactions<sup>5</sup> re Covid-19 vaccines:
  - (i) 20,595 deaths; and
  - (ii) 1.9 million injured (50%) seriously.
- d. *Vaccine death and injury* – USA Vaccine Adverse Event Reporting System<sup>6</sup> re Covid-19 vaccines:
  - (i) 15,937 deaths; and
  - (ii) 752,801 injured.
- e. *99% under-reporting of adverse reactions to vaccines* – Fewer than 1 % of vaccine adverse events are reported, according to a Harvard Pilgrim study.<sup>7</sup>
- f. *mRNA vaccine risks were previously known* – Pre-trials of mRNA vaccines showed risk of autoimmune and blood coagulation.<sup>8</sup>
- g. *Vaccines generate resistant variants* – Viral variants of concern may emerge with dangerous resistance to the immunity generated by Covid-19 vaccines.<sup>9</sup>
- h. *Vaccinated people still spread Covid-19*.<sup>10</sup>
- i. *Vaccinated people were found to be 27 times more likely* to experience symptomatic Covid-19 infection than those with natural immunity from Covid-19.<sup>11</sup>
- j. *Fully vaccinated are most infected with Covid-19* – Most of the people infected with Covid-19 in Scotland<sup>12</sup> and Massachusetts<sup>13</sup> are fully vaccinated.
- k. *Vaccine mortality* – The Covid-19 vaccines are emerging as a very substantial source of morbidity and mortality.<sup>14</sup>
- l. *Vaccines wane in efficacy* – Covid-19 vaccines wane in efficacy over time, around 6 months, and boosters become necessary.<sup>15</sup>

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<sup>5</sup> <https://www.globalresearch.ca/20595-dead-1-9-million-injured-50-serious-reported-european-union-database-adverse-drug-reactions-covid-19-shots/5751904>

<sup>6</sup> <https://openvaers.com/index.php>

<sup>7</sup> <https://digital.ahrq.gov/sites/default/files/docs/publication/r18hs017045-lazarus-final-report-2011.pdf>

<sup>8</sup> <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5906799/#!po=0.173010>

<sup>9</sup> <https://www.nejm.org/doi/10.1056/NEJMsr2105280>

<sup>10</sup> <https://www.ox.ac.uk/news/2021-08-19-vaccines-still-effective-against-delta-variant-concern-says-oxford-led-study-covid>

<sup>11</sup> <https://www.science.org/content/article/having-sars-cov-2-once-confers-much-greater-immunity-vaccine-vaccination-remains-vital>

<sup>12</sup> <https://theexpose.uk/2021/07/29/87-percent-covid-deaths-are-vaccinated-people/>

<sup>13</sup> [https://www.cdc.gov/mmwr/volumes/70/wr/mm7031e2.htm?s\\_cid=mm7031e2\\_w](https://www.cdc.gov/mmwr/volumes/70/wr/mm7031e2.htm?s_cid=mm7031e2_w)

<sup>14</sup> <http://orthomolecular.org/resources/omns/v17n15.shtml>

<sup>15</sup> <https://www.medrxiv.org/content/10.1101/2021.08.06.21261707v1.full.pdf>

- m. *Natural immunity to Covid-19* – even in people never exposed to this virus or SARS-CoV-1, provides stronger, longer-lasting immunity than the vaccines.<sup>16</sup>
- n. *Pre-existing antibody cross-reactivity* – A majority of uninfected adults show preexisting antibody reactivity against Covid-19.<sup>17</sup>
- o. *Dr. Robert Malone, co-inventor of mRNA vaccines* – expresses concerns regarding their use for Covid-19.<sup>18</sup>

### ***Undisguised Scientific Censorship***

The World Health Organization openly partnered with social media<sup>19</sup>, Google, Facebook, Twitter, Instagram, TikTok and many others, and the mainstream media<sup>20</sup> of the world, directing them to quote: “filter out false information and promote accurate information from credible sources like the WHO and the CDC.”<sup>21</sup>

Despite this undisguised scientific censorship, the accumulating scientific evidence around Covid-19 speaks loudly for itself over the political narrative.

### ***Closing Appeal***

The human rights and informed consent law that I have summarized in this letter, is very longstanding and oft-applied in Canada. This law will not be overthrown by the hasty ideological decisions of human rights tribunals and transitory governments chasing the passing winds of public opinion in these turbulent times.

Long after the governments of the day are gone and the media accord pushing this global vaccination program has been broken up, the labour union movement, and HSA in particular, should remain standing, unmoved from its core values and *raison d’être* – of protecting workers’ civil rights and liberties in the context of employment. If HSA abandons its values and its workers in these troubled times, then what purpose remains to it, and who will stand up for these workers?

My clients recognize, with regret, the vehement hostility that the HSA leadership is likely to face from the true believers in forced vaccination within your membership. My clients daily experience the abuses of this empowered group. However, we respectfully submit that HSA is nevertheless bound to throw off these pressures and support its members, my clients, against the vaccine mandate, and is equal to the task.

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<sup>16</sup> <https://www.science.org/doi/epdf/10.1126/science.abd3871>

<sup>17</sup> <https://pubmed.ncbi.nlm.nih.gov/33720905/>

<sup>18</sup> [https://www.theepochtimes.com/dr-robert-malone-mrna-vaccine-inventor-on-latest-covid-19-data-booster-shots-and-the-shattered-scientific-consensus\\_3979206.html](https://www.theepochtimes.com/dr-robert-malone-mrna-vaccine-inventor-on-latest-covid-19-data-booster-shots-and-the-shattered-scientific-consensus_3979206.html)

<sup>19</sup> <https://www.who.int/director-general/speeches/detail/report-of-the-director-general-146th-meeting-of-the-executive-board>

<sup>20</sup> <https://www.who.int/director-general/speeches/detail/who-director-general-s-opening-remarks-at-the-technical-briefing-on-2019-novel-coronavirus>

<sup>21</sup> <https://www.who.int/director-general/speeches/detail/director-general-s-remarks-at-the-media-briefing-on-2019-novel-coronavirus---8-february-2020>

The government cannot pull off this tyrannical mandatory vaccine program without the cooperation of the labour union movement. Yet, it would be unconscionable for the labour union movement to lend its weight and influence to these abhorrent government policies. Whatever the financial, political and relational costs – and they may be great – HSA must confront the government on these policies.

Not the least reason HSA should disengage with the government with respect to this mandatory vaccine policy, is that such a patently illegal, dangerous and devastating policy is sure to attract liability to its perpetrators and promoters, of a magnitude equal to the massive harms being caused by the policy. HSA should take every precaution to avoid incurring this liability to its membership. I reiterate that HSA's membership has never empowered its union to wander into this minefield of liability, much less, to stay there after fair warning.

My clients implore HSA to take up their cause, which is your duty, against a ruthless employer bent on the decimation of their civil rights and freedoms, and possibly their very lives and health.

I would be happy to discuss these matters with you at your convenience. I look forward to hearing from you.

Yours truly,

*'Herb Dunton'*

Herb Dunton  
Barrister & Solicitor

c.c.

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