



**Our Right Our Choice Our Future**

**VaccineChoiceCanada.com**

PO Box 23023 Belleville Ontario K8P 5J3

**Info@VaccineChoiceCanada.com**

September 1, 2020

Dear Elected Representative

I am writing on behalf of Canadians who are deeply concerned that government measures imposed in response to CV-19 are **out of proportion to the actual risk** and **contrary to medical and scientific evidence**. It is our contention that many of the imposed measures are a gross over-reaction due to irrational fear, avoidance of liability, and/or excess caution rather than evidence-based interventions that are justifiably necessary and finite.

Over the last six months, Canadians have experienced the following grievous violations of our charter rights and freedoms with no projected end in sight:

- severe curtailment of civil liberties with the mass and indiscriminate containment of citizens
- the imposition of non- medical masks, physical distancing, contact tracing, and limits on socialization
- the shutdown of economic activity with widespread permanent business closures and job losses
- the effective closure of our parliaments and courts of justice denying citizens a ready recourse

The impact of these measures on our physical, emotional, psychological, social, and economic well-being is profoundly destructive and clearly not sustainable.

My purpose in writing is to share information to assist you in your leadership and decision-making. It is incumbent that all elected representatives become fully informed on the evidence, or lack of evidence as the case may be, for measures being considered and imposed. It does not serve Canada to blindly rely on the dictates of foreign and financially conflicted agencies and corporations.

My request is that you consider this information so that you are equipped to make sound, fact-based decisions.

I also request that you use your position to ensure that the **required actions** listed at the end of this document are implemented without delay.

I look forward to your earliest response after you have considered the information below.

Sincerely,

Ted Kuntz, President  
Vaccine CHOICE Canada

*“If the main pillar of the system is living a lie,  
then it is not surprising that the fundamental threat to it is living in truth.”*

– Vaclav Havel

# Are Government Imposed CV-19 Measures Necessary and Effective?

## 1. Masking Does Not Prevent Infection or Transmission

The scientific evidence is clear. The use of non-medical masks do not prevent viral infection or transmission. Even more disconcerting, masking increases the risk of respiratory infection.

- A July 2020 report by the **Centre for Evidence Based Medicine** concluded that *“masks alone have no significant effect in interrupting the spread of Influenza-like illness or influenza in the general population.”*
- Denis Rancourt, Ph.D, a retired University of Ottawa Physics Professor and internationally recognized researcher, conducted an extensive review of the scientific literature on masking that used randomized clinical trials (RCT) with verified outcomes. Dr. Rancourt found no scientific evidence to support masking of the general population. He concluded that face masks have **“no detectable benefit”** for reducing the risk of person-to-person transmission of a viral respiratory disease.
- In April 2020, the **World Health Organization** issued ‘advice on the use of masks in the context of Covid-19’ and concluded – *“At the present time, the widespread use of masks by healthy people in the community setting is not yet supported by high quality or direct scientific evidence.”* **The WHO confirmed that masks carry uncertainties and critical risk including increased risk of self-contamination.**
- According to a randomized controlled trial study, the use of cloth masks actually **increases** the risk of respiratory infection. Researchers found the risk of infection with influenza-like illness was **13 times higher** in hospital workers using cloth masks compared to medical/surgical masks, and over **three times higher** when compared to not wearing a mask at all.
- It is widely acknowledged that the masking of children disrupts their emotional and psychological development.

References:

<https://www.cebm.net/covid-19/masking-lack-of-evidence-with-politics>

<http://ocla.ca/ocla-letter-who/>

<https://www.marktaliano.net/masks-dont-work-a-review-of-science-relevant-to-covid-19-social-policy-by-denis-rancourt-phd-11-june-2020/>

## 2. Physical Distancing Measures are Arbitrary

The imposition of two metre physical distancing is arbitrary rather than evidence-based.

- The World Health Organization recommends only one metre distancing.
- There is no scientific evidence to support the effectiveness of two metre distancing to reduce SARS-CoV-2 transmission.
- Former Chief Medical Officer, Dr. Joel Kettner stated – *“We need approaches with a better balance of benefits and harms. Rather than generalized restrictions for all people in all settings, most people at low risk should be allowed now to go to work, school, and other settings. **They should not be required, as a general rule, to socially distance or wear a mask.”***

Reference: <https://www.cbc.ca/news/canada/manitoba/joel-kettner-opinion-covid-19-response-1.5654062>

## 3. PCR Testing is Scientifically Meaningless

The PCR test used to identify SARS-CoV-2 is not intended for use as a diagnostic tool.

- The PCR test used to identify the SARS-CoV-2 virus was never designed as a diagnostic tool and should not be used as such.
- The high rate of false positives and false negatives makes any test results unreliable.
- The SARS-CoV-2 virus purported to be the cause of CV-19 has never been isolated, purified, and scientifically proven to cause CV-19.
- The testing for SARS-CoV-2 is based upon assumptions and speculations rather than established scientific facts.
- There is no scientific evidence that current PCR testing is measuring the SARS-CoV-2 virus. This renders the use of PCR testing for SARS-CoV-2 meaningless.

Reference: <https://off-guardian.org/2020/06/27/covid19-pcr-tests-are-scientifically-meaningless/>

#### 4. Concern with Positive Test Results Unwarranted

**Public health officials and the mainstream media are vigilant in reporting the number of individuals who test positive for SARS-CoV-2. The message implied is that the higher the number who test positive, the higher the risk. This is fear-mongering and irresponsible.**

- The increase in individuals testing positive for SARS-CoV-2 is most often a reflection of the increase in the number of individuals tested and does not necessarily reflect an increase in the rate of community infection.
- An increase in those testing positive (assuming the testing is reflective of real infection) means a higher percentage of the population has developed immunity to the virus thereby increasing herd immunity.
- Herd immunity results in a lower risk of transmission.
- An increase in those testing positive, without an increase in hospitalizations and deaths, is a positive development and should be reported as such.
- The reporting of those testing positive, without context, is meaningless and irresponsible.
- A better indicator of the risk of CV-19 is the rate of hospitalization and deaths purportedly due to CV-19.

#### 5. The Risk of Dying from CV-19 is Extremely Low

**The survival rate of CV-19 is more than 99.9%.**

- The fact is that that the risk of dying from CV-19 for the vast majority of the population is extremely low.
- The number of Canadians who have purportedly died due to CV-19 is 9,117 (as of Aug. 30) in a population of 37,700,000. This is **less than 1/40th of one percent of Canada's population.**
- Of all deaths attributed to CV-19, less than 5% occurred in individuals under age 60, and most of these individuals had chronic disease.
- At least 82% of deaths attributed to CV-19 in Canada occurred in senior's care facilities. This means that less than 18% of deaths occurred outside of a senior's care facility.
- More than 95% of these seniors had multiple chronic health conditions.

References:

<https://health-infobase.canada.ca/covid-19/epidemiological-summary-covid-19-cases.html?stat=num&measure=deaths#a2>  
<https://www.cbc.ca/news/health/coronavirus-canada-long-term-care-deaths-study-1.5626751>

#### 6. Data Manipulation

**The number of deaths attributed to CV-19 has been artificially inflated and is therefore unreliable as an indicator of the risk of CV-19.**

- Public Health, under the direction of the World Health Organization, has directed physicians to not distinguish between those who died from CV-19 and those who died with CV-19. This is unprecedented in medicine.
- More than 95% of individuals whose deaths are attributed to CV-19 had one or more serious co-morbidities that are more likely the cause of death.
- Ontario Public Health admits to arbitrarily inflating the number of CV-19 deaths by **50%**.
- These measures artificially inflate the number of deaths attributed to CV-19 and makes this data unreliable as a measurement of risk.
- A more reliable way to measure the impact of CV-19 is to examine whether the total all-cause deaths in the first six months of 2020 is greater than all-cause deaths during the same period in the previous decade.
- **To date, no evidence has been provided to show that all-cause deaths in 2020 exceeds any previous year.**

References:

<https://www.publichealthontario.ca/-/media/documents/ncov/epi/2020/06/covid19-epi-case-identification-age-only-template.pdf?la=en>

#### 7. CV-19 Comparable to Annual Influenza/Pneumonia

**The number of deaths attributed to CV-19 is comparable to a moderate to severe influenza season.**

- According to the **Infection Prevention Control Canada**, approximately 8,000 Canadians die annually from influenza and pneumonia.

- In 2018, the mortality of influenza and pneumonia was calculated at **230 per million** or 8,687 deaths.
- As of August 30, 2020, the mortality rate attributed to CV-19 is **241 per million**, a difference of 11 deaths per million. Given the deaths attributed to CV-19 are purposely inflated, there is no evidence to support the claim that CV-19 has a higher mortality than annual influenza/pneumonia.

References:

<https://ipac-canada.org/influenza-resources.php>

<https://www.statista.com/statistics/434445/death-rate-for-influenza-and-pneumonia-in-canada>

<https://www.worldometers.info/coronavirus/>

## 8. The Risk to Children Extremely Low

**The risk of infection in children is extremely low.**

- According to a public statement issued by the BC Ministry of Health:
  - SARS-CoV-2 has a very low infection rate in children and youth
  - In BC, less than 1% of children and youth have tested positive
  - There is no conclusive evidence that children pose a risk to other children or to adults
  - The closure of schools and childcare facilities has significant negative mental health and socioeconomic impacts on vulnerable children and their families.
- According to Dr. Mark Lysyshyn, MD, Deputy Chief Medical Health Officer with Vancouver Coastal Health: *“Although children are often at increased risk for viral respiratory illnesses, that is not the case with Covid-19. Compared to adults, children are less likely to become infected with CV-19, less likely to develop severe illness as a result of infection and less likely to transmit the infection to others. **Personal protective equipment such as medical masks and gloves are not recommended in the school environment.**”*
- There have been no deaths in children in Canada attributed to CV-19.

References:

<http://www.vch.ca/Documents/COVID-VCH-Schools-May-21-2020.pdf>

<https://www2.gov.bc.ca/assets/gov/health/about-bc-s-health-care-system/office-of-the-provincial-health-officer/covid-19/covid-19-pho-guidance-k-12-schools.pdf>

## 9. Censorship of Alternative Perspectives and Treatments

**Information that challenges the current CV-19 narrative is actively censored in the mainstream media and on social media platforms.**

- Media appear to have been instructed to suppress any information that challenges the official narrative.
- This censorship prevents accountability and transparency, unnecessarily inflates fear and anxiety, and prevents the consideration of treatment strategies other than vaccination.
- Numerous researchers and public health experts globally have had their public statements and videos removed because they challenged the measures being implemented by governments.
- Preventative medications as Hydroxychloroquine, and natural treatments as zinc, high dose Vitamin C, Vitamin D, and others are being withheld from those affected by CV-19.
- People should have the right to full disclosure of all information pertinent to adverse impacts of mitigation measures, including information on legal and constitutional human rights issues, and the public should be guaranteed a voice in a transparent process as authorities establish public health policy.

References:

<https://doi.org/10.1017/dmp.2020.298>

<https://questioningcovid.com/>

<https://www.tabletmag.com/sections/science/articles/hydroxychloroquine-morality-tale>

## 10. Lack of Science to Support Measures

**The measures being implemented in response to CV-19 are not science based.**

- British Columbia’s Chief Health Officer, Dr. Bonnie Henry, when asked about the inconsistency of CV-19 measures across Canada stated: *“None of this is based on science.”*

## 11. Negative Impact of Measures

**The negative consequences of CV-19 measures is not fully considered.**

- There is increasing awareness that the number of deaths due to the response of governments is substantially higher than the number of deaths purportedly caused by CV-19.
- The rates of domestic violence, suicide, drug and alcohol addiction, and deaths due to the inability to access medical treatment have increased significantly as a result of CV-19 measures.
- The financial consequences of CV-19 measures include massive job loss, bankruptcy, closure of businesses, homelessness, and insurmountable debt. Our economy is in “free fall”.
- The social fabric of our communities has been severely impacted by government measures.
- Our democracy and rights and freedoms are in serious and immediate danger. One only need witness what is happening in Australia and New Zealand to appreciate how vulnerable we are to tyranny.

References: <https://www.aier.org/article/madness-in-melbourne/>

## 12. Innate Immune System

**We all possess immune systems that have adapted to challenges and allowed humanity to survive over millennia.**

- Each time we are exposed to germs, viruses and bacteria, our immune system grows smarter and stronger.
- It is healthy and necessary for our very survival to be exposed to different germs.
- If we purposely prevent such exposure, we may gain in the short term, but we may negatively impact our natural immune system in the long term.
- Numerous public health experts have advocated for exposure amongst those populations under the age of 60 who are in good health and where the risk of serious consequences is low.
- This exposure allows for the development of herd immunity, a necessary condition for life to return to normal.

Reference: [https://www.americanthinker.com/blog/2020/06/immune\\_systems\\_matter.html](https://www.americanthinker.com/blog/2020/06/immune_systems_matter.html)

## What Is Needed Now

What is needed during this critical time is leaders who fully inform themselves to enable them to make decisions based upon evidence rather than politics. We also need leaders who do not succumb to media pressure or the public’s over reaction due to fear and anxiety. The public, including our elected officials, are being bombarded with misinformation from extremely biased and manipulative media outlets and public health officials. The result is that misinformed citizens as well as our elected representatives are acting emotionally rather than logically and rationally.

## Required Actions

1. **Eliminate all masking mandates.**
2. **Eliminate all physical distancing measures.**
3. **Open all businesses immediately.**
4. **Open our schools without masking or physical distancing requirements.**
5. **Open our parliaments and courts so citizens can hold their governments accountable.**
6. **Allow open and honest debate about this medical condition and the measures needed to treat it.**
7. **Recognize that financial conflicts of interest are distorting our understanding of this condition and access to treatment options.**
8. **Insist on robust, peer reviewed science and evidence-based measures to guide our actions.**
9. **Defend our rights and freedoms and the sovereignty of the human body.**
10. **Tell the truth.**

*It is the government’s job to increase both freedom and security.*