

## **Why I believe mask mandates should not be reinstated**

**There is no emergency, at least not in the way that Dr. Nili Kaplan-Myrth is implying**

- The CDC has declared the initial “pandemic” over close to three months ago
- The original potentially deadly Wuhan bio-weapon strains are done since February of 2022
- Many countries and some provinces are now treating COVID as a regular seasonal flu
- Omicron and new strains are simple colds
- Colds, flu, virus has been with us for 5785 years, they have never constituted an emergency with the exception of the Spanish flu etc
- The fall and winter have always been highly infectious times for various Colds Hospitals
- Hospitals at been at and over capacity for over 30 years, then came mass immigration and aging of population without building new hospitals, COVIDs are not responsible for hospital capacity issues, miss-management is
- The life expectancy (76) and mortality rate stayed the same during the epidemic, Statistics Canada noted that excess mortality was due to overdose, delay in surgeries and suicides
- Covid-19 has never met the requirement for a pandemic (4% + overall mortality rate) or emergency requiring a lockdown under the definition and laws.

***No kids and teens are NOT dying OF COVID. Some kids and teens have died WITH COVID, they all had severe comorbidities such as stage 4 cancer***

*\*CDC have retracted their initial false claims*

**Let's talk numbers...**

- Teenagers and kids have 0 chance of dying of Covid-19 or any other COVID (cold or flu)
- The recovery rate for original strain was 99.998% for age 0-30 and from 0-18 0% died without severe comorbidities
- It is estimated that 2/1 Billion healthy children will die of the new strain of COVID
- Statistically speaking youth have
  - 6x more chance of being hit by lightning than to die of Covid and
  - 100x more chance of dying in a car accident on their way to school

**COVIDs is not an emergency and does not and has never met the legal requirement for any of measures implemented**

***If colds and flu are an emergency may I ask you what isn't?***

## The true emergency:

- In the past 2.5 years children, children, teens and adults have had mental health issues due to fear and anxieties from the mandates and narrative
- Teen anxiety, depression and suicides were at an all time high during the pandemic
- We have coerced and extorted our you in taking an experimental bio-agent "vaccine" that has not completed phase 3 and for which every step of the informed consent and nuremberg code were violated, vaccinated 90% of teenagers for a disease for which they have 0% fatality rate, for which they have 0 risk.
- Since the implementation of these "safe" and "effective" "vaccines" kids and teens have had record number of myocarditis, heart attacks, disabilities and injuries and deaths
- Children and youth excess mortality has climbed 585%, 7x the number of kids are dying....

*Healthy kids are dropping dead in record numbers in their sleep, while playing video games, on soccer fields and basketball courts.*

In science when only one variable has changed the variable is responsible. Time will tell if the "vaccines" are responsible but many countries are now pulling them off below 12, 18, 30 or 50 years old.

- As a result to the Covid measures (masks,"vaccines", lockdowns, fear, social distancing) kids immune system are so weak that:
  - We now have a record of RSV
  - Frequent long colds
- We are destroying our environment with the masks who are creating hundred of metric tons of waste
- Surgeries and diagnostics are baked up, cancers, heart attacks, strokes, auto-immune disorders, infertility, miscarriage and still births are now at record highs
- Our economy has been destroyed for generations to come:
  - Parents now struggle to feed their families and pay their bills
  - Businesses and individuals have gone bankrupt
  - The funds for new hospitals was spent Covid measures
- **Hatred and division is at an all time high since these measures have taken place**

***We do have a pandemic one of childhood death, SADS, poverty, MH issues, hatred, division and cancel culture and loss of common sense and respectful debate***

Since none of the measures have worked and has instead harmed and killed people should we really continue? With all due respect I was taught that **only a**

**fool repeats the same thing over and over again expecting a different result. Isn't it time to stop the vicious cycle?**

**Our population in numbers:**

- 90% of the population is “vaccinated” although these vaccines don't prevent infection, transmission, hospitalization and death, people complied and keep complying without results they shouldn't they feel safer?
- 90%+ of the population already contracted Covid, for kids, teens, young adults, and the vast majority of the population and are now naturally immune
- People who die with COVID have on average 2.6 severe comorbidities

**Masks don't work:**

- Masks were not part of Pandemic response strategies including the one drafted in 2006
- Mask have not prevented the transmission of Covies in the past and wont in the future
- Covid's are airborne disease, they stay in the air for approximately 3 hours
- The particles of a Covid virus is 10 times smaller than the holes in N95 masks, hence they go right through it
- At the beginning of the pandemic it was clearly written on N95 mask boxes that they don't prevent Covid type viruses (cold and flu), this was the truth then and the truth now, all other masks having bigger holes, none are effective
- We didn't have a control group for masks to assess their effectiveness, in fact many doctors believe they are only useful for droplets hence why they have only been used by surgeons and dentist in the past, may virologist and respirologist are against them
- It is estimated that wearing masks might at best reduce 4/1000 infections
- Our own Premier, PM and top doctor are constantly seen in parties and events without masks..... meaning they don't practice what they preach and don't believe in it and live a slide of hypocrisy. One rule for thee, ok one rule for me. Or do what I say, not what I am doing. Surely if they believed the narrative, they would protect themselves.

***Would it be wise to keep doing the same thing, over and over again expecting a different result?***

**Countries, Provinces and counties without mandates had less deaths:**

- In the United States some counties had mask mandates while some didn't, hence scientific control groups. The counties without mask mandates had less cases, less hospitalization and deaths than the counties in that state with mandates.
- In Brazil the provinces without masks also fared much better.
- Sweden who was criticized for not locking down and imposing mandates have had less excess mortality in the last two years
- The countries without mandates have had less excess mortality in the past 3 years.

Numbers don't lie.

***Our body NEEDS to face viruses in order to be strong, have strong immunity so we can face bigger threats, this fact has been medically known for hundreds of years. It's medicine 101. If we keep suppressing our immune system we won't be able to face bigger threats. Let's stop the vicious cycle.***

Continuing these measures will continue to weaken immune systems and perpetuate this vicious cycle

**Masks are dangerous and have been known to cause much harm especially to children and teens:**

Masks have been found to:

- Be tinted with graphene, toxic chemicals, [carcinogens](#) and microplastics
  - These toxic chemicals are non to cause lung toxicity and disease
- During autopsies micro plastics are now found on lungs
- Cause fear, anxiety
- Suppress the Immune system
- Causes skin disease
- Greater bacterial overload in mouth, nose, throat and lunch
- Breath less well, become dizzy, cause headaches and have trouble concentrating as well as breathing issues, asthma, coughing spells and panic attacks
- Developmental delays, social delays, speech delays, and social issues
- Mask particles can enter airways and cause damage to lungs, in my case it caused a partial lung collapse

***People perish for lack of knowledge***

**Masks cause much harm to the environment:**

- Governments and schools are saying they care about the environment, yet since masks have been introduced hundreds and thousands of metric tons of masks have been put in our oceans, rivers, environment and land fills, these are made of plastics and non biodegradable or compostable
- The masks are single use plastic, by this very definition they should be banned according to new policies and guidelines in Canada

## **Hatred, division and exemptions**

- According to the Human Rights Commission of Ontario, proof of exemption cannot be asked to enter school, workplace and businesses yet most of these areas insist on it including our OCDSB schools
- Mask exempt people get yelled at bullied, ridiculed, taken pictures of and cursed at in public
- People, kids, teens with our school of thoughts are being cancelled, demonized. We have loss tremendously; jobs, family, friends, privileges, we have been segregated for over a year
- Our own Premier and Prime Minister have created intolerance, hate and division towards people of our school of thoughts. Doctors have lost their license for telling the truth and doing what's best for their patients. We were called selfish, careless, reckless yahoos, people that cannot be tolerated, people with unacceptable views that don't represent Canadians, who don't believe in science, homophobes, racist misogynist islamophobes... as if it had anything to do with that etc etc etc. For choosing bodily autonomy... we were called anti-vaxxers while most of us are fully vaxxed with real vaccines. One of my kids teachers said the "un-vaxxed din't deserve to live in Canada, others cheered our deaths". This has got to stop.

***Darkness cannot cast out darkness only light can. Hate cannot drive out hate, only love can. Martin Luther King Jr.***

## **The conscience argument:**

- Many of us, can no longer wear masks do to religious or regular conscience
- We can no longer promote lies, a spirit of fear, we need to promote a spirit of POWER, LOVE and A SOUND MIND a gift that Jesus Christ gave to His church, we need to promote mental health, strong immune system and a return to a better life
- Trust me if there was a true emergency and if masks worked, we would be the first to be wearing them out of love for our neighbour, but because of love for our neighbour we cannot encourage mandates that we know are harmful.
- Yes some people are at risk but asking the 10000/2 ratio to hurt their mental health, livelihood, overall health and environment is neither fair nor wise.

***And you will know the truth and the truth will set you free***

## **Time to re-educate, reassure and provide psychological help to people:**

- If masks did work, they work on both sides right? When you wear a N95 to protect yourself against construction dust (what it's meant for), you wear the mask to protect yourself, if your colleague is not allergic to the dust and doesn't wear one, you are still protected, right?

- It is time to tell that last paragraph broadly to reassure the people who are still scared and wearing masks (10% of population),
- It's time to educate them to love others with different views once again
- It is time to give counselling, therapy to the people who are still afraid of cold and flu (germaphobes) those who are petrified and need psychological help and for the Government, schools and media to apologize to them

### **My body my choice, bodily autonomy and legal issues**

- Many legal battles are on the way because of the great damage of the Covid mandates ("vaccines", hand sanitizer, masks and lockdowns)
- Forcing people to wear masks is in my opinion and that of many to be against our Charter of Rights and Freedoms / bodily autonomy, against the Hippocratic oath to do no harm.
- **If a student is harmed for wearing a mask you could be legally liable**
- Last year the minister of education confirmed that OCDSB didn't have grounds to implement mask mandates when the Province hasn't and still did
- Although countries are now banning COVID-19 for children, teens, young adults and in one up until 50, and although Kieran Moore has said he doesn't recommend boosters youth as the risk outweigh the benefits, OCDSB keeps promoting vaccines and boosters every week, **should a teen take a vaccine based on your recommendation and coercion and be injured, handicapped or dies you could be found legally responsible/ liable.**

If mandates return, I am convinced protests will come back and legal actions will be taken against OCDSB and the school board for which you could be liable for the harm caused to kids physical and mental health

***If mandates return, I am convinced protests will come back and legal actions will be taken against OCDSB and the school board for which you could be liable for the harm caused to kids physical and mental health***

Should masks return, the school will need to ensure medical, conscience and religious exemptions are respected

You will also need to give the ability for parents to pull their kids out of school and have access to on-line school so they have the liberty to breathe, have a strong immune system and not face physical harm from the masks. I do hope it doesn't come to that. May I challenge you that maybe the ones who are that scared should be the ones encouraged to go online

### **In conclusion**

Cold and flu seasons are a NORMAL, healthy part of life. We lived 5785 years without masks. We are good to continue that way.

Masks create a sense of fear and emergency, it is time that we get over colds and viruses and get on with our lives. Enjoy a normal life, a healthy life. **Haven't our kids suffered and sacrificed enough?** The 2 weeks to flatten the curve has turned into close to 3 years, enough is enough.

It's time to **speak the truth in love**, to have the courage to get back to a free and democratic, common sense, loving society. **It's time for the fear, division and hatred to end.**

It's time for people, for kids of all colors, religions, political parties and medical school of thoughts to feel heard and included.

I am asking again, that you would ban mask mandates, not allow them to ever be reinstated. It's time for true science and debate to be reinstated and mental health to return.

May you have the courage to stand for truth, to do what's right, I know the pressure from the 10% is hard... I do appreciate the position you are in but please do what is right, do not make things worse..

P.S. you will notice a few Bible verses and although it speaks from a spiritual standpoint it does apply here in the physical.

Be blessed, have faith and courage,

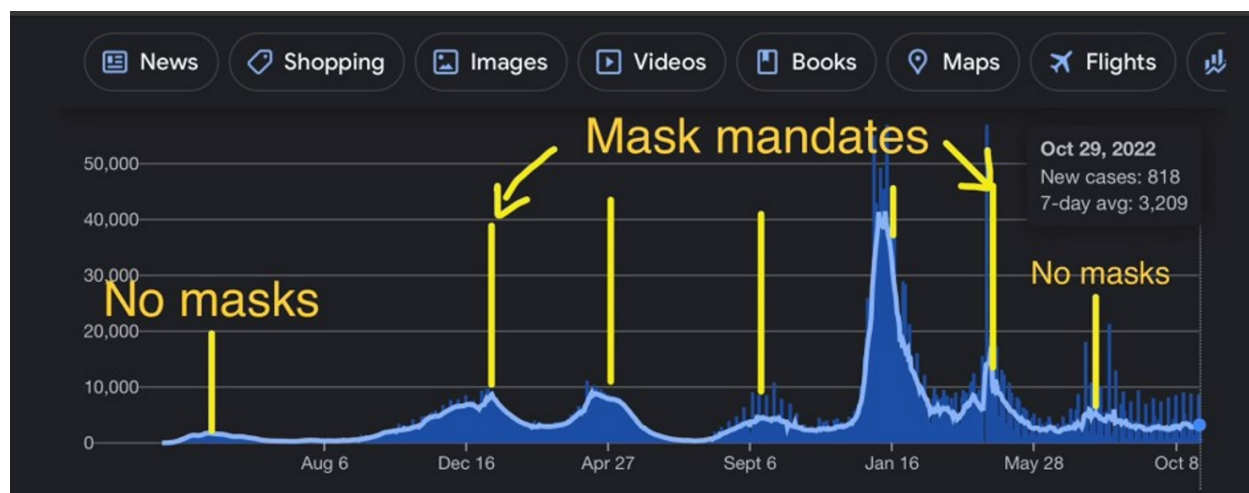
Melanie Lefebvre

<https://www.canadiancovidcarealliance.org/>

<https://guardiansofmedicalchoice.com/17000-signatures-on-physicians-declaration-global-covid-summit/>

<https://vaersanalysis.info/2021/10/22/vaers-summary-for-covid-19-vaccines-through-10-15-2021/>

<https://www.gov.uk/government/publications/coronavirus-covid-19-vaccine-adverse-reactions>



November 22, 2022

Re: "mandatory" masks in schools

To Whom This May Concern:

This letter is to convey my strong opposition to the OCDSB attempting to "mandate" the masking of students and staff in schools. My opposition stems from the following:

1. **No Scientific Merit:** The actual science (i.e. not political science) is very clear that masks do not decrease transmission and/or prevent infection of respiratory infections. This is especially true for an airborne virus such as Sars Cov-2 (Covid-19). Masking is useless in this regard.
2. **Masking is Dangerous:** There are multiple studies that indicate, clearly, that wearing a mask carries with it significant risk to both physical and mental health. The science is very clear: a healthy person gains no benefit from wearing a mask, only detriment.

\*As a side note, I am well-researched on the above and would be happy to present my findings to this board at any time. I am also happy to debate, publicly, anyone on this topic.

3. **Lack of Authority:** School boards do not have any legal standing to enact, in any form, a public health directive. It is questionable, from a constitutional/Charter perspective, whether public health has the authority to force an individual to wear a mask, let alone a board of trustees for a school board. Hence, regardless of your decision, it has no standing and it is unenforceable, legally. In April of this year, Ontario's education minister, Stephen Lecce, stated the following:

*"We believe that medical doctors, not school board officials or teacher's unions, should make public health decisions. Every student in every school board in Ontario retains the choice to wear a mask, and that policy will be universally respected, as recommended by the Chief Medical Officer of Health."*

It is clear by this statement that your own minister is opposed to school board's attempting to enact public health directives. Ultimately, as aforementioned, the point is moot as the OCDSB has zero legal authority to "mandate" a public health policy.

Finally, and to further drive the point that masking has no scientific merit, the Chief Medical Officer of Health for Ontario was recently photographed and filmed maskless while drinking at a packed party in Toronto. This, only two days after "strongly recommending" that Ontarians wear a mask when indoors. This flagrant act of opposition to his own "strong recommendation" is certainly telling.

Finally, I have two daughters attending high school under the OCDSB. Regardless of your decision, they will NOT be wearing a mask to school. If they are denied attending classes, I will seek any and all legal remedies available to me, directed towards the school, the board and any and all individuals duly involved. Govern yourselves accordingly.

Yours Truly,

Dr. Sean Whittal, BA DC

November 22, 2022

To: Trustees of the Ottawa-Carleton District School Board (OCDSB)

Dear Trustees,

**Re: Mask Mandates in OCDSB Schools**

We, the undersigned, are parents of two girls aged 10 and 15, who are currently enrolled in OCDSB schools (Hopewell Avenue PS & Glebe Collegiate Institute). We strongly disagree with the proposal to impose mandatory masking in OCDSB schools. Our reasons for taking this position are rooted in the harm that Covid-19 mandate measures have caused to our children's well being and education. We are also witnesses to similar impacts to the children of friends and neighbours. The imposition of a mask mandate threatens to set back the progress that our children have made in recent months.

While masking may have made sense at the height of the pandemic, its efficacy has diminished. Further, the social costs that lies behind the mask has not been adequately considered in public health calculations. Decision-makers, including those at OCDSB, have failed to take into account the significant impacts to mental health arising from previous mandate measures. Our youth experienced a staggering increase in rates of disordered eating, body dysphoria and depression. Many students simply 'checked out' and retreated into their digital devices as a coping mechanism. Our own family, and families very close to us, have not been spared by these unintended consequences.

These impacts to the well being of our children were initially triggered by the move to on-line school. It continued on, to a lesser extent, throughout the period of mandatory masking in OCDSB. To our children, and to a great many of their peers, a room full of masked students is an alienating, unfriendly learning environment that creates an atmosphere of disengagement, passivity and dissociation. What is truly unfortunate is that many health and education officials, who purportedly profess to be acting in the best interest of our children, have ignored or minimized these serious impacts.

We, and parents like us, are not anti-government radicals or science deniers. We reject the characterization of our motivations as being 'bizarre and misinformed and angry'. We are none of those things. We are simply the parents of children who have experienced considerable stress over the past 2.5 years.

While we appreciate the concerns about the current prevalence of respiratory diseases in the community, it is not acceptable for the happiness, well-being, and education of students in the OCDSB to be sacrificed to advance a rigid, narrow and ideological view of public health. Why the OCDSB is contemplating the imposition of a mask mandate when the *legally-mandated authorities* themselves, the Government of Ontario and the local Public Health Units, have not bothered to execute a comparable mandate?

Finally, has the OCDSB thoroughly considered the impacts on school operations from this proposed mask mandate? It is likely that there will be resistance to it from students. Are the school administrators prepared to grapple with the difficulty of enforcing an unpopular measure on the 90% of students who currently are not masking? Further, do not be surprised if thousands of families such as ours mobilize to oppose the Board's mandate overreach.

Please do the responsible thing and do not authorize this measure.

*Patrick Duxbury    ZMoghal*

Patrick Duxbury and Zainab Moghal

Copied:

- Hon. Stephan Lecce, Minister of Education, Government of Ontario
- Hon. Merrilee Fullerton, Minister of Children, Community and Social Services

Dear Lynn Scott,

I am a mother of two children in the OCDSB and I am writing to urge you to vote against the motion for a mask mandate for the OCDSB.

As far as I know, the OCDSB is the only school board in Ottawa, in Ontario, in Canada and possibly in the western hemisphere that is proposing a mask mandate. This begs the question - what is different in the OCDSB that would make it necessary for children to be masked at school while children in the rest of the country are not masked at school? Further, Dr. Kiernan Moore, in his statement last week, recommended but did not mandate that masks be worn in Ontario. As well, Dr. Vera Etches has recommended mask wearing in Ottawa but she has not mandated it. Why is the OCDSB considering going above and beyond both provincial and local public health advice and making mask wearing mandatory in schools. And what legal grounds does the OCDSB have for overstepping the public health advice of the provincial and local chief medical officers?

The annual cold and flu epidemic is upon us – this is not new, nor is it new for the Ontario health care system to be overstretched, this has been the case for decades. The wearing of masks to prevent the spread of respiratory viruses such as colds and flus has been proven to be very, very low. Face masks do not block respiratory viruses; therefore, they do not reduce transmission of respiratory viruses. On the other hand, the negative effects on children's mental and physical health from mask wearing are numerous. I am happy to provide links to scientific studies that support these facts.

If teachers and students have a sense of security that they will be protected from seasonal colds and flu viruses by wearing a mask then by all means they should be free to wear one. I ask that you do not impose a mask mandate on all students as doing so would be an infringement on Section 7. of the Canadian Charter of Rights and Freedoms, which protects our right to "life, liberty and security of the person" - more specifically, which protects our bodily integrity from laws or actions by the government, in this case the OCDSB, that violates those rights. Please uphold the Charter rights and freedoms of the students and teachers in the OCDSB.

I ask that you please vote against the motion for a mask mandate for the OCDSB. Abstaining from voting on this issue will demonstrate weak leadership and a lack of courage.

Best Regards,

Joanne Crossman  
Ashton, ON (Ward 1)

Greetings,

I would like to offer a few pieces of information and suggestions regarding the motion for masking.

Overall, I urge you to support implementing an immediate mask mandate for OCDSB students and staff.

I also urge you to remove any standing OCDSB policies against ventilation improvement in classrooms, if still in effect -- namely the two policies I learned of earlier in the pandemic:

- \* staff were instructed not to open windows; and,

- \* 'Corsi-Rosenthal boxes' (Do-It-Yourself air filtering tool) were not permitted to be used.

My background: I have previously worked as a teacher in the OCDSB, as well as other three other school boards in Ontario. Math is one of my specialties, and has provided me an increased ability to parse through some of the science about COVID and health care statistics.

I have delegated at a number of Ottawa Board of Health meetings during this pandemic.

It has been frustrating at times: I produced a fairly in-depth analysis of OPH's February 2021 report on COVID in schools, demonstrating they didn't have enough data to back up their conclusions of very limited spread within schools, that I don't think they ever acknowledged. But at the start of 2022, I was able to get them to issue a correction on a similar statement made by Dr. Etches, where she had stated that as the Omicron variant wave hit, school rates were lower than the rest of the community. Earlier on, Dr. Etches had made a statement at a meeting about how droplet transmission was the primary means of spread, while later in the week CBC was reporting that Canada's representative to the World Health Organization was being criticized for the same thing, but authorities and media locally seemed to give Dr. Etche a pass on such comments.

And most recently - the past three OPH board meetings, in June, September, and November - I have delegated pushing for implementing mask mandates, to no effect. At the meeting this month, I was the only one pushing for mask mandates, but by the end of the week Dr. Etches was saying to the media that mandates were a good idea, but only - for some unexplained reason - if they were implemented for the whole province or at individual organizations / businesses, and not at the city level or in city-run initiatives like public transit. Personally, I think that type of response is an abdication of public health responsibility.

Because the context of this is a growing hospital and health care crisis, which for the past few weeks we have heard about in terms of children's hospitals and RSV, flu, and COVID - but it has been, and remains, an extreme and worsening crisis in most hospitals across the province and elsewhere. It is getting worse and very little if anything continues to be done to support the suffering hospital workers and hospital capacity.

So the other side of things is to reduce the demand on the health care system.

Which in other words, is about protecting the health of people in the community.

The prevailing hypothesis - in my opinion, backed up with some references at the link below - for the increase in severe health problems that are currently being experienced, is some sort of immunity damage from people having had COVID infections.

So, protecting people from COVID - as well as reducing the spread of RSV and flu currently - is both in the overall long-term interest and also will help with the current crisis in hospitals.

There are two fairly recent studies that both measured a significant decrease in COVID spread in schools where mask mandates were in effect, versus ones that either didn't have or removed mask mandates:

- \* the 'Boston study' (from Harvard); and,
- \* the 'Alberta study' (obtained from the Alberta government in court disclosure).

There is more that could be said on this topic, but I think this is the most relevant points for your consideration.

And to repeat, I urge you to implement a mask mandate, and remove any policies preventing ventilation improvements in classrooms

Sincerely,

- Greg Macdougall

Ottawa

\* *References:*

<https://equitableeducation.ca/2022/deputation-for-public-health-hospital-crisis>

Dear OCDSB Trustees,

We are writing to ask you to vote against the motion RE: Wearing of Masks for Educators, Staff and Students.

We would not oppose this motion if it were clearly worded to end once CHEO pediatric ICU occupancy is less than 85%, or if it was time limited (e.g. for 3 or 4 weeks, whereupon a new vote would be required to extend it). The idea of temporarily increasing masking in the community until ICU occupancy at CHEO decreases is sound (although unfair if applied only to OCDSB students and not community wide, see below). However, as currently worded the motion appears designed to never end. The final paragraph requires 3 conditions for the mask requirement to end:

- i. Ottawa Public Health declares that influenza season has ended
- ii. CHEO pediatric ICU occupancy is less than 85% for a period of at least two weeks, **AND**
- iii. Ottawa Public Health no longer advises the public to wear a mask to protect against exposure to airborne and respiratory viruses in indoor spaces.

The first and last of these conditions would likely be impossible to meet as Ottawa Public Health does not declare an official end to influenza season and has never stopped advising masking in indoor spaces since near the start of the pandemic. As such, the motion appears to be calculated to achieve long-term masking of students under the guise of reducing acute patient loads at CHEO.

Given that the motion appears to be designed for the long-term, we respectfully submit the following reasons to vote against it:

1. The motion states that there is no harm to a child's physical or mental health from wearing masks. As parents with lived experience we can tell you that this is categorically false. Under previous mask mandates our child did not cope well. Beyond the straightforward difficulties such as not being able to clearly hear his teachers and difficulty reading emotional cues from classmates, our child developed anxious and obsessive behaviours. Since the return to normal schooling this year, without a mask mandate, these behaviours have disappeared and our child is thriving. However, the prospect of a return to mandatory masking has already begun to resurface the anxiety. Our child is not alone. We know many friends and neighbours whose children also dread the reintroduction of a mask mandate. Implementation of this mask mandate will harm the well being of many students at OCDSB schools.
2. The board does not have the scientific expertise to decide on this issue. Public health authorities have the expertise (and legal authority) to require mask wearing, yet across Canada, across Ontario, and even in Ottawa these authorities have continued to *recommend*, rather than *mandate*, mask wearing. Even if the trustees believe they have the legal authority to pass this mandate, they do not have the ethical authority. How can a board with absolutely no public health expertise, no infectious disease expertise, no virology, immunology, or epidemiology expertise have the ethical authority to overrule the decisions of our public health authorities? The board may feel that it is following the "recommendation" of public health authorities by

implementing this masking requirement. However, there is a world of difference between *recommending* masks be worn and *mandating*, on threat of punishment or removal from school, masks be worn.

3. It is not fair to place the responsibility for our overburdened hospitals on students and educators of OCDSB schools. If this motion passes the students of OCDSB schools will be the only large cohort of the community required to mask. Our children have shouldered more than enough of the pandemic burden over the last 2.5 years. It would not be just to expect them alone to shoulder still more. If our Public Health authorities are not ready to introduce community-wide mask mandates then it is not the place of the OCDSB trustees to do it for them.
4. Several statements in the motion are factually incorrect:
  - The motion states that covid-19 cases are on the rise. They are not. In fact, they are at an all time low (see the Ottawa Covid Dashboard at <https://www.ottawapublichealth.ca/en/reports-research-and-statistics/covid19-dashboard.aspx>)
  - The motion states that the health and safety of educators and students is in jeopardy as demonstrated by the ICU and emergency room crises at CHEO. As numerous officials have stated, the ICU admissions at CHEO are primarily children under 4 years of age. Most of this age group does not encompass students or educators at OCDSB schools.
  - The motion states that increased respiratory virus activity is causing people to miss work and school at unprecedented levels. No data is presented to substantiate this claim. Moreover, the board's own data shows that this is not the case. Pages 3 to 5 of Report 22-086 *Information on Mandatory Mask Mandates* shows that there has been effectively no change in staff absences in the school year thus far compared to last year.
  - The motion states that "there is strong evidence of harm caused by infections with COVID-19, influenza, RSV, and other viral illnesses". No evidence is presented to substantiate this claim. Whatever harm may be caused by influenza, RSV, and other viral illnesses has for decades been considered by society in general, by parents in particular, and by public health authorities to be so low as to be acceptable without the need for wearing of masks. Regarding COVID-19, there is no "strong evidence" that our children or vaccinated staff are at significant risk.
5. The stress on CHEO Emergency Department and ICU has already peaked. The most recent data from Ontario's Acute Care Enhanced Surveillance (ACES) Viral Respiratory Mapper shows that Emergency Department visits for children aged 0-4 and 5-18 has peaked and is on the way down (<https://www.kflaphi.ca/viral-respiratory-mapper-admissions/>). While there is no certainty that this downtrend will not reverse, the historical data shows that these respiratory illness waves are short and steep, with a fast increase and fast decrease in admissions. There is no reason to not expect the same will happen with this wave. Any effect on Emergency Department or ICU admissions of a mask mandate being implemented at OCDSB schools would be delayed by several days or weeks. The crisis at CHEO will likely have abated before then. Again, this may

not prove to be the case, which is why we are comfortable with a mandate that is tied specifically to CHEO ICU capacity improvement or, more preferably, is time-limited to 3-4 weeks and requires another vote to be extended.

6. The recent surge in pediatric emergency and ICU demand is a rebound effect caused by a suppression of respiratory illnesses over the last 2 years (see <https://www.kflaphi.ca/viral-respiratory-mapper-admissions/>). This suppression may have been at least partially attributable to the effectiveness of previous mask mandates. It follows that implementation of yet another long-term masking requirement will necessarily be followed at some point in the future by another rebound increase in respiratory illnesses.
7. The patients in CHEO's ICU are predominantly non-school aged children (under 4 years old). It is not clear how masking of high-school students, very few of whom have siblings under 4 years old, will significantly prevent transmission to toddlers and infants.
8. The board's own staff has stated that implementing a mask mandate will have "substantive impact at the school level" and that "[B]ased on previous experience, mask mandates require considerable time for educators and administrators addressing protocols, compliance, behavioural issues, etc." (see page 5, 2<sup>nd</sup> last paragraph of Report 22-086 *Information on Mandatory mask Mandates*). This time requirement for educators and administrators will negatively impact their ability to focus on the educational achievement of our students, which is, according to the *Education Act* the prime responsibility of school boards.
9. This mandate will cause unnecessary division, discord, and conflict at our schools. At present, those who wish to mask are free to do so. If this motion passes, nobody at an OCDSB school will have the freedom to choose whether to mask or not.
10. The board's own data collection tells us that approximately 90% of students and 80-85% of staff are currently not wearing masks (page 2, 5<sup>th</sup> paragraph of Report 22-086 *Information on Mandatory mask Mandates*). The logic of implementing a mask mandate on a population so clearly opposed to it is challenging to understand. The Board should fully expect thousands of families to mobilize to oppose this mandate.

In summary, we plead that the trustees vote against this motion, mainly on the grounds that it is not without grave mental health consequences to many children, goes beyond the expertise and authority of the board, and is based on misinformed or unsubstantiated claims.

Thank you for your consideration.

Respectfully

Drs. Michael O'Hare and Neena Kushwaha

Written submission to Special Board Meeting Nov 22, 2022 regarding proposed OCDSB Mask Mandate by T-C D'Agostino, 12 Oakwood Avenue, Nepean On, K2E 6A5, parent to 2 High School students at Merivale High School

I understand that SB Trustees are entrusted to create a safe environment for teaching & learning; however, local mask mandates are not the most effective way to get people to mask up as stated by Dr. Vera Etches, Ottawa's Chief Medical Officer of Health.

The proposal to "temporarily" (effectively indefinitely) and forcibly-mask our healthy children for the annual flu has never before been contemplated by any medical establishment. Some Trustees are operating under the false assumption that the OFF-LABEL use of surgical and N95 masks will solve our broken health-care problems. Both the Chief Medical Officer of Health for Ontario and Ottawa have not declared an emergency and have decided against any provincial or local mask mandates for Covid-19, Flu, RSV or other respiratory viruses.

I do not consent in holding healthy adults and children hostage to unscientific practices to save hospitals from being accountable to their administrative failings. It is the responsibility of the Ministry of Health to deal with their service issues.

Whether or not you believe that surgical or non fit-tested N95 masks prevent virus transmission to any significant degree, to which the manufacturers do not claim any such benefit, the harms from masking are significant and appear to heavily outweigh any measurable benefit. Study after study is being published that quantifies the harms from masking during the COVID-19 pandemic: speech and developmental delays in younger children, social anxiety and depression in teenagers. Extended long-term masking of Children for COVID-19 was a medical experiment that had never been done before.

**None can provide informed consent to any further experimental medical interventions** such as masking until the findings of randomized control trials are presented, reviewed and debated openly within the scientific community. Whether one chooses to mask sometimes, everytime or never, that is a choice to be respected; however, it is unethical to force mandates on healthy adults and children who have serious concerns (and have been impacted) about the dangers and known harms from masking. Any form of coercion and denial of service to participate in a medical experiment does not create a safe work and school environment.

The Flu, RSV, and other respiratory diseases have circulated seasonally in the past, and surgical masks were never recommended by medical professionals: **what has changed in the scientific literature to suggest that surgical masks work to prevent transmission of flu viruses?** Masking in school environments to prevent virus transmission is a medical experiment at this time.

Occupational Health and Safety engineers have publicly stated and published documentation to indicate that wide-spread use of surgical masks and non-fit-tested N95s do not provide significant protection in the prevention of virus transmission. Are parents aware that the manufacturers of surgical masks state clearly on their packaging that they are not designed, tested or proven to reduce the spread of air-borne viruses? Are parents aware that N95s require

fitting, and training plus signing a contract with 3M regarding purpose of use, training and a waiver?

The state of the current health-care system is not the fault of Parents, Educators and Children. Intimidation and scare tactics do not create a safe environment for learning. Good hygiene, hand washing, adequate sleep, healthy food, vigorous exercise, fresh air and Vitamin D supplementation are widely recognized, tested and accepted as means of keeping adults and children healthy. **Are teachers and staff prepared to accept the liability for ensuring proper mask use by students in their care and any damages and harms resulting from it? Is the OCDSB and its Trustees prepared to assume the legal liability of damages and harms from use?**

My recommendations are:

- Trustees should not provide any medical recommendations, and certainly not that advice known to harm children and create learning loss and delays. Parents must provide written informed consent to any medical interventions.

- Trustees should not blame, shame, coerce or intimidate parents for questioning proposed medical interventions **-critical thinking is a pillar of the OCDSB**. Children should not be discriminated against for refusing to participate in medical experiments.

- Trustees should hold the Ministry of Education to account for adequate resources for air quality and learning supports to address the documented learning delays resulting from the past 2.5 years of COVID-19 pandemic policies.

- Trustees should hold the Ministry of Health and Hospital Administrators to account for the maintenance and performance of their institutions.

And finally Trustees should not rush "to do something" with questionable "temporary" measures with known risks and long term harms. Trustees should create a safe environment, free from bullying and segregation. Local mask mandates are not the most effective way to get people to mask up as stated by Dr. Vera Etches, Ottawa's Chief Medical Officer of Health.

**Masking should remain a choice for each family as recommended by Ontario's Chief Medical Officer of health.**

Please attachment for more than 150 Comparative studies and articles on mask ineffectiveness and harms.

Good evening.

I unfortunately cannot join this evening as I am at work. I am the mom of OCDSB students that have experienced both physical and mental health challenges throughout the pandemic as many children have. As a pediatric Registered Nurse I am writing to lend my voice to the plea to institute a temporary mask mandate in our schools in order to allow our local hospitals and healthcare providers to tend to the incredibly large volume of very ill children in our community.

Masking may not be a perfect solution, but as Ottawa Public Health and The Chief Medical Officer of Health have recommended wearing them to reduce illness and burden on our health care system, and the Registered nurses association is calling for a mask mandate due to low voluntary compliance, I am echoing the request to our leaders to require masking for a short time in order to prevent any unnecessary death in our pediatric population. Our system is stretched so thin that we need to act as a community for those that cannot speak out right now.

Protests are loud, but I truly believe that if most people were face to face with the reality of how acutely ill these children can get, that they would do anything they could to help minimize the impact on the pediatric population.

Thank you for considering,

Natalie Thomas, RN