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To:

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**RE: British Columbia Vaccine Passports**

Premier Horgan,

We are writing to you because of concerns we have regarding the plans to implement a British Columbia vaccine passport program (the Vaccine Passport Policy).

The Vaccine Passport Policy will exclude unvaccinated individuals from entering certain public spaces. There is no plan for accommodation for individuals who cannot be vaccinated for medical reasons or reasons of faith or conscience.

The Canadian Constitution Foundation (the CCF) is a legal charity that advocates for the fundamental freedoms of Canadians. The CCF believes that COVID-19 is a serious illness that warrants health measures, and that vaccines are safe and effective. The CCF believes that individuals who are able

should make the choice to get vaccinated against this virus, for their own safety and for the safety of their family, friends, and community.

However, the Vaccine Passport Policy prevents people who are unable to get vaccinated for medical reasons or reasons of religion or conscience from participating in public life. This is unwarranted and extreme. A failure to create an exemption or accommodation for these individuals is a violation of their section 15 Charter protected right not to be discriminated against on the basis of disability or religion.

**We have been contacted by several British Columbia residents who are unable to get fully vaccinated due to an adverse reaction to the first dose of a COVID-19 vaccine. We are deeply troubled by the failure to accommodate these individual, and all similarly situated individuals whose medical conditions preclude them from being vaccinated.**

██████ is a resident of ██████, BC. She is 35 years old and works as a ██████. ██████ was a previously healthy and active woman who would run or take spin classes 5 times a week or more and who did weight training in her home gym.

██████ is pro-vaccine and has been vaccinated many times before. She gets the flu shot every year. ██████ decided to get the COVID-19 vaccine to protect the children she works with and to protect her elderly grandfather.

██████ got her first dose of the Pfizer vaccine against COVID-19 on April 19<sup>th</sup>, 2021.

In the first 15 minutes following the vaccine ██████ was fine and was released to go home. However, within about 25 minutes she began to develop a very bad migraine headache. This headache was so severe ██████ needed to go to the hospital to be put on an IV drip. The headache lasted 10 days.

On May 8<sup>th</sup>, ██████ woke up with agonizing pain in her shoulder. ██████ went to the emergency room, where she was diagnosed with a scapular wing. This was a spontaneous injury not caused by any physical activity. ██████ was referred to orthopedics and then ultimately a neurologist. On June 3<sup>rd</sup>, ██████ was officially diagnosed with Parsonage Turner Syndrome, also called Brachial Neuritis. ██████'s neurologist is confident that this condition is a rare adverse reaction to the COVID vaccine.

██████'s neurologist and family doctor have both advised her against getting a second dose of the COVID vaccine, because they do not know if the vaccine will cause further damage.

██████'s case was referred to public health for investigation as an adverse reaction to the COVID-19 vaccine. However, public health has advised ██████ to get the second dose because her injury is not permanent.

██████ is going to follow the advice of her family doctor and neurologist, who are her primary care providers and who have advised against the second dose. She is seeing a chiropractor, physical therapist and massage therapist regularly to try to improve her condition. This injury has had a serious negative impact on her daily life, making it difficult to cook, clean, wash her hair or brush her teeth. The pain is also having a negative impact on her mental health. This harm is being exacerbated by the Vaccine Passport Policy which will exclude ██████ from participating in public life.



██████ is now pregnant, and she is worried that even in her current condition she will not be able to hold her baby. She is worried that the second dose could cause nerve damage to another area of her body and do something to harm her unborn baby. She will not take that risk.

██████'s story is rare, but is not unique.

██████ is a resident of ██████. She is 24 years old, and prior to her vaccination worked as a youth worker. ██████ was a previously healthy and physically active woman who would go to the gym regularly and maintained a healthy lifestyle. ██████ has asthma, which has been managed since childhood.

██████ is pro-vaccine and has been vaccinated many times before against other diseases. This includes flu vaccinations every year. ██████ was excited to get the COVID-19 vaccine, which is something she viewed as important for herself, her family, and her community.

██████ got her first dose of the Pfizer vaccine against COVID-19 on April 20<sup>th</sup>, 2021.

██████ experienced a reaction in the first 15 minutes following her dose of the vaccine. Her mind felt foggy, and she started having difficulty swallowing. These symptoms passed, and after observation ██████ was sent home.

On April 24<sup>th</sup>, ██████ began developing serious adverse reactions to the vaccine. Her initial reaction began as severe nausea and dizziness and difficulty seeing straight. These symptoms persisted for days, coming and going in waves.

On May 9<sup>th</sup>, new symptoms developed. While at a Mother's Day brunch, ██████ began feeling dizzy and nauseated again and decided to drive home. While driving, her heart began racing and had difficulty breathing. Her chest was tight, and her body felt like it was tingling. Her Apple Watch showed a pulse of 190.

██████ pulled over and called 911. Paramedics arrived and could not determine the cause of her symptoms. They speculated she may be experiencing a panic attack. ██████ does not have a history of anxiety or panic attacks and was not experiencing anything in her life that was causing her anxiety. ██████ was met by her mother, who drove her to the emergency room at the nearby hospital.

By the time she arrived at the hospital, ██████'s symptoms had subsided. Physicians listened to her heart and lungs using a stethoscope and observed nothing unusual. They did not conduct an electrocardiogram. ██████ was sent home.

These new symptoms of heart racing and difficulty breathing would come in waves every other day.

██████ had a hard time getting out of bed because she was afraid it would make her heart race. She was afraid to leave the house for periods because she did not know how her body would react.

██████ saw her family doctor, who also could not diagnose her symptoms and put ██████ on an anti-depressant medication despite ██████ not feeling depressed. The anti-depressants were not effective.

In June, ██████ developed new neurological symptoms. She developed bad headaches and began experiencing tremors. Her tremors were so severe they would wake her up at night while she was

sleeping. ■■■■■ was given anxiety medication for her tremors, despite not feeling anxious. The medication did not stop the tremors.

■■■■■ then developed muscle twitches. Prior to her vaccine, ■■■■■ had never had tremors or muscle twitches.

In July, ■■■■■ took a medical leave from her job because her symptoms had made it impossible for her to continue working.

In August, ■■■■■'s symptoms began to subside but then returned in her most severe bout of tremors to date, which caused the entire right side of her body to shake uncontrollably. She continues to have tremors and twitching, although not as severe, and still has a persistent headache, light sensitivity, and ringing in her ears. ■■■■■'s family doctor has told her to hold off on the second dose of the COVID-19 vaccine.

■■■■■'s doctor has reported her case to British Columbia public health as an adverse reaction to the COVID vaccine. Public health has conducted an investigation and has marked her experience as an adverse reaction. However, public health has recommended that ■■■■■ receive a second dose, despite the fact that she is still experiencing symptoms four months post vaccination. ■■■■■ is understandably not comfortable taking the risk of the second dose given her adverse reaction, and she should not be discriminated against for this decision by denying her access to public spaces.

■■■■■ would like to participate in public life. She would like to go to the theatre. She would like to go to sporting events. She would like to eat in restaurants. However, the Vaccine Passport Policy will prevent her from doing this. There is no way for ■■■■■ to access an exemption. ■■■■■ would like to be vaccinated, but there is no vaccine that is safe for her to take at this time. The prospect of further isolation as the Vaccine Passport Policy is implemented is beginning to have adverse impacts on ■■■■■'s mental health.

**■■■■■ and ■■■■■'s cases are rare, but there are other similarly situated people who have contacted us who are likewise unable to get vaccinated due to adverse reactions or complex medical histories.**

**We are writing to you today to ask that you create a process that will grant exemptions to the Vaccine Passport Policy for individuals who cannot be vaccinated for medical reasons. Individuals living with disabilities cannot be excluded from participation in public life.**

We are also asking for the government of British Columbia to create an exemption from the Vaccine Passport Policy for individuals who cannot be vaccinated for reasons of faith or sincerely held belief.

We have an urgent concern for individuals like ■■■■■ and ■■■■■ who despite a desire to be vaccinated are unable to do so. Our urgent concern is related to section 15 equality rights, and that is why we are asking the government to immediately create medical and religious exemptions to Vaccine Passport Policy.

However, we also view the entire policy as an unjustified infringement of section 7 Charter protected right to liberty and bodily autonomy given the current risk of COVID-19 in the highly vaccinated Canadian population.

Medical interventions, including vaccination, must be made on the basis of meaningful consent. For many people, especially medically complex people, the choice to get vaccinated involves making deeply personal trade offs about their own health. As access to public spaces is limited, this creates a coercive effect on the decision making for these people and is an attempt by the government to tilt the scales of personal and individual medical choice in their preferred direction.

As a legal charity, we have a long track record litigating on behalf of individuals whose rights have been violated by government overreach. It is our strong preference not to litigate, and we believe the needs of individuals like [REDACTED] and [REDACTED] can be accommodated by an amendment to the Vaccine Passport Policy. **However, we are prepared to litigate if the government of British Columbia fails to make an accommodation for individuals who cannot be vaccinated for medical or religious reasons.**

We hope to hear from you soon and look forward to your response.

Sincerely,

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