

March 26, 2021

Open Letter to Government of Alberta MLAs

Dear Minister,

I am writing to express my outrage over the oppressive actions that have been and continue to be taken by our government, and my disappointment that you and so many others seem to be going along, without question or independent thought. It seems that you are placing blind trust in the media and medical officials and ignoring or disregarding any opposing evidence. While I used to believe that we could trust the media and the medical officials, over the past months it has become increasingly clear that we can not do so – we must do our own research, listen to a multitude of experts, examine the evidence, and come to our own conclusions. The appointed health officials are not following the science, nor are they providing any evidence for the recommendations that they make, and they seem to be hiding from the public, never discussing or providing information on how they have come to their conclusions. As a mom with extensive education in science, and particularly relevant experience in Emergency Systems Management during my Ph.D. program at the University of Alberta, I believe we must question, debate openly, and determine whether the recommended measures are warranted, consider what benefits they may provide and, perhaps even more critically, what (short and long-term) harms they may cause. For example, children's developing immune systems require exposure to microorganisms (such as bacteria and viruses), in order to properly grow and function, and thus prolonged use of masks and chemical hand sanitizers may be particularly deleterious to their health. This, combined with the strong evidence that children are at extremely low risk of this disease and are very unlikely to transmit the virus (with particularly low risk of transmission from children to adults), makes it almost impossible to comprehend why we would be forcing these interventions on them. And as time goes on, knowing that they have been suffering unnecessarily from these restrictions for months^{1,2}, it is unconscionable that we are not re-evaluating and changing course.

It is important to seek out and listen to health and scientific experts beyond those currently being funded by government, and especially to those with dissenting views, in order to gain perspective. We must do a risk-based analysis of any recommended intervention, and look at multiple measures assessing various aspects of health for different subpopulations, to provide a balanced approach that considers the whole picture. If Alberta Health was actually interested in the health of Albertans, they would be considering a wide range of health measures and outcomes, instead of narrowly focusing on only one pathogen/disease that has harmful effects on only a small portion of the population. They would be considering multiple ways to improve the health outcomes for those individuals who are seriously affected by that one pathogen/disease (such as preventative and early treatments, improving the ventilation systems in LTC homes, ensuring that LTC workers do not need to work at multiple locations and making sure protocols and supports are in place to ensure that they do not go to work sick, etc.). They would be particularly concerned about children's health, and they would include measures of the physical and mental health impacts on children/youth for any intervention they were considering. They would be looking at a wide range of measures of the impacts (to all citizens) of restrictions, including negative impacts such as the loss of livelihoods, disrupted and sub-standard education, loss of social support systems, impacts of delayed surgeries and diagnoses, impacts on mental health, eating disorders, drug overdoses, suicides, homicides, child abuse, domestic violence, declines in health due to lack of access to exercise facilities, organized sports, or support groups and counselling services, and many others. They would, at the very least, require evidence of safety before mandating a medical intervention that, according to their own research, is not even effective³. They would not be propagating fear and divisiveness, or forcing isolation of healthy individuals, all of which are all incredibly harmful to health. They would talk about why hospitalizations are increasing, despite the fact that new hospitalizations are not⁴, and how restrictions could possibly impact those things that are apparently increasing the length of the hospital stay for Covid patients. Additionally, the person at the head of the scientific advisory group (the one advising the government response to covid-19) would not be quietly collaborating with another group that is pushing out misinformation in the mainstream media and criticizing the government response.⁵ Finally, they would be publicising (and making easy to find) the evidence on which they were basing their decisions – they would not be censoring this information. The fact that I was censored and blocked from the 'YourAlberta (Government of

Alberta)' Facebook page for posting a link in a comment to the correspondence that I have had with Alberta Health, speaks volumes about their intentions.

Alberta Health is not acting like a public health agency concerned about the health of their citizens, they are acting like a drug company that is concerned about only one thing – the sales of its product. They are not doing what is in the best interests of overall public health, they are doing what is in the best interests of the pharmaceutical companies. As soon as one narrative no longer produces the required levels of fear to promote the product, they switch to a new narrative. It started with 'deaths, deaths, deaths...' and then moved on to 'cases, cases, cases...' and then 'hospitalizations, hospitalizations, hospitalizations...' and now 'variants, variants, variants'. Few of their words – “we are all in this together”, “just a little while longer”, “new normal”, “once we have vaccinated a sufficient portion of the population”, “exponential growth”, “more deadly variants” – are based in facts or reality, rather they are part of a massive ‘messaging’ (advertising) campaign with only one goal: to sell as many vaccines as possible.

The science does not support lockdowns, the data does not show any significant impact in Alberta⁶, and they are causing widespread harm that may continue to affect the population for many years to come. Nevertheless, disregarding all of that for a moment, even if there were a benefit to lockdowns, now that the most at-risk population has been vaccinated, and there is very little risk to the remaining public with this virus, there is absolutely no reason to even suggest that we continue with any of these measures. We are more than a year into this ‘pandemic’ and just over 3% of the population of our province has been infected and of those, less than 5% have required hospitalization. We can not continue indefinitely with these unsafe, unscientific, and in many ways counterproductive (to the goal of improving health) public health orders that are adversely affecting the lives of so many – for the benefit of who? Those who have already been vaccinated and thus are already protected from the disease? It does not pass even a basic logic test.

When a former provincial CMOH (Dr. Richard Schabas⁶), very much a vaccine supporter, posts this picture (right) to his personal Facebook page, it is clear that things have gotten way out of control.

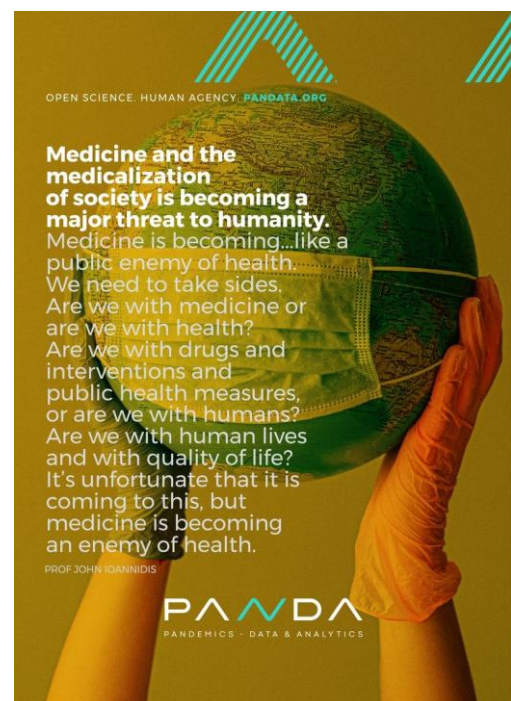
If you are interested in looking past the agenda of the pharmaceutical companies and want a different perspective – one that focuses on the health and wellbeing of the population – I suggest that you seek out, and start to listen to, some of the countless doctors and experts that are speaking out against the narrative and advocating for a balanced response.

Some examples (with links to sources in the endnotes):

Dr. Richard Schabas (former Medical Officer of Health for Ontario) “*We used to live in a world that put children first. Now they're an afterthought. Collateral damage in our fear-driven response to Covid. Lockdown is scarring a generation for no real purpose. Fight back against the fear! Let's get back to a world that cares about kids.*”⁷ “*We will be paying for lockdown – in lives and dollars for decades to come.*”⁸

Dr. Ari Joffe (pediatric infectious diseases specialist at the Stollery Children’s Hospital and Clinical Professor in the Department of Pediatrics at University of Alberta) “*Emerging data has shown a staggering amount of so-called ‘collateral damage’ due to the lockdowns.*”⁹

David Redman (retired lieutenant-colonel of the Canadian Armed Forces, and former head of Emergency Management Alberta) “*The long-term impact of our response will be felt for years in societal breakdown, mental health problems and the increasing prevalence of other diseases.*”¹⁰



Dr. Stephen Malthouse, Dr. Patrick Phillips, Dr. Caroline Turek, Dr. Neda Amani, Dr. Dorle Kneifel, Dr. Bill Code (members of the Canada Health Alliance - a group of Canadian medical doctors, nurses and other healthcare practitioners from across Canada with the common goal “to protect freedom of choice and bodily autonomy through informed consent”)¹¹ Video: “Top Reasons Not to be Afraid of Covid”¹²

Dr. Scott Jensen “*The effects of these lockdowns, masking our children, isolating them, etc. may very well last far beyond when our political leaders anticipated.*”¹³ “*On masking, blank face, and the babies who lost some of their human interaction because of these policies.*”¹⁴

Dr. Neil Rau (infectious diseases specialist and medical microbiologist at Halton Healthcare and Humber River hospitals and assistant professor at the University of Toronto), Dr. Nicole Le Saux (infectious diseases specialist and professor at the University of Ottawa), Dr. Joan Robinson (pediatric infectious diseases specialist at Stollery Children’s Hospital in Edmonton and professor at the University of Alberta): “*Once the number of hospitalizations goes down to a manageable threshold, the economic and social harms of continuing the restrictions outweigh the benefits, even if the number of non-hospitalized cases continues to wax and wane.*”¹⁵

Robert F Kennedy Jr. (Children’s Health Defense) “*The following is list of studies and articles on the effectiveness of the use of lockdowns and their relationship to virus control.*”¹⁶

The FLCCC (Frontline Covid19 Critical Care Alliance¹⁷) “*Dr. Pierre Kory testifies to Senate Committee about ivermectin, Dec. 8, 2020*”¹⁸

Mary Beth Pfeiffer (award winning investigative journalist) “*I interviewed a top Yale researcher and oncologist, who has decided to put himself out there to make this statement: There is a cheap, effective, extremely safe treatment for COVID, he says, and it’s called ivermectin. I thank him for his courage. Only a small sliver of the populace knows this because our public health officials won’t acknowledge it. I blame a system driven by pharmaceutical money and invested in vaccines and new, expensive, on-patent drugs. Thousands of people would be alive today if we had started using ivermectin months ago.*”^{19, 20}

Dr. Martin Kulldorff (biostatistician, epidemiologist, and professor of medicine at Harvard University), Dr. Sunetra Gupta (epidemiologist, and professor at Oxford University), Dr. Jay Bhattacharya (epidemiologist, health economist, public health policy expert, and professor at Stanford University Medical School) – Authors of the Great Barrington Declaration²¹ “*The Declaration was written from a global public health and humanitarian perspective, with special concerns about how the current COVID-19 strategies are forcing our children, the working class and the poor to carry the heaviest burden. The response to the pandemic in many countries around the world, focused on lockdowns, contact tracing and isolation, imposes enormous unnecessary health costs on people. In the long run, it will lead to higher COVID and non-COVID mortality than the focused protection plan we call for in the Declaration.*”²² “*The International evidence and American evidence is clear. The lockdowns have not stopped the spread of the disease in any measurable way*” Roundtable discussion.²³

These doctors and experts are speaking out against lockdowns (and the censorship of other alternatives), despite having nothing to gain and a lot to lose, because they believe they have a moral obligation, they believe steadfastly in the “do no harm” principle, and they know that the harms of lockdowns far outweigh the benefits. It is time that we listen to these experts. I am asking you to stand up and fight for what is right. Many are Canadian and I believe would be happy to speak to you about the potential harms and benefits of lockdowns.

I have been a long time supporter of the NDP and have always (in the past) voted for candidates on the left, but as this insanity continues, my vote is up for grabs and the main criteria that I will use to determine my choice is which party/candidate is most likely to stand up in the face of growing pressures from powerful special interest groups (Big Pharma, Big Chem, Big Tech, Big Food, ...) to protect individual rights and freedoms. I know that there are many others like me, and we all want representatives who will fight for us. Of particular concern to me, as both a scientist and someone who works with children who have been injured by pharmaceutical products, are the rights/freedoms of medical choice and bodily autonomy.

Thank you,

Susan Budge, Ph.D.

- ¹ <https://www.thestar.com/news/gta/2020/12/13/4-million-cries-for-help-calls-to-kids-help-phone-soar-amid-pandemic.html>
- ² <https://www.aier.org/article/masking-children-tragic-unscientific-and-damaging/>
- ³ <https://maskingtruthca.files.wordpress.com/2021/03/reply-to-alberta-health.pdf>, (www.maskingtruth.ca/correspondence)
- ⁴ <https://www.alberta.ca/stats/covid-19-alberta-statistics.htm#severe-outcomes>

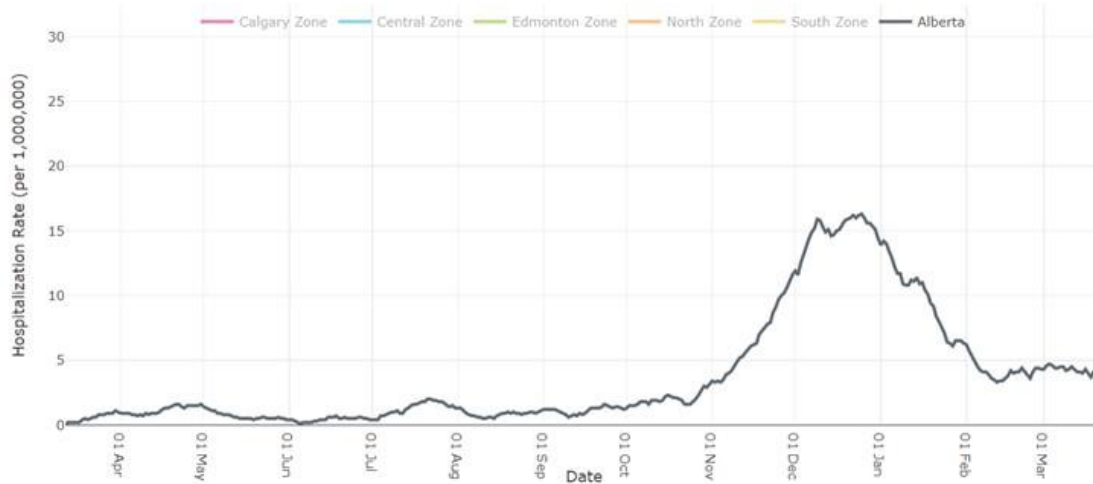


Figure 13: Rate of new hospitalizations (7-day rolling average, average of current day and previous 6 days) by admission date in Alberta and by zone

- ⁵ "I am part of a physician group in Edmonton that has been writing and synthesizing information for the public - these will all be in the newspaper in a week ... I'll post chunks here over the next while as well. The link for the whole thing is [SCPC COVID Myths — ZMSA \(albertazmsa.com\)](http://SCPC COVID Myths — ZMSA (albertazmsa.com))" - <https://www.facebook.com/LMSaxson> (her Facebook page actually reads like a series of paid ads)
- ⁶ <https://www.alberta.ca/stats/covid-19-alberta-statistics.htm#total-cases>

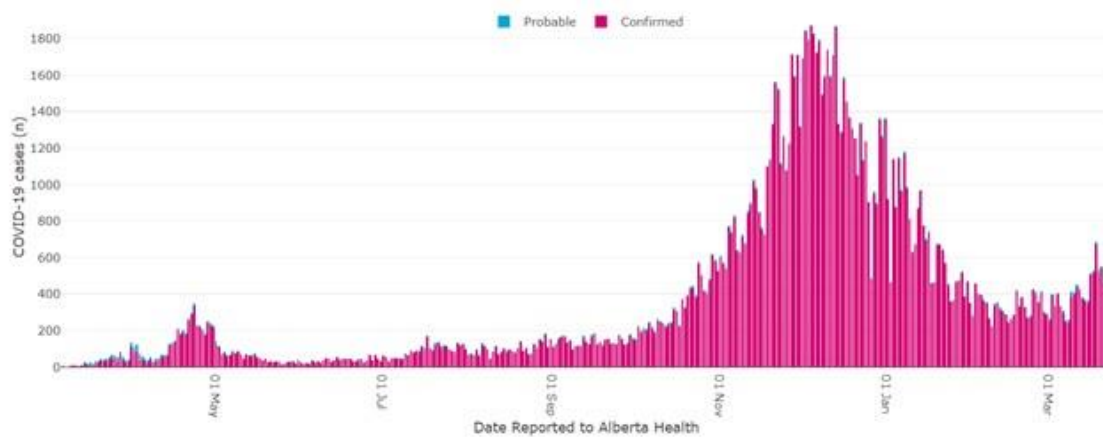


Figure 6: COVID-19 cases in Alberta by day and case status. Probable cases include cases where the lab confirmation is pending. Data included up to end of day March 23, 2021.

Other than holidays, the only major blips in this graph appear to be one or two day spikes, right around the announcement of restrictions, followed by one or two day dips and then a return to the regular curve – more indicative of staff working overtime to get cases recorded than any impact of restrictions (which would be expected to appear 7-10 days later and then be sustained rather than a return to the original curve). Cases were already declining before the Dec 13 restrictions and if you looked at a 7 day average for this curve (or at a 'weekly cases' curve) to control for the variations in reporting dates and daily fluctuations in the data, I am confident that it would look very smooth, unaffected completely by any restrictions, with the only abnormalities near Dec 25 and Jan 1.

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- ⁷ <https://www.facebook.com/richard.schabas>
 - ⁸ <https://nationalpost.com/news/canada/ontario-lockdown-not-supported-by-strong-science-says-former-chief-medical-officer-of-health>
 - ⁹ <https://torontosun.com/opinion/columnists/canadian-experts-research-finds-lockdown-harms-are-10-times-greater-than-benefits>
 - ¹⁰ <https://c2cjournal.ca/2020/12/every-store-and-school-should-be-open-confronting-the-pandemic-with-confidence/>
 - ¹¹ <https://www.canadahealthalliance.org/>
 - ¹² <https://www.bitchute.com/video/nQgg0BxXfZ4f/>
 - ¹³ <https://www.facebook.com/DrScottJensen>
 - ¹⁴ https://fb.watch/4tb_z5XTbY/
 - ¹⁵ <https://nationalpost.com/opinion/opinion-as-vaccines-roll-out-politicians-must-establish-a-clear-path-to-easing-lockdowns>
 - ¹⁶ <https://childrenshealthdefense.org/protecting-our-future/lockdowns/>
 - ¹⁷ <http://Covid19CriticalCare.com/>
 - ¹⁸ <https://www.facebook.com/100363048333463/videos/1037505076738845>
 - ¹⁹ <https://www.facebook.com/marybethpf>
 - ²⁰ <https://trialsitenews.com/author/marybeth/>
 - ²¹ <https://gbdeclaration.org/>
 - ²² <https://www.facebook.com/GreatBarringtonDeclaration>
 - ²³ <https://loom.ly/Vl7fDys>