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19 Major Inconsistencies with COVID-19 Narrative

Continuation from Canada-Wide Declarations of Emergency

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The following article is for general information only, and should not be construed as legal or medical advice.

In addition to the fact that [every single Emergency Declaration in Canada is illegitimate](#), we found, *oddly enough*, 19 major inconsistencies that do not support the COVID-19 narrative. It is essential that you understand these evidence-based factors as they fall on the heels of all the [illegitimate emergency declarations](#). They are vital pieces of the puzzle which will help you easily understand that all of these *evidence-based inconsistencies* simply don't hold up the covid-19 narrative.

19 major inconsistencies that do NOT support COVID-19 Narrative:

- #1 COVID-19 virus has NOT been isolated! - VIDEO
- #2 COVID-19 deaths Combined into one Grand Total – Slight of Hand
- #3 Unethical Classification of COVID-19 Deaths
- #4 Is Anyone Dying from the Flu Anymore?
- #5 Introducing “All-Cause Mortality” – VIDEO
- #6 ASYMPTOMATIC – Deemed Not Contagious by WHO – VIDEO
- #7 Irrelevancy of Testing Positive for COVID-19
- #8 Shifting focus from Deaths to Cases
- #9 COVID-19 “Vaccines” are NOT Mandatory, Experimental and Ineffective – 2 VIDEOS
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- #16 Emergency Powers Shifted from EMCPA to Reopening Ontario Act – Slight of Hand
- #18 2nd Ontario provincial Declaration of Emergency in 2021 – Turning up the Heat
- #19 3rd Ontario provincial Declaration of Emergency in 2021 – Full Rolling Boil!

Summary of Questioning the Major Inconsistencies



#1 – COVID-19 Virus has NOT been Isolated

Christine Massey, Canadian researcher and bio-statistician, has been filing Freedom of Information requests to public health institutions around the world, asking one simple question “*has the virus been isolated?*”

To date she has confirmed evidence from [141 health/science institutions globally](#) who all failed to cite even 1 record of “SARS-COV-2” purification, by anyone, anywhere, ever. Of that that list, [41 Canadian Institutions](#) also confirm that there is NO evidence of viral isolation.

This is alarming because the entire planet has been locked-down because of this non-existent virus.

Please watch this latest informative video of Christine as she discusses this important subject - [Brighteon](#)

Additionally, Dr. Derek Knauss, a clinical scientist and immunologist-virologist at a southern California laboratory, says he and colleagues from 7 universities are **suing the CDC for massive fraud**. The reason: **not one** of the 1,500 samples of people who tested “positive”, could find Covid-19. All people were simply found to have Influenza A, and to a lesser extent, Influenza B.

- Watch his brief video talking about this: <https://www.bitchute.com/video/AnckYhOZMgU7/>, and
- Read April 18, 2021 articles about this: <https://greatreject.org/laboratories-cant-find-covid-19-in-positive-tests/>

If the virus has not been isolated, then what exactly are they finding in those PCR “tests” for which people are testing positive? More importantly, how can they create a vaccine if they have not isolated the virus?

#2 – COVID-19 Deaths Combined into one Grand Total – Slight of Hand

Fast forward to our monthly update on December 15, 2021, the government is [claiming there were *29,994 COVID-19 related deaths in Canada](#) and considering our unchanged population of nearly 38,000,000, this would represent **0.07%** of the population who have died [(29,994 / 38,000,000)*100]. Wait a second! **There is a fundamental problem with the death toll. Do you see where?**

***All COVID-19 deaths are being lumped into one Grand Total**

***Important distinction** - the provincial and [federal government are continually counting COVID-19 related deaths](#) by **combining two flu seasons and combining two years**; it is unethical to present the number of deaths this way for the following reasons:

- **the government’s tally on COVID-19 related deaths should have reset at zero on January 1, 2021 and again on January 1, 2022**
- **by not resetting their counter to zero each year is not only misleading**, but this gives the false perception there are more deaths than are truly being accounted for **by year**
 - why is this important to know?
 - because you need to compare [apples to apples](#) in order to make a determination of significance
 - you simply cannot keep the death toll running; there needs to be a fundamental cut off date so that you can measure its affects; to not have one is misleading and unethical reporting
- Statistics Canada has confirmed that they record their statistics on an [annual basis](#), from January 1 to December 31

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- As Statistics Canada is the sole source of approved statistical reporting in Canada, Stand Up Canada will provide same statistical reporting by year; to do so otherwise, would be misleading and unethical
- **For the year 2020: January 1, 2020 to December 31, 2020**, there were
 - **15,651** COVID-19 related deaths in **Canada**, equivalent to **0.04%** of Canada's population; and
- **For the year 2021: January 1, 2021 to December 15, 2021**, there were
 - **14,343** COVID-19 related deaths in **Canada**, equivalent to **0.04%** of Canada's population; and

There are just so many inconsistencies with this covid-19 narrative, that we decided to list the remainder on a separate page called "[Declaration of Emergencies – 19 Major Inconsistencies with COVID-19 Narrative](#)". Some times too much information on one page can dilute the absolute significance that these emergency orders were not valid.

#3 - Unethical Classification of COVID-19 Deaths

In addition to the way the government is **unethically** tallying up the COVID-19 related death toll, were you aware of how COVID-19 deaths have been classified? According to [Statistics Canada, Canadian Vital Statistics – Death database](#), *The cause of death variable in the **death database is classified according to the World Health Organization (WHO) "International Statistical Classification of Diseases and Related Health Problems"***.

So, we looked up how the WHO classifies COVID-19 deaths since they are being referred to as the source of authority on classifying deaths in Canada.

According to their "[International Guidelines for Certification and Classification \(Coding\) of COVID-19 as Cause of Death](#)":

- 2. DEFINITION FOR DEATHS DUE TO COVID-19 - A death due to COVID-19 is defined for surveillance purposes as a **death resulting from a clinically compatible illness**, in a **probable** or confirmed COVID-19 case, unless there is a clear alternative cause of death that cannot be related to COVID disease (e.g. trauma). There should be no period of complete recovery from COVID-19 between illness and death. **A death due to COVID-19 may not be attributed to another disease (e.g. cancer) and should be counted independently of pre-existing conditions** that are suspected of triggering a severe course of COVID-19.
- 3. GUIDELINES FOR CERTIFYING COVID-19 AS A CAUSE OF DEATH - In view of COVID-19 it is important to record and report deaths due to COVID-19 in a uniform way. A- RECORDING COVID-19 ON THE MEDICAL CERTIFICATE OF CAUSE OF DEATH COVID-19 should be recorded on the medical certificate of cause of death for ALL decedents where the disease caused, **or is assumed to have caused, or contributed to death**.

In essence, anyone who died from a primary cause of death, like heart attacks, Alzheimer's, suicide, cancer – their death record was changed to COVID-19 **IF** they had tested positive or showed symptoms, including assumed to have COVID-19. *Does that seem ethical to you?*

Want more proof of how the deaths in Ontario are overinflated? According to the Ontario.ca website, their death toll is based on "[Deaths are determined by using the outcome field in iPHIS, CORES, CCMtool or The COD. Any case marked "Fatal" is included in the deaths data. Deaths are included whether or not COVID-19 was determined to be a contributing or underlying cause of death as indicated in the iPHIS field "Type of Death". IS THIS ETHICAL???](#)

The number of COVID-19 related deaths are overinflated, as evidenced from the WHO's classification system the government is using. If you removed the unethical classifications, just how many people truly died "from" COVID-19?



Would it be comparable to how many people died “from” the flu each year? Does this make you wonder about the flu? If so, please read further below...

#4 - Is Anyone Dying from the Flu Anymore?

The latest data on Statistics Canada is only for [2019](#) which reported that 6,893 people died from influenza and pneumonia (respiratory disease/the flu). The [2018](#) statistics were higher, reporting that 8,511 people died from same cause of death. Why is the death count for the flu going down when it went up on average each year by around 1,200? Could it be due to the unethical classifications of deaths? Our answer is simply, YES.

[The Government of Canada’s Influenza Weekly Reports](#) clearly states that the flu starts to take a rapid decline around end of March 2020. On one of their last weekly reports, from September to October, they report “*no influenza detections and no influenza activity was reported across Canada in weeks 39 to 40*”. Is no one dying from the flu anymore? Just COVID-19? Don’t you find it odd that the flu is suddenly disappearing? Something people have died from every year **without fail** since the beginning of time. *Six in one, half-dozen in the other, as the saying goes...*

5 - Introducing “All-Cause Mortality”

Do you know what this is? When you understand the vital significance of “all-cause mortality”, you will realize that this is the **ONLY** number to be concerned about. This means the total number of deaths, for all causes in a given period. All deaths, from all causes are added up into one total number for a given period of time. This number is then measured against the previous years all-cause mortality total and from the same time frame. You need to compare these two numbers to determine if there are more deaths now than last year.

When a Canadian researcher did this analysis in 2020, he found that this number had not changed as compared from this year to last! Why is this significant? Because if the all-cause mortality number has NOT gone up, it means that there are **NO** new diseases killing anyone. The data does not lie. This is the only way to scientifically know if there is a new disease killing people. We were astonished to understand this fact.

Incidentally, when you start classifying deaths by “cause of death”, it then becomes political. A death is a death, regardless of how someone died. When you start classifying deaths it then becomes very hard to know just how many people are dying from a new disease. So, let’s forget about the unethical classification of COVID-19 deaths for a moment. If **LESS** people are dying from heart disease or cancer now (because their deaths have been classified as COVID-19,) and we have a **NEW** number of deaths attributed to COVID-19, **BUT** the overall number of all-cause mortality is the **SAME** – what does this tell you? Its basic math.

Here is an informative [video presentation](#) of all-cause mortality by Denis Rancourt, researcher of the Ontario Civil Liberties Association, displaying graphs of this data. Mr. Rancourt does a fantastic job of explaining all-cause mortality. It’s less than 20 minutes long, so we highly recommend everyone watch this.



#6 - World Health Organization (WHO) declare ASYMPTOMATIC People NOT Contagious

Did you know that the World Health Organization (WHO) retracted their position on asymptomatic people? They now declare they are NOT contagious! But the damage has already been done. Many people around the world, including Canadians, do not know this information.

Why the government never talks about our natural immune system, our [immune response to COVID-19](#) is completely irresponsible and reckless. Our bodies (our immune system) are designed to fight off viruses! Why the government never talks about the 99.9% recovery rate is now becoming criminal negligence.

#7 – Irrelevancy of Testing Positive for COVID-19

But WAIT! What about ALL of the people who are testing positive?

This is totally irrelevant. Why? Because we have a 99.9% recovery rate. The only people who will die with virus related complications, like the flu, are people with very compromised immune systems. Their immune system is already very weak and another hit to it is too much for the body to take. Thus, they die “with” the virus, not from it. The mass number of people testing positive is ONLY another fear tactic! The provincial and territorial governments are using testing as justification for the continuation of the states of emergencies and unconstitutional measures.

#8 – Shifting Focus from Deaths to Cases

Ok, so now we have been hearing for over a year now that it’s about cases.

We guess they have to focus on something to justify the lockdown as the death count is relative to a typical flu season.

Cases, hmm? Guess the mask is not working.

Cases, hmm? Guess the ~~1st vaccine~~, ~~2nd vaccine~~, 3rd booster shot is not working.

#9 – COVID-19 “Vaccines” are NOT Mandatory, Experimental and Ineffective

There are three major inconsistencies/issues surrounding these COVID-19 “Vaccines” in Canada and throughout the world.

1 – Forced vaccination in Canada is Unconstitutional:

Mandatory COVID-19 “vaccination” is being forced onto employees in Canada. Vaccinate or terminate. If you do not know already, [vaccination in Canada is voluntary](#) [chose language; scroll to page 3] because of our Canadian Constitution. Therefore, to make it mandatory for employment or participation in society now makes those measures



unconstitutional. To know your rights in this capacity, please visit our page called [Your Rights to Refuse Mandatory Vaccination](#).

2 – These are NOT “Vaccines” until Experimental Trials End:

All of the COVID-19 injections are all still in experimental trials until 2023:

- [Moderna ends Nov 22, 2022](#)
- [Johnson & Johnson’s Janssen ends Jan 2, 2023](#)
- [AstraZeneca ends Feb 14, 2023](#)
- [Pfizer ends May 2, 2023](#)

As these are all in Phase III experimental trials, they cannot be called “vaccines” in the traditional sense because of this very reason. They need to be referred to as what they are, which are experimental biological agents until the trials are over and safety and efficacy have been determined.

The reason all medical treatments have a 3rd Phase, is so that they can test on a select group of individuals for safety and efficacy. Once Phase III has been completed, and it has been determined that these biological agents are safe and efficient, only then can they be referred to as “vaccines” and administered to the general population – and on a voluntary basis.

To call these experimental biological agents “vaccines” is extremely misleading and unethical because it gives the impression that they are safe and effective. This is not true at all. No one will know this until the trials are done in 2023.

In addition, these injections contain a brand-new technology known as [mRNA](#), which has never ever been used before or approved for human use. No one has any idea of the effect they will have on humans as it has NEVER been done before. That is why these experimental biological agents need to be tested in a select group, *not the entire population of a country*.

Mass Vaccination is Not a Select Group!

On May 28, 2021 a [New Zealand High Court 23 ruling](#) where the judge deemed it "reasonably arguable" that the limited-use provision granted for the vaccine rollout under section 23 of the Medicines Act was "problematic", as this was meant to encompass a limited number of patients, and arguably not the whole population.

Essentially what this court ruling means is that medical experimental trials can only be carried out on a select number of people and that by logic, the entire population cannot be considered a select group.

Therefore, the entire population of Canada cannot be considered a “select group” for these experimental trials. It is immoral and unethical to subject an entire country to an experimental biological agent.

3. These “vaccines” are Ineffective

How can we say this? Because in the true sense of what a vaccine is supposed to do, they are supposed to prevent the spread of a disease. These “vaccines” do not promise to stop the spread of COVID-19; they do not promise that you will still not catch COVID-19.



Insisting the entire population of Canada become vaccinated, not once, but twice (during the experimental trials of these biological agents) within 14 days of each other, and to now include booster shots *on top* of these two injections (the sole purpose is to help with the efficiency of these vaccines because their effectiveness wanes) – tells you that these “vaccines” are ineffective.

The fact that people are still wearing a mask AFTER they have been fully vaccinated (once, twice, booster shots), tells you that these “vaccines” are not effective.

The fact that people who are fully vaccinated are still getting COVID-19, tells you that these “vaccines” are not effective.

Either these “vaccines” work, or they don’t. The evidence is in that they do not work.

Summary

We understand fully how fear is playing a major role in people’s lives. We all want to get back to normal and we will do just about anything to have that. People are either consumed with fear or consumed with being leery of the whole situation. Fear is what is leading people to make fundamental and irrational decisions to rush head on into an experimental medication. They just want to get their lives back. We all do. But using coercion or fear is not the way to do this because the ramifications of injecting yourself or your children’s tiny bodies with experimental biological agents cannot be undone.

Please watch this short 6-minute video where Dr. Tam openly admits that these “vaccines” are in Phase III – and that they are supposed to be conducted on a “smaller number of people” to test for safety and efficacy. This bears repeating: There is no select group that is testing these “vaccines” to determine if they are SAFE or EFFECTIVE. **They are being tested right now by everyone on the entire planet which is unethical, unless you have knowingly and voluntarily consented to this testing.**

Thank goodness we now we have a court ruling which states that these roll-outs should not be done on an entire country – that they should be properly conducted on a select group.

- [Vaccine may not be a 'silver bullet' to end COVID-19 pandemic warns Tam - YouTube](#)

Finally, please watch this informative talk given by America’s Frontline Doctors who present so much evidence on this subject. There are many excerpts from medical and scientific experts around the world shown on this video – all of whom are giving people clear warning of the dangers of injecting oneself with an experimental, unknown and brand-new technology that has never been used on humans before. Ever.

If doctors and nurses are willing to risk everything by losing their medical license to bring you this information, *what does that tell you?*

#10 – Useless PCR Test and Portugal Court Ruling

First of all, the name is misleading. It is not a “test”. The late Kary Mullis, inventor of Polymerase Chain Reaction (PCR) in 1985, did so as a research tool. The PCR is not a test. It is an amplification technique which is great for research, that’s it. It is a research tool designed to find genetic material. [It should not be used for diagnosis of a disease](#) as it is too sensitive. It does not point to infections and therefore, anything deemed “positive” in terms of finding someone infected with COVID-19 is a mis-diagnosis and [useless](#).



Further, it was designed for 25 cycles. Remember this is an “amplification” technique. Think of it this way – this is identical to increasing the scale on a print job if you have something with small print and you would like to read it with a larger font. That’s what this PCR test does. We know now that hospitals are ramping up cycles to 37 - 45 (increasing the zoom) to find genetic material. *You can find anything if you zoom in enough!* The increase in cycles (or amplification) gives a 50-95% false positive error rate. All these “cases”, false-positive or not, are used as continual justification to keep us all locked down, to strip away our fundamental rights and freedoms under our *Canadian Charter of Rights and Freedoms*.

November 11, 2020: Portugal (Europe) Court Ruling

Lisbon Court of Appeal ruled that the PCR test “*is unable to determine, beyond reasonable doubt, that a positive result corresponds, in fact, to the infection of a person by the SARS-CoV-2 virus*”. Most importantly, the judges decided that a **single positive PCR test cannot be used as an effective diagnosis of infection**. The judges referred to the following publication: Surkova, E., Nikolayevskyy, V., & Drobniowski, F. (2020). False-positive COVID-19 results: hidden problems and costs. *The Lancet Respiratory Medicine*, 8(12), 1167–1168. doi.org/10.1016/S2213-2600(20)30453-7
Fulltext: [www.thelancet.com/journals/lanres/article/PIIS2213-2600\(20\)30453-7/fulltext](http://www.thelancet.com/journals/lanres/article/PIIS2213-2600(20)30453-7/fulltext)

CDC No Longer Recommends Using PCR – After December 31, 2021:

In a vaguely written notice, the [CDC is no longer recommending PCR testing after December 31, 2021](#) – without any indication as to why. They are now recommending [other various diagnostic methods](#) .

However, if we go back to the #1 COVID-19 Inconsistency – that [the virus has NOT been isolated](#), **what are they finding that is making a diagnosis of this virus, when this virus has been proven to not exist?** That is the real question! There is so much deception that it is hard to keep track of the lies. Either there is science to back this up, or there isn’t?

#11 - No-Test Order for Ontario Teachers – 50% False-Positive Rate

In July 2020, Public Health Physician Dr. Yaffe explains the No-Test Order for Ontario Teachers. She admits to a 50% false-positive rate for covid tests – short video clip [HERE](#).

If Public Health is admitting that these tests yield such a high false-positive rate, why on earth would they be telling people to use them as they are totally unreliable?

#12 – Emergency Plans Were Not Followed

Retired Lieutenant Colonel David Redman, former Head of Emergency Management Alberta, speaks about how none of the emergency plans were followed – *because none of the Emergency Management Organizations were consulted*. He has written to all 13 Premier’s with no response back and speaks throughout Canada, highlighting the importance of how the provinces should have responded this this pandemic.



- Pandemics happen continuously
- Emergency Management is the foundation responses to all emergencies
- Pandemics are public emergencies, NOT public **health** emergencies

He gives a full presentation, with slides and provides URL addresses from the Canadian government. He is the co-founder of www.pandemicalternative.org, a valuable resource website.

<https://www.youtube.com/watch?v=cKGr5Ks-euM&t=754s>

#13 - Declarations of Emergencies based on Inaccurate Predictive Basis

We now know that all the provinces and territories made their respective Declarations of Emergency based on an [international predictive model](#) from Professor Neil Ferguson of Imperial College London UK on March 16, 2020. His report warned that **tens of millions would die** in a pandemic that was compared to the Spanish flu, the deadliest epidemic in modern times. Two days later, the US-Canada border closed to 'non-essential' travel, and one week after that, Prime Minister Trudeau announced an \$82 BILLION aid package to address the massive job losses expected from the lockdowns.

Predictive vs Reality

Ferguson projected that, unmitigated, **COVID-19 would kill 326,000 people in Canada in 2020**. That would be **0.86% of Canada's population** [(326,000 / 37,855,621)*100]. As of December 31, 2020, there were **15,651** COVID-19 related deaths in Canada or **0.04%**, and **4,576** in Ontario or **0.03%**. We don't know about you, but that is a VAST difference and one that can no longer be ignored.

Predictive vs Actual COVID related deaths in 2020 = BIG difference

- **Predicted:** 326,000 = **0.86%** of population
- **Actual:** 15,651 = 0.04% of population

#14 - Ontario's Command Table – Problem with Modelling Predictions

The Ontario government is now using modelling from their Command Table – a group of unidentified individuals whose projections dictate the lives of Ontarians in every sense. These modelling projections are consistently over-inflated, with the worse projection having been made in the fall 2020. It warned that if Ontario maintained Michigan's case trajectory, by the end of October 2020, we would have over 250 patients in ICU. Although Ontario maintained Michigan's case trajectory, the actual number of ICU patients on October 31st was 73 or 3.5 times LESS than predicted.

The most recent Command Table projection, which prompted this second provincial emergency in January 2021, warns that "[The latest modelling data shows that Ontario is in a crisis and, with the current trends, our hospital ICUs will be overwhelmed in a few short weeks with unthinkable consequences](#)," said Premier Ford. Will these "predictions" be wrong again, Mr. Ford?



#15 - Counting the Continual Extensions of the Emergency in ONTARIO

So, let's say that we would call the FIRST Declaration of Emergency as an act of "good faith". That our provincial governments were acting in the best interest of Canadians with the information they had at hand during that time. Heck, we could even go so far as to say they were still acting in good faith for the SECOND and *maybe* even the THIRD extensions of the Emergency. But what about the FOURTH, FIFTH and SIXTH and now with continual lockdown for one year at a time now?

• 1 st 7.0.7 (1)	14 days only	Mar 17-30/20
• 2 nd 7.0.7 (2)	1 further extension 14 days only	Mar 31-Apr 13/20
• 3 rd 7.0.7 (3)	additional periods no more than 28 days	Apr 14-May 11/20
• 4 th 7.0.7 (3)	additional periods no more than 28 days	May 12-Jun 8/20
• 5 th 7.0.7 (3)	additional periods no more than 28 days	Jun 9-Jul 6/20
• 6 th 7.0.7 (3)	14 days this time	Jul 7-20/20

What about the **second Declaration of Emergency** made on January 12, 2021? What about the **third Declaration of Emergency** made on April 7, 2021?

#16 - When it is all going to end?

Good question. Are you wondering like us, how long this can go on for? Seems like the powers shifted from the Premier to the Lieutenant Governor in Council (LGC) (*and you wonder why most Canadians are confused with this stuff!!!*) under section 7.0.7 Termination of Emergency.

Turns out that under this section that the LGC holds all the cards now. The LGC under section 7.0.7 (1) "*an emergency declared under section 7.0.1 (by the Premier of Ontario), is terminated at the end of the 14th day following its declaration UNLESS the LGC by order declares it to be terminated at an earlier date.*"

According to section 7.0.7 (4) "*If there is a resolution before the Assembly to extend the period of the emergency, the declaration of emergency shall continue until the resolution is voted on.*" Huh? Who is the "Assembly"? They are the MPP's who you elect and who sit in the Ontario House of Commons.

Seems that the Assembly may have powers to END the declaration of emergency because according to section 7.0.9 (1) "*Despite section 7.0.7, the Assembly may by resolution **disallow the declaration of emergency under section 7.0.1** (made by the Premier) or the extension of emergency.*" Maybe give your MPP a phone call if you want the declaration of emergency to end. Seems they DO have more power than they may have been telling their constituents.

#17 - Emergency Powers Shifted from EMCPA to Reopening Ontario Act – Slight of Hand

The extensions of emergency were passed from the EMCPA to the NEW **Reopening Ontario Act** (or Bill 195) that came into force on July 21, 2020. In case you didn't know the significance of this, it gives the provincial government extraordinary powers to **keep Ontarians in a state of emergency for one year at a time** under section 8.(2) of the Reopening Ontario Act (rather than approving every 28 days under the EMCPA). How can we possibly REOPEN Ontario if we are continually in a state of emergency for one year at a time now? Was anyone paying attention to this when it was being voted on? Did your MPP fully disclose these extraordinary powers under this new Bill to you? At some point the



declaration of emergency must end. ***The expressed understanding of an emergency is that it is temporary.*** These continual extensions of emergency give NO sight in end to the “temporary” emergency.

#18 - 2nd provincial Declaration of Emergency in 2021 – Turning up the Heat

Are you wondering why the province declared a [second provincial emergency in January 2021](#) under the *Emergency Management and Civil Protection Act* (EMCPA)? Most people don't understand the difference between the first provincial emergency and the Reopening Ontario Act.

The emergency powers under the EMCPA can only go so far and they went to their maximum duration which ended on July 20, 2020. Then the Ontario government introduced the new Reopening Ontario Act effective July 21, 2020 and the purpose of that was to continue the existing orders under the EMCPA for up to a year at a time. The keyword here is “existing”.

The Ontario government declared a new state of emergency on January 12, 2021 so that they can now introduce [NEW measures](#). What do you suppose these will be? Will it have anything to do with the roll out of the [COVID-19 vaccines](#) and possible removal of medical freedom rights, including [involuntary removal and detention at quarantine facilities](#)?

- [Vaccine Choice Canada has excellent source material on COVID-19 vaccines](#) - MUST READ! They are a trusted source in Canada for vaccines. You need to have INFORMED CONSENT before you take these vaccines (including any medical treatment actually). **Please do your own research before you take any action regarding vaccines.**

#19 - 3rd provincial Emergency Declaration in 2021 – Full Rolling Boil!

Are you even curious as to why the province declared a third provincial emergency in April 2021? Could it be due to even more severe and restrictive regulations that were announced, like mandatory vaccinations, continual booster shots and now vaccination passports which equates to 24/7 digital surveillance?

Do you see a pattern of how our rights are slowly being taken away?

Summary of Questioning the Major Inconsistencies

Do you see a pattern of how our rights are slowly being taken away?

The measures become more and more restrictive; trying to convince everyone that we will get our lives back if we do this, or if we do that. The goal post keeps moving.

We have complied by closing down schools and businesses - *when are we getting our lives back?*

We have complied by masking and vaccination - *when are we getting our lives back?*

We have complied by not seeing our family and friends - *when are we getting our lives back?*

When will everyone stop wearing a mask?



- if you are fully “vaccinated”, why do we still need to wear a mask?

When will everyone be asked to stop getting booster shots?

- how many booster shots will we need, and to what end?

When will be free to travel throughout Canada and beyond our borders and back?

- do the vaccines work or not?

If the vaccines work, then it's all over. We get our lives back.

BUT...they don't. The COVID-19 "vaccines" are not effective.

So, its either that the vaccines clearly don't work, or that the virus does not exist. You cannot have it both ways! Which one is it? Or is it both?

WE NEED TO SEE THE WRITING ON THE WALL!

Do you think you can survive another second, third or fourth wave of forced business closures? Again, you need to ask yourself if any of these overwhelming abuses of authority, violations to our *Canadian Charter of Rights and Freedoms*, coupled with the BILLIONS of Canadian tax-payer dollars spent on “COVID-19 measures” – is this really justified with only 15,651 COVID-19 related deaths in Canada for 2020 and **14,343** COVID-19 related deaths in 2021, out of a population of nearly 38,000,000?

This is completely illogical.

How Do You Boil a Frog?

With the latest revisions made under Stage 3 of the Reopening Ontario Act, in respect of mandatory vaccination and now mandatory proof of vaccination... *which are extremely dire with serious implications*, are you starting to see the whole “*how do you boil a frog*” analogy?

- Put a frog in a pot of cold water and slowly turn up the heat... [**stay at home orders**]
- The frog will not notice that the water is getting warmer as he is getting used to it... [**masks**]
- By the time he notices it is too hot, it is too late... [**mandatory vaccination / mandatory vaccination passports = 24 hr digital surveillance**]

The Slow Erosion of Our Rights and Freedoms

The slow removal of our rights and freedoms since March 2020 has left many people like the unsuspecting frog.

- We complied when the government said it would take *two weeks to flatten the curve*.
- We complied when they were told that masks were mandatory.



- We complied to incessant testing – even paying for it!!
- We complied to not leaving our homes, our provinces and our beautiful country.
- We have even complied with mandatory vaccination and some people don't have a problem "showing their papers" like Nazi Germany, to prove they have been vaccinated.

But at what point will *enough be enough*? What's your line in the sand?

Pop Quiz on History

Q. Do you know how many people Hitler killed during his reign over Nazi Germany?

A. Zero. He never killed one single person. Everyone else did it for him. They were *just following orders*.

Do You Know Your Rights are being Violated?

This is not a question of intelligence, but of awareness.

Many Canadians do not know they have rights, let alone how the COVID-19 measures are violating these rights. That's where Stand Up Canada comes in.

MOST CANADIANS DO NOT KNOW...

- ♥ their own **medical information is private** and that **no one has the right to ask** them about that - *except their licensed medical doctor*
- ? there are federal and provincial **laws that protect their privacy**
- ♥ **they are violating someone else's privacy rights** by asking about their private medical information
- ♥ **they are discriminating against another human being** if they refuse to serve them because of that person's medical information - *which is supposed to be private and confidential to them*
- ? hand sanitizers, masks, testing and **vaccines for COVID-19** are all medical treatments / procedures that **require their "informed consent"**
- ? **what "informed consent" means** - and that they are **allowed to say no**
- ? there are Canadian and International **laws that protect their "informed consent"** - and that these laws derived from the Nuremberg Code / Nuremberg Trials which held those responsible for *Crimes Against Humanity* during Nazi rule
- ? **no one has the right to ask them for their ID** - *except a Police Officer, and that there are exceptions to that*
- ♥ **they own their body** - and that **no one has the right to tell them what to put on it or in it**

Did you know you have these rights? How do you feel knowing that they are violated?



OUR MORAL DUTY ...

Not just as Canadians, but as Human Beings

Now that you have been presented with this information, what will you do about it? Where is your moral compass?

Keeping your eyes closed, deliberately keeping yourself in a state of denial can only last for so long. We get that - denial is a *vital survival technique*. But if kept in that state forever, it will cause harm to yourself and others.

There is an expression that needs to be heard “Evil happens when good people do nothing”.

Canadians, without a doubt, are the most beloved people on the planet! Hands down. But, if we turn a blind eye to what is happening to our fellow citizens, our family, friends and neighbours – we become complicit and are now part of the problem.

Kind of like the good [Samaritan law](#) that some US States have - if you are aware that harm is happening to someone else and you do nothing, you're just as guilty as the perpetrator because you did nothing to stop it AND you let it happen.

In closing, in case you were not aware, to say that “[I was only following orders](#)” is no longer a defence in the court. This actually originated from the Nuremberg Trials coming out of World War II. Society held those responsible for their part in the unspeakable *Crimes Against Humanity* committed upon millions of Jewish people - even those who said they were *just following orders*.

Please don't be afraid to stand up for yourself and others. You are STRONGER than you've been taught to believe!

We believe that knowledge is *potential power*. But **knowledge has no power without action**. And so, our purpose has been fulfilled by giving you this knowledge... the rest is up to you.

So now that you have this knowledge, what are you going to do with it?

