

Court File No: CV-21-00673636-0000

**ONTARIO
SUPERIOR COURT OF JUSTICE**

B E T W E E N:

**CANADIAN FRONTLINE NURSES, SARAH CHOUJOUNIAN, KRISTEN NAGLE,
and KRISTAL PITTER**

**Plaintiffs
(Responding Parties)**

- and -

**CANADIAN NURSES ASSOCIATION,
TIM GUEST, MICHAEL VILLENEUVE, TOGETHER NEWS INC.
o/a COMOXVALLEY.NEWS and o/a VANISLE.NEWS, and JOHN DOE**

**Defendants
(Moving Parties)**

**JOINT SUPPLEMENTARY MOTION RECORD
(Transcripts of Cross-Examinations)
VOLUME 1 of 3**

Date: August 10, 2022

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Court File No.: CV-21-00673636-0000

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SUPERIOR COURT OF JUSTICE

B E T W E E N:

CANADIAN FRONTLINE NURSES
SARAH CHOUJOUNIAN, KRISTEN NAGLE,
and KRISTAL PITTER

Plaintiffs

- and -

CANADIAN NURSES ASSOCIATION
TIM GUEST, MICHAEL VILLENEUVE, TOGETHER NEWS INC.
o/a COMOXVALLEY NEWS and o/a VANISEL NEWS,
and JOHN DOE

Defendants

MICHAEL VILLENEUVE - 2

This is the Cross-Examination of MICHAEL
VILLENEUVE, a Defendant herein, on his affidavit sworn
June 24, 2022 taken via Zoom with the offices of Network
Reporting & Mediation, on the 21st day of July, 2022.

A P P E A R A N C E S:

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and MICHAEL VILLENEUVE)

CHRISTINE E. JOHNSON

Solicitor for the Defendants

(TOGETHER NEWS INC. and JOHN DOE)

ALSO PRESENT:

TIM GUEST

Observing/Defendant

RACHEL BROUILLETTE Manager/Canadian Nurses Association

CARLY DOWNS

Student Observing with Mr. Dearden

MICHAEL VILLENEUVE - 3

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MICHAEL VILLENEUVE - 5

1 --- UPON COMMENCING AT 9:59 A.M.

2 MICHAEL VILLENEUVE, Affirmed

3 EXAMINATION BY MR BOISSONNEAU-LEHNER:

4 1. Q. So, good morning again, Mr. Villeneuve.
5 You've been sworn, correct?

6 A. Correct.

7 2. Q. Do you have your affidavit that was
8 sworn for this motion handy in front of you?

9 A. I have it on my -- I can pull it up on
10 my screen.

11 3. Q. Okay, good. Have you reviewed that
12 affidavit before your cross-examination today?

13 A. Yes, I have.

14 4. Q. Is there anything that you'd like to
15 correct in that affidavit? Like, in reviewing it, did
16 you notice anything that's inaccurate or not true that
17 you'd want to correct before I start asking questions?

18 A. No, I believe it's correct in -- in my
19 memory.

20 5. Q. Fair enough. So, as of September 9th,
21 2021, you were the CEO of the Canadian Nurses
22 Association, correct?

23 A. Yes, that's correct.

24 6. Q. You're now retired from that role,
25 correct?

MICHAEL VILLENEUVE - 6

1 A. Yes, correct.

2 7. Q. All right. You spoke with Ms. Camille
3 Bains from the Canadian Press on September 2nd, 2021.
4 Is that right?

5 A. Yes, that's correct.

6 8. Q. She contacted you about an article she
7 was writing about anti-vax protests that had taken
8 place outside of hospitals on September 1st, 2021,
9 right?

10 A. Yes, that's correct.

11 9. Q. If you'd like to follow along, I'm just
12 going to refer you to Paragraph 28 of your affidavit.
13 I have some questions about that. So, at Paragraph 28
14 of your affidavit you deposed that, "Through my
15 conversation with Bains and through my own research, I
16 became aware that members of Canadian Frontline Nurses
17 had organized and/or played a role in organizing the
18 hospital protests." Can you tell me what you learned
19 about Canadian Frontline Nurses' role from your
20 conversation with Ms. Bains?

21 A. As I recall, she -- she was interested
22 to learn more about what -- what was going in -- in
23 the protests and she had herself read something about
24 or learned something about Canadian Frontline Nurses
25 and shared that they were, confirmed really what I'd

MICHAEL VILLENEUVE - 7

1 heard from others, that they were organizing these
2 protests and that she had witnessed one of the
3 protests in Vancouver.

4 THE REPORTER: Sorry, Mr. Lehner, can I just
5 interrupt? I have a Rachel Brouillette wanting to be
6 admitted. I'm not sure who she is and can I admit
7 her?

8 MR BOISSONNEAU-LEHNER: I'm not sure who she
9 is either, but I'm sure somebody in this room does.

10 THE REPORTER: Does anybody know what her
11 role is?

12 MR. DEARDEN: Yes, she's with CNA.

13 THE REPORTER: Oh, okay. Thank you. I'll
14 admit her.

15 MR. DEARDEN: Thank you.

16 THE REPORTER: What's her role at CNA?

17 MR. DEARDEN: I will confirm that for you,
18 Madam Reporter.

19 THE REPORTER: Okay, thank you.

20 BY MR BOISSONNEAU-LEHNER:

21 10. Q. So, you had understood before your
22 conversation with Ms. Bains that Canadian Frontline
23 Nurses had a role to play in organizing the September
24 1st protest, correct?

25 A. Yes, that's correct. We were, as you

MICHAEL VILLENEUVE - 8

1 can imagine, rapidly pulling information together in
2 the hours after and around the protest and we -- we
3 had -- I was aware of the existence of the group.

4 11. Q. So, in that same Paragraph 28 and
5 speaking about gathering information, you talk about
6 doing your own research with respect to Canadian
7 Frontline Nurses either organizing or playing a role
8 in organizing the protest outside of the hospital.
9 Can you tell me what that research involved?

10 A. Yes, so we -- we -- it was typical to
11 come at a problem like this from on multiple fronts.
12 So, one thing I did was look at their web site to see,
13 you know, again, what -- that were they -- what were
14 they saying there about any of these issues. I -- I
15 looked at traditional media which is also something we
16 do. We do a lot of constant scanning of, you know,
17 the major news outlets across the country. That's a
18 routine part of our business. So, we have feeds that
19 come in every day, for example, that highlight
20 articles of current issues. So, I looked through
21 those. I spoke with colleagues across the country
22 just in a general way to, you know, does anyone know
23 about any of this, and it was -- it was still all
24 pretty new at the time. And I looked in social media.
25 I just looked at, you know, for example, what was

MICHAEL VILLENEUVE - 9

1 coming in, being said CNA and so on. So, I came at it
2 from those different approaches.

3 12. Q. Okay. When you said you looked at
4 Canadian Frontline Nurses' web site and what they were
5 saying about these issues, can you clarify what you
6 mean by these issues? What issues were you looking
7 at?

8 A. The issue at the protests, around which
9 the protests were -- were focused, which was public --
10 wanting to object to mandated public health measures
11 such as masks, vaccines and so on. So, I was simply
12 looking at what -- were they saying that and then were
13 they saying join us, you know, at a -- at a rally or
14 anything else like that.

15 13. Q. At Paragraph 31 of your affidavit you
16 deposed that, "Through my research I became aware that
17 the Plaintiffs identified as nurses and were spreading
18 misinformation about the pandemic, public health
19 measures and COVID-19 vaccines." So, my first
20 questions is: your reference to the Plaintiffs there,
21 I just want to confirm, by that you mean Canadian
22 Frontline Nurses, Sarah Choujounian, Kristen Nagle and
23 Kristal Pitter, correct?

24 A. Correct.

25 14. Q. All four of them? Okay. So, can you

MICHAEL VILLENEUVE - 10

1 tell me what research you undertook to determine that
2 these individuals and the Canadian Frontline Nurses
3 organization identified as nurses, please?

4 A. They said they were.

5 15. Q. Did you do any further research? Like,
6 where did they say that they were? On their web site
7 or ---

8 A. Yes, they introduced themselves right
9 on their web site as -- you know, one -- one is
10 registered practical nurse, one a registered nurse,
11 one a nurse practitioner. And, you know, one, for
12 example, said she had been fired from her nursing job.
13 So, you know, they were very clearly identifying
14 themselves as regulated nurses.

15 16. Q. Is it your understanding that they are
16 not regulated nurses?

17 A. No, it is my understanding that they
18 are.

19 17. Q. Okay. What research did you undertake
20 to reach your conclusion that the Plaintiffs were
21 spreading misinformation about the pandemic, public
22 health measures and COVID-19 vaccines?

23 A. There -- so, again, I would say, sir,
24 that we -- we came at it from multiple fronts. One
25 was on their web site. They stated very clearly some

MICHAEL VILLENEUVE - 11

1 -- some of the -- what's the right word, some of the -
2 - the views that we -- we were concerned about. For
3 example, that masks don't work or are defective, you
4 shouldn't take the vaccine, those sorts of things.
5 And then that, of course -- maybe not of course, but
6 that was reflected in other places such as in
7 newspaper articles, nearly all of them said that. But
8 I suppose for me the -- the biggest issue that gave me
9 pause was they were very clearly inviting nurses,
10 doctors, the public and others to come join us to
11 protest these public health measures. So, they just -
12 - they said directly, "We're gathering to -- to speak
13 up against them."

14 18. Q. To speak out against who?

15 A. Against the public health measures.

16 19. Q. Oh. So, you were concerned that they
17 were inviting nurses and doctors to participate in
18 those protests and in those sentiments, correct?

19 A. Yes.

20 20. Q. Safe to say, you did not agree with
21 their statements about the nature of the pandemic?

22 A. Correct.

23 21. Q. You didn't agree with their statements
24 with respect to public health measures?

25 A. Correct.

MICHAEL VILLENEUVE - 12

1 22. Q. You didn't agree with their statements
2 about COVID-19 vaccines, correct?

3 A. Correct.

4 23. Q. You were frustrated that the Plaintiffs
5 views on the pandemic, public health measures and
6 COVID-19 vaccines did not align with those of Canadian
7 Nurses Association, right?

8 A. I was frustrated -- we were frustrated
9 that they didn't align with the -- with the views and
10 values of nursing and the Canadian Nurses Association
11 is -- is a -- is a, not the only one, but certainly a
12 professional voice of the profession -- excuse me, a
13 voice of the profession. So, it wasn't that they had
14 to agree or not with CNA, it's what are the agreed
15 upon principles by which we operate the nursing
16 profession.

17 24. Q. Who dictates those agreed upon
18 principles?

19 A. It's -- it's an interesting question
20 because it -- it -- it's an evolving process over
21 years and decades. So, what happens in the country is
22 that groups like the Canadian Nurses Association and
23 its counterparts, let's say for example we use the
24 nurse practitioner, put forward the -- the -- the
25 notion that we're going to have a nurse practitioner

MICHAEL VILLENEUVE - 13

1 role in the country and there's going to have to be
2 standards and so on. So, professional associations
3 line up to decide what that needs to look like.
4 Regulators, regulatory colleges then need to line up
5 to say, "Okay, we're going to licence Michael to do
6 these things." The education system has to line up to
7 -- to create those conditions.

8 So, it's -- it's a shared responsibility of
9 the profession, and I think because the Canadian
10 Nurses Association is really the steward of
11 professional nursing in Canada, we often have a lead
12 hand in moving these things along or standing up and
13 speaking for them.

14 25. Q. On September 4th of 2021, you sent an
15 e-mail and you expressed that you thought you needed
16 to make a loud clear statement about ridiculous claims
17 of that Frontline Nurses group. Do you remember
18 sending that e-mail on September 4th, 2021?

19 A. Yes, I do.

20 26. Q. I'll actually ask you to pull it up on
21 your end. I believe it's found at Exhibit 29 of your
22 affidavit.

23 A. Thank you. Just please give me one
24 second. I'm flipping around the screen here. Okay,
25 sir, I'm there.

MICHAEL VILLENEUVE - 14

1 27. Q. Okay. So, that same e-mail, it
2 references private messages about the Frontline Nurses
3 group and in parentheses it says Tim include con (ph)
4 one. What were these messages? Like, what did these
5 messages contain?

6 A. That was meant, by the way, to be Tim
7 was included on one.

8 28. Q. Oh.

9 A. Just so you know, it's just my typo at
10 the time. We had within hours, really, of the events
11 that were happening in, of course, different time
12 zones across the country on the first, have a -- just
13 a real large number of calls from nurses, messages
14 saying -- basically saying, "You've got to say
15 something. What's -- what's going on out there? It's
16 inappropriate. They're -- they're nurses," which is
17 the crux of the issue. It's not if they're members of
18 the general public. That's something else. But
19 they're standing up as nurses saying things against
20 everything we've all talked about for the last, it was
21 then a year and a half, to try to protect public
22 health and -- and public safety. And you, CNA, you've
23 got to say something. And, of course, CNA is -- I'm
24 connected as -- as are some of our officers, with a
25 number of people across the country. But certainly I

MICHAEL VILLENEUVE - 15

1 -- nurse leaders have no hesitancy to pick up a phone
2 and call me and say -- say, you know, you've got to
3 say something on any particular issue. So, it really
4 came to us really on a number of fronts and very
5 quickly.

6 29. Q. These messages, were you sending
7 responses to these messages that you're referencing,
8 or were they just incoming messages?

9 A. I may have responded to some that -- I
10 -- I really don't recall. It's not unusual, however,
11 that we don't respond to everything like that because
12 often there -- it's just the sheer volume. Pardon me,
13 sorry. Sheer volume. But certainly, you know, when
14 saw the -- the feedback or heard in my ear and saw the
15 statements from other organizations, we -- I then
16 said, "You know, it's -- it's probably time that we
17 say something."

18 MR BOISSONNEAU-LEHNER: Could you check your
19 messages between September 4th and September 9th and
20 produce anything that you sent out in response to
21 these messages, please? It's probably more a question
22 for your counsel. Mr. Dearden, can I get an
23 undertaking to produce just the outgoing messages from
24 this witness, Mr. Villeneuve, from September 4th to
25 September 9th --

MICHAEL VILLENEUVE - 16

1 MR. DEARDEN: 2021.

2 MR BOISSONNEAU-LEHNER: -- 2021, yes.

3 MR. DEARDEN: So, first of all, the exhibit
4 you've been referring to is not 29, it's 28, for the
5 record.

6 MR BOISSONNEAU-LEHNER: Oh, so it is. My
7 apologies.

8 MR. DEARDEN: It's okay. I will ask Mr.
9 Villeneuve to check to see if he replied to any of the
10 private messages that he's referring to in the
11 September 4th, 2021 e-mail between September 4 and end
12 of day September 9, 2021. If he finds anything, we
13 will send it to you.

14 --- UNDERTAKING NO. 1

15 BY MR BOISSONNEAU-LEHNER:

16 30. Q. Wonderful, thank you. So, you felt
17 that the nurses, the members of Canadian Frontline
18 Nurses were dangerous and that you and the Canadian
19 Nurses Association needed to speak up, right?

20 A. Correct.

21 31. Q. This e-mail that we've been looking at,
22 which again, Exhibit 28, references that you've been
23 in touch with Silas, S-I-L-A-S. Who is Silas?

24 A. It's Linda Silas and I just -- because
25 we've been colleagues for many years I always call her

MICHAEL VILLENEUVE - 17

1 Silas. She is the president of the Canadian
2 Federation of Nurses Unions.

3 MR BOISSONNEAU-LEHNER: Could I also ask you
4 to produce the messages that you exchanged with Ms.
5 Silas during the same period, September 4th to
6 September 9th?

7 MR. DEARDEN: Do you recall any messages
8 being exchanged, Mr. Villeneuve, or was this a phone
9 call?

10 THE DEPONENT: It was a phone call. It's
11 really unusual for Linda and I to do much by e-mail
12 unless it's on -- we're going to do a shared statement
13 or something. I -- I certainly phoned her.

14 BY MR BOISSONNEAU-LEHNER:

15 32. Q. Okay. No e-mails that you recall
16 during that period?

17 A. I don't think so.

18 MR BOISSONNEAU-LEHNER: Would you mind
19 double checking and if there is any written
20 correspondence between the two of you during that
21 period would you mind producing them, please?

22 MR. DEARDEN: I'll have Mr. Villeneuve
23 double check to see whether there were any e-mails
24 exchanged with Linda Silas between September 4 and
25 September 9, 2021.

MICHAEL VILLENEUVE - 18

1 --- UNDERTAKING NO. 2

2 BY MR BOISSONNEAU-LEHNER:

3 33. Q. Thank you, Mr. Dearden. I'd like to
4 take you to the next exhibit of your affidavit,
5 Exhibit 29. I don't know if the affidavit that you're
6 looking at is the same as mine, but they're paginated
7 in mine. So, I'm looking at Page 923 of the motion
8 record. Is your similarly paginated, Mr. Villeneuve?

9 A. Yes. So, you're looking at the enough
10 is enough statement itself?

11 34. Q. Correct.

12 A. Yes, I'm there.

13 35. Q. So, this is your first draft of the
14 enough is enough statement that would ultimately be
15 revised and published on September 9th, correct?

16 A. Yes, it is.

17 36. Q. Your original draft seems to take issue
18 with the fact that Canadian Frontline Nurses members
19 are allegedly a faith based group. Do you take issue
20 with those who profess a religious faith, Mr.
21 Villeneuve?

22 MR. DEARDEN: Can you just take him to the
23 paragraph you're referring to, Counsel?

24 BY MR BOISSONNEAU-LEHNER:

25 37. Q. Of course. I think there's two

MICHAEL VILLENEUVE - 19

1 references here. So, in the first paragraph, the
2 second sentence, "A fringe group of faith-based anti-
3 science conspiracy theorists using their nursing
4 titles to represent and unite all nurses." I believe
5 the second reference is in the third paragraph, the
6 first sentence, "Theirs is a world of personal faith
7 and ideology to which they are entitled." So, did you
8 take issue with the fact that Canadian Frontline
9 Nurses profess a religious faith?

10 A. No, the -- the context of the statement
11 is -- has nothing to do with their personal either
12 ideology, because both are there. Some are talking
13 about ideology. At least one talks about faith. And
14 I said right there, "to which they are entitled." So,
15 that's where my mind was. But you can't guide your
16 nursing practice as a regulated nurse in this country
17 based on just what you think in the moment. That's
18 the issue. It's not what they believe personally,
19 it's what they believe when they're working and how
20 they deploy -- not deploy, excuse me, execute their
21 practice.

22 38. Q. So, what did you mean by faith-based?
23 Like, why use the word faith?

24 A. Because one of them specifically says a
25 lot about that in her web -- excuse me, not her web

MICHAEL VILLENEUVE - 20

1 page, her -- the section about her in the -- on their
2 web site, that this is how she's guided, which is
3 fine.

4 39. Q. All right.

5 A. But ---

6 40. Q. So, it's a reference to religious
7 faith?

8 A. By -- that she made, one of the
9 Plaintiffs.

10 41. Q. Okay. If I could take you to the next
11 page, Page 324.

12 A. 924?

13 42. Q. 924. I don't know why I said three.

14 A. No, that's okay.

15 43. Q. At the bottom of this page, Kristal
16 Pitter, Kristen Nagle and Sarah Choujounian are
17 identified. Why are their names there?

18 A. I had, at the time, couldn't remember
19 the individual names and so finally I -- I think in
20 writing it, and I had looked at their web site, I
21 wrote this on a Sunday, I simply went there and wrote
22 them down at the bottom to remember the names. And
23 they, you know, it was never intended that that would
24 -- that names either of the organization or the
25 people, would be part of the statement. It was -- it

MICHAEL VILLENEUVE - 21

1 was a cut and paste that I just didn't take out.

2 44. Q. But the statement is a reference to
3 Kristal Pitter, Kristen Nagle, Sarah Choujounian and
4 to Canadian Frontline Nurses group, right?

5 A. The statement is directed to nurses --

6 45. Q. Yes.

7 A. -- across the country who are choosing
8 a certain set of views which were in direct opposition
9 to -- to the agreed upon public health principle and
10 the Plaintiffs in their organization put themselves
11 forward as leaders in that movement. So, it's
12 intended to be -- it was always intended to be nurses
13 out there speaking this way, for example. So, it's
14 broader than those three people.

15 46. Q. It's not a specific reference to
16 Canadian Frontline Nurses? That's your evidence?

17 A. We -- we spoke all along about how
18 nurses in the country, regulated nurses, must behave
19 in their practice and this was intended, yes, for the
20 people organizing it, but for all the nurses who --
21 they said, we've got lots of people on our side.
22 There were nurses at the rally -- rallies, and -- and,
23 you know, even with signs supporting those views, and
24 us saying no, this is to all of you.

25 47. Q. Your September 4th, 2021 e-mail that we

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1 looked at a few moments ago, when you say you thought
2 you needed to make a loud, clear statement about the
3 ridiculous claims of that Frontline Nurses group,
4 that's a specific reference to Canadian Frontline
5 Nurses, isn't it?

6 A. It is, but my -- my thinking at the
7 time was the issue of the nurses out there. But yes,
8 certainly, they were the -- the face of it. So, that
9 was absolutely in my mind and they said come join us.
10 So, yes, I was thinking about them and the people that
11 joined them.

12 48. Q. Okay. If we could scroll down a few
13 pages to Page 927. So, this is an e-mail that you
14 sent to Tim Guest and others on September 5th of 2021,
15 correct?

16 A. Yes.

17 49. Q. The first sentence of this says, "Once
18 other feedback comes in I'll also check with Megan so
19 that we can't be sued for slander for any reason."
20 So, my first question is: who is Megan?

21 A. Megan Wallace is the main legal counsel
22 for the Canadian Nurses Association.

23 50. Q. Okay. I won't ask any more questions
24 about your interactions with her. But you had some
25 concern that CNA's statement would lead you to be sued

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1 for slander. Isn't that right?

2 A. My concern was we want to condemn the
3 issue and the behaviour, not condemn people. We don't
4 know those people, have no reason to go after them as
5 humans. The -- the behaviour was the problem. I was
6 then concerned -- let's not, you know, we want this to
7 be worded in a way that doesn't look like an attack on
8 individual people that could either hurt them or get
9 us into trouble.

10 51. Q. You weren't checking with Megan because
11 you were worried about being sued for slander because
12 you recognized that your statement was slanderous?
13 That's not the reason why you thought you should check
14 with Megan?

15 MR. DEARDEN: Don't answer that question,
16 Mr. Villeneuve, because your discussions with Megan or
17 your thoughts about what you were going to seek advice
18 from Megan are privileged.

19 --- REFUSAL NO. 1

20 BY MR BOISSONNEAU-LEHNER:

21 52. Q. Were you worried that you were going to
22 be sued for slander as a result of the draft as it
23 existed on Sunday, September 5th, 2021, yes or no?

24 A. I was worried that we generate a final
25 draft that would achieve the aims I just described

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1 which is let's tackle the issue, not the people. That
2 was not the purpose.

3 53. Q. I'd like to jump ahead to Page 957. I
4 believe it's of the same Exhibit that we're looking at
5 now, Exhibit 29.

6 A. Okay, just a second.

7 MR. DEARDEN: It would be Exhibit 30.

8 BY MR BOISSONNEAU-LEHNER:

9 54. Q. Oh, would it be? Sorry. You're right.

10 A. Please bear with me just one sec.

11 55. Q. Yes.

12 A. Is this the one, sir, that starts with
13 the same e-mail about once other feedback comes,
14 that's the page you're on? At the top, to Tim Guest?

15 56. Q. Yes. So, this is an e-mail. I just
16 want to make sure we're looking at the same thing.
17 This is your e-mail to Tim Guest sent Wednesday,
18 September 8th, 2021, correct?

19 A. I -- I don't have one from September
20 8th on my -- on Page 927.

21 MR. DEARDEN: Fifty-seven, right? Fifty-
22 seven.

23 THE DEPONENT: Oh, 57. I'm sorry. Let me
24 just -- I apologize for that.

25 BY MR BOISSONNEAU-LEHNER:

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1 57. Q. It might have been my mix-up.

2 A. No, it's me. All right. Please let me
3 just look at it.

4 58. Q. Yes, of course.

5 A. Okay, I'm -- I'm with you.

6 59. Q. So, we're now looking at an e-mail.

7 The subject line is: statement responding to Frontline
8 Nurses United protest draft. That's the subject line,
9 right?

10 A. Yes, sorry.

11 60. Q. It's an e-mail sent by you on September
12 8th, 2021 to Tim Guest and a number of others.

13 A. Yes, that's to my senior staff, or at
14 the time my staff.

15 MR. DEARDEN: To be really specific, 7:14
16 p.m.

17 BY MR BOISSONNEAU-LEHNER:

18 61. Q. Correct. So, in the last sentence, you
19 state, "I think those people are running into pretty
20 strong backlash, not that it will slow them if the
21 Trump experience teaches anything." So my question
22 is: why did you associate the subjects of your
23 forthcoming publication with the Trump experience?
24 What were you getting at there?

25 A. Oh, simply that he through his

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1 presidency, in my view, marshalled a lot of not very
2 good evidence and did a lot of damage to public
3 health. So, what I was saying was, you know, you can
4 run into -- he ran into a lot of -- of opposition and
5 people disagreeing with him as did the people who were
6 his followers, but it didn't make them change their
7 behaviour. That's what I meant. The Trump experience
8 meaning, you know, if you -- in my mind, if you
9 present the best possible evidence, it doesn't always
10 make any difference in -- in how people choose to
11 behave.

12 62. Q. Okay. So, at the time that you wrote
13 this, you weren't trying to associate Canadian
14 Frontline Nurses or the three nurses, the three other
15 Plaintiffs with being followers of Trump or anything
16 like that?

17 A. No.

18 MR. DEARDEN: No, meaning you were not doing
19 that, not that you're --

20 THE DEPONENT: Right.

21 MR. DEARDEN: -- disagreeing with counsel?

22 BY MR BOISSONNEAU-LEHNER:

23 63. Q. Thanks for that, Mr. Dearden. If I can
24 take you to Pages 628 and 629 of the record, which I
25 believe it is Exhibit 6 to your affidavit. Just let

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1 me know when you're there, please, Mr. Villeneuve.

2 A. I'm there now, Page 628. It starts
3 with concerns from a nurse in Ontario as the subject?

4 64. Q. Correct, yes.

5 A. Yeah, there's where I am.

6 65. Q. So, you received an e-mail from a
7 certain Sofia Lyty nec, L-Y-T-Y-N-E-C --

8 A. Correct.

9 66. Q. -- who had read reports about a protest
10 outside of a British Columbia hospital, right?

11 A. Correct.

12 67. Q. You understood that this was a
13 reference to the protests that were organized on
14 September 1st, 2021, right?

15 A. Yes.

16 68. Q. You responded to Ms. Lyty nec's e-mail
17 on September 9th, 2021?

18 A. Yes, I did at 3:32.

19 69. Q. You advised her, you say specifically,
20 "FYI, at least two of the three nurses leading that
21 tiny group have been fired and at least one is under
22 investigation." This tiny group that you're referring
23 to is Canadian Frontline Nurses, right?

24 A. And their followers.

25 70. Q. The three nurses that you are referring

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1 to in this e-mail are Kristen Nagle, Kristal Pitter
2 and Sarah Choujounian, right?

3 A. Correct.

4 71. Q. The next paragraph reads, "FYI, our
5 statement released today," and then there's a link to
6 the statement that follows. So, you e-mailed that
7 link to Sofia to give her the statement relating to
8 two of the three nurses leading that tiny group that
9 had been fired with at least one under investigation,
10 right?

11 A. Could you please repeat that question?

12 72. Q. Yes, it was ineloquently phrased. So,
13 you e-mailed Ms. Lyty nec a link to the statement that
14 CNA published on September 9th, 2021 in response to
15 her concerns about the protests that were organized on
16 September 1st, 2021, right?

17 A. Yes. She had said that the Frontline
18 Nurses, quote/unquote, leading these protests need to
19 investigated and removed promptly and permanently from
20 the professional colleges, College of Nurses roster,
21 and secondly I -- her last statement was, "I strongly
22 urge CNA to," setting aside the comment about the
23 Prime Minister, "issue a public statement in support
24 of these courageous health leaders who are burning out
25 as they continue to care." So, I was making her aware

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1 that we had just released -- excuse me, I've lost the
2 date. Oh, sorry. I'm sorry. I'm looking at her
3 original note. So, this is Thursday the 9th. That
4 was the day it was released.

5 So, I was just saying to her, we have done
6 what you are suggesting we should have done which is
7 release a statement.

8 73. Q. Okay, thank you. Let's turn to Exhibit
9 1 of your affidavit, Mr. Villeneuve.

10 A. Okay.

11 74. Q. This is a copy of the statement that --
12 if Ms. Lytynech clicked the hyperlink, she would see a
13 statement like this, right, the same statement, the
14 September 9th, 2021 statement?

15 A. She should have.

16 75. Q. Exhibit 1 is a news release by the CNA,
17 correct?

18 A. It -- it's -- it's something we've
19 tussled with in our -- in our terminology at CNA
20 because we -- it's -- it's called a news release, but
21 it's not a formal press release, if that makes sense.
22 It's a statement that's news from CNA.

23 76. Q. Understood. It's entitled, Enough is
24 Enough: Professional Nurses Stand for Science-based
25 Health Care.

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1 A. Correct.

2 77. Q. This is a statement that was co-
3 authored by you on behalf of the Canadian Nurses
4 Association, right?

5 A. Correct.

6 78. Q. I have some questions about a few
7 statements in this enough is enough release
8 publication. So, at the second paragraph of this
9 enough is enough publication, you state, or Canadian
10 Nurses Association states, "The reckless views of a
11 handful of discredited people who identify as nurses
12 have aligned in some cases with angry crowds who are
13 putting public health and safety at risk." So, my
14 first question is: this handful of discredited people
15 who identify as nurses, that's a reference to Canadian
16 Frontlines nurses, right?

17 A. And to the nurses that are members and
18 follow them -- support them, I should say.

19 79. Q. It would include the three nurses that
20 you alluded to in your e-mail to Ms. Sofia Lytynech,
21 namely Sarah Choujounian, Kristal Pitter and Kristen
22 Nagle, right?

23 A. Yes.

24 80. Q. When you say identify as nurses or when
25 the statement says identify as nurses, it's suggesting

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1 that they're not real nurses, right?

2 A. No.

3 81. Q. What did you mean by identify as
4 nurses?

5 A. They -- they identify themselves as
6 nurses, not members of the public or anything else.
7 They said, "We are regulated nurses." So, that's an
8 important -- I mean, that's the difference between if
9 they were laypeople versus people who -- who use the
10 nurse title.

11 82. Q. You're not suggesting that they're not
12 nurses? I just want ---

13 A. Absolutely not, no. They -- they're
14 regulated nurses.

15 83. Q. Just for a moment, we'll come back to
16 this statement, but could you please pull up Exhibit
17 12 of your affidavit, which I think is a Global News
18 article titled, The Ultimate Selfishness: Doctors Grow
19 Frustrated as Anti-vaxxers Protest Hospitals?

20 A. Yes, I have it.

21 84. Q. I believe on Page 698 of the motion
22 record, the second last paragraph there, "However,
23 Villeneuve, a registered nurse, said it's not always
24 clear that those protesting against vaccines and
25 claiming to be nurses on social media, in particular,

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1 are actually part of the profession." So, by
2 September 2nd, you had spoken with the woman who
3 authored this article, right?

4 A. If this is the Camille Bains article,
5 the -- oh, there's no title on it and no author.

6 85. Q. If you would scroll to the next page,
7 you'd agree with me that it's a publication by the
8 Canadian Press?

9 A. I -- I have Globalnews.ca as the title
10 of this. Page 696?

11 86. Q. Yes, Page 696 is where it starts, but
12 if you go down to Page 699, the very last line there.

13 A. Oh yes. I'm sorry, yes, I see that.

14 MR. DEARDEN: What are you guys seeing?

15 MR BOISSONNEAU-LEHNER: Sorry. The last
16 line of Page 699, copyright 2001, the Canadian Press.

17 MR. DEARDEN: Okay, but it's a Globalnews.ca
18 publication.

19 MR BOISSONNEAU-LEHNER: Okay.

20 MR. DEARDEN: It's in the top right hand
21 corner.

22 BY MR BOISSONNEAU-LEHNER:

23 87. Q. So, Mr. Villeneuve, you don't know if
24 this is the article that was published as a result of
25 your discussion with Ms. Camille Bains on September

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1 2nd, 2021?

2 MR. DEARDEN: I'm sorry to step in. Just to
3 clarify, Paragraph 27 of Mr. Villeneuve's affidavit
4 clearly identifies this exhibit as Camille Bains'
5 article. I just want to help everyone out, I think.

6 BY MR BOISSONNEAU-LEHNER:

7 88. Q. Thank you.

8 A. Thank you.

9 89. Q. So, that's accurate, right?

10 A. Correct.

11 90. Q. You testified earlier that by the time
12 that Ms. Bains had contacted you, you were already
13 aware that Canadian Frontline Nurses was involved in
14 organizing the protests on September 1st, 2021, right?

15 A. Correct.

16 91. Q. Yet, you made a statement that it
17 wasn't clear that those claiming to be nurses are
18 actually part of the profession. Why did you make
19 that statement?

20 A. One of the dynamics we run into in our
21 profession in all kinds of settings is that people
22 often say that those are nurses. They may be support
23 workers, they may be environmental staff. You know,
24 they have many different roles. There's many
25 different roles in the hospital and in -- in -- in a

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1 very direct way we often say anybody who isn't a
2 doctor gets called a nurse.

3 So, in any of the work we do, and when
4 people come online, for example, and -- and say
5 things, they -- let's say that they send you an e-mail
6 and they say they're a nurse, "I'm a nurse from
7 Alberta," well, I don't know if you are. So,
8 sometimes there are, and there were in those crowds --
9 excuse me, a -- a reporter said he had approached, I
10 guess the woman had a badge, identified as a
11 registered nurse, so he assumed she is. But other
12 people, you don't know. So, there's -- in -- in any
13 group in -- in any of the work we do and -- and when
14 we hear feedback, we don't always know if they're
15 nurses or the public or members. It -- it's -- it's a
16 bit up in the air. So, it's -- it's -- it's really
17 meant to say we don't know how many health care
18 workers are in a crowd of 100, how many are nurses.
19 It's not clear.

20 92. Q. Okay. But it was clear by September
21 2nd to you, based on your research and your
22 understanding from speaking with Ms. Bains, that
23 Kristen Nagle, Kristal Pitter and Sarah Choujounian
24 were, in fact, nurses, right?

25 A. Well, their -- their being nurses had

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1 nothing to do with Camille Bains. As I had said
2 earlier, we -- I looked, you know, at their web site
3 and so on and they said they were nurses.

4 93. Q. Okay.

5 A. There was never any question they
6 they're regulated nurses.

7 94. Q. It wasn't a question as of September
8 2nd and wasn't a question as of September 9th. That's
9 your evidence, right?

10 A. Correct.

11 95. Q. As far as you're aware, Ms.
12 Choujounian, Ms. Pitter and Ms. Nagle are currently
13 entitled to practice as a nurse without restrictions,
14 right?

15 A. Today or at that time?

16 96. Q. At that time?

17 A. Correct.

18 97. Q. As of today?

19 A. Correct.

20 98. Q. The title of the publication,
21 Professional Nurses Stand for Science-based Health
22 Care, would you agree with me that you are, Canadian
23 Nurses Association is, distinguishing professional
24 nurses from unprofessional nurses, right?

25 A. We're talking about regulated nurses

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1 here, so as a profession --

2 99. Q. Yes.

3 A. -- we stand for science-based health
4 care. We are -- we are the leader of professional
5 nurses in the country. It's the term we use.

6 100. Q. Okay. By contrast, unprofessional
7 nurses are those who you say identify as nurses and
8 align themselves with angry crowds, right?

9 A. We did not in the statement use the
10 word unprofessional. However, I think it's fair to
11 say that that behaviour which flies in the face of
12 accepted, agreed upon standards of behaviour and
13 comportment in nursing are not, in a sense, small P,
14 professional.

15 MR BOISSONNEAU-LEHNER: Thank you.

16 MR. DEARDEN: Counsel, just for the record,
17 the meaning of the words is going to be a decision for
18 the motions judge.

19 BY MR BOISSONNEAU-LEHNER:

20 101. Q. Well, sure. Paragraph 2 of this enough
21 is enough statement, the first sentence, "The reckless
22 views of a handful of discredited people who identify
23 as nurses have aligned in some cases with angry crowds
24 who are putting public health and safety at risk."
25 So, who discredited Kristen Nagle?

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1 A. The nurses to whom we were referring,
2 which is more than one person, are discredited by what
3 they said. So, there is a standard social contract in
4 this country and within nursing around science, how
5 you find it, interpret it, critically analyze it,
6 deploy it in your practice and evaluate it. And those
7 basic steps for how you orchestrate nursing practice,
8 and nursing practice can be teaching like -- like you
9 may do at rally. You may be speaking up, so you're
10 communicating. It may be clinical care. But there's
11 a standard of -- of -- of comportment that we all
12 agree to, a mantle that we take on. So, when you then
13 say, make statements that are completely opposite to
14 the best scientific knowledge in the world, in this
15 case around public health measures, you are -- it's
16 not credible. It's -- it's preposterous. It's not
17 credible. They -- it -- it's discredited by its -- by
18 the statements themselves.

19 102. Q. So, the answer to my question is
20 Kristen Nagle discredited herself?

21 A. Along with everybody else involved.

22 103. Q. Yes, Kristal Pitter discredited
23 herself?

24 A. Along with all the nurses involved.

25 104. Q. Sarah Choujounian discredited herself?

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1 A. Along with all the nurses involved,
2 yes.

3 105. Q. The next sentence, "They have drawn in
4 anti-science, anti-mask, anti-vaccine, anti-public
5 health followers whose beliefs align with theirs."
6 Who are the anti-science followers of Canadian
7 Frontline Nurses?

8 A. No, they -- what we said is they've
9 drawn in followers who -- excuse me, not necessarily
10 that they're direct followers of Frontline Nurses, but
11 that they follow their call to come to rallies. So,
12 this is members of the public. Could be health care
13 workers. It's the people we all saw in all the news -
14 - news articles who responded to, you know, come and
15 join us to protest vaccines, public health measures,
16 masks wearing mandates, all the things that are listed
17 there. "We don't believe in those. Come and join us
18 if you don't believe in them too."

19 106. Q. So, them not believing in mandates
20 makes anyone who follows Canadian Frontline Nurses
21 anti-science?

22 A. No, it's -- there's a collection of
23 comments here: anti-science, anti-mask, anti-vaccine.
24 It's the mix of people and ---

25 107. Q. I'm just asking about the anti-science

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1 people right now.

2 A. Well, it's a question of ideology. You
3 -- yes, you can believe in science and still practice
4 something different. So, as I mentioned earlier, you
5 present evidence to people and they choose to accept
6 it or not. So, if the best evidence says, you know,
7 let's -- let's use vaccines as an example, this works,
8 here's the evidence, people are going to hospital
9 less, they're dying less, and people say, I don't
10 believe it, that's -- then they don't believe in
11 science.

12 108. Q. How did the crowds organized by
13 Canadian Frontline Nurses on September 1st put public
14 health and safety at risk?

15 A. Excuse me. I just want to shrink my
16 screen so I can see you. The reports from across the
17 country in media, particularly ones I recall from BC,
18 Saskatchewan, Manitoba, Ontario, Montreal, but I was
19 really particularly struck by the BC ---

20 109. Q. I'm sorry to cut you off. I just
21 wanted to know how. Your statement says the crowds
22 put public health and safety at risk. I'm not asking
23 why or the source of that right now. I'm asking how
24 the crowds up public health and safety at risk.

25 A. Two major concerns we had. They

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1 gathered. In a time when we were all being told to
2 mask and stay apart, they all gathered together
3 without masks. Very, very dangerous in the time of a
4 global emergency of a communicable and easily
5 communicable disease. Secondly, they were -- it was
6 report widely that they blocked or slowed driveways of
7 hospitals, that patients called and cancelled
8 appointments that they needed because they were
9 worried about going through and they, in one case,
10 slowed an ambulance with a patient who was apparently
11 bleeding heavily according to the paramedics. So,
12 they -- they had an immediate impact on people trying
13 to come and go from health care. But -- and they --
14 they also then gathered at a time when all the common
15 sense said don't gather.

16 110. Q. This reference to this ambulance that
17 was caring somebody who was bleeding heavily and the
18 ambulance was impeded, where was that?

19 A. Can you allow me the time to pull it
20 up?

21 111. Q. Sure.

22 A. Forgive me. I'm trying to find. There
23 was some news articles.

24 112. Q. That's okay. Because I am going to
25 come back to the news articles and what I'm going to

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1 suggest when I do, because I appreciate despite you
2 having reviewed your affidavit, you probably don't
3 have all the news articles committed to memory. I'm
4 going to have some questions about the news articles
5 and what I'm going to propose is when we get to that
6 section, we take a break and you review those news
7 articles. I don't have any problems with you
8 underlining or highlighting things or making notes
9 about them when I get to that series of questions.
10 But I'll return to the ambulance question. So,
11 basically, Canadian Nurses Association, you, in
12 authoring this statement, were relying on reports in
13 the media?

14 A. That was one source.

15 113. Q. What was the other source?

16 A. Colleagues across the country telling
17 us what they were seeing. Nurse leaders saying they
18 had seen it, for example, in their hospital. But
19 certainly, when we -- we were very struck by the
20 reporting by the major news outlets that simply
21 reflected what -- what happened in each place. But
22 there were also statements released, for example, from
23 Saskatchewan Health Authority, I want to say and the
24 Health Authority in -- around Winnipeg condemning the
25 actions, so those pieces were available.

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1 114. Q. So, you relied on the reports of
2 others?

3 A. Yes.

4 115. Q. Did you take any steps to verify the
5 truth of those reports?

6 A. I -- I wouldn't say we circled back to
7 nurse leaders, for example, who is the CEO of a health
8 region. We are not -- excuse me. Not nurse leaders -
9 - leaders of that. We -- they accept their word on
10 these things when this kind of event happens and has
11 been filmed and reported.

12 116. Q. You said that you heard reports from
13 nurses --

14 A. Excuse me.

15 117. Q. -- who had seen what happened. Where
16 is their evidence? How come they haven't provided an
17 affidavit to show what they, themselves, witnessed?

18 MR. DEARDEN: Don't answer that question,
19 Mr. Villeneuve. You have her affidavits, Counsel.

20 MR BOISSONNEAU-LEHNER: Yes.

21 MR. DEARDEN: We have yours.

22 MR BOISSONNEAU-LEHNER: Got it.

23 MR. DEARDEN: That's what the motion will be
24 decided on.

25 --- REFUSAL NO. 2

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1 BY MR BOISSONNEAU-LEHNER:

2 118. Q. Understood. Back to the Enough is
3 Enough statement. You say, "Now the focus is on
4 images of surly mobs happy to stand in front of
5 health-care settings and harass, threaten and even
6 assault health-care workers coming and going in the
7 business of saving lives." I'm going to put it to you
8 that the protests that were organized by Canadian
9 Frontline Nurses on September 1st were peaceful and
10 friendly. You'd agree with that statement?

11 A. No.

12 119. Q. What evidence do you have to support
13 that there was a surly or unfriendly group of people
14 in front of health-care settings?

15 A. Because the people who run them who
16 were cited in numerous, you know, the -- the
17 traditional major media outlets across the country
18 said that was happening. There were films that -- not
19 films. But we could see videos on the news of people
20 yelling. They were out there because they were angry.
21 They were there -- I mean, that's why they went. So,
22 one expects some emotion, but what we heard in several
23 settings, including from CEOs of health regions and so
24 on that were cited was they -- they felt threatened
25 because they were yelled at. They were yelled at if

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1 they -- people were yelled at wearing masks. They
2 were -- they felt intimidated coming and going from
3 work. That's not a happy crowd. So, that was the
4 meaning -- the intent of the meaning when we wrote
5 that.

6 120. Q. Who was yelled at for wearing masks?

7 A. It -- in -- in my recollection from the
8 articles, it was both the public and health care
9 workers.

10 121. Q. Any specific person that can support
11 that they were yelled at? Like, do you have a name of
12 somebody who complained about being yelled at for
13 wearing a mask?

14 A. I can go back and check in the news
15 articles.

16 122. Q. Okay, we will get there. So, what
17 images of surly or unfriendly mobs are you referring
18 to? What are the images that you're referencing?

19 A. The pictures that were -- accompanied
20 the articles around the -- the event itself and the --
21 the video from news outlets showing, you know, crowds
22 in the streets and the yelling and the signs and it
23 was -- it was pretty common coverage right across the
24 country. I -- I don't for a minute believe every
25 second of every rally was like that. But certainly

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1 the tone in -- in the major rallies was one of pretty
2 upset people and other people feeling threatened or
3 scared or intimidated.

4 123. Q. Which major rallies was there yelling
5 and people feeling intimidated based on ---

6 A. BC. BC, Saskatchewan, Ontario,
7 Manitoba. It was quite well documented.

8 124. Q. By news reports?

9 A. Correct.

10 125. Q. I'm going to put it to you know health-
11 care workers were harassed at the protests organized
12 by Canadian Frontline Nurses. Do you agree with that
13 assertion?

14 A. My understanding is that health care
15 workers were harassed, yelled at around masks being on
16 at, at least, some of those protests and they --
17 excuse me. The Canadian Frontline Nurses are the
18 people who invited people to come.

19 126. Q. Your understanding is based on what?
20 Media reports?

21 A. The reports and, as I said earlier, the
22 reports, for example, of hospital leaders who said --
23 who released statements in the -- in the hours are day
24 after saying this is not okay, you know, here's our
25 observations of what happened and we don't -- we won't

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1 stand for it.

2 127. Q. The CNA statement Enough is Enough
3 doesn't reference that there are reports of
4 harassment, right? It just states that health care
5 workers are being harassed, correct?

6 A. Yes. It's -- it's typical, yes. It's
7 typical in -- in writing a statement like this that we
8 don't use references, right? It's not an academic
9 paper, so we -- we make statements in -- when we make
10 a statement, excuse me, we make statements within it
11 without saying where the references came from.

12 128. Q. But you don't even reference that it's
13 reports of harassment. You're just stating that there
14 are angry crowds who are harassing healthcare workers.

15 MR. DEARDEN: Counsel, you can make your
16 argument to the motion judge about what those words
17 complained of mean. But it's not for this witness to
18 be getting into a debate with you about what the CNA
19 statement means.

20 --- REFUSAL NO. 3

21 BY MR. BOISSONNEAU-LEHNER:

22 129. Q. Mr. Villeneuve, what was the nature of
23 the harassment that you're referencing in the Canadian
24 Nurses Association statement of September 9th, 2021?

25 A. Primarily what we heard was people were

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1 yelled at for wearing masks and, you know, sort of, in
2 a sense shamed, I guess, is what we read in some of it
3 for taking part in the mainstream public health
4 activities in the very institutions where -- excuse
5 me. Sorry. Where the protests were being held. We
6 heard, for example, from reports quotes from two
7 different doctors who said they were -- they felt
8 nearly brought to tears or so saddened by what was
9 going on and -- and some colleagues in Toronto told us
10 they even were thinking about how do -- how do they
11 use a different entrance so they don't have to
12 confront the crowd.

13 130. Q. Do you remember offhand where that
14 occurred or allegedly occurred?

15 A. I remember clearly one of the articles
16 was referring to a physician going into work at Mount
17 Sinai in Toronto and I saw one of our colleagues who
18 is a manager in the critical care unit at Toronto
19 General across the street from Mount Sinai making
20 comments about whether they should use different
21 entrances and so on. So, it was clearly getting the
22 attention of healthcare workers that they didn't want
23 to engage in it.

24 131. Q. I put it to you that no healthcare
25 workers were threatened at the protests organized by

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1 Canadian Frontline Nurses. Do you agree or disagree
2 with that statement?

3 A. I think people -- if people say, I felt
4 threatened," then they felt threatened. They felt
5 intimidated. That's -- that's what it means.

6 132. Q. So, people felt threatened but not
7 necessarily threats were made, right?

8 A. That's possible, yes.

9 133. Q. Were there specific threats that you
10 are referencing here in your article of September 9th,
11 2021?

12 A. No. I think we were referring to a
13 general tone of what was happening there.

14 134. Q. It's going to be my clients' evidence
15 that nobody was assaulted by the protesters at the
16 protest organized by Canadian Frontline Nurses on
17 September 1st, 2021. Do you have reason to believe
18 that individuals were assaulted at the protests
19 organized by Canadian Frontline Nurses?

20 A. The report -- the media reports
21 reported that there was an attempt to spit at nurse in
22 BC and there was a similar incident, I believe, it was
23 Manitoba and the -- it was -- so, that's the sort of
24 behaviour we're talking about. It -- it wasn't -- you
25 know, it wasn't, like, a violent hit or something.

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1 But spitting at people is assaultive.

2 135. Q. The spitting, that happened at a
3 protest in Nanaimo, right? The reports of spitting?

4 A. I'm not -- I believe so.

5 136. Q. Are you aware that Canadian Frontline
6 Nurses did not organize a protest in Nanaimo on
7 September 1st, 2021?

8 A. I was not aware then. I am aware now.

9 137. Q. What research did you do prior to
10 publishing this statement to determine which protests
11 were organized by Canadian Frontline Nurses?

12 A. I -- we did not go through city by city
13 and cross-check with what was on the -- the call, in a
14 sense, from the Canadian Frontline Nurses to come and
15 join us. They were making clear that they wanted to
16 champion a national movement, social movement, and
17 come out and join us. And what we saw then evolve or
18 unfold was some many people did that across the
19 country. So, if they came out and said this is --
20 this is what we want to happen on that day across the
21 country and people responded, we had no reason to then
22 go back and -- and cross-check. They had a call to
23 action, people responded and we responded to that.

24 138. Q. Okay. The second last paragraph of the
25 Enough is Enough publication reads, "The public should

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1 be assured that the vast majority of Canada's 448,000
2 regulated nurses are united in their commitment to
3 operate from a stringent code of ethics and they are
4 duty bound to use science, evidence and facts in
5 assessing, planning and evaluating the care they
6 deliver to people across Canada." So, do you have any
7 information or evidence to suggest, let's start with
8 Sarah Choujounian, did not use science, evidence and
9 facts in assessing, planning and evaluating the care
10 that she delivered to patients in her role as a nurse?

11 A. No, I don't.

12 139. Q. Okay. The same question with respect
13 to Kristen Nagle?

14 A. No, I don't.

15 140. Q. Same question with respect to Kristal
16 Pitter?

17 A. No, I don't. May I add a comment?

18 141. Q. No, that's okay.

19 MR. DEARDEN: No. Yes, he can. He can
20 finish his answer. Go ahead Mr. Villeneuve.

21 THE DEPONENT: My comment was -- so I don't
22 have personal evidence of what they did in their daily
23 practice. I don't know any of them. But the fact
24 that they deploy in a very public way a set of
25 science, facts, evidence that flies completely in the

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1 face of what they agree to do when they get licensed.
2 We all get licensed every year and we say here's --
3 we're going to follow the rules. Would give me pause
4 to think about what happens in their practice. Now,
5 one can deliver quite good nursing care and still
6 espouse different values. But you see the patient
7 here is the public. The damage is not to -- to an
8 individual person, maybe, in a clinical setting. This
9 is, like, nurses take care of patients, populations,
10 towns, classrooms, so where -- now they're in front of
11 the public saying we're -- don't listen to all of
12 them, meaning the majority, and the people that we --
13 we registered with. Listen to us because they're
14 lying to you and we -- here's the facts. Therein lies
15 the problem and the facts that we had read by then and
16 it was on their web site that this had happened that
17 they have been fired for their behaviour from their
18 jobs would indicate that because of this behaviour,
19 not for any other reason, fired with cause, I think
20 supports that very concern. I cannot tell you that
21 they delivered A, B or C kind of care to a child in an
22 emergency room, no. I can tell you what the public
23 behaviour was by people who said, "We're nurses," a
24 most respected profession and, "All of them are
25 wrong."

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1 BY MR BOISSONNEAU-LEHNER:

2 142. Q. Thank you. That wasn't my question.

3 But thank you. I'm going to suggest that we take a
4 break. But before we do, I've reached the point where
5 I am going to have some questions with respect to
6 Paragraph 19 of your affidavit where you outline media
7 reports that state that nurses participated under
8 protest --

9 A. Excuse me.

10 MR BOISSONNEAU-LEHNER: -- and then you
11 itemize a list of things that mainstream media
12 reported upon and then those media reports are at
13 Exhibit 5 of your affidavit. So, I'm just going to
14 give you a preview of the questions that I am going
15 to, because what I'd like you to do over the break is
16 review Exhibit 5 of your affidavit and I'm going to
17 have questions about -- I'll just tell you what my
18 questions are going to pertain to. So, Paragraph
19 19(a) of your affidavit, which pertains to mainstream
20 media reports of unfriendly crowds protesting in front
21 of health care settings. I'm also going to ask you
22 questions about (c), mainstream media reports of
23 protesters that made anti-science, anti-mask, anti-
24 vaccination and anti-public health statements. I will
25 ask you about (d), about media reports that harass

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1 health care workers, inhibited their access to
2 hospitals and threatened and assaulted health care
3 works. So, with your counsel's agreement, what I
4 would suggest is maybe we take a 15 minute break to
5 allow Mr. Villeneuve to re-familiarize himself with
6 the evidence that he is deposed to in his Exhibit 5
7 and I have no problem with him taking notes,
8 highlighting. My questions are going to pertain to
9 which statements are you relying upon or which media
10 reports are you relying up in support of these
11 subparagraphs that I've identified, again (a), (c),
12 and (d). Does that sound good?

13 MR. DEARDEN: Well, the break does. I mean,
14 if Mr. Villeneuve will do his best to tell you, you
15 know, page whatever of Exhibit 5 was a media report
16 about unfriendly crowds protesting in front of health
17 care settings, but I mean, in the time we've got, if
18 he happens to miss one, I'm not going to be prevented
19 from arguing in this motion and in our factum if he
20 missed one. Because I'm going to rely on what's in
21 Exhibit 5 and what he says in Paragraph 19. But he'll
22 do his best during the break, Counsel, to try to
23 direct you to specific publications in Exhibit 5 that
24 match Paragraphs 19 (a), (c) and (d).

25 MR BOISSONNEAU-LEHNER: So, this is what I

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1 am happy to do. I'll ask my questions and I'll
2 qualify them with if there's any more statements that
3 have been missed, to undertake to advise me of what
4 those reports are. I won't hold him to if he misses
5 something and subsequently discovers that there is
6 another media report or that he referenced the wrong
7 media report. You can advise me afterwards.

8 MR. DEARDEN: Okay.

9 MR BOISSONNEAU-LEHNER: Okay. So, we shall
10 take a 15 minute break and be back at 11:40 a.m. if
11 that works for everyone.

12 --- OFF THE RECORD (11:25 A.M.) ---

13 --- UPON RESUMING (11:42 A.M.) ---

14 BY MR BOISSONNEAU-LEHNER:

15 143. Q. All right. So, Mr. Villeneuve, as I
16 explained before the break, I want to take you through
17 Paragraph 19 of your affidavit, particularly certain
18 subparagraphs of that. So, the first one I would like
19 to go through is (a), mainstream media reports
20 reported unfriendly crowds protested in front of
21 health care settings. My question is: which
22 mainstream media reports found at Exhibit 5 of your
23 affidavit indicate that the crowds ---

24 A. Give me one second.

25 144. Q. Yes.

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1 A. I'm so sorry. I -- they have been -- I
2 have dogs. Okay. Sorry about that.

3 145. Q. No issues. So, my question is: which
4 mainstream media reports found at Exhibit 5 of your
5 affidavit indicate that the crowds that protested in
6 front of health care settings were unfriendly?

7 A. I'm just scrolling quickly here. So,
8 the first one I would draw your attention to is on
9 page -- the affidavit Page 545 and it's CBC Manitoba
10 with the title Crowd Protesting Vaccine Mandates Cause
11 Chaos -- causes chaos.

12 146. Q. Sorry. Which page?

13 A. Five four five.

14 147. Q. Okay?

15 A. Just -- please bear with me. I just
16 made a couple of notes. So, CBC Manitoba is the --
17 you've asked which media reports, so it was this one.
18 For example, hundreds of people protesting the vaccine
19 mandates swarmed Winnipeg's largest hospital Wednesday
20 afternoon, slowing traffic and some confronting people
21 as they tried to enter, hampering foot traffic into
22 the such and such entrance, impeding vehicles turning
23 into the drop off loop for the rehabilitation and
24 clinic areas. Protests created traffic congestion
25 that obstructed the arrival of ambulances with sirens.

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1 148. Q. So, just for clarity, Mr. Villeneuve,
2 you are now on Page 546.

3 A. Five -- correct. Sorry. Yes. I'll --
4 I'll say that from here on. And then it says
5 eventually led by a woman with a microphone, the group
6 moved away from the entrance. The statement from
7 Shared Health, which is the Regional Health Authority
8 included this statement that patients were
9 aggressively harassed for wearing masks and some
10 cancelled their appointments rather than approach the
11 protesters. Disrespectful to the dedicated health
12 workers working inside. So, that's one.

13 149. Q. Just to be clear, that's one thing that
14 you're relying upon in terms of unfriendly crowds
15 protesting in front of health care settings?

16 A. Yes.

17 150. Q. Okay?

18 A. The next one is on page -- whoops, it's
19 frozen, five four nine.

20 151. Q. Yes.

21 A. It's CBC British Columbia. Starts with
22 a statement about the premier slamming harassment of
23 health care workers and has a picture under it if
24 you're on the right page.

25 152. Q. Yes.

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1 A. Crowds of people opposed to COVID
2 vaccines clogged the streets and demonstrated outside
3 hospitals on Wednesday afternoon. Protesters carried
4 signs with slogans criticizing vaccine passports.
5 Hang on. Let me go. By early evening, one health
6 authority was reporting a physical assault against a
7 health care worker and the CEO said ---

8 153. Q. I'm sorry. What page are you on?

9 A. I'm sorry. Page 550 now. So, just
10 below the picture, so now I'm on 55 -- no, sorry, 550.

11 154. Q. Yes.

12 A. One health authority was reporting a
13 physical assault against a health care worker. The
14 CEO said some of the protests had disrupted people's
15 safe access. Page 551 continues. Members of island
16 health care teams were verbally abused as they came to
17 and left work during these protests and in at least
18 one case, a health care team member was physically
19 assaulted.

20 155. Q. McNeal said in a written statement.
21 Okay.

22 A. Right. I'm going to keep scrolling
23 through them. I'm sorry. I didn't have time to make
24 notes on each one of them, but.

25 MR BOISSONNEAU-LEHNER: You know what? This

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1 is what I propose we do. Because I recognize now that
2 this is going to take a long time and we are limited
3 on time. I'll just ask my questions and I wonder if
4 your counsel can undertake to provide me the answer in
5 writing or better, Mr. Villeneuve, if you can advise
6 your lawyer of your answers to these questions and
7 then he can provide it to me in writing at a later
8 date. So, I'll just ask the questions. Is that
9 acceptable with you, Mr. Dearden?

10 MR. DEARDEN: Depends what the questions
11 are.

12 MR BOISSONNEAU-LEHNER: Okay.

13 MR. DEARDEN: But I think it will be.

14 MR BOISSONNEAU-LEHNER: Okay, so my first
15 question which we started with is: which mainstream
16 media reports found at Exhibit 5 of Mr. Villeneuve's
17 affidavit indicate that the crowds that protested in
18 front of health care settings were unfriendly? Could
19 you please advise me of Mr. Villeneuve's evidence in
20 writing?

21 MR. DEARDEN: I will ask Mr. Villeneuve to
22 identify those media reports and provide you the
23 answer.

24 --- UNDERTAKING NO. 3

25 MR BOISSONNEAU-LEHNER: Once he has done

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1 that, my follow up question which I'm happy to take in
2 writing as well is: did Mr. Villeneuve or did CNA take
3 any steps to verify the truth of those reports?

4 MR. DEARDEN: We'll get you that answer.

5 --- UNDERTAKING NO. 4

6 MR BOISSONNEAU-LEHNER: All right. My next
7 question is: with respect to Paragraph 19(c) of Mr.
8 Villeneuve's affidavit which says, "Mainstream media
9 reports reported some protesters made anti-science,
10 anti-mask, anti-vaccination and anti-public health
11 statements." My question is: which mainstream media
12 reports found at Exhibit 5 to Mr. Villeneuve's
13 affidavit reference anti-science statements?

14 MR. DEARDEN: Mr. Villeneuve will provide an
15 answer to that question.

16 --- UNDERTAKING NO. 5

17 MR BOISSONNEAU-LEHNER: Thank you, Mr.
18 Dearden. My follow up question on that is once the
19 reports are identified, could you confirm whether Mr.
20 Villeneuve or CNA, Canadian Nurses Association, took
21 any steps to verify the truth of those reports?

22 MR. DEARDEN: Mr. Villeneuve will answer
23 that question.

24 --- UNDERTAKING NO. 6

25 MR BOISSONNEAU-LEHNER: Thank you. My next

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1 question or series of questions relates to Paragraph
2 19(d) of Mr. Villeneuve's affidavit. "Some protesters
3 had harassed health care workers, inhibited their
4 access to hospitals and threatened and assaulted
5 health care workers." So, my first question is: which
6 mainstream media reports at Exhibit 5 reference
7 harassment of health care workers?

8 MR. DEARDEN: Mr. Villeneuve will answer
9 that question in writing.

10 --- UNDERTAKING NO. 7

11 MR BOISSONNEAU-LEHNER: Thank you. The
12 follow up question that I would like Mr. Villeneuve's
13 evidence on is: Did he or did Canadian Nurses
14 Association take any steps to verify the truth of
15 reports referencing harassment of health care workers?

16 MR. DEARDEN: Mr. Villeneuve will answer
17 that question in writing.

18 --- UNDERTAKING NO. 8

19 MR BOISSONNEAU-LEHNER: Thank you. The next
20 question: which mainstream media reports at Exhibit 5
21 reference health care workers being inhibited by their
22 access to hospitals?

23 MR. DEARDEN: Being inhibited what?

24 MR BOISSONNEAU-LEHNER: Inhibited by their
25 access to hospitals.

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1 MR. DEARDEN: In accessing hospitals?

2 MR BOISSONNEAU-LEHNER: Yes. I think that's
3 -- I don't know if I'm borrowing the language from the
4 affidavit there. Yes. How you put it.

5 MR. DEARDEN: Okay.

6 --- UNDERTAKING NO. 9

7 MR BOISSONNEAU-LEHNER: Follow up question
8 on that is: did Mr. Villeneuve or did the Canadian
9 Nurses Association take any steps to verify the truth
10 of those reports? Being the reports of health care
11 workers being inhibited from accessing hospitals as a
12 result of the protests.

13 MR. DEARDEN: Mr. Villeneuve will answer
14 that in writing.

15 --- UNDERTAKING NO. 10

16 MR BOISSONNEAU-LEHNER: Thank you. Next
17 question: which mainstream media reports found at
18 Exhibit 5 to Mr. Villeneuve's affidavit reference
19 health care workers being threatened?

20 MR. DEARDEN: Mr. Villeneuve will answer
21 that question in writing.

22 --- UNDERTAKING NO. 11

23 MR BOISSONNEAU-LEHNER: The follow up
24 question on that is: did Mr. Villeneuve or did the
25 Canadian Nurses Association take any step to verify

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1 the truth of reports of health care workers being
2 threatened at the protest?

3 MR. DEARDEN: Mr. Villeneuve will answer
4 that in writing.

5 --- UNDERTAKING NO. 12

6 BY MR BOISSONNEAU-LEHNER:

7 156. Q. Thank you. Yes. Those are my
8 questions in relation to Paragraph 19 of Mr.
9 Villeneuve's affidavit. Thank you, Mr. Dearden. I'd
10 like to ask you a question about Paragraph 18 of your
11 affidavit where you state or you depose, "I follow
12 evidence developed by modern scientific methods.
13 COVID-19 vaccines, the wearing of masks, social
14 distancing and other science based measures for
15 combating the spread of COVID-19, for protecting
16 Canadians from COVID-19 and curtailing the virus
17 spread in Canada." My question is: do you agree with
18 me that modern scientific methods involve observation,
19 measurement, experiment and experimentation? Do you
20 agree with that?

21 A. That's how science is developed. Yes.

22 157. Q. That observation, measurement and
23 experiment leads to formulation, testing and
24 modification of hypotheses. That's part of the
25 scientific method as well, right?

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1 A. Usually.

2 158. Q. What do you mean by usually? When
3 isn't it?

4 A. Well, not -- not all ideas make it to
5 the -- to that phase. But when they do, yes, they are
6 tested.

7 159. Q. What evidence developed by modern
8 scientific methods are you referring to with respect
9 to COVID-19 vaccines curtailing the virus's spread in
10 Canada?

11 A. The virus was developed using the best
12 science in the world, funded in a way that produced --
13 brought a lot of attention to it very, very quickly,
14 using extremely modern scientific techniques that
15 didn't exist, for example, when I was a child getting,
16 you know, a smallpox vaccine or something. So,
17 technology that had been developed over a couple of
18 decades was mustered -- harnessed, I guess is the
19 word, in the development of -- of the vaccines and
20 there was a rigorous testing of several different
21 kinds of vaccines globally among hundreds to thousands
22 in the end of volunteers. The ones that were seen to
23 be harmful or were working, were discarded and the
24 ones that have the highest effectiveness, excuse me,
25 in -- in either preventing transmission or severity of

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1 disease are the ones that, we know now, that emerged
2 and have been successful. So, it was -- it was
3 developed using very rigorous scientific method.

4 160. Q. You agreed with me already that the
5 scientific method involves observing and measurement
6 as well, right?

7 A. Yes.

8 161. Q. Okay. If the boosted population was
9 contracting COVID-19 infections at a higher rate than
10 the unvaccinated population according to Ontario's own
11 health data, would that warrant a reconsideration of
12 the hypothesis that vaccines are effective at
13 preventing the transmission of COVID-19 in your view?

14 MR. DEARDEN: I'm objecting to that
15 question. It's not relevant to any of the issues in
16 this libel action and in this motion. But we have
17 agreed according to Justice Vermette's order that
18 answers will be given if they can after an objection,
19 so could you repeat the question again, Counsel, so
20 that it can be answered under objection?

21 MR BOISSONNEAU-LEHNER: Sure.

22 THE REPORTER: Sorry. Mr. Dearden, I didn't
23 catch the name of the justice you mentioned.

24 MR. DEARDEN: Vermette.

25 THE REPORTER: I'm sorry. Can you just

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1 spell that for me?

2 MR. DEARDEN: V-E-R-M-E-T-T-E.

3 THE REPORTER: Thank you very much.

4 BY MR BOISSONNEAU-LEHNER:

5 162. Q. So, my question is with respect to
6 Paragraph 18 or at least it's my position that my
7 question is with respect to Paragraph 18 of Mr.
8 Villeneuve's affidavit about following the evidence
9 developed by modern scientific methods. My question
10 was: if the data showed that boosted populations, that
11 is individuals who have received a booster, are
12 contracting COVID-19 at a higher rate than the
13 unvaccinated population, with that warrant a
14 reconsideration of the hypothesis that vaccines are
15 effective at preventing transmission of COVID-19?

16 MR. DEARDEN: Just before he answers that,
17 Counsel, the first time you asked that question, I
18 thought I heard you refer to Ontario statistics. Is
19 that in the evidence?

20 MR BOISSONNEAU-LEHNER: No, not yet. I
21 guess. So, no. It isn't.

22 MR. DEARDEN: It's not. So, your question
23 remains but without any reference to whatever Ontario
24 statistics or reports might say.

25 BY MR BOISSONNEAU-LEHNER:

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1 163. Q. Okay.

2 A. When we make -- make a decision to
3 release a statement on anything, we want to be
4 accurate and do -- and do our homework. But in -- so,
5 in this case, for example, we are not epidemiologists,
6 so we -- we turn to what the Public Health Agency of
7 Canada says, the World Health Organization, the
8 Science Table in Ontario in this case and follow their
9 best advice. Sometimes the political decisions about
10 how things will be carried out, we may or may not
11 agree with, but we always turn to the science. So, I
12 would have said I would have to look at what the
13 science said. What scientists said, typically
14 doctors.

15 164. Q. Thank you. In your view, the CNA
16 speaks for the 448,000 give or take registered nurses,
17 nurse practitioners, licensed and registered practical
18 nurses, registered psychiatric nurse, retired nurses
19 and nursing students nationwide. Isn't that right?

20 A. That's correct.

21 165. Q. I just want to make sure that I haven't
22 missed something in reviewing your extensive
23 affidavit.

24 A. Excuse me.

25 166. Q. There's not a single report from one of

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1 these 448,000 nurses to the CNA that says that they
2 were harassed, threatened or assaulted during the
3 September 1st, 2021 protest organized by Canadian
4 Frontline Nurses. Is that right or did I miss
5 something?

6 MR. DEARDEN: The evidence will speak for
7 itself.

8 BY MR BOISSONNEAU-LEHNER:

9 167. Q. Okay. Paragraph 58 of your affidavit.
10 You state that you have never been sued for libel
11 prior to the Plaintiff's libel action and that this
12 libel action has had a major effect on your
13 willingness to comment publicly and engage in
14 discussions about COVID-19 and pandemic measures. I
15 just want to understand what you mean by pandemic
16 measures. Does this mean interventions against COVID-
17 19 such as masking, social distancing, vaccines, et
18 cetera?

19 A. Yes. I -- it -- I should probably
20 correctly should say pandemic public health measures.

21 168. Q. You understand that libel involves
22 publishing disparaging comments about others, right?

23 MR. DEARDEN: Is that a legal question?

24 MR BOISSONNEAU-LEHNER: It is. I'm asking
25 why this witness's understanding, given that he says

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1 that the libel action has had a major effect on his
2 willingness to comment publicly and engage in
3 discussions about COVID-19 and pandemic measures. So,
4 I'm asking whether he understands that libel involves
5 publishing disparaging comments about others.

6 MR. DEARDEN: But that's different than the
7 libel that's being dealt with in Paragraph 58 and 59
8 of the affidavit. Which is he fears that he is going
9 to get sued again, so it's affected his ability to
10 speak out since he's been sued. Never been sued
11 before.

12 BY MR BOISSONNEAU-LEHNER:

13 169. Q. Well, thank you. But I would like Mr.
14 Villeneuve's evidence on this point if I can whether
15 he understands that libel involves publishing
16 disparaging comments about others.

17 A. I -- I would -- yes, I understand that.
18 I -- which is why you do your due diligence and not
19 say things to hurt people. I don't know if I'm
20 answering your question but I don't know what else to
21 say.

22 170. Q. Do you understand that you're not being
23 sued for your views on CNA or CNA's views relating to
24 COVID-19 and pandemic measures or do you not have an
25 understanding of that?

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1 A. I ---

2 MR. DEARDEN: Can you repeat that, please,
3 Counsel?

4 BY MR BOISSONNEAU-LEHNER:

5 171. Q. Yes. I'll put it a different way. You
6 understand that you are not being sued for your views
7 or CNA's views relating to COVID-19 and pandemic
8 measures, right?

9 MR. DEARDEN: Well, they're in the statement
10 that you're suing him on.

11 MR BOISSONNEAU-LEHNER: Okay.

12 MR. DEARDEN: Unless I'm misunderstanding
13 the question.

14 BY MR BOISSONNEAU-LEHNER:

15 172. Q. So, Mr. Villeneuve, it's your
16 understanding that you are being sued for your views
17 relating to COVID-19?

18 A. I'm not sure I'm fully understanding
19 where -- is it possible to ask it a different way?
20 I'm just not really following. We're being sued.

21 173. Q. Well, why can't you comment publicly on
22 COVID-19 and pandemic measures without disparaging
23 Canadian Frontline Nurses, Kristal Pitter or Sarah
24 Choujounian, for instance?

25 A. Oh. Okay. That seemed to me a

MICHAEL VILLENEUVE - 70

1 different question. I -- what I'm -- what I stated
2 here is the fact that, you know, in the last two
3 months of a 44 year career, to have this arrive after
4 Christmas, first was shocking. I've never been in
5 trouble in any way with -- with the College or in any
6 other way around libel. So, it -- when you say, hey,
7 we have a duty as leaders at CNA when we see something
8 that's not right to speak to it. We did it and look
9 what happened. So, it makes you think, well, geez, I
10 better be pretty damn careful about anything else I
11 say and I tend to be pretty vocal, I admit. You know,
12 I participate in a lot of public things and I try to
13 be careful. But this really, I mean, all I can say is
14 it put a pall over CNA and my time there and Tim can
15 speak to you about what he feels now. And then -- and
16 me personally, I just basically didn't comment on it
17 anymore. It just scared me.

18 174. Q. So, you were scared to voice anything
19 publicly about COVID-19 and pandemic measures, full
20 stop, as a result of the libel action? That's your
21 evidence?

22 A. Yes, because in my role as a leader, I
23 did what -- what we're supposed to do as the -- as the
24 leader of CNA. Respond to a problem in a -- in as
25 thoughtful a way as we could and if that causes this

MICHAEL VILLENEUVE - 71

1 sort of result, it scares -- well, I don't know what
2 it does. I don't see it scares you. It scared me.

3 175. Q. So, picking up on Paragraph 59, I
4 understand that you would have normally commented
5 about some of the Plaintiff's actions, the Plaintiffs
6 being Canadian Frontline Nurses, Kristal Pitter, Sarah
7 Choujounian, Kristen Nagle. You'd comment on some of
8 their actions and statements relating to the freedom
9 convoy that occupied Ottawa in January and February of
10 2022. What statements would have wished to publicly
11 comment on? What are you getting at here? Like, what
12 statements would you have made but for this libel
13 action?

14 A. They made different statements in a
15 public way during the convoy -- the convoy. As did
16 other people. What I'm saying is, I don't -- I didn't
17 record those statements, sir. Sorry. I'm struggling
18 with your surname, Mr. Lehner. Just anxiety. So, I
19 didn't -- what we did then is we just said, "We're not
20 saying anything about that." So, for example, we had
21 a very senior person in the country, a nurse leader,
22 who got yelled at when she just went for a walk
23 downtown wearing a mask. And a very, very senior
24 person who normally would support some of those
25 things, so that -- this is -- I'm not talking now

MICHAEL VILLENEUVE - 72

1 about the Plaintiffs. But those -- when those kind of
2 things arose, if nurses said, "Are you going to say
3 anything about the convoy?" Just like are you going
4 to say anything about the protests? We would go
5 through the same, "Do we have anything to say? Do we
6 not?" But we didn't even go into the process. We
7 just said, "We're not saying anything about anything."

8 MR BOISSONNEAU-LEHNER: Mr. Villeneuve,
9 thank you very much. Those are my questions for you.
10 So, subject to the undertakings and the issue of
11 questions were refused, that concludes my cross-
12 examination of Mr. Villeneuve.

13 THE DEPONENT: Thank you very much and thank
14 you, Madam Sauve.

15 THE REPORTER: Thank you.

16
17 --- WHEREUPON THE EXAMINATION WAS ADJOURNED AT 12:12 P.M.
18
19
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23
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25

MICHAEL VILLENEUVE - 73

1

2

I hereby certify that this is the

3

examination of MICHAEL VILLENEUVE,

4

taken before me to the best of my

5

skill and ability on the 21st day of

6

July, 2022.

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Jody Sauve - Court Reporter

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January 1, 1990, and are not certified without the

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original signature of the Court Reporter

TAB 2

File No. CV-21-00673636-0000

ONTARIO
COURT OF JUSTICE

B E T W E E N:

CANADIAN FRONTLINE NURSES
SARAH CHOUJOUNIAN, KRISTEN NAGLE,
and KRISTAL PITTER

Plaintiffs

- and -

CANADIAN NURSES ASSOCIATION,
TIM GUEST, MICHAEL VILLENEUVE, TOGETHER NEWS INC.
o/a COMOXVALLY.NEWS, and o/a VANISLE.NEWS and
JOHN DOE

Defendants

This is Cross-Examination of TIM GUEST, a
on his Affidavit sworn June 26, 2022, taken at the
offices of Network Reporting & Mediation, on the 21st
day of July, 2022.

A P P E A R A N C E S:

ALEXANDER BOISSONNEAU-LEHNER Solicitor for the
Plaintiff

RICHARD G. DEARDEN Solicitors for the Defendants,
MARCO S. ROMEO Canadian Nurses Association,
ALEXANDRA PSELLAS Tim Guest, and Michael Villeneuve

PAUL CHAMP Solicitors for the Defendants,
CHRISTINE JOHNSON Together News Inc. and
John Doe (aka) William Horter

TIM GUEST - 2

Also Present:

Carly Down

Student with Mr. Dearden

Rachel Broulliette

Manager at Canadian Nurses
Association/Observer

TIM GUEST - 3

I N D E X O F P R O C E E D I N G S

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I N D E X O F E X H I B I T S

--- EXHIBIT NO. 1: Document entitled "'Without health workers, there is no health care': Health care leaders call for urgent action at emergency COVID-19 summit" ..	26
--- EXHIBIT NO. 2: Document entitled "Nurses commit to action against anti-Black racism in nursing and health care", dated November 15, 2021	28
--- EXHIBIT NO. 3: Document entitled "2021 speech from the throne commits to strengthening Canada's health system" dated November 21, 2001	30
--- EXHIBIT NO. 4: Document entitled "CNA supports amendments to the Criminal Code that will protect health-care workers"	32
--- EXHIBIT NO. 5: Document entitled, "CNA congratulates Lisa Little on becoming First Vice-President of ICN" ..	34
--- EXHIBIT NO. 6: Document entitled "CNA announces retirement of Michael Villeneuve, CEO"	35

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--- EXHIBIT NO. 7: Document entitled "CNA welcomes the federal government to support health-care workers" dated December 16, 2021	37
--- EXHIBIT NO. 8: Document entitled "Governments must work together to combat nurse burnout, CNA, CFNU say" dated January 20th, 2022	41
--- EXHIBIT NO. 9: Document entitled, "CNA applauds federal government for the reinstating chief nursing officer for Canada" dated February 1, 2022	43
--- EXHIBIT NO. 10: Document entitled, "Canadian Nurses Association Unveils Massive 28-storey Mural to Celebrate Nurses Nationwide" dated February 14, 2022	44
--- EXHIBIT NO. 11: Document entitled, "Federal government takes step in the right direction to stabilize Canada's health-care system" dated March 28, 2022	46
--- EXHIBIT NO. 12: Document entitled, "International Nurses Day is an opportunity to recognize how nurses continue to answer the call" dated May 12, 2022	47
--- EXHIBIT NO. 13: Document entitled, "Physician, nurse offer solutions to immediately address health human resource crisis", dated May 16, 2002	49

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--- UNDER ADVISEMENT NO. 1	51

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--- REFUSAL NO. 5	39

TIM GUEST - 6

1 --- UPON COMMENCING AT 12:46 P.M.

2 TIM GUEST; Affirmed

3 CROSS-EXAMINATION BY MR. BOISSONNEAU-LEHNER:

4 1. Q. Good afternoon, Mr. Guest.

5 A. Good afternoon.

6 2. Q. So you're currently the Chief Executive
7 Officer of Canadian Nurses Association; is that right?

8 A. yes, as of April 1st.

9 3. Q. April 1st of 2022?

10 A. Yes.

11 4. Q. And as at the time that Canadian Nurses
12 Association published its statement, "Enough is enough"
13 on September 9th, 2021, you were CNA's president?
14 That's right?

15 A. That's correct.

16 5. Q. And you were the co-author of that
17 statement?

18 A. Yes. Frequently -- so I'll give you
19 some context. The president holds the chief
20 spokesperson role for the organization. The president
21 is a voluntary role; it's not a paid position, and so I
22 wasn't an employee of the organization.

23 It would be typical practice with the
24 organization over a period of time that significant
25 position statements or document that we put out would

TIM GUEST - 7

1 go out by both signatures.

2 6. Q. Other than adding your signature, did
3 you contribute to the publication?

4 A. I reviewed the first draft and provide
5 feedback and advice on it. I also gave some direction
6 as to what I wanted to be done with the next draft; and
7 I also forwarded the document to my three president
8 predecessors because I wanted some additional feedback
9 and perspective on the document and their advice.

10 MR. BOISSONNEAU-LEHNER: To the extent --
11 and this is more a question for your counsel. To the
12 extent that that correspondence with the three prior
13 presidents has not been produced in you motion record,
14 could I get copies of the correspondence that went
15 back and forth between Mr. Guest and the three prior
16 presidents of the Canadian Nurses Association, please

17 MR. DEARDEN: Perhaps, Counsel, you ask Mr.
18 Guest if all the correspondence is in his Affidavit,
19 or what he could find.

20 BY MR. BOISSONNEAU-LEHNER:

21 7. Q. Mr. Guest, do you know whether all of
22 that correspondence was in your Affidavit or elsewhere
23 in the motion record?

24 A. I don't believe that it's in mine, but
25 I would need time to review any exhibits that may have

TIM GUEST - 8

1 been in Mr. Villeneuve's that I could validate that
2 it's there.

3 MR. BOISSONNEAU-LEHNER: So Mr. Deardon,
4 could you please advise me whether all of the
5 correspondence is contained in Mr. Villeneuve's
6 Affidavit or if it's in Mr. Guest's Affidavit, and to
7 the extent that it's not, would you please ask Mr.
8 Guest to produce that correspondence?

9 MR. DEARDEN: Mr. Guest will provide an
10 answer in writing.

11 --- UNDERTAKING NO. 1

12 BY MR. BOISSONNEAU-LEHNER:

13 8. Q. Thank you. So I have a series of
14 questions about ethics, particularly the CNO Code and
15 CNA's Code of Ethics, as you depose to in your
16 Affidavit. So at paragraph 17 -- well, first I should
17 ask. Do you have a copy of your Affidavit accessible?

18 A. I do, yes.

19 9. Q. Great. So at paragraph 17 of your
20 Affidavit you depose that CNO mandates that nurses
21 respect the dignity of patients, treat them as
22 individuals and you also say, "Nurses do you not impose
23 their beliefs and biases on patients."

24 So my first question is what information or
25 evidence do you have that Kristal Pitter did not

TIM GUEST - 9

1 respect the dignity of patients and treat them as
2 individuals, if any?

3 A. So what this statement is referring to
4 is the public statements that were made by individuals
5 participating in the protests that expressed beliefs
6 that were counter to all of the evidence that existed
7 at the time related to public health measures,
8 vaccination and those sorts of issues.

9 And what we're talking about here is nurses
10 in their role from the context of a population, not
11 necessarily an individual.

12 As nurses in their work, we look after
13 individuals, we look after groups, and we look after
14 populations as a whole, and the Code of Ethics is taken
15 into account whatever practice setting or context of
16 what's going on at time.

17 10. Q. So I want to make sure I understand.
18 Your view of the CNO code is that the reference to
19 patients is not isolated to a nurse/patient
20 relationship, but the reference to patients included
21 the public at large?

22 A. Yes, Public Health nurses as an
23 example, and nurses that work and practice within a
24 population context. It would apply to them in that
25 way.

TIM GUEST - 10

1 11. Q. Okay. Thank you. So with that context
2 in mind, what information or evidence do you have that
3 Krista Pitter did not respect the dignity of patients
4 and treat them as individuals?

5 A. So as I mentioned a moment ago, this
6 refers to the statements that we observed and read
7 about in media reports that came out statements that
8 were expressed during the protests.

9 And it was -- we were quite concerned about
10 the misleading information that was in those statements
11 that potentially could have had negative ramifications
12 for the public at a time when we having a global
13 pandemic health crisis where patients or individuals
14 may made decisions that were contrary to what the best
15 science evidence at the time was suggesting was best
16 for them.

17 12. Q. Thank you. Which statements during the
18 protests did Kristal Pitter make that suggested that
19 she was not respecting the dignity of patients and
20 treating them as individuals?

21 A. You know, I think as I answered in your
22 two previous statements, these statements were intended
23 to speak globally to participants that were quoted and
24 make comments and participated in those statements.
25 These statements aren't intended to identify specific

TIM GUEST - 11

1 things for specific individuals, so I can't
2 specifically speak to individual statements.

3 13. Q. So you can't specifically speak to
4 quotes or comments made by Kristal Pitter, given that
5 it applied more globally, as you say?

6 A. Certainly that was the intention behind
7 the wording that was in the letter and that statement
8 in my Affidavit.

9 14. Q. Just for sake of completeness, the same
10 question with respect to Sarah Choujounian. The quotes
11 and comments are not necessarily a reference to her,
12 but to the movement at large and statements that were
13 made during the protests?

14 A. Yes. They were a reference to
15 statements that the media reported based on those
16 events that happened across the country, and I can't
17 tell you specifically which ones were associated with
18 which individuals.

19 We do know that those individuals were --
20 they did have a lot of public air time during the
21 protests and there was a lot of media uptake.

22 15. Q. And I think I know the answer, but with
23 respect to Kristal Pitter, the same thing, you can't
24 specify which specific quotes or comments she made in
25 the context of the September 1st protest?

TIM GUEST - 12

1 A. Yes. As I mentioned before, the
2 statement is reflective of the generalized comments
3 that we saw the media report being stated during that
4 time that we felt we misleading to the public and
5 potentially put the public at risk.

6 16. Q. And that applies both to not respecting
7 the dignity of patients and treating them as
8 individuals, as well as imposing beliefs and biases on
9 patients; correct?

10 A. Yes. Thank you.

11 17. Q. If you could turn to Exhibit 5 of your
12 Affidavit, I believe is the CNA's Code of Ethics for
13 registered nurses. I'm just pulling it up myself.

14 And if you could go down to Sections C,
15 paragraph three? I believe that's found at page 73 of
16 the first volume of the motion record.

17 A. So you're referencing paragraph number
18 three?

19 18. Q. Paragraph number three, yes.

20 A. Okay.

21 19. Q. This will be my question. And as I
22 understand, nurses ensure that nursing care is provided
23 with the person's informed consent; nurses recognize
24 and support a capable person's right to refuse or
25 withdraw consent for care or treatment at any time. So

TIM GUEST - 13

1 that still remains part of the Code of Ethics for the
2 Canadian Nurses Association today; correct?

3 A. Yes.

4 20. Q. And informed consent means that a
5 patient is informed about the risk associated with the
6 treatment, as well as its potential benefits; right?

7 A. Basically what we mean by informed
8 consent is that the individual has knowledge and has
9 basically been provided with answers to questions for
10 them to be able to make a decision on whether they
11 accept or decline treatment understanding the pros and
12 cons, the potential risks so that they can make that
13 decision for themselves in the most informed way
14 possible.

15 21. Q. So in the context of COVID-19
16 vaccination, does informed consent involve making a
17 patient aware of risk associated with receiving such a
18 vaccine, if there are such risks?

19 A. So at the time of vaccination, a nurse
20 that would be participating in administering vaccine
21 would need to ensure that they have gone through all of
22 that information and that the patient has a full
23 understanding of the risks associated with accepting
24 administration of that medication.

25 It would be the same for any medication that

TIM GUEST - 14

1 we administered, and a nurse would have an obligation
2 to ensure that the patient was comfortable with that
3 decision prior to administering.

4 22. Q. Thank you. Does informed consent, as
5 understood in the Code of Ethics, also mean uncoerced
6 consent?

7 A. Yes.

8 23. Q. Would it be appropriate and consistent
9 with the Canadian Nurses Association's Code of Ethics
10 for nurses to advocate for those who might not wish the
11 receipt of COVID-19, but felt coerced to do so to
12 maintain their employment?

13 A. Could you ask me that again?

14 24. Q. I can. Would it be appropriate in
15 accordance with Canadian Nurses Association's Code of
16 Ethics for nurses to advocate for individuals who may
17 not wish to receive a COVID-19 vaccine, but feel
18 coerced to do so so that they can maintain their
19 employment?

20 A. I don't think it would ever be
21 appropriate for a nurse to advocate for a situation
22 where they believed that an individual was coerced into
23 receiving a treatment.

24 25. Q. Okay. You mean advocate for the
25 application of that treatment if they felt there was

TIM GUEST - 15

1 coercion involved?

2 A. I think it's the individual who would
3 be administering the medication that ultimately has the
4 accountability to ensure that the individual getting it
5 is not in that situation.

6 26. Q. At page 80 of the same exhibit, under
7 the heading, "Ethical Endeavors related to broad
8 societal issues", number seven says nurse should work
9 with people -- sorry.

10 I'll read what it says verbatim. "Working
11 with people and advocating for expanding the range of
12 available healthcare choices." Would it be appropriate
13 for nurses to advocate for the choice to receive a
14 COVID-19 vaccination?

15 A. I think it would be appropriate for a
16 nurse to explore the issue with an individual and
17 understand the context of what is going on with that
18 individual in order to be able to help them select the
19 option that's best for them at the time.

20 It wouldn't be appropriate for them to
21 advocate necessarily not to have a treatment without
22 understanding the context and fully having and
23 following the evidence that the context at the time
24 suggests is the best course of action. And so it would
25 be as problematic to advocate for a person to take

TIM GUEST - 16

1 something versus not, without fully understanding what
2 their situation is because there maybe circumstances
3 that because of their health status, as an example,
4 they couldn't get the vaccine anyway.

5 And so I think it behooves a nurse to fully
6 understand what is going on with that individual in
7 order to be informed enough to provide them the
8 information that they require in order to make an
9 informed decision.

10 But whatever advice that they give the
11 individual, it needs to follow the evidence and
12 accepted information that's available at the time.

13 27. Q. I'm more concerned about nurses'
14 ethical responsibilities relating to broad societal
15 issues. So nurses are supposed to advocate for
16 improving systems and societal structures, and try to
17 ensure and be advocates for fair policies and
18 practices, generally; right?

19 MR. DEARDEN: Are you looking at a
20 particular paragraph on page 80?

21 MR. BOISSONNEAU-LEHNER: Well, that's my
22 understanding from reading the heading; the first
23 paragraph before the numbered paragraphs. I'll just
24 read it. "Ethical nursing practices addressed broad
25 aspect of social justice that are associated with

TIM GUEST - 17

1 health and wellbeing. These aspects are focus on
2 improving systems and societal structures to create
3 greater equity for all.

4 Individually and collectively, nurses keep
5 abreast of current issues and concerns and are strong
6 advocates for fair policies and practices."

7 So it is appropriate for nurses to advocate
8 that it may not be fair, a fair practice, for a
9 healthcare worker such as a nurse, being required to be
10 vaccinated in order to continue work in the healthcare
11 industry?

12 A. So I would say in this context that it
13 would be because all of the evidence suggested that
14 healthcare workers that were vaccinated, specific to
15 the COVID-19 pandemic, had a greater potential to
16 protect the individuals that they cared for and each
17 other, by decreasing the risk of spread of the COVID-19
18 virus.

19 And so from that perceptive, it would be
20 completely appropriate for advocacy efforts to happen
21 to encourage all individuals to be vaccinated.

22 I would say that what wouldn't be appropriate
23 is to say that individuals would not have a choice as
24 to whether they were vaccinated or not, but individuals
25 that chose to not follow the best evidence and not have

TIM GUEST - 18

1 the vaccine, as an example, would maybe face other
2 expectations in order to fulfill a requirement to
3 protect those that they're caring for and working with.

4 And so I think all the evidence would suggest
5 that for a circumstance like that it would an
6 appropriate place to advocate for that sort of a
7 decision.

8 28. Q. What is the evidence in relation to
9 vaccines protecting the patients for who healthcare
10 workers interact with? Is there a specific study that
11 you're referencing or what is the evidence for that?

12 A. The evidence that we use in our work
13 has been the evidence that's been released by the
14 Public Health Agency of Canada, the World Health
15 Organization, and NACI.

16 And just give me one second, and I can tell
17 you what that means. It's the National Advisory
18 Committee on Immunization, and their recommendations.

19 Those bodies were largely the organizations
20 whose recommendations and evidence were used to guide
21 our advocacy efforts and our positions.

22 29. Q. Do you know what evidence they relied
23 on to support their announcement that vaccinated
24 healthcare workers tend to pass COVID-19 at a lesser
25 rate than unvaccinated healthcare workers?

TIM GUEST - 19

1 A. Specifically, no. You know, we viewed
2 the Public Health Agency of Canada, the World Health
3 Organization and NACI as reputable organizations that
4 have expertise in this area.

5 And when they put out statements, a lot of
6 times in their statements they would have footnotes
7 that you could go back and verify information on if you
8 so chose.

9 We believe them to be reputable and that the
10 information that they put out was the most recent and
11 the best available evidence at the time.

12 30. Q. Okay. So the CNA relies on the
13 statements of reputable institutions on the basis of
14 their reputation?

15 A. I would add that -- I would say yes,
16 but also on the basis of the level of expertise that
17 they hold, that we don't. The premise of ethical
18 nursing practice is that where you don't have the
19 knowledge and expertise in an area, you seek it from
20 someone who does.

21 And so that is why we would go to those
22 agencies who do hold the expertise on those areas.

23 31. Q. I have a similar question with respect
24 to paragraph 34 of your Affidavit. So paragraph 34
25 reads, "As of the date of the CNA statement referencing

TIM GUEST - 20

1 the September 9th, 2021 statement, COVID-19 vaccines,
2 the wearing of masks, social distancing and other
3 science-based measures for combatting the spread of
4 COVID-19 represented the best available means for
5 protecting Canadians from COVID-19 and curtailing the
6 viruses spread in Canada."

7 So you're not relying on your own studies or
8 Canadian Nurses Association's own studies relating to
9 the efficacy of COVID-19 vaccines, for instance?

10 A. That's correct. We rely on the
11 expertise of other organizations. CNA does not
12 internally have individuals with the expertise to have
13 done that work.

14 32. Q. Is taking vitamin D a science-based
15 measure for protecting Canadian from COVID-19; do you
16 know?

17 A. So I would say ---

18 MR. DEARDEN: Sorry; I was muted. I was
19 objecting to that question as not being relevant to
20 the issues in the motion. But we've agreed, Mr.
21 Guest, that after an objection is made you give the
22 answer and the motion's judge will decide if it's
23 relevant or not. Perhaps you could ask the question
24 again, Counsel?

25 --- REFUSAL NO. 1

TIM GUEST - 21

1 BY MR. BOISSONNEAU-LEHNER:

2 33. Q. Yes. Is taking vitamin D a science-
3 based measure for protecting Canadians from COVID-19?

4 A. I don't have the personal expertise to
5 be able to judge that on my own, but I believe it to be
6 the case that it is not.

7 34. Q. What about living a health lifestyle?
8 Is that a science-based measure for protecting
9 Canadians from COVID-19? And just wait for your
10 counsel.

11 MR. DEARDEN: Yes, I object. Go ahead, Mr.
12 Guest.

13 --- REFUSAL NO. 2

14 THE DEPONENT: I think it is obvious to say
15 leading a healthy lifestyle is certainly an advantage,
16 but I would not say that it in itself is a measure
17 that would protect a person from COVID-19, no.

18 BY MR. BOISSONNEAU-LEHNER:

19 35. Q. What about reducing ones obesity? Is
20 that a science-based measure for protecting Canadians
21 from COVID-19?

22 MR. DEARDEN: Object.

23 --- REFUSAL NO. 3

24 BY MR. BOISSONNEAU-LEHNER:

25 36. Q. Okay.

TIM GUEST - 22

1 A. And I would say the same. Obesity
2 certainly has an impact in the risk from what we've
3 seen that individuals that get COVID experience.

4 37. Q. So I understand from your Affidavit
5 that the plaintiffs libel action has caused Canadian
6 Nurses Association to very hesitant in engaging in
7 discussions about COVID-19 measures; right?

8 A. Yes.

9 38. Q. And just to be clear, pandemic
10 measures, that means measures to control the pandemic;
11 right? Masking, vaccines, social distancing and the
12 like?

13 A. Yes, that's correct.

14 39. Q. Do you understand that libel involves
15 publishing disparaging comments about others?

16 A. I believe I have an understanding about
17 what libel means, yes.

18 40. Q. And is that your understanding that it
19 involves somebody being disparaged?

20 A. I understand that it can, yes.

21 41. Q. Can CNA engage in discussions about
22 COVID-19 and pandemic measures without disparaging
23 others?

24 A. Yes, and I believe that's the intention
25 of what we do all the time.

TIM GUEST - 23

1 42. Q. You and Canadian Nurses Association did
2 not become aware of the libel suit that was initiated
3 by the plaintiffs until Colin Butler from the CBC
4 contacted the Canadian Nurses Association about it on
5 January 7th, 2022; is that correct?

6 A. So off the top of my head I can't
7 recall the exact dates. But yes, we did as a
8 organization become aware of the suit from a reporter
9 from CBC, and I to this date have never still been
10 served myself.

11 43. Q. Okay. And you became aware of the
12 lawsuit in January of 2022; fair?

13 A. Yes, I believe that to be the case.

14 44. Q. So Canadian Nurses Association
15 continued to publish statements about COVID-19 and
16 pandemic measures between September 9th and January;
17 correct?

18 A. Yes.

19 MR. DEARDEN: For the record, September 9,
20 2021 and January 2022?

21 BY MR. BOISSONNEAU-LEHNER:

22 45. Q. Correct. Sorry. I'm going to show you
23 a number of documents. Madam Reporter, am I able to
24 share my screen.

25 MR. DEARDEN: Are these in the record?

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1 MR. BOISSONNEAU-LEHNER: They are not.

2 MR. DEARDEN: Then I'm objecting. You're
3 showing this witness documents -- or you intend to
4 show this witness documents that you haven't produced
5 yet? You haven't produced as part of the evidence?

6 --- REFUSAL NO. 4

7 MR. BOISSONNEAU-LEHNER: I intent to have
8 him identify the document and then enter it on an
9 exhibit on this cross-examination.

10 MR. DEARDEN: My question to you, Counsel,
11 is you are about to show on screen a document that is
12 not in anybody's evidence?

13 MR. BOISSONNEAU-LEHNER: Correct.

14 MR. DEARDEN: Well, I object.

15 MR. BOISSONNEAU-LEHNER: Okay. So I guess
16 we'll proceed under -- I'll ask my questions and I
17 understand your objection, and we'll deal with it
18 afterwards, if that's all right with you, Mr. DEARDEN?

19 MR. DEARDEN: We'll deal with them one at a
20 time. I personally can't read that.

21 MR. BOISSONNEAU-LEHNER: Is it not visible?

22 MR. DEARDEN: No, the print was too small.
23 It was like an eye test.

24 BY MR. BOISSONNEAU-LEHNER:

25 46. Q. Sorry about that, Mr. DEARDEN. So my

TIM GUEST - 25

1 first question is I'm showing you a document. It's
2 entitled "'Without health workers, there is no
3 healthcare': Healthcare leaders call for urgent action
4 at emergency COVID-19 summit." Do you see that.

5 A. Yes, I do.

6 47. Q. And this is a statement that was
7 published on the Canadian Nurses Association's website?

8 MR. DEARDEN: I would suggest that you let
9 Mr. Guest read the entire document. We're only seeing
10 two inches of it.

11 BY MR. BOISSONNEAU-LEHNER:

12 48. Q. Of course. One moment. Is that still
13 legible, Mr. Guest?

14 A. Yes, I can read it. You can scroll
15 up. Okay.

16 49. Q. Was this a statement that was published
17 by Canadian Nurses Association on October 6th, 2021?

18 A. This is a joint statement that was
19 published by the Canadian Medical Association and the
20 Canadian Nurses Association associated with an urgent
21 issue with a shortage of healthcare workers, is what
22 the content and the underlying issue that this
23 publication speaks about.

24 50. Q. And it references COVID-19?

25 A. It references COVID-19, but the

TIM GUEST - 26

1 premises behind this article was and is to address the
2 urgent shortage of healthcare workers that is impacting
3 the Canadian health system.

4 51. Q. It does not reference pandemic
5 measures, this particular article; right?

6 A. There's a statement by the president of
7 the Canadian Medical Association that speaks to that,
8 but as I said, the premise and the purpose behind this
9 statement was to deal with a urgent and looming crisis
10 with respect to a shortage of healthcare workers in the
11 Canadian health system.

12 MR. BOISSONNEAU-LEHNER: Okay. I want to
13 show you another document. And Mr. Dearden, I
14 recognize your objection in advance.

15 MR. DEARDEN: Okay.

16 MR. BOISSONNEAU-LEHNER: So I've now pulled
17 -- actually, before that, and I recognize this is
18 going to be objected to. But I would like to enter
19 this document, which has been identified by the
20 witness, this October 6th, 2021 CNA News Room -
21 "'Without health workers, there is no health care':
22 Health care leaders call for urgent action at
23 emergency COVID-19 summit as an exhibit on this cross-
24 examination

25 --- EXHIBIT NO. 1: Document entitled "'Without health

TIM GUEST - 27

1 workers, there is no health care': Health care leaders
2 call for urgent action at emergency COVID-19 summit"

3 MR. DEARDEN: It goes in under objection,
4 yes. So it will be Exhibit 1.

5 BY MR. BOISSONNEAU-LEHNER:

6 52. Q. Thank you. Mr. Guest, I've now pulled
7 up another document on my screen. It's entitled,
8 "Nurses commit to action against anti-Black racism in
9 nursing and health care." And it appears to be dated
10 November 15th, 2011.

11 Is this a statement that was published by the
12 Canadian Nurses Association?

13 MR. DEARDEN: Sorry; he needs to see the
14 whole document.

15 THE DEPONENT: You can scroll up. Okay.
16 I've read it.

17 BY MR. BOISSONNEAU-LEHNER:

18 53. Q. Thank you. Was this a statement that
19 was published by Canadian Nurses Association?

20 A. This is a statement that was published
21 by Canadian Nurses Association and the other
22 organizations that you see listed here in response to
23 situations that were happening in the world with
24 respect to anti-black racism, and our belief that it
25 was a public health issue that needed to be addressed,

TIM GUEST - 28

1 yes.

2 54. Q. It would appear on Canadian Nurses
3 Associations website; correct?

4 A. Yes.

5 55. Q. And it was authored or published around
6 November 15th, 2021?

7 A. That appears to be the date on it, yes.

8 56. Q. And this particular statement that
9 we're looking at, "Nurses commit to action against
10 anti-Black racism in nursing and health care", it does
11 not reference COVID-19; correct?

12 A. That not I saw. It shouldn't; it
13 really has no -- they don't have anything to do with
14 each other.

15 MR. BOISSONNEAU-LEHNER: Thank you. And I
16 would like to have this document identified by the
17 witness marked as Exhibit 2, recognizing that it's
18 objected to.

19 --- EXHIBIT NO. 2: Document entitled "Nurses commit to
20 action against anti-Black racism in nursing and health
21 care", dated November 15, 2021

22 BY MR. BOISSONNEAU-LEHNER:

23 57. Q. Mr. Guest, I'm now showing you another
24 statement. I'll give you the opportunity to read it.
25 Please let me know when I can scroll down.

TIM GUEST - 29

1 A. Okay. You can scroll up.

2 58. Q. The title of this statement is "2021
3 speech from the throne commits to strengthening
4 Canada's health system."

5 A. Is that a question for me?

6 59. Q. Yes.

7 A. That's what it appears to say on the
8 screen, yes.

9 60. Q. This is an article that -- sorry, a
10 statement that was published by Canadian Nurses
11 Association?

12 A. It appears to be, yes.

13 61. Q. On or about November 23rd, 2021?

14 A. That is the date that's on it, yes,
15 from what I can see.

16 62. Q. And this statement would appear on
17 Canadian Nurses Association's website?

18 A. It looks like it, yes.

19 63. Q. And this publication references COVID-
20 19; right?

21 A. The purpose of this publication is
22 CNA's response to the throne speech from the liberal
23 government when the 44th parliament opened and it
24 speaks to our response to what the government indicated
25 in the throne speech that they were going to commit to

TIM GUEST - 30

1 doing, and it largely was associated with our concerns
2 about the health work force and stabilizing the health
3 system, not per se the pandemic, rather some of the
4 outcomes associated with it, was really the premise to
5 this document.

6 And it was really speaking to where we felt
7 the government fell short in their throne speech
8 commitments to deal with those issues.

9 64. Q. Thank you. And accordingly, it doesn't
10 reference pandemic measures, measures to mitigate
11 against COVID-19 such as vaccines, masks ---

12 A. No. Sorry. The purpose behind it is
13 solely to respond to the speech from the throne, the
14 government's commitments and where we felt they fell
15 short. It's not related to government policy or
16 pandemic measures at all.

17 MR. BOISSONNEAU-LEHNER: I understand.
18 Thank you. Recognizing my friend's objection, I would
19 like this to be marked as the next exhibit, Exhibit 3
20 on the cross-examination of Mr. Guest.

21 --- EXHIBIT NO. 3: Document entitled "2021 speech from
22 the throne commits to strengthening Canada's health
23 system" dated November 21, 2001

24 BY MR. BOISSONNEAU-LEHNER:

25 65. Q. Mr. Guest, I've now pulled up another

TIM GUEST - 31

1 statement. Again, I'll give you the chance to read
2 through it.

3 A. Is there anything further down?

4 66. Q. There is.

5 A. Okay.

6 67. Q. So was a statement that was published
7 by Canadian Nurses Association?

8 A. It looks like it, yes.

9 68. Q. It's entitled "CNA supports amendments
10 to the Criminal code that will protect health-care
11 workers"; right?

12 A. Yes.

13 69. Q. It was published on November 26th,
14 2021?

15 A. Yes, that looks like the date that's on
16 it.

17 70. Q. Would the statement appear on CNA's
18 website?

19 A. It looks like it did, yes.

20 71. Q. And this particular publication doesn't
21 reference COVID-19.

22 A. What this specific publication is
23 speaking to is CNA's response to the federal government
24 indicating that it would introduce changes to the
25 Criminal Code making it illegal to obstruct health

TIM GUEST - 32

1 facilities and threaten or intimidated health care
2 workers.

3 This is an issue that has been a growing
4 concern amongst healthcare workers for a number of
5 years and where we had conversation with the government
6 over quite a period of time where we've wanted to see
7 them strengthen the protections for the health work
8 force.

9 As an example, there was a nurse in New
10 Brunswick, a number of months -- I can't remember the a
11 date; a couple of years ago where she was severely
12 beaten by a visitor and while we saw an increase in
13 these sorts of events in the pandemic, this is an issue
14 that has been a challenge in the health system for a
15 number of years and is certainly not specific to COVID-
16 19 or the pandemic. It's a much broader societal
17 issue.

18 MR. BOISSONNEAU-LEHNER: Okay. Thank you
19 very much. Recognizing my friend's objection, I would
20 like this marked as Exhibit 4 to the cross-
21 examination.

22 --- EXHIBIT NO. 4: Document entitled "CNA supports
23 amendments to the Criminal Code that will protect health-
24 care workers"

25 MR. DEARDEN: Counsel, you will be providing

TIM GUEST - 33

1 copies of these documents to us this afternoon?

2 MR. BOISSONNEAU-LEHNER: Yes, I will. As
3 soon as I'm finish Mr. Guest's cross-examination.
4 And Madam Reporter, I imagine you will need a copy as
5 well?

6 THE REPORTER: No, I don't need a copy.
7 Thank you. It's in the transcript.

8 BY MR. BOISSONNEAU-LEHNER:

9 72. Q. Thank you. Mr. Guest, I've pulled up
10 another on my screen. I'll give you an opportunity to
11 review it.

12 A. Okay.

13 73. Q. Mr. Guest, is this a statement that was
14 published by the Canadian Nurses Association?

15 A. Yes, it does appear like it is.

16 74. Q. On December 1st, 2021?

17 A. That's the date that is certainly
18 showing on the screen.

19 75. Q. And the title of the document is CNA
20 congratulates Lisa Little on becoming First Vice-
21 President of ICN."

22 A. Yes.

23 76. Q. And this particular document doesn't
24 reference COVID-19; correct?

25 A. It does not.

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1 MR. BOISSONNEAU-LEHNER: Thank you.

2 Recognizing my friend's objection, I would like this
3 to be marked as the next exhibit. I believe we're at
4 Exhibit 5?

5 THE REPORTER: Yes. thank you.

6 --- EXHIBIT NO. 5: Document entitled, "CNA congratulates
7 Lisa Little on becoming First Vice-President of ICN"

8 BY MR. BOISSONNEAU-LEHNER:

9 77. Q. I've pulled up another document, Mr.
10 Guest. Would you please review it and let me know when
11 I can scroll up?

12 A. Okay.

13 78. Q. This is document that was published by
14 the Canadian Nurses Association?

15 A. This appears to be a document that was
16 posted as a communication mechanism to announce, as the
17 title suggests, the retirement of Michael Villeneuve,
18 yes.

19 79. Q. It would have appeared on the Canadian
20 Nurses Association's website?

21 A. It looks like it did, yes.

22 80. Q. The title is "CNA announce retirement
23 of Michael Villeneuve, CEO", as you referenced;
24 correct?

25 A. Yes.

TIM GUEST - 35

1 81. Q. Dated December 7th, 2021?

2 A. Yes, the date is on it.

3 82. Q. And this particular document doesn't
4 reference COVID-19? Oh, actually it does. I'm sorry.
5 This document does reference COVID-19.

6 A. The purpose of this is a letter from
7 myself as the president to notify the membership of CNA
8 of Michael Villeneuve's retirement announcement.
9 That's the intent and the content behind it and it
10 speaks to some of the achievements that she led the
11 organization through. That's largely what this
12 document is.

13 83. Q. It does not speak to pandemic measures
14 specifically; correct?

15 A. No, it just speaks to the
16 organization's response to the pandemic.

17 MR. BOISSONNEAU-LEHNER: Thank you. If I
18 could have this marked as Exhibit 6, recognizing my
19 friend's objection.

20 THE REPORTER: Thank you.

21 --- EXHIBIT NO. 6: Document entitled "CNA announces
22 retirement of Michael Villeneuve, CEO"

23 BY MR. BOISSONNEAU-LEHNER:

24 84. Q. I'll pull up another document, Mr.
25 Guest. If you would please review it.

TIM GUEST - 36

1 A. Okay. You can scroll up.

2 85. Q. This document that we're looking at
3 right now -- it's a document that was published by the
4 Canadian Nurses Association?

5 A. That appears to be the case by what
6 you're showing me.

7 86. Q. It would have appeared on the Canadian
8 Nurses Association's website?

9 A. That's what it looks like.

10 87. Q. "CNA welcomes the federal government's
11 commitment to support health-care workers" is the title
12 of the publication?

13 A. That's what it states.

14 88. Q. And it was published around December
15 16th, 2021?

16 A. That is the date that's on the document
17 you're showing me.

18 89. Q. Thank you. This publication references
19 COVID-19; correct?

20 A. This document is a response from the
21 organization related to the content of the mandate
22 letter from the Prime Minister to the Federal Health
23 Minister and it speaks to areas that are in the mandate
24 letter that we were happy with and continues to
25 advocate for areas we felt were inadequately addressed,

TIM GUEST - 37

1 largely the health human resources crisis and it's not
2 a document that is specific to the COVID-19 pandemic,
3 but it's referenced in it as per the weather.

4 MR. BOISSONNEAU-LEHNER: Thank you.
5 Recognizing my friend's objection, if I could have it
6 marked as Exhibit 7 for identification.

7 THE REPORTER: Thank you.

8 --- EXHIBIT NO. 7: Document entitled "CNA welcomes the
9 federal government to support health-care workers" dated
10 December 16, 2021

11 BY MR. BOISSONNEAU-LEHNER:

12 90. Q. So we've just reviewed seven statements
13 that were made before January of 2022. And fair to say
14 some of these reference COVID-19, some do not.

15 A. I would say that COVID-19 is referenced
16 in them, but the documents that you showed me today, it
17 wasn't the subject matter behind them.

18 91. Q. I see. And none of them deal with the
19 subject matter of pandemic measures, as you describe in
20 your ---

21 A. No.

22 92. Q. Thank you. I'll stop; sharing my
23 screen for a moment. So it's your evidence, as I
24 understand it from reviewing your Affidavit, that after
25 January 7th, or more precisely, after you became aware

TIM GUEST - 38

1 of the plaintiff's libel action, that Canadian Nurses
2 Association became more hesitant to discuss COVID-19
3 and pandemic measures than they were before; correct?

4 A. That would be correct.

5 93. Q. Do you know whether Canadian Nurses
6 Association did continue to publish statements after
7 they were served with the libel notice relating to the
8 COVID-19 pandemic?

9 A. I don't believe that to be the case,
10 but I'd have to go back and review them all to know for
11 sure.

12 94. Q. Okay. Well, let's turn to Exhibit 30
13 of your Affidavit.

14 A. Okay.

15 95. Q. So this is a statement that was made by
16 Canadian Nurses Association dated April 11th, 2022 and
17 it relates to the COVID-19 pandemic; right? I'll give
18 you a chance to read through it. Let me know when
19 you're done.

20 A. Okay.

21 96. Q. So this document relates to the COVID-
22 18 pandemic; correct?

23 A. Yes, it does. Yes.

24 97. Q. Why were you not concerned about
25 publishing this specific April 11, 2022 publication?

TIM GUEST - 39

1 A. I believe in reviewing this document it
2 was really responding to what we were seeing as a
3 significant rise in cases from across the country and
4 just trying to bring back to the awareness of the
5 public for us all to do our part to try and minimize
6 the impact of it, was largely what the purpose of that
7 was.

8 98. Q. And you weren't deterred from that
9 purpose on account of the libel action that was brought
10 by the plaintiff, that's the CNA and yourself
11 personally; correct?

12 A. I believe with this statement we very
13 much spoke to -- you know, asking the public to keep in
14 mind the increase in cases and to be vigilant. It did
15 not speak to mandates or any of the items that we
16 believed to be in the lawsuit.

17 99. Q. I'm going to return to sharing my
18 screen. I have a few more documents to show you, and
19 I'm anticipating your counsel's objection, as these
20 documents are not in either parties' records.

21 MR. DEARDEN: You're correct; I object.

22 --- REFUSAL NO. 5

23 BY MR. BOISSONNEAU-LEHNER:

24 100. Q. Thank you. I've pulled up a document
25 on my screen. Are you able to see it, Mr. Guest?

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1 A. Yes, I am.

2 101. Q. I'll give you a chance to review it.

3 A. Okay.

4 102. Q. Is this a statement that was published
5 by the Canadian Nurses Association?

6 A. So the document you're showing me
7 appears to be joint statement by the Canadian
8 Federation of Nurses Union and the Canadian Nurses
9 Association.

10 103. Q. It's entitled, "Governments must work
11 together to combat nurse burnout, CNA, CHNU say."

12 A. Yes.

13 104. Q. It would have been published on the
14 Canadian Nurses Association's website.

15 A. That appears to be the case, yes.

16 105. Q. And it's dated January 20th, 2022.

17 A. That's the date that's on the document
18 you're showing me, yes.

19 106. Q. Thank you. And this document
20 references COVID-19; does it not?

21 A. The document references COVID-19, but
22 the subject matter and the intent behind it is speaking
23 to significant burnout of the health workforce and
24 speaking to high levels of workload and the
25 deterioration of the workforce that was experienced

TIM GUEST - 41

1 over the last number of months.

2 And it also speaks to the health human
3 resource crisis. That is the subject matter behind
4 this document and it's urging the government to put in
5 place measures to help deal with some of those issues.

6 107. Q. Particularly because the Omicron
7 variant was pushing the healthcare system to the brink
8 of collapse; correct?

9 A. I would say that it was a factor, but
10 it's not the only factor.

11 MR. BOISSONNEAU-LEHNER: Recognizing my
12 friend's objection, if I could have this marked as
13 Exhibit 8 for identification on Mr. Guest's cross-
14 examination?

15 THE REPORTER: Thank you.

16 --- EXHIBIT NO. 8: Document entitled "Governments must
17 work together to combat nurse burnout, CNA, CFNU say"
18 dated January 20th, 2022

19 BY MR. BOISSONNEAU-LEHNER:

20 108. Q. Mr. Guest, I've pulled up another
21 document on my screen. Would you please review it?

22 A. Okay.

23 109. Q. This document that's on my screen right
24 now, is it a Canadian -- on your screen too, I guess,
25 is it a Canadian Nurses Association publication?

TIM GUEST - 42

1 A. So it appears to be, yes.

2 110. Q. It's dated February 1st, 2022?

3 A. That's the date that I can see, yes.

4 111. Q. It's entitled, "CNA applauds federal
5 government for the reinstating chief nursing officer
6 for Canada."

7 A. That's what it reads, yes.

8 112. Q. It would have appeared on the Canadian
9 Nurses Association's website; correct?

10 A. It appears to be, yes.

11 113. Q. And the article references COVID-19;
12 doesn't it?

13 A. Yes, so the subject matter for this
14 document is a comment related to the announcement by
15 the Federal Government that they were reinstating the
16 chief nursing officer position, something that we had
17 been advocating to the federal government for a number
18 of months, and the COVID-19 reference to it is really
19 not relevant in the subject matter; it's really
20 speaking to the reinstatement or the role and what we
21 believed the role could have from an impact perspective
22 on health policy decision-making at the federal
23 government level.

24 MR. BOISSONNEAU-LEHNER: I understand.

25 Thank you. Recognizing my friend's objection, if I

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1 could have this marked as Exhibit 9 on the cross-
2 examination of Mr. Guest.

3 --- EXHIBIT NO. 9: Document entitled, "CNA applauds
4 federal government for the reinstating chief nursing
5 officer for Canada" dated February 1, 2022

6 MR. BOISSONNEAU-LEHNER: Would you mind if
7 we just go off the record for just a second?

8 --- OFF THE RECORD (1:58 P.M.) ---

9 --- UPON RESUMING (1:59 P.M.) ---

10 BY MR. BOISSONNEAU-LEHNER:

11 114. Q. Mr. Guest, I'm pulling up another
12 document. Please review and let me know when you
13 finish reading.

14 A. Okay. Scroll up, please.

15 115. Q. This was a statement published by the
16 Canadian Nurses Association?

17 A. Yes, that appears to be the case. Yes.

18 116. Q. On February 14th of 2022.

19 A. That's the date that's on the document
20 you're showing me, yes.

21 117. Q. It's entitled, "Canadian Nurses
22 Association unveils Massive 28-storey Mural to
23 Celebrate nurses nationwide"?

24 A. Yes, that what I see.

25 118. Q. And this article references continuing

TIM GUEST - 44

1 COVID-19 pandemic; doesn't it?

2 A. This document -- what it's speaking
3 about is -- it's announcement of the unveiling of a
4 mural as part of CNA's current branding exercise and
5 it's also to celebrate nurses and recognize nurses for
6 the role they've played.

7 It's not -- the content of it isn't
8 specifically about the pandemic, rather to create
9 awareness related to the impact that nurses have in the
10 Canadian health system and also speak to the issues
11 that are impacting the nursing profession and some of
12 the factors impacting the shortage and to -- the
13 intention behind is to create awareness of the
14 organization and the nursing profession itself.

15 MR. BOISSONNEAU-LEHNER: If I could have
16 this document marked as Exhibit 10, recognizing my
17 friend's objection.

18 --- EXHIBIT NO. 10: Document entitled, "Canadian Nurses
19 Association Unveils Massive 28-storey Mural to Celebrate
20 Nurses Nationwide" dated February 14, 2022

21 BY MR. BOISSONNEAU-LEHNER:

22 119. Q. Mr. Guess, I know this is tedious. I
23 only have three more. Thanks for your patience. I've
24 pulled up another document. Mr. Guest, would you
25 please read it and let me know when you need me to

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1 scroll up.

2 A. Okay.

3 120. Q. Mr. Guest, this document that's on your
4 screen, it's a statement that was made by the Canadian
5 Nurses Association?

6 A. It appears to be, yes.

7 121. Q. Published on March 28th, 2022?

8 A. That's the date that I see.

9 122. Q. That it appeared on the Canadian Nurses
10 website?

11 A. It appears to have, yes.

12 123. Q. And it's entitled "Federal government
13 takes step in the right direction to stabilize Canada's
14 health-care system; correct?

15 A. That is what's there, yes.

16 124. Q. COVID-19 is referenced in this
17 publication?

18 A. So this publication is a response to
19 the federal government announcing a \$2 billion dollars
20 to the provincial governments, specific to dealing with
21 surgical backlog that was happening across the health
22 system, and while COVID-19 is referenced in it, it's
23 not the topic that is the intent of the statement,
24 rather to comment about the positive nature of the fact
25 that the federal government has announced money, but to

TIM GUEST - 46

1 also point out that even with the infusion of funds the
2 current health human resource shortage and the
3 challenges associated with shortage of the nursing
4 workforce are factors the government still needs to
5 consider for that issue to be resolved. That's largely
6 the underlying content and theme of that statement.

7 MR. BOISSONNEAU-LEHNER: hank you, Mr.
8 Guest, for that explanation. If I could have this
9 document, the March 28th statement marked as the next
10 exhibit. I think we're at Exhibit 11, if I'm not
11 mistaken, recognizing my friend's objection.

12 THE REPORTER: Yes. Thank you.

13 --- EXHIBIT NO. 11: Document entitled, "Federal
14 government takes step in the right direction to stabilize
15 Canada's health-care system" dated March 28, 2022

16 BY MR. BOISSONNEAU-LEHNER:

17 125. Q. Mr. Guest, I've pulled up yet another
18 document, if you would like the time to read it, let me
19 know when I need to scroll up.

20 A. Okay. You can scroll up.

21 126. Q. This is a statement that was published
22 by the Canadian Nurses Association?

23 A. It appears like it was, yes.

24 MR. BOISSONNEAU-LEHNER: On May 12th, 2022?

25 A. That's the date that I see, yes.

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1 127. Q. It would have appeared on Canadian
2 Nurses Association's website?

3 A. That's how it appears, yes.

4 128. Q. It's entitled, "International Nurses
5 Day is an opportunity to recognize how nurses continue
6 to answer the call"; correct?

7 A. That's what I see there, yes.

8 129. Q. And this publication references COVID-
9 19 as well; right?

10 A. So this is a statement that was put out
11 during National Nursing Week on International Nurses
12 Day, which is May 12th, to commemorate International
13 Nurses Day and it really speaks to celebrating nurses
14 in the nursing profession. COVID-19 is referenced, but
15 it's not the subject matter behind the statement.

16 MR. BOISSONNEAU-LEHNER: If I could have
17 this marked as the next exhibit on the cross-
18 examination of Mr. Guest, Exhibit 12, recognizing my
19 friend's objection.

20 THE REPORTER: Thank you.

21 --- EXHIBIT NO. 12: Document entitled, "International
22 Nurses Day is an opportunity to recognize how nurses
23 continue to answer the call" dated May 12, 2022

24 BY MR. BOISSONNEAU-LEHNER:

25 130. Q. Mr. Guest, the last one. I've pulled

TIM GUEST - 48

1 up a document and I'm sharing it on your screen, the
2 same procedure, if you could read it and let me know if
3 I need to scroll. Let me know when you're done.

4 A. Okay. You can scroll up.

5 131. Q. This is a document published by
6 Canadian Nurses Association?

7 A. It appears to be, yes.

8 Q. It's entitled, "Physician, nurses offer
9 solutions to immediately address health human resource
10 crisis."

11 A. that's the title I see.

12 132. Q. It's dated May 16, 2022?

13 A. That's the date I see, yes.

14 133. Q. And it would have appeared on the
15 Canadian Nurses Association's website; correct?

16 A. That's what it looks like, based on
17 what you're showing me on the screen.

18 134. Q. Thank you. This publication references
19 COVID-19, doesn't it?

20 A. So this document is in response to a
21 health human resource roadmap that was a collaboration
22 between the Canadian Medical Association, the Canadian
23 Nurses Association and the College of Family Physicians
24 of Canada that we collectively presented to the federal
25 government as a series of actions that the federal

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1 government could do, along with the provinces and
2 territories to deal with the looming health human
3 resource crisis that was impacting the Canadian Health
4 System.

5 While COVID-19 is mentioned in it, it's not
6 the subject matter that was intended behind the
7 statement. The statement was really to speak about the
8 roadmap that we had collectively prepared and submitted
9 to government.

10 MR. BOISSONNEAU-LEHNER: Thank you for that
11 explanation, Mr. Guest. And if I could have this
12 marked as Exhibit 13 on the cross-examination of Mr.
13 Guest, recognizing my friend's objection.

14 THE REPORTER: Thank you.

15 --- EXHIBIT NO. 13: Document entitled, "Physician, nurse
16 offer solutions to immediately address health human
17 resource crisis", dated May 16, 2002

18 BY MR. BOISSONNEAU-LEHNER:

19 135. Q. And I'll stop sharing screen. Mr.
20 Guest, would you pull up your Affidavit and go to
21 paragraph 46, where you depose, "I feel restricted in
22 making comments about COVID-19, masking, vaccination or
23 social distancing including not liking or sharing
24 comments of others on social media." My first question
25 is ---

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1 A. Can you just give me a second to get
2 there? You said it was 46?

3 136. Q. Paragraph 46.

4 A. Okay.

5 137. Q. My question is do you have a social
6 media profile; personal social media profile?

7 A. I do.

8 138. Q. What platforms are you active on in
9 social media?

10 A. On Facebook and LinkedIn predominately.
11 I have Twitter, but I don't -- I'm not a twitterer; I
12 don't really use it. It's more to follow.

13 139. Q. And have you made any comments related
14 to COVID-19 masking, vaccination or social distancing
15 on Facebook since you became aware of the lawsuit?

16 A. I do not believe so.

17 140. Q. How about on LinkedIn, did you make any
18 statements relating to COVID-19, masking, vaccination
19 or distancing on LinkedIn?

20 A. I don't believe I have there either,
21 no.

22 141. Q. Nor have you shared any comments
23 relating to COVID-19 on your personal Facebook profile?

24 A. I don't have any recollection that I
25 have.

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1 142. Q. How about LinkedIn, do you have any
2 recollection of whether you shared or liked any posts
3 relating to COVID-19?

4 A. I don't have any recollection that I
5 have.

6 143. Q. I would ask that you confirm your
7 recollection? If you could review your Facebook and
8 your LinkedIn profile, and I understand you're not
9 active on Twitter, so I won't ask for that. If you
10 could review your Facebook and LinkedIn profile from
11 January 2022 to present and simply advise me whether
12 there are some posts about COVID-19, including masking,
13 vaccinations, social distancing or not? Would that be
14 okay?

15 MR. DEARDEN: I've taken that under
16 advisement. And it would be from the date in January,
17 which I think was the 7th that Colin Butler contact
18 CNA.

19 --- UNDER ADVISEMENT NO. 1

20 MR. BOISSONNEAU-LEHNER: Correct. Yes, from
21 January 7th, 2022 to present is what I'd like. If
22 there's something responsive, as in responsive in the
23 sense that there's a like, there's a share, there's a
24 comment relating to COVID-19 masking, vaccinations or
25 social distancing, if that particular post could be

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1 produced to me, and if nothing exists, then of course
2 nothing to produce.

3 MR. DEARDEN: Actually, I take back my under
4 advisement and Mr. Guest will provide an answer in
5 writing.

6 --- UNDERTAKING NO. 2

7 BY MR. BOISSONNEAU-LEHNER:

8 144. Q. Thank you. Is it your view that you
9 need to speak about Canadian Frontline Nurses to be an
10 effective advocate for Canadian nurses and public
11 health measures relating to COVID-19?

12 MR. DEARDEN: I didn't understand that
13 question, Counsel. Could you say it again, please?

14 BY MR. BOISSONNEAU-LEHNER:

15 145. Q. Mr. Guest, is it your view that in
16 order to be an effective advocate for Canadian nurses
17 and COVID-19 public health measures, that you are
18 required to speak about Canadian frontline Nurses?

19 A. So no. I believe that to be an
20 effective advocate as a national professional nursing
21 organization, we need to be able to comment when
22 there's any opportunity that information could be put
23 into the public realm that we believe has a negative
24 impact on the health of the public or the nursing
25 profession, irrespective of where it comes from.

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1 146. Q. I just have a last series of questions
2 with respect to the David York documentary that you
3 deposed to.

4 And if you need to refresh your memory, I think there's
5 some correspondence with respect to that set out at
6 Exhibit 31 of your Affidavit.

7 A. Okay.

8 147. Q. So the Canadian Nurses Association
9 wasn't worried about participating in David York's
10 documentary initially; right? Is that fair?

11 A. I would say that from the moment the
12 request came to us to participate, it was automatically
13 when we questioned whether we were comfortable doing
14 so, and made the decision that it wasn't in our best
15 interest and we decided that we would not, right from
16 the date the request came.

17 148. Q. But it appears from -- hold on, I'm
18 catching up here. So my understanding from reviewing
19 the chain of emails, which goes all the way to page 481
20 of the motion record, that the invite for CNA's
21 participation in meeting with David York was sent on
22 April 22nd, 2022. Would you agree with that?

23 MR. DEARDEN: Are you looking at the 5:00
24 p.m. one on the bottom of page 480?

25 BY MR. BOISSONNEAU-LEHNER:

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1 149. Q. Five p.m. one at the bottom of page
2 480, which continues onto page 481.

3 A. And sorry; you're asking me what again,
4 please?

5 150. Q. Yes. So an invite was sent on behalf
6 of the work to participate in a meeting regarding his
7 documentary on April 22nd, 2022; correct?

8 A. April 22nd, 2022 at 5:00 p.m. is the
9 date that is identified in that email, yes.

10 151. Q. Okay.

11 MR. DEARDEN: Just a second, Counsel. So
12 Mr. Guest, we're looking at the April 22nd, 2022, 5:00
13 p.m. email. And if you flip the page to page 481,
14 there appears to be an invite for a call, or I'm not
15 sure, a Zoom call, I guess, April 26th, 2022 at 3:00
16 p.m. Do you see that?

17 THE DEPONENT: Yes, I do.

18 MR. DEARDEN: So Counsel, your question
19 about that is what?

20 BY MR. BOISSONNEAU-LEHNER:

21 152. Q. So that's what I wanted to establish.
22 So my next question is it wasn't until two hours before
23 the meeting that Mr. David York was informed that he
24 would have to cancel the meeting; right?

25 A. So based on the Exhibit that is here,

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1 there is a response back to the individual on April
2 26th, just prior to one o'clock, that the meeting that
3 was set up, from what I understand here on the 22nd,
4 was cancelled. I can't speak for the timeline without
5 -- I'd have to look at calendars and things and speak
6 to the individuals as to what the delay was about,
7 whether there's a weekend or anything in there. I
8 honestly can't speak to the timeline between the dates.

9 153. Q. The April 26th, 2022, 12:59 p.m. email
10 on the second line there, it states, "We just realized
11 that at this time we are unable to speak to this due to
12 a matter that is before the courts."

13 And then the next line reads, "We are
14 terribly sorry for not realizing this at the onset. We
15 do appreciate your understanding."

16 So my question is what caused this sudden
17 realization two hours before the meeting with David
18 York that Canadian Nurses Association wouldn't be able
19 to participate in the project?

20 A. So I believe likely the rationale was
21 the staff person that was dealing with this individual
22 made Donna or myself aware, and wasn't aware that they
23 could have the meeting or not. And when we became
24 aware of it, a decision was made that we wouldn't
25 participate.

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1 154. Q. And why did the matter that is before
2 the court that's referenced in this email -- why did
3 that prevent your participation in David York's
4 documentary?

5 A. I believe it was related to the content
6 of the documentary and us not necessarily knowing what
7 all he was going to do with it. And we believed it
8 wasn't appropriate considering this suit was before the
9 courts.

10 MR. BOISSONNEAU-LEHNER: Mr. Guest, thank
11 you very much. Those are all my questions, subject to
12 the undertakings and dealing with the refusals.

13 RE-EXAMINATION BY MR. DEARDEN:

14 155. Q. So I have a couple of questions arising
15 out of your cross-examination. Mr. Guest, you just
16 said "Donna" in your answer to the questions about
17 Exhibit 31. Donna is who?

18 A. Donna Dewar, the Chief Operating
19 Officer for the Canadian Nurses Association.

20 156. Q. And then you also said when "we" became
21 aware. Who is the "we"?

22 A. It could have either been forwarded to
23 Donna or myself. I don't recall if I was involved in
24 the decision at the time, but generally what would
25 happen is if Donna or I were aware that something like

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1 that was happening, in this instance a decision was
2 made that we wouldn't participate in it.

3 I do know about it. It is in the exhibits
4 because I was made aware that we had made a decision
5 not to participate in it. Yes.

6 157. Q. Okay. Now, my last set of questions
7 will deal with these 14 documents that are not included
8 in anybody's Affidavits' exhibits. They've been marked
9 as exhibits one to 13 under my objection. And Counsel,
10 I haven't seen any of those documents and not reviewed
11 them.

12 You've drawn them to my attention now for the
13 first time during this cross-examination. I may change
14 my mind on the objections, but I need to review the
15 documents because I don't have them.

16 Now, my re-examination is, Mr. Guest, you
17 have been shown on screen 13 documents marked Exhibits
18 1 to 13, and I want you to turn up paragraphs 45 and 46
19 of your Affidavit.

20 And my question to you, sir, is do any of
21 those exhibits, one to 13, change your evidence in
22 paragraph 45, that to your knowledge, the CNA has never
23 been sued for libel prior to this libel action, the CNA
24 has been extremely hesitant to speak about the
25 plaintiffs because it fears being targeted by further

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1 lawsuits; the libel actions impact on the CNA has
2 reduced the CNA's effectiveness as an advocate for
3 Canadian nurses and public health measures.

4 Do any of those exhibits change your evidence
5 in paragraph 45, Mr. Guest?

6 A. No, they don't because we believe none
7 of them have anything to do with the content matter
8 here.

9 And there have been times where we may have
10 made a comment on decisions, political decisions, made
11 at some of the provinces when they relaxed public
12 health measures that we did not make that, you know,
13 are examples of things that we may have done without
14 this libel suit in front of us that we've chosen not to
15 do.

16 158. Q. And with respect to paragraph 46 of
17 your Affidavit, where you say, "The libel action's
18 impact on me personally has been similarly severe. I
19 feel restricted in making comments about COVID-19,
20 masking, vaccinations, or social distancing, including
21 not liking or sharing the comments of others on social
22 media. I am afraid that if I do comment publicly on
23 these matters I will be suited again."

24 Recollecting Exhibits 1 to 13 that have been
25 shown to you today, Mr. Guest, do any of those

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1 documents change the evidence that you have set out in
2 paragraph 46 of your Affidavit?

3 A. No, sir, they do not.

4 MR. DEARDEN: That completes my questions,
5 so Mr. Guest is free to go if he wishes, Counsel.

6 MR. BOISSONNEAU-LEHNER: Yes, thank you, Mr.
7 Guest.

8 --- WHEREUPON THE EXAMINATION WAS ADJOURNED AT 2:31 P.M
9

10 I hereby certify that this is the
11 examination of TIM GUESS taken
12 before me to the best of my skill
13 and ability on the 21st day of July,
14 2022.

15 -----
16

17 JODY SAUVE - Court Reporter
18
19
20
21

22 Reproductions of this transcript are in direct
23 violation of O.R. 587/91 Administration of Justice Act
24 January 1, 1990, and are not certified without the
25 original signature of the Court Reporter



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‘Without health workers, there is no health care’: Health care leaders call for urgent action at emergency COVID-19 summit



Ottawa — Oct. 6, 2021 — In many parts of Canada, hospitals are overwhelmed, vaccine rates are at a standstill and public health measures are being reinstated to contain rising COVID-19 cases. Amid a growing fourth wave, health care workers are burnt out, demoralized and exhausted as they care for patients. In addition, many Canadians are waiting for much-needed procedures that have been delayed due to increasing backlogs.

On Tuesday evening, in response to this state of crisis, the Canadian Medical Association (CMA) and the Canadian Nurses Association (CNA) hosted an emergency summit. It brought together nearly 40 national and provincial health organizations, and included nurses, physicians, personal support workers, psychologists, educational institutions, and other health organizations.

During the meeting, health care leaders identified both short-term and long-term actions to contain the fourth wave, lead an effective COVID-19 response and ensure Canada’s health system remains sustainable. These include:

1. Taking decisive urgent and long-term actions to address staff shortages across Canada, examining issues including recruitment, retention, workload and safety, and bring immediate relief to workers in COVID-19 hot zones.
2. Making immediate commitments at all levels of governments — including municipal, provincial, territorial and federal — to avoid the collapse of the health systems at all costs by implementing stronger public health measures and empowering authorities such as school boards to intervene and protect the people they serve.
3. Providing urgent and long-term mental health support for health workers who continue to work in dire conditions to care for patients and keep the health system afloat.

“Health workers across the country are past the point of exhaustion and they need to feel like there is a light at the end of this endless tunnel. We need to aggressively work to implement public health measures — even those unpopular ones — to regain control. We can no longer ask our health workers to carry the load.” — Dr. Katharine Smart, CMA president

“Throughout the summit we heard common concerns and themes being shared on how to immediately support health workers in this crisis. It is clear, that we need a multi-pronged intervention, one that addresses the critical short-term challenges and one that also looks at beyond the COVID-19 crisis. While improved data collection and national health human resource frameworks are necessary, they do not fix the immediate issues. For our health system to make it through the fourth wave, governments and health organizations need to urgently work together to support our health workers. Without health workers, there is no health care.” — Tim Guest, CNA president

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About the CMA

The Canadian Medical Association is the national voice of the medical profession. Our focus is on creating strong and accessible health systems, fostering well-being and diversity in medical culture, and ensuring every person in Canada has equal opportunity to be healthy. In partnership with physicians, medical learners, patients and others, we advance these goals through advocacy, knowledge sharing and granting.

About the CNA

The Canadian Nurses Association (CNA) is the national and global professional voice of Canadian nursing. We represent registered nurses, nurse practitioners, licensed and registered practical nurses, registered psychiatric nurses and retired nurses across all 13 provinces and territories.

For further information or to conduct interviews, please contact:

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613-807-0457
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Nurses commit to action against anti-Black racism in nursing and health care



November 15, 2021 — Anti-Black racism is a public health emergency in Canada that has created and reinforced serious health and social inequities for Black Canadians. For too long we have rested comfortably on the false narrative that systemic racism did not exist in our country or our profession; over the course of the past two years, this reality has been harshly exposed.

Today, the Canadian Nurses Association, along with leaders of the Canadian Association of Schools of Nursing, Canadian Black Nurses Alliance, Canadian Black Nurses Network, Canadian Federation of Nurses Unions, Canadian Nursing Students' Association, Nurse Practitioner Association of Canada, Association of Regulated Nurses of Manitoba, Coalition of African, Caribbean and Black Nurses in British Columbia, Nurses and Nurse Practitioners of British Columbia, Quebec

Nurses Association, and WeRPN Registered Practical Nurses Association of Ontario, are releasing a *Nursing Declaration Against Anti-Black Racism in Nursing and Health Care*.

Similar to the *Nursing Declaration Against Anti-Indigenous Racism in Nursing and Health Care*, which was released in June 2021, this declaration will set the context for a major response by nurses and lays out principles and actions for which individuals, nursing organizations, and the nursing profession will be held accountable. The intention is for the declaration to be a living document that helps our respective organizations take meaningful action to decolonize the nursing profession and ensure the profession can continue to provide safe, compassionate, and ethical care to Black and other racialized communities.

The declaration lays out that as nurses, we will no longer be complacent or silent.

The group of associations will convene at the First National Summit on Racism in Nursing and Health Care on November 24, 2021, where the anti-Indigenous and anti-Black declarations will guide the conversation. The summit, proudly sponsored by the Johnson & Johnson Family of Companies in Canada, will feature guest leader and CNA ambassador, The Honourable Murray Sinclair, and political activist and co-founder of the Black Lives Movement Canada, Sandy Hudson.

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About the Canadian Nurses Association

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2021 speech from the throne commits to strengthening Canada's health system

November 23, 2021 — The [2021 speech from the throne](#) marked a historic moment in Canada's reconciliation journey as it was delivered by Mary Simon, Canada's first Indigenous Governor General. The throne speech, which marked the opening of the first session of the 44th Parliament, included many of the Liberal government's election priorities to improve Canada's health-care system.

The Canadian Nurses Association (CNA) was pleased to see recognition that work needs to be done to strengthen the health-care system, enhance mental health care and long-term care, fight discrimination in the health system, advance reconciliation, and improve data collection across health systems.

CNA is extremely concerned with Canada's ongoing health workforce crisis. In some places across the country, health-care organizations and systems are on the brink of collapse due to health worker burnout and shortages. Getting the pandemic under control was a priority in the throne speech and, to achieve that, urgent investments in Canada's health workforce are needed.

"Nurses and health-care workers are burnt out, exhausted, and demoralized. Even before COVID-19, the health system was in crisis due to health worker shortages. Now, these problems have been exacerbated and there is a worrying level of health workers leaving their

profession. They are also facing increasing levels of violence and harassment, which is why the government's commitment to protect health workers is so important." said Tim Guest, president of CNA. "Canada can only finish the fight against COVID-19 and rebuild a resilient economy if we have a well-functioning health system and health workforce," said Guest.

Canada's health workforce crisis has reached a point where no single jurisdiction can tackle it on its own. CNA urges the federal government to take action. This can be done by investing in a renewed pan-Canadian health human resources strategy that addresses critical staffing shortages, and improves health workforce data collection and health worker mobility.

CNA looks forward to further details in the new ministerial mandate letters on how the government plans to achieve real results for all people in Canada. We stand ready to collaborate with the federal government to support the implementation of priorities outlined during the election and in the throne speech.

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CNA supports amendments to the Criminal Code that will protect health-care workers

November 26, 2021 – The Canadian Nurses Association (CNA) commends the federal government for introducing legislation to protect health-care workers and ensure safe access to health care. The new bill creates new offences under the Criminal Code that will make it illegal to obstruct access to health facilities and to threaten or intimidate health-care workers. This new legislation will assist in retaining nurses in the workforce and avoid further escalation of the ongoing critical nursing shortages in Canada.

CNA has long been advocating for violence-free workplaces in health-care settings, where nurses have the right to work in respectful environments, safe from threats and intimidation. According to a Canadian Federation of Nurses Unions (CFNU) survey, over 80% of nurses reported facing physical violence from patients and families at work. CNA also welcomes the requirement for courts to consider more serious penalties for offenders who target health-care workers engaged in their duties or who impede others from obtaining health services.

“It is imperative that nurses feel safe at work. During the fall, we saw several protests in front of hospitals where nurses were harassed, threatened, and even assaulted while coming and going in the business of saving lives,” said Tim Guest, president of CNA. “With the ongoing nursing shortages, we welcome and fully support this legislation as it will help to ensure respectful working environments for health-care workers who are already past the breaking point,” said Guest.

CNA is committed to working and collaborating with the government and parliamentarians to see this bill come into law. We look forward to offering our resources and nursing expertise to help inform this important work and ensure the safety of all health-care workers.

-30-

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CNA congratulates Lisa Little on becoming First Vice-President of ICN

December 1, 2021 – The board, staff and members of the Canadian Nurses Association (CNA) would like to offer our sincerest congratulations to our member and an inaugural Fellow of the Canadian Academy of Nursing, Lisa Little, on being elected to the position of first vice-president of the International Council of Nurses (ICN).

“This is excellent news for both ICN and for nursing more broadly. Lisa’s extensive knowledge of health systems and the health profession, as well as her broad range of experience globally, will prove to be invaluable in her new position as first vice-president of ICN,” said Tim Guest, president of CNA.

A former director of public policy at CNA, Lisa was recently elected to a second term on the ICN board, representing North America and the Caribbean. She has been an important supporter of CNA over many years.

“I cannot think of a harder working or more suitable candidate for this position than Lisa. She embodies nursing leadership, and her ethic of hard work done well continues to help advance the nursing profession both in Canada and worldwide,” said Michael Villeneuve, CEO of CNA. “I know that Lisa will be an excellent support to the new president, Pamela Cipriano, and the entire ICN board.”

CNA also wishes to congratulate second vice-president Karen Bjørø, from Norway, and third vice-president Lian-Hua Huang, from Taiwan, as well as the entire new board of directors. We would also like to thank ICN's outgoing president, Annette Kennedy, for all her hard work. We look forward to our continued relationship with Lisa and the entire ICN board.

Lisa Little will be featured in a Canadian Nurse profile on December 6th.

-30-

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CNA announces retirement of Michael Villeneuve, CEO

December 7, 2021

Dear colleagues,

After a career in health care that began as an orderly at Ottawa's Montfort Hospital in 1978, Michael Villeneuve has announced his intention to retire as CEO of the Canadian Nurses Association (CNA) as of March 31, 2022.

Under Mike's leadership, CNA has implemented many historical changes. These include our new membership model, a new governance model, new by-laws, the new Canadian Academy of Nursing, and the launching of our Fellowship and Accreditation programs. CNA's advocacy and media efforts have increased noticeably and helped position nurses' voices to be heard in an impactful way as we saw with medical assistance in dying, long-term care, the response to the COVID-19 pandemic, and most recently the unfolding health human resources crisis. Mike's insights and personal values have led the beginning of much needed work against systemic racism in our health systems and action to advance our truth and reconciliation work.

With all these changes led by Mike, CNA now has a new brand, positioning the organization as a strong, member-driven organization that is answering the call of nurses. CNA is on a solid foundation to move into the future, serving nurses, our profession, and the public.

On behalf of the CNA board of directors and staff, we extend our deepest gratitude to Mike for his tremendous contributions to CNA and the nursing profession at large. The list of accomplishments achieved since he assumed the role in June 2017 reflect his outstanding hard work, dedication, and passion for nursing and for CNA. We look forward to continuing to work with Mike while ensuring a smooth transition to the next CEO. Details about the succession plan will follow in the new year. I know you will all join me in wishing Mike well as he steps into the next phase of his life!

A handwritten signature in blue ink, appearing to read 'Tim Guest', with a large loop at the end of the word 'Guest'.

Tim Guest, M.B.A., B.Sc.N., RN

President

president@cna-aiic.ca

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CNA welcomes the federal government's commitment to support health-care workers

December 16, 2021 — After almost two years of the COVID-19 pandemic, Canada is on the brink of a 5th wave that, once again, poses serious risks to our country's health system. For health workers, the pandemic has been unrelenting. They are burnt out, exhausted, and demoralized, contributing to a mass exodus from the health professions.

CNA is pleased to see that **ensuring health-care workers are supported and recruited across the country** was included in the mandate letter to the federal health minister.

"Canada can only finish the fight against COVID-19 if we have a well-functioning health system and health workforce. Critical staffing shortages were already an issue long before the pandemic began as our health-care system and those who work in it have been neglected for many years. Inadequate workforce planning, lack of timely data, and chronic underfunding have prevented us from planning, managing, and deploying our health workforce effectively," said Tim Guest, president of CNA.

On behalf of Canada's 448,000 nurses, CNA strongly supports the priorities highlighted in mandate letters to cabinet ministers. We are committed to working with the health minister and the federal government to continue the crucial work to support health-care workers.

“To help address the health human resources crisis, CNA is urging the federal government to demonstrate leadership by working with the provinces and territories to develop a new pan-Canadian health workforce action plan. This would include targeted funding for retention and recruitment in the immediate term, as well as establishing a national health workforce planning agency,” said Guest.

Along with prioritizing health-care workers, the ministerial mandate letters also included significant commitments in other areas important to nurses and the public, including long-term care, mental health, and virtual care.

CNA looks forward to collaborating with the federal government and parliamentarians to support the implementation of these priorities.

-30-

About the Canadian Nurses Association

CNA is the national and global professional voice of Canadian nursing. We represent registered nurses, nurse practitioners, licensed and registered practical nurses, registered psychiatric nurses, retired nurses, and nursing students across all 13 provinces and territories.

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Governments must work together to combat nurse burnout, CNA, CFNU say



CANADIAN FEDERATION
OF NURSES UNIONS
LA FÉDÉRATION CANADIENNE
DES SYNDICATS D'INFIRMIÈRES
ET INFIRMIERS

Canadian
Nurses
Association



Association des
infirmières et infirmiers
du Canada

January 20, 2022 — For 22 months nurses and other health workers have shouldered the enormous burden of the pandemic. They are burnt out, demoralized, and have little left to give.

The emergence of the highly transmissible Omicron variant that is fuelling the fifth wave of this pandemic deeply concerns the Canadian Federation of Nurses Unions (CFNU) and the Canadian Nurses Association (CNA) with regard to the state of Canada's health workforce. For months we have been warning that our health system is on the brink of collapse and this new variant may be the final straw.

Even before COVID-19, health care workers across Canada were under extreme stress due to excessive workloads and shortages. Now, the pandemic has not only increased the workload of nurses, but has also significantly elevated concerns regarding physical safety and ethical dilemmas, which have unsurprisingly led nurses to report worsening mental health and high rates of burnout. Rates of anxiety and depression among nurses have increased over 40% during this pandemic, and we can surmise that the exponential rates of the Omicron variant in the last few weeks will only add to this trend.

Preliminary studies show that one-third of nurses have given thought to leaving their health care facility and/or the profession altogether. Critical care shortages have been further exacerbated by large numbers of health workers being unable to work due to isolation requirements.

This has forced many hospitals across Canada to close beds and scale back emergency services, directly affecting those who are seeking care. Patients must travel much longer distances to access needed services and long-awaited surgeries are once again being postponed.

For those in hospital, critical staff shortages are challenging expected standards of care due to increasing patient-to-nurse ratios and re-deployment of staff. In many areas, multiple patients are being cared for by one nurse, putting patient safety at serious risk.

Canada's nursing workforce deserves better than this, and we cannot have a functioning health care system without a healthy workforce. How can decision-makers help?

Governments must work together as a federation in crisis to immediately negotiate innovative strategies that include financial incentives such as wages and retention bonuses, to encourage senior nurses to remain in practice, and targeted loan forgiveness programs, to support new graduates. Nurses also deserve safe working conditions, which should include immediate deployment of mental health resources to the front lines and additional efforts to ensure safe patient-to-nurse ratios. Nationally, the development of health workforce strategies is needed to guide the retention and recruitment of nurses through enhanced data and best practices.

Canada's health care system has never been tested to this extent. If immediate action is not taken, we risk pushing the health workforce past its breaking point. Without health workers, there can be no health care.

Linda Silas, B.Sc.N., RN

President, Canadian Federation of Nurses Unions

Tim Guest, M.B.A., B.Sc.N., RN

President, Canadian Nurses Association

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CNA applauds federal government for reinstating chief nursing officer for Canada

February 1, 2022 — For several years, the Canadian Nurses Association (CNA) has been advocating for the federal government to reinstate the position of the federal chief nursing officer (CNO) for Canada, and we are delighted to see Health Canada officially launching a hiring process.

The CNO will strengthen Canada's health system by providing strategic policy advice from a nursing lens to Health Canada. It will also be essential in supporting a national response to the significant shortages in health human resources that exist across the country and in stabilizing the nursing workforce beyond the COVID-19 pandemic.

"This announcement comes at a time when Canada is facing a health workforce crisis. The pandemic has been unrelenting for nurses and has led to extreme burnout and the desire by many to leave the profession," said Tim Guest, president of CNA. "Re-establishing the CNO sends a powerful message to all nurses that the federal government recognizes their immense contributions, expertise, and sacrifices throughout this pandemic and intends to act to stabilize the situation."

While the position exists today in some Canadian jurisdictions at the provincial and territorial levels, and in many other nations, it was rescinded federally in the last decade and has resulted in a fragmented approach to national nursing and health policy.

“As the most trusted and respected health professionals in Canada, an empowered and effective nursing leadership is essential to mobilize appropriate resources and shape health policy and strategic direction,” said Guest. “We have held numerous meetings with senior government officials, members of Parliament, and sent letters to both the prime minister and health minister, highlighting the importance of reinstating this role for not only the nursing profession, but for Canada’s health systems. We are very happy to see that the key competencies included in the job description align with CNA’s recommendations.”

Interchange Canada will be used to recruit this role. Any individuals residing in Canada and Canadian citizens residing abroad who meet the qualifications can apply.

CNA encourages senior nursing leaders to apply for this strategic position by [visiting the online posting](#). The application deadline is February 28.

-30-

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Canadian Nurses Association Unveils Massive 28-storey Mural to Celebrate Nurses Nationwide

While COVID-19 continues its assault on health-care systems across the country, CNA reminds people across Canada that nurses keep answering the call

OTTAWA and TORONTO, ONTARIO, February 14, 2022 — The Canadian Nurses Association, the national organization dedicated to championing nurses across Canada, today unveiled a massive, 28-storey reminder to people in Canada of the immense role nurses have played and continue to play amidst the continuing COVID-19 pandemic, which has created a health-care crisis.

The mural, entitled “We Are Nurses — We Answer The Call,” located at Toronto’s Dixon Hall shelter in the Yonge-Dundas area, was officially dedicated this morning at an on-site ceremony, which included remarks from CNA executives and spokespersons.

“COVID has impacted the nursing profession in measures we still can’t quantify,” said Tim Guest, CNA president. “Nurses in all practice settings, many in crisis, have played a significant role in the last two years responding to this deadly virus. Despite the disproportionate toll on their own mental health as a result, they have continued to answer the call that this pandemic has foisted on Canadian health systems. The latest wave may be waning, but we are still in the middle of a bonafide health-care crisis. This monumental artwork serves as a reminder of nurses’ sacrifice.”

The mural, created by artist collective Oneday Creates, depicts the diverse faces of four nurses looking out at the city's skyline. Complementing the static image featured on the wall, and as a nod to the art and science in which the nursing profession is steeped, the mural also contains an augmented reality overlay, launched via QR code on mobile devices. The augmented reality experience brings the nurses' faces to life with voiceovers and links to stories from the front line and other CNA initiatives.

Among CNA's initiatives is the call for a national coordinating body to address critical health workforce gaps by guiding the retention and recruitment of nurses through enhanced data collection. Nurses also deserve safe working conditions, which should include immediate deployment of mental health resources targeted to health-care workers, and additional efforts to ensure safe patient-to-nurse ratios.

"If we don't care for our nurses," said CNA spokesperson and JUNO award winning Indigenous singer-songwriter Susan Aglukark, "how can we expect them to care for us? The nursing profession is on the brink of collapse. Nurses are burned out, demoralized and have little left to give — and yet they still show up."

The latest statistics indicate alarming numbers for the nursing profession and Canada's health-care system writ large:

- Rates of anxiety and depression among nurses has **increased over 40%**, and the Omicron variant's surge in recent weeks has only added to this number.
- Preliminary studies conducted by the Healthy Professional Worker Partnership show that **one in three nurses has given serious thought to leaving their health-care facility and/or the profession altogether**. Critical care shortages have been further exacerbated by large numbers of health workers being unable to work due to isolation requirements.
- While the pandemic has taken its toll on all Canadians, health-care workers unsurprisingly top the list. A recent poll from Canada Life and Mental Health Research Canada, in which CNA was a participant, found that **a staggering 66% of nurses report workplace burnout** — practically doubling the national average of 35%.

Added Guest: "Without nurses, there can be no health care. We need nurses to know that people living in Canada have their backs. We hope every nurse that sees this mural is reminded of this sentiment and

hopefully of the concrete positive actions spurred in the wake of this crisis.”

To see more of the mural and learn about the project and the Canadian Nurses Association’s broader mandate, visit www.WeAreNurses.ca

-30-

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About the Canadian Nurses Association

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Federal government takes step in the right direction to stabilize Canada's health-care system

March 28, 2022 — Over the past two years, it has become clear that Canada needs to give a long, hard look at the challenges faced by our health-care system and reimagine how all levels of government can better support health-care workers and deliver results for people living in this country.

Action and leadership are needed to ensure the sustainability of our health-care system and the Canadian Nurses Association (CNA) applauds the federal government for taking a step in the right direction.

The federal government announced an investment of \$2 billion to help provincial and territorial governments reduce the backlog of surgeries by providing additional support for the health workforce. The federal government also outlined five priority areas for collaboration with provincial and territorial governments: backlogs and health workers; access to primary care; long-term care and home care; mental health; and virtual care.

"We are pleased to see that the federal government is listening to our concerns and recognizes nurses and other frontline health-care workers as a key priority," said Tim Guest, president of CNA. "Over recent decades, but especially during these last two years, we have seen

alarming mental health distress and burnout rates for nurses, and we have seen how the COVID-19 pandemic has made nursing shortages in Canada even worse.”

“Nurses are the backbone of the health-care system and retaining them and other health-care workers is at the heart of fixing the backlog of surgeries and medical procedures,” said Guest. “Patients deserve accessible and timely health-care services, but we know there is a critical link between patient outcomes and adequate nurse staffing. If we do not have effective strategies to retain the workforce that we have now, no recruitment strategy is going to make the difference.”

To help address Canada’s health workforce crisis and deliver better outcomes for patients, CNA recommends that all levels of government work collaboratively with health professionals and employers to:

- Implement evidence-based and innovative **retention strategies** for health-care workers immediately
- Create a **pan-Canadian health workforce strategy**, including addressing data gaps
- **Optimize workloads** for health-care workers, including strategies related to scope of practice, skill mix, and teams
- Create a **national mental health strategy** for health-care workers
- Increase **system capacity for education** of nurses and health-care workers
- **Fast-track the licensing and employment** of internationally educated health workers

CNA looks forward to supporting and collaborating with all levels of government to ensure people living in Canada can receive the care they need when they need it.

-30-

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International Nurses Day is an opportunity to recognize how nurses continue to answer the call

May 12, 2022 — Sylvain Brousseau, president of the Canadian Nurses Association (CNA), issued a statement today to celebrate International Nurses Day.

“We are pleased to commemorate International Nurses Day. This is a day to pay tribute to the outstanding contributions of nurses to the communities, patients, and health systems they serve, as well as their impact on global health outcomes.

“As we celebrate International Nurses Day for a third time amidst a global pandemic, I know many nurses in Canada are tired, exhausted, and even demoralized. Their fatigue has reached critical levels and staffing shortages have been made worse by COVID-19.

“Achieving better health outcomes for patients in Canada will depend on ensuring that the right number of trained and educated nurses are providing care. However, nursing shortages are a global problem, so recruitment must be done ethically to ensure that health systems in developing nations are strengthened.

“Staffing shortages and the burden brought by COVID-19 are not the only issues faced by nurses globally. Nurses occupy many challenging roles, including acting as the main care provider for their children or



families, advocating for their communities, and even responding to global disasters such as the war in Ukraine. Nurses have answered the call at every turn.

“I encourage the public, the media, organizations, and governments in Canada to reflect on, celebrate, and recognize the invaluable roles that nurses play in supporting all people to be healthy and safe.”

-30-

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Physicians, nurses offer solutions to immediately address health human resource crisis

Ottawa – May 16, 2022 — For more than two years, health care providers have worked tirelessly to keep the Canadian health system from buckling under the strain of a global pandemic, massive surgical backlogs, and a depleted workforce. Unfortunately, the health system was struggling before COVID-19. Today, with more health workers burning out and leaving their professions, the system has reached a point where immediate action is needed to prevent total collapse.

In response, the Canadian Medical Association (CMA), in partnership with the Canadian Nurses Association (CNA) and the College of Family Physicians of Canada (CFPC), have collaborated to develop health human resources solutions designed to rebuild Canada's health care workforce in a proactive and sustainable way. The plan offers immediate, medium and long-term policy recommendations for the federal government to adopt and collaborate with its provincial/territorial counterparts.

Immediate action plan (next six months):

1. Create retention incentives for health care workers, especially in areas of greatest need.
2. Address issues that prevent health care workers from spending more time caring for patients by creating administrative and mental health supports in primary and secondary care settings.

3. Scale up collaborative, interprofessional primary care so that more Canadians can access timely care provided by family doctors together with other primary care practitioners in a team-based model.

Medium-term plan (7-12 months):

1. Build on existing virtual care models to increase access and remove barriers to appropriate care in a safe, secure virtual space.
2. Invest in new training and education infrastructure to increase the supply of physicians, nurses and nurse practitioners.
3. Support internationally trained physicians, nurses and nurse practitioners in getting licensed and into the workforce.

Long-term plan (13-18 months):

1. Initiate a long-term, sustainable pan-Canadian mental health plan for health care workers.
2. Improve workforce data collection across health systems to support creating a health human resource plan for Canada.

The CMA, CNA and CFPC recently presented these recommendations to the House of Commons' Standing Committee on Health and the federal/provincial/territorial Committee on Health Workforce. The complete presentation with further details on the recommendations can be found [here](#) in English and [here](#) in French.

Our organizations are calling on immediate action to begin implementing these critical policy measures. We are prepared to work in collaboration with governments and other stakeholders to support and grow the health workforce needed to care for Canadians.

-30-

Quotes:

"Our organizations are unified in calling for timely action to address the health care worker crisis before us. The people who care for Canadians have been stretched to the point of exhaustion. No one government or organization can solve the critical challenge that we are facing alone. That is why our organizations collaborated to come up with tangible ways of supporting our existing workforce while planning for the future."

- Dr. Katharine Smart, president, Canadian Medical Association

“When it comes to looking at how we provide better health care in Canada, we need to first look at our health workforce. They are the backbone of the system and make everything else work. Retaining and caring for them is at the heart of resolving many challenges of our health care system. We need to ‘stop the bleeding’ and create better environments that attract and keep health care workers. This is an urgent national issue and pan-Canadian collaboration is needed to address this multi-faceted crisis.”

- *Dr. Sylvain Brousseau, president, Canadian Nurses Association*

“Prior to the pandemic our health care systems were already struggling. Now with the unprecedented pressure of the pandemic, many family physicians are at or past their breaking point. Our organizations are united in calling for urgent intervention to address both the immediate health care worker crisis, as well as to ensure the longer-term sustainability of our health workforce. Our plan provides concrete, actionable steps to help get us to ‘better.’”

- *Dr. Brady Bouchard, president, College of Family Physicians of Canada*

-30-

About the CMA

The Canadian Medical Association leads a national movement with physicians who believe in a better future of health. Our ambition is a sustainable, accessible health system where patients are partners, a culture of medicine that elevates equity, diversity and wellbeing, and supportive communities where everyone has the chance to be healthy. We drive change through advocacy, giving and knowledge sharing – guided by values of collaboration and inclusion.

About the CNA

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About the CFPC

The College of Family Physicians of Canada (CFPC) is the professional organization that represents more than 41,000 members across the country. The College establishes the standards for and accredits postgraduate family medicine training in Canada’s 17 medical schools. It reviews and certifies continuing professional development programs

and materials that enable family physicians to meet certification and licensing requirements. The CFPC provides high-quality services, supports family medicine teaching and research, and advocates on behalf of the specialty of family medicine, family physicians, and the patients they serve.

To schedule an interview or for further information, please contact:

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CANADIAN FRONTLINE NURSES
SARAH CHOUJOUNIAN, KRISTEN NAGLE,
and KRISTAL PITTER

Plaintiffs

- and -

CANADIAN NURSES ASSOCIATION,
TIM GUEST, MICHAEL VILLENEUVE, TOGETHER NEWS INC.
o/a COMOXVALLY.NEWS, and o/a VANISLE.NEWS and
JOHN DOE

Defendants

This is the Cross-Examination of WILLIAM
HORTER, on his Affidavit sworn June 16, 2022, taken at
the offices of Network Reporting & Mediation, on the
21st day of July, 2022.

A P P E A R A N C E S:

ALEXANDER BOISSONNEAU-LEHNER

Solicitor for the
Plaintiff

RICHARD G. DEARDEN
MARCO S. ROMEO
ALEXANDRA PSELLAS

Solicitors for the Defendants,
Canadian Nurses Association,
Tim Guest,
and Michael Villeneuve

PAUL CHAMP
CHRISTINE JOHNSON

Solicitors for the Defendants,
Together News Inc. and
John Doe (aka) William Horter

WILLIAM HORTER - 2

Also Present:

Carly Down

Student with Mr. Deardon

Rachel Broulliette

Manager at Canadian Nurses
Association/Observer

WILLIAM HORTER - 3

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1 --- UPON COMMENCING AT 2:42 P.M.

2 WILLIAM HORTER; Affirmed

3 CROSS-EXAMINATION BY MR. BOISSONEAU-LEHNER:

4 1. Q. Good afternoon, Mr. Horter.

5 A. Good afternoon.

6 2. Q. You swore an Affidavit on June 16, 2022
7 as part of your motion in this matter; correct?

8 A. Yes.

9 3. Q. Did you review the Affidavit ahead of
10 this cross-examination?

11 A. Yes, I did.

12 4. Q. Is there anything that you'd like to
13 correct? Is there anything that you realize now is
14 inaccurate in that Affidavit?

15 A. Not that I'm aware of.

16 5. Q. And you're the Editor of Together News?

17 A. Yes.

18 6. Q. And Together News operates the
19 Comoxvalley.News website?

20 A. Yes.

21 7. Q. Westisle.News?

22 A. Yes.

23 8. Q. Vanisle.News?

24 A. Yes.

25 9. Q. And Northisle.News websites?

WILLIAM HORTER - 5

1 A. Yes.

2 10. Q. And you had a role in editing the
3 article that was published on these sites entitled,
4 "Quack! Quack! These Pro-Virus Nurses Have Dangerous
5 Ideas." Correct?

6 A. Yes.

7 11. Q. And this article was published on
8 September 11, 2021; is that right?

9 A. I think so. I don't remember the date
10 exactly, but I think so, yes.

11 12. Q. Would it help if we looked at the ---

12 MR. CHAMP: We can see it's September 11th.

13 BY MR. BOSSONNEAU-LEHNER:

14 13. Q. Yes. And in fact, the article reflects
15 your own expressions and opinions. That's your
16 evidence; right?

17 A. Yes, it's an opinion piece.

18 14. Q. And those opinions are yours or yours
19 and your team?

20 A. Those are my opinions and I guess the
21 opinions of the online news wires because we published
22 them.

23 15. Q. And the article concerns the
24 plaintiffs, right? That's Sarah Choujounian, Kristen
25 Nagle, Kristal Pitter and Canadian Frontline Nurses;

WILLIAM HORTER - 6

1 right?

2 A. Yes, it does.

3 16. Q. These are the "Pro-Virus Nurses" who
4 have dangerous ideas; right?

5 A. Yes, they are.

6 17. Q. The title of the article starts,
7 "Quack! Quack!" The article isn't calling them ducks;
8 is that fair to say?

9 A. The article? I didn't hear the
10 question.

11 18. Q. The article is not actually calling
12 them ducks; that's not what the reference is to.

13 A. No.

14 19. Q. "Quack" is derogatory term used to
15 describe a pretender to medical skill; correct?

16 A. I've never heard that particular
17 definition, but yes, like the general intent is, yes.

18 20. Q. Sorry; what's the general intent?

19 A. To say that they were spewing
20 misinformation essentially.

21 21. Q. I see. And you made no attempt to
22 reach out to the plaintiffs for comment to get their
23 version of the events before Together News published
24 the September 11th, 2021 article; right?

25 A. No, their activities and their opinions

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1 were widely covered in numerous mainstream
2 publications; their website was quite voluminous and
3 it's various comments on these various different
4 matters, so we took much of the content and the
5 references and the article from their own Facebook
6 pages.

7 And in many of the -- as I say in my
8 Affidavit, they had not responded to other entities
9 asking for comment, and in fact, had threatened police
10 engagement around harassment in at least one reported
11 instance.

12 22. Q. Reported instance, but you don't have
13 any personal knowledge about that instance you just
14 referred to; correct?

15 A. No, I do not.

16 23. Q. Do you have your Affidavit in front of
17 you, Mr. Horter?

18 A. I do.

19 24. Q. Would you please pull up Exhibit H,
20 which I think starts at page 148 of the pdf document,
21 page 125 as what it's marked as in my copy?

22 A. You said 128?

23 25. Q. It's 148 I think -- if you're working
24 off the pdf.

25 A. Yes, I'm working off the pdf.

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1 26. Q. So 148 is the page number on the pdf,
2 but it starts at -- it's Exhibit H and it's marked as
3 page 124 at the top there.

4 A. And what is the document?

5 27. Q. It's the article that's published on
6 the Comoxvalley.News site. Are you with me?

7 A. I haven't got there yet; I'm just
8 trying to find it.

9 MR. CHAMP: There's a few different ways to
10 get there, Will. One easy way is if you've got --
11 depending on the Adobe Reader that you have, if you go
12 to the left and click on "Index" it will open it up
13 and then you click on "H" or in the numbers, like when
14 it says page numbers at the top, the pdf, as Mr.
15 Boissonneau-Lehner is saying, you just put in 148 and
16 it should get you there.

17 THE DEPONENT: Okay. I apologize. My
18 computer went skitzo at eight o'clock this morning and
19 I had to redo the entire -- every password, everything
20 on there today.

21 MR. BOSSONNEAU-LEHNER: Oh, dear.

22 THE DEPONENT: So 148. My 148 and the pdf
23 is an article about CBC.

24 BY MR. BOSSONNEAU-LEHNER:

25 28. Q. So perhaps you and I are working from a

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1 different -- can you find where Exhibit H is in your...

2 A. Let me go back to the beginning. I'm
3 sorry. All my normal systems are not functioning as
4 normal because of all this -- from whatever chaos with
5 my computer.

6 MR. CHAMP: I believe it's at 144 of the pdf
7 pagination.

8 THE DEPONENT: Okay. Let me see.

9 MR. CHAMP: Well, if you're looking at the
10 page numbers at the top, then it's 124, but if you're
11 using the pdf pagination it's 144.

12 THE DEPONENT: Okay.

13 BY MR. BOSSONNEAU-LEHNER:

14 29. Q. So maybe my copy is different. At any
15 rate, it's marked as page 124 for the record.

16 A. Okay. There's a whole much of
17 documents that have no ---

18 MR. CHAMP: Will, are you working from the
19 one in the motion record or just some other version of
20 your ---

21 THE DEPONENT: I thought it was the one that
22 you sent me, but I'm not -- my version has 211 pages
23 in the pdf is the total number of pages.

24 MR. CHAMP: Sorry; you've got the wrong -
25 I'll send him the -- are you able to access your

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1 emails right now, Will?

2 THE DEPONENT: Yes. It will take me a
3 second, but...

4 MR. CHAMP: I think Mr. Boissonneau-Lehner
5 is referring to the one in the motion record. We
6 would have sent that to you at some point, but I'll
7 send it to you again right now.

8 MR. BOSSONNEAU-LEHNER: The alternative, Mr.
9 Champ, is I can share it on my screen because there's
10 certain passages that I want to ask questions about.

11 THE DEPONENT: Yes, if you just wait one
12 second, I can open up my email quickly and get it.

13 MR. BOSSONNEAU-LEHNER: Sure.

14 MR. CHAMP: So I've just sent it to you
15 again, Will. It's the motion record. It's probably
16 better, Mr. Boissonneau-Lehner, that we're all
17 referring to the same version.

18 I think he's referring to an earlier -- or
19 just like the actual pdf of the Affidavit alone, rather
20 than the one in the motion record.

21 MR. BOSSONNEAU-LEHNER: I understand.

22 THE DEPONENT: It hasn't come through yet.
23 I can open up the article itself, if you want me to do
24 that. Like, it's not in the Affidavit version, but I
25 can open that up on my computer. Oh, here it came.

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1 Okay.

2 MR. CHAMP: So again, Will, if you go to 144
3 in that pdf, like of the pdf pages, rather than the
4 paginated top.

5 THE DEPONENT: Okay. I just have to
6 download this so I can put it in a different place.
7 Okay. Now I'm there. So what page on the pdf record
8 do you want me to look at?

9 MR. BOSSONNEAU-LEHNER: On my copy it's 146,
10 but I think, Mr. Champ, you said a different number.

11 MR. CHAMP: So that's the article itself.

12 MR. BOSSONNEAU-LEHNER: Correct.

13 MR. CHAMP: Okay. I found it.

14 MR. BOSSONNEAU-LEHNER: You're there? Okay.
15 So I just want to confirm we're looking at the same
16 thing. In the top left corner it says 5:12:22, 4:35
17 p.m.?

18 MR. CHAMP: Yes.

19 BY MR. BOSSONNEAU-LEHNER:

20 30. Q. And it has the image of the duck and
21 "Quack Quack Quack"; right?

22 A. Yes.

23 31. Q. Great. We're on the same page. So I
24 have a number of questions about this article, and I'm
25 just going to take you through from the top.

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1 A. Sure.

2 32. Q. So just underneath the "Eight months
3 ago, Vanisle.News staff, it says, "While Canadian
4 health care workers are fighting to keep people safe, a
5 small group of disgraced nurses is putting us in
6 danger." And the small ---

7 A. Can you just wait one second? Now I've
8 lost the zoom. Like I said, all my systems are screwy.
9 so I've lost -- I can't see you any longer, so I've got
10 to close all this stuff down. Okay. There we go. Go
11 ahead. Proceed again.

12 33. Q. "So while Canadian health care workers
13 are fighting to keep people safe, a small group of
14 disgraced nurses is putting us in danger."

15 A. Yes.

16 34. Q. The small group of disgraced nurses,
17 that's Kristal Pitter, Kristen Nagle, Sarah Choujounian
18 and Canadian Frontline Nurses; right?

19 A. Yes. Correct.

20 35. Q. In the first sentence of the article,
21 it says, "A small group of unhinged, conspiracy touting
22 nurses..." By "unhinged", that means highly disturbed,
23 unstable, distraught; right?

24 A. Those aren't the words that I was
25 thinking of, but I don't disagree with them. Yes, that

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1 are not distraught, but like that are outside -- I
2 meant in the context of that are saying things that are
3 completely counter to science.

4 36. Q. So you didn't mean that they were
5 unstable or highly disturbed?

6 A. I don't know anything about them other
7 than what's been public, and that has not been reported
8 publicly. Their opinions, I think, are unhinged. As
9 individuals, I don't know if they're unhinged, but
10 their opinions are unhinged.

11 37. Q. Okay. But it doesn't say that their
12 opinions are unhinged; right? You didn't qualify that
13 in the article?

14 A. Well, I think outside the mainstream of
15 scientific evidence about what -- you know, what the
16 risks are of COVID and what the measures to deal with
17 COVID are was the intent there.

18 I don't know them personally, so I don't know
19 their personal background, but the evidence that I had
20 in the public record and from their own Facebook page
21 denying viruses and various other things are kind of
22 unhinged opinions. So I don't know if they're -- I
23 don't know why they have those opinions, but I think
24 the opinions are unhinged.

25 38. Q. The next paragraph the article states,

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1 "On September 1st, mobs of people swarmed hospitals to
2 scream and hurl insults at frontline healthcare
3 workers."

4 So it's going to be our evidence that the
5 protests organized by Canadian Frontline Nurses that
6 protesters did not scream or hurl insults at frontline
7 healthcare workers. Do you agree that the protesters
8 did not scream or hurl insults at frontline healthcare
9 workers?

10 A. No, I don't agree. It was widely
11 reported that they were screaming and yelling insults,
12 including spitting, and intimidating people that were
13 trying to enter various different establishments, you
14 know, medical establishments.

15 39. Q. What insult were screamed and hurled at
16 Frontline Care Workers at the protest of September 1st?

17 A. Well, I wasn't there, but the
18 mainstream media basically talked about the aggressive
19 statements and, you know, tone of the various different
20 meetings. Mainstream media doesn't usually report the
21 actual words especially if they're off colour. You
22 know, given the feedback that we've got from folks who
23 are denying COVID and denying vaccines and other things
24 in response to this article, quite aggressive language
25 was used. It seems similar to some of the statements

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1 that have been reported publicly in relation to this,
2 so I think it was, you know, a fair comment that it was
3 widely -- there was a reason a person would draw that
4 conclusion from the various different reports of what
5 happened there.

6 40. Q. To draw the conclusion that insults
7 were screamed and hurled?

8 A. Yes. There were articles reporting
9 how, you know, doctors were trying to enter that were
10 intimidated, and yes -- so they didn't get intimidated
11 because they were, you know, sending messages of love.

12 41. Q. So you don't know who screamed and
13 hurled the insults that are referenced in this Together
14 News ---

15 A. No, but I know that the people who
16 showed up in response to the call by the Frontline
17 Nurses, and the individuals for a worldwide walkout on
18 that date, they didn't just randomly show up; they
19 showed up in response to a call by those nurses and the
20 people that were intimidated at those meetings, as
21 reported by the press, felt intimidated and felt that
22 there were screams and insults. I wasn't there.

23 42. Q. Who are the people who felt intimated
24 and that there were ---

25 A. It was widely reported. I don't

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1 remember the names in the articles, but there's people
2 that said, you know, institutions -- the Mayor of
3 Vancouver, for example, basically went on record and
4 said that.

5 You know, there's a reference to that. There
6 is mayors and other officials across the country who
7 asked for people to stand down because both the
8 patients and the doctors and nurses trying to enter
9 those facilities on those days were intimidated.

10 And again, I presume that they weren't
11 intimated by hugs and love, so they were intimidated by
12 something, which was reported as, you know,
13 intimidating behaviour, screams and insults.

14 43. Q. So you're presuming based on reports
15 that ---

16 A. I think a reasonable person would
17 assume that based on the wide variety -- it wasn't one
18 report, it was reports from all the way across the
19 country.

20 44. Q. I'm not asking about the reasonable
21 person; I'm asking if the authors of Together News ---

22 A. I thought that was a reasonable
23 conclusion based on the vast amount of evidence and the
24 vast amount of reporting on the event.

25 45. Q. And that's what you relied on right?

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1 A. Yes, I did.

2 46. Q. You didn't independently verify whether

3 ---

4 A. No, but as I attribute in my Affidavit,
5 a friend had a family member that was -- that couldn't
6 go to their appointment because of the nature of the
7 crowd in Nanaimo on that day.

8 THE REPORTER: Sorry, Mr. Horter, can I just
9 remind you to let counsel finish his question before
10 you answer, please?

11 THE DEPONENT: Sure.

12 BY MR. BOSSONNEAU-LEHNER:

13 47. Q. Mr. Horter, who is your friend?

14 A. Vanessa Scott.

15 48. Q. And what did she report to you?

16 A. That her mother, who was in the midst
17 of cancer treatments, was unable to attend an
18 appointment in Nanaimo that day of the Nanaimo protest,
19 and she felt intimidated, and it was a very emotionally
20 disturbing interaction from her in a vulnerable state.

21 49. Q. So you learned this thirdhand through
22 your ---

23 A. Yes. But it was compatible and
24 verified, widely reported feelings of many Canadians
25 who were involved in that. I mean, I don't recall the

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1 numbers, but on Facebook there was a whole bunch of
2 different people saying -- you know, having concerns
3 about various different events all the way across the
4 country, including on Vancouver Island.

5 50. Q. Are you aware that the protests at
6 Nanaimo was not organized by Canadian Frontline Nurses
7 or any of the plaintiffs?

8 A. I was informed by counsel that that's
9 the position put forward by the plaintiffs, however, I
10 saw no evidence before or during or after that they
11 distinguished themselves from that event, and they did
12 call for a worldwide walkout on that day, so, you know,
13 I don't know which ones they considered they organized
14 or didn't, but they've certainly taken credit across
15 many different platforms since as being the main people
16 behind those protests.

17 51. Q. Did they take credit for the Nanaimo
18 hospital protest; the protest that ---

19 A. No, but they've taken credit for the
20 protests on that day that happened and they called --
21 they called out for people to protest on that day
22 across the country.

23 You know, they didn't say except for Nanaimo,
24 and it was at least inspired. I have no idea what was
25 happening behind the scenes in relation to one event

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1 versus another, but on the same day that they called
2 and the same day nearby were events where they were
3 actually present, you know, things with the same
4 messaging, et cetera, occurred, a reasonable person
5 would determine that, you know, they were part of it.
6 Like, I don't know what happened in terms of the
7 organizing of the specific events what they consider
8 something that they organized or they didn't organize,
9 but they certainly called for it.

10 52. Q. So you don't know what they organized
11 and what they didn't?

12 A. I've seen videos subsequently of them
13 being introduced and essentially being introduced as
14 the people that were behind those events and them not
15 denying it and saying oh, everything by Nanaimo.

16 53. Q. So Mr. Horter, I recognize that you
17 have meetings to get to, and in order for this cross-
18 examination to proceed faster, if you could simply
19 answer the questions that I'm posing, this will go a
20 lot faster.

21 A. Sure.

22 54. Q. Thank you.

23 A. So are you now telling me that -- I
24 heard from counsel that you're now saying that they had
25 nothing to do with the Nanaimo protest?

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1 55. Q. Yes, that's what I'm putting to you.
2 But you don't know which protests they were
3 specifically involved in organizing?

4 And when I say "they", I mean Canadian
5 Frontline Nurses, Kristen Nagle, Kristal Pitter and
6 Sarah Choujounian? You don't know which one protest
7 they may have been involved in planning or not;
8 correct?

9 A. No, I have no direct knowledge of which
10 one they claim to have organized and which ones they
11 claim they didn't organize.

12 56. Q. And you didn't know that at the time
13 that Together News published this article either;
14 right?

15 A. I didn't know that, yes; you're
16 correct.

17 57. Q. Your article states that a nurse was
18 spat on while heading to her shift at Nanaimo General
19 Hospital. Who was the nurse?

20 A. I don't know. I was relying on reports
21 at the time.

22 58. Q. The next paragraph, the first sentence
23 says, "These protesters made it hard for the workers to
24 do their jobs that day."

25 How did the protesters make it hard for the

WILLIAM HORTER - 21

1 workers to do their jobs? What evidence was Together
2 News relying on when they made that statement?

3 A. Again, widely reported evidence that
4 ambulances had difficulty accessing some hospitals.
5 The pictures showed that, you know, crowds around some
6 of the hospitals, people couldn't actually get through
7 without facing a gauntlet. You know, numerous reports
8 of doctors saying that.

9 You know, leaders of cities like Vancouver's
10 Mayor calling out and, you know, saying similar things.

11 So yes, so it was widely reported that it was
12 inhibiting the normal functioning of the medical system
13 on both the patient and the doctor's side.

14 59. Q. You're relying on reports and
15 statements from the Mayor, for instance, but you didn't
16 independently confirm that healthcare workers were
17 impeded that day; correct?

18 A. No, I didn't, but that's not the nature
19 of what we do on the news wire. We frequently rely on
20 reports in other places.

21 60. Q. Your article doesn't mention the --
22 and when I say "your article", I mean Together News'
23 article. It doesn't mention that you are relying on
24 reports, right, or that it's been ---

25 A. It's an opinion piece. It does in

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1 certain places, I think. I don't remember the exact
2 words, but, yeah, it's been widely reported. So, you
3 know, the mainstream media has, you know, lots of
4 checks and balances to verify other things and they
5 mostly get things right.

6 You know, occasionally there's a mistake and
7 usually they correct that if it's brought to their
8 attention. And the breadth of different entities; it's
9 not just one newspaper chain; it was multiple different
10 chains with different decision-makers and different
11 reporters reporting exactly the same thing in many
12 different places.

13 61. Q. Did you talk to any of these reporters?

14 A. No, but I read their articles. And as
15 far as I'm aware, none of them have retracted any of
16 their articles subsequently, or issued any corrections.

17 62. Q. "They also made it harder for sick
18 people to get the care that they need." So you spoke
19 about your friend's mother at Nanaimo. What other
20 things are you referencing?

21 A. Well, again, wide reports in numerous
22 places, including government officials who said
23 explicitly that; right?

24 And you know, a variety of different sources
25 have said this is a problem; it's interfering with the

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1 normal operation of the medical system on both the
2 doctors and the patients' side, so -- and then I had,
3 you know, I had an individual who I know tell me that
4 that had happened to a member of their family.

5 63. Q. And that's the individual that you
6 referenced earlier?

7 A. Yes.

8 64. Q. So again, in terms of making it harder
9 for sick people to get the care that they need, reports
10 and statements by politicians, for instance, but no
11 independent fact checking by Together News; correct;
12 right?

13 A. Independent fact checking in what --
14 what are you suggesting?

15 65. Q. You didn't verify that the reports
16 by the politicians that are you alluding to or the
17 reports that are widespread in the media, as you
18 deposed, you didn't verify whether those reports were
19 true or not?

20 A. How would one verify whether they were
21 true or not?

22 66. Q. So you didn't; right?

23 A. But how would one? I don't understand
24 this because there's no registry, so I'm not certain
25 how one would verify that.

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1 67. Q. You didn't speak to anyone directly who
2 said that they didn't get the care that they needed,
3 with the exception of speaking to your friend who
4 relayed that her mother couldn't get the cancer -- or
5 was being harassed when trying to attend her cancer
6 appointment; right?

7 A. No, I didn't, but many of the other
8 entities did report that. This is an opinion piece;
9 this is not an article of reporting. This is an
10 opinion piece.

11 68. Q. But your opinion piece states these
12 things as fact; right? They don't say in my opinion a
13 nurse was spat at, for instance; right?

14 A. Well, this was posted on the news sites
15 as what's called "The Take", which is the opinion
16 section of our news site. If you go there, all the
17 things in The Take are opinion pieces, our take, or my
18 take.

19 69. Q. So in your view, as long as it's in The
20 Take section of the website, it's opinion and you can
21 70. -- you don't have to verify the statements?

22 A. You know, if there's a specific fact --
23 I did go verify a number of things in the article, but,
24 you know, I have no direct knowledge that there's a
25 actually a war going on in the Ukraine, but it's widely

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1 known and reported that there's a war going on in the
2 Ukraine.

3 So, you know, I can write that there's a war
4 going on in the Ukraine without personally going there
5 or calling somebody that's in the war to verify that.

6 71. Q. What were the things in this articular
7 that you verified?

8 A. Well, I verified -- there was numerous
9 collect collaboration for every sentence in the
10 article, but the question of whether the nurses
11 attended in Washington, D.C. and their role, I looked
12 at that very closely, and, you know, I watch video
13 showing them basically -- I don't know the word
14 "celebrating", but like, you know, their participation
15 in the march there, so I looked at that.

16 There's been some confusion in the mainstream
17 press about what they did their, so I looked at that
18 very closely and it became clear that they participated
19 in an event that was a series of events -- or actually,
20 I'll let you ask the question.

21 72. Q. Is that video in your evidence?

22 A. Yes, it's attached to -- I think it's
23 the CBC article where it shows them in a hotel room the
24 day of talking about their participation.

25 73. Q. What did they say about their

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1 participation?

2 A. They kind of made a joke about how -- I
3 don't know how you pronounce her name, but Choujounian
4 ---

5 74. Q. I think that's close.

6 A. Is that close? So the video starts
7 Kristen Nagle talking about it in a celebratory way,
8 hey, look at where we're at, and then she hands it over
9 to Choujounian who says, hey, oh, people saw me on the
10 news.

11 I've been trying to get on the news; people
12 saw me on the news and I had people calling me and
13 saying they were very disappointed in me and I told
14 them I was very disappointed in them.

15 She said that she put a Trump flag around her
16 neck because some people had perceived because she was
17 wearing all black as an Antifa person, right, so, you
18 know, they were clearly there.

19 They weren't distinguishing themselves and
20 saying oh, they were there for a different purpose, or
21 whatever at that point, so clearly -- so I looked at
22 that very closely.

23 And the timing of that in relation to their
24 participation there and they coming back and launching
25 this new entity and then calling for stuff happening

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1 across the country.

2 75. Q. Anything else that you independently
3 verified?

4 A. No, I independently verified every
5 sentence in the article. We looked back and tried to
6 find sources that indicated that what we were saying
7 was accurate, and we did.

8 Most of it, as I said, you know, we get down
9 further in the article where we talk about the specific
10 views, most of that came from their own Facebook pages,
11 which is another reason why I didn't feel like we
12 needed to call them or corroborate it.

13 I'm not certain of anybody ever who's been
14 successful arguing that their own Facebook page
15 misquoted them. So, you know, we took most of the
16 content about what their views were directly from their
17 own social media channels.

18 76. Q. So Mr. Horter, I'm going to ask you
19 another question. At the bottom of this first page,
20 for starters, let's talk about Sarah Choujounian, a
21 former registered practical nurse, and Kristen Nagle, a
22 former neonatal ICU nurse. The emphasis here is on the
23 word "former" because they'd both been fired.

24 Are you aware that Sarah Choujounian and
25 Kristen Nagle were registered with the Colleges of

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1 Nurses and entitled to practice as nurses without
2 restrictions as of September 11th, 2021?

3 A. I was aware that there was an
4 investigation ongoing, but if you look at the second
5 sentence there it clarifies the definition of why we're
6 using "former."

7 We're using "former" in the context of their
8 employment; right? So in their employment they were no
9 longer employed in those roles. As nurses, they can do
10 lots of different kinds of roles, but in those
11 particular roles -- at least with their existing
12 employer they were "former", so the second sentence
13 tries to clarify why I was using the word "former"
14 there. I wasn't talking about their licencing
15 requirements; I was talking about their employment
16 status. And I think that's fairly clear on the face of
17 the two sentences.

18 77. Q. These two disgraced Ontario nurses --
19 I'm on the next page; sorry.

20 A. Yes.

21 78. Q. These two disgraced Ontario nurses are
22 the co-founders of Canadian Frontline Nurses. Why are
23 Kristen Nagle and Sarah Choujounian disgraced?

24 A. Well, they were fired for cause and
25 they were under investigation at the time of the

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1 article. So, you know, they were fired for cause.
2 That's a disgrace. I mean, you know, losing your job
3 for cause is kind of disgraced, I think. That's my
4 opinion.

5 79. Q. The organization which launched - I'm
6 reading from the article. "The organization which
7 launched in January 2021 (remember that date), says
8 they stand for freedom and choice while denying the
9 science around COVID-19."

10 It was important for the reader to remember
11 January 2021 because in January 2021 that was also the
12 month that the Capitol Building in DC was stormed by
13 pro-Trump supporters; right? That's what you're
14 getting at?

15 A. Yes.

16 80. Q. Then going further down, a few
17 sentences down. "Do you remember what else happened in
18 January?" "That's right. A right-wing mob attacked
19 the U.S. Capitol Building and rioted in the streets on
20 January 6th, and guess who was there?

21 A. Where are we?

22 81. Q. Do you see it? "And guess who was
23 there?" Are you with me, Mr. Horter

24 A. So you've gone down from your last
25 thing about -- okay. Yes, I do see it. Yes.

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1 82. Q. “So do you remember what else happened
2 in January?” “That’s right. A right-wing mob attacked
3 the U.S. Capitol building and rioted in the streets on
4 January 6th, and guess who was there?” Just a few days
5 before launching their new organization, they went down
6 to Washington, D.C. to be part of the Trump-inspired
7 protest.

8 So this Together News article is associating
9 Ms. Nagel and Ms. Choujounian with the attack on the
10 U.S. Capitol building; right?

11 A. I’m saying that they were there when it
12 occurred. They were on a roster of events that led up
13 to that. It was well circulated.

14 You know, a series of different things went
15 up with people who were angry about a variety of
16 different things going on, including COVID restrictions
17 that led up to that event, and they were there as
18 participants, and then by their own evidence were
19 participants in the actual events to some extent.

20 83. Q. By “led up to” you mean that their
21 events contributed towards the events that culminated
22 with the attack on the U.S. Capitol building; am I
23 understanding your evidence correctly?

24 A. You know, I don’t know for the people
25 that were at the event, right, but there’s a series of

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1 events that led to a mob that was angry about a whole
2 bunch of different things, including COVID
3 restrictions, who then descended on the Capitol
4 building, which individuals were motivated -- the whole
5 point of the way that the event was structured apparently
6 was -- you know, had different issues that were being
7 discussed at different times in the lead up to that.
8 If you just look at the schedule of events, it's pretty
9 clear that that's what occurred; right?

10 And so they -- you know, that was part of
11 that. And if subsequently, if you listen to some of
12 the testimony, it's come forward that's been
13 corroborated, but that was my understanding when I
14 looked at what occurred on that day and the role.

15 84. Q. You looked at a schedule of events, but
16 before ---

17 A. Yes, there was things floating around
18 that said, you know, these speakers are happening at
19 this time and this time and this time, for the leadup
20 for the day to, you know, for that day that led to the
21 thing; lead to the insurrection essentially; right?

22 Not everybody who was there, as we're hearing
23 testimony, people had a wide variety of different
24 understandings of what was -- why they were there and
25 what their motivations were, right? But it was part

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1 and parcel of a broader critique of, you know, what was
2 going on there; what was going on in the country and on
3 the continent.

4 Mostly it was about the U.S., but they were
5 bringing the Canadian perspective saying essentially
6 this is, you know, a North American problem.

7 85. Q. Okay.

8 A. I've listened to the testimony; I've
9 listened to the speeches that they gave on that day.

10 86. Q. How did you listen to them?

11 A. They were posted.

12 87. Q. Where?

13 A. Numerous places. I think I saw it on
14 Instagram.

15 88. Q. Did you retain a copy of these
16 speeches?

17 A. I think they're still on Instagram. I
18 watched them again last night, or two days ago or
19 something. You know, they're talking about freedom;
20 they're talking about, you know, conspiracy.

21 89. Q. They were talking about freedom?

22 A. Yes, lots of -- you know, which was ---

23 90. Q. Are they talking about attacking the
24 U.S. Capitol building?

25 A. No. As far as I'm aware, like, at the

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1 time -- well, it's not relevant. As far as I'm aware,
2 none of the speakers on that day talked about directly
3 attacking -- from the podium, talked about that. I
4 haven't heard evidence of that.

5 There's questions about what Trump actually
6 suggested, but as far as I'm aware, I haven't seen any
7 news clips of people from the podium actually saying
8 that.

9 In the article I didn't say that they did
10 that either, I just said that they were there and they
11 were part of a sequence of events that led to the ---

12 91. Q. The sequence of events that led to the
13 attack on the U.S. Capitol building? That's what you
14 say you're article is getting at; right?

15 A. What I'm saying is they were willing
16 participants in the events of the people showing up and
17 at the Capitol that day. And by their own words, they
18 were celebrating that. Their videos -- like, oh, this
19 terrible thing happened today; policemen were beat up
20 into death, et cetera, the day of their own video was
21 celebratory.

22 There were friends of theirs on recording
23 called them up and said I'm very disappointed in you;
24 they said I'm very disappointed in you for being
25 critical of us. So that was the evidence that I was

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1 aware of when the article was published.

2 92. Q. All right. So Mr. Horter, I'm trying
3 to get through my cross-examination. It's easier if
4 you just confine your answers to the question asked,
5 please.

6 A. Sure.

7 93. Q. So your article states that Choujounian
8 and Nagle went down to Washington, D.C. to be part of
9 the Trump inspired protest; right?

10 A. They went down to participate in the
11 events of the day, yes.

12 94. Q. The article says "Trump-inspired
13 protests"; right?

14 A. Yes.

15 95. Q. So this will likely not come as a
16 surprise to you, but it will be Choujounian and Nagle's
17 evidence that they did not travel to be a part of Trump
18 inspired protests. Do you agree that they did not
19 travel to Washington, D.C. to be part of a Trump-
20 inspired protest?

21 A. I agree that they're now claiming that
22 they didn't go there for that purpose. It was pretty
23 clear -- if you looked at the roster of things that
24 were happening that day, and you look at the history of
25 what was happening up until that point, it was pretty

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1 clear what was happening that day; right? You know, on
2 its face, it didn't take -- you don't have to be an
3 investigative journalist to figure out that people were
4 showing up because the president of the united states
5 was saying there was, you know, a stolen election, and
6 there was a variety of issues that he was calling upon
7 of people that were angry to speak about and collect a
8 mass of people that were -- you know, now we're finding
9 out, we didn't know at the time, but were part of an
10 orchestrated attempt to prevent a transition of power
11 in the United States.

12 And it was on its face reported in the
13 newspapers that that was what was happening; right?
14 And so somebody who went down there in the face of
15 that, that wouldn't have been a surprise to them.

16 So it says, "Trump-inspired", right? Like,
17 so the whole push was being inspired by Donald Trump.
18 And there's hearings going on in Washington, D.C. about
19 the extraordinary lengths that people took to set that
20 stage for doing that.

21 And we didn't know all the machinations
22 behind the scenes, but it was pretty clear on its face
23 of what the event of the day was.

24 96. Q. So you're saying it would be no
25 surprise to Choujounian and Nagle that a Trump inspired

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1 protest would develop and lead to what it did?

2 A. No, I don't say that there. I don't
3 say -- the protests were Trump-inspired. The idea that
4 there would be an insurrection at the Capitol, nobody
5 predicted, but the Trump-inspired protests, that's
6 exactly what the sequence of the day was.

7 They had a whole roster of people who were
8 showing up to protest a whole bunch of different
9 things, including this. All of those protests were
10 inspired by - you know, why do you think they chose
11 that day to do it; right?

12 You know, so we're going to the definition of
13 what Trump-inspired -- I'm not saying that they went
14 down there to be involved in an insurrection, and I
15 don't think the article says that either.

16 97. Q. But you think that the choice of the
17 date was deliberate; right? And that's kind of what
18 your article is insinuating when it comes to "remember
19 the date"; right?

20 A. Yes, "remember the date." They chose
21 to have these various different protests on the day
22 that there was supposed to be the beginning of a
23 transition of power in the United States in the context
24 of a president who was saying that the election had
25 been stolen, and, you know, some evidence visibly at

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1 that point, but a lot more has become public of various
2 machinations to get a crowd riled up, and they
3 knowingly participated.

4 And anybody who reads any newspaper in the
5 leadup to that was aware that that was what the event
6 was about.

7 98. Q. I see.

8 A. And the series of events on that day
9 were about, and that's the reason that day was chosen.

10 99. Q. You keep referring to a roster or a
11 schedule of events that you relied upon. Would you
12 produce a copy of this roster?

13 MR. CHAMP: I think we can do that, Will.

14 --- UNDERTAKING NO. 1

15 THE DEPONENT: Yes.

16 MR. CHAMP: I think we've got that one. So
17 yes, we can produce that.

18 BY MR. BOSSONNEAU-LEHNER:

19 100. Q. Thank you. So I just want to be fair
20 to you, the evidence that you're relying upon in the
21 article about Choujounian and Nagel travelling to D.C.
22 to be part of Trump-inspired protests is because
23 everyone knew what went on on January 6th?

24 A. Well, you're trying to link two things,
25 and I'm trying to be very clear that those two things

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1 are separate; right?

2 101. Q. Okay.

3 A. There was protests and there was a
4 series of things that were happening a t those
5 protests. So Trump-inspired protests -- they were
6 around issues that the president had been vocal and
7 that were, you know, a variety, from COVID to a whole
8 bunch of different things; right?

9 The date that they were chosen was because
10 they wanted a crowd in relation to a transition of
11 power in the United States; that's the date.

12 Everybody knew it; right? Like, it was being
13 written. In the days in advance before was that there
14 was going to be -- you know, states were going to get
15 up and say we don't accept this roster of electors;
16 right? Like, that's the date that that happened.
17 That's the reason it was chosen.

18 There's whole congressional hearings on
19 things, so I'm not saying that they went down there
20 because they knew there was going to be a insurrection.
21 I'm saying they went down there because Trump had
22 inspired a protest on that day and they were aware that
23 the protest was not a narrow protest around, you know,
24 the technical definitions of COVID mandates, it was
25 around a political movement and they were there.

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1 Then the participated after they spoke; they
2 participated in that -- at least the march. They put a
3 Trump flag around their neck ---

4 102. Q. Who is "they"?

5 A. Pardon?

6 103. Q. Who is "they"?

7 A. Well, I think Choujounian is the person
8 who said that she put the Trump flag around her neck on
9 video. It was published by CBC, that I saw.

10 104. Q. Okay.

11 A. And they both -- again, if you watch
12 the video, it was a celebratory video.

13 105. Q. Right.

14 A. It wasn't, oh, this terrible thing
15 happened. We were here today and look at, these
16 vigilantes tried to take over the Capitol.

17 106. Q. All right. So Mr. Horter, that's an
18 indication that they travelled to Washington, D.C. to
19 be part of Trump-inspired protests; right?

20 A. You keep on trying to co-conflate two
21 things; right?

22 107. Q. I'm just reading your article.

23 A. So what I'm saying they travelled to
24 speak at these events, this roster of events; then they
25 participated.

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1 108. Q. Okay.

2 A. That's what I was trying to get out in
3 the article; right? And I don't think the article says
4 anything different on that.

5 109. Q. What evidence is Together News relying
6 upon to support its statement that -- or its inference
7 that Nagle was involved in storming the Capitol
8 building?

9 A. The video.

10 110. Q. The video? Okay.

11 A. There was the video and other reports
12 where, you know -- the video particularly basically
13 said they were there. There was Instagram posts; there
14 was a series of other things. But the video is
15 primarily what I relied on.

16 111. Q. Okay. What other reports ---

17 A. I can't remember off the top of my
18 head, but the video primarily was what I was relying
19 on; them celebrating their participation in the event;
20 not distinguishing it.

21 You know, not being appalled by the death of
22 the policeman and you know, the violation of, you know,
23 centuries of transition of power and democracy, but
24 celebratory mood and then pushing back on people who
25 had called them up to give them a chance of sober

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1 second thought, basically saying, you know, hey, we're
2 on the right here, is essentially what the video said.

3 112. Q. I see. Okay.

4 A. So there is two things. They went to
5 participate in an event on a day that was well-known to
6 be taking place for a specific purpose, then they
7 participated in what happened after.

8 113. Q. So to be fair to you, it's going to be
9 Kristen Nagle's evidence that she had nothing to do
10 with stirring up extremists to invade the U.S.
11 congress. Do you have a reason to disagree with that
12 statement?

13 A. Yes. The article doesn't say, and I
14 have no evidence that shows that she did anything to
15 stir that up.

16 114. Q. Okay. So you don't agree or disagree
17 with that evidence, basically?

18 A. Other than her participation and event
19 on the day, you know, the choice to appear on that day
20 -- it wasn't just a normal COVID thing on the weekend
21 at a hospital; it was on a specific day with a series
22 of events occurring that was well-known and she chose
23 to participate in that. So other than that...

24 115. Q. Okay.

25 A. Some people had the expressed intent

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1 that day to lead to exactly what occurred; some people.
2 Now we have congressional hearings showing some of who
3 those people were, but clearing some people had that
4 intent; some of the people who also shared a podium on
5 that day had that intent.

6 116. Q. And that's just you kind of piecing
7 together based on the roster and the schedule of
8 events, and their celebratory -- what you called the
9 celebratory video after the fact; right?

10 A. You said "that." What are you
11 referring to?

12 117. Q. The intent behind Ms. Nagle and Ms.
13 Choujounian's visit to Washington, D.C.

14 A. The only thing that a reasonable person
15 can surmise their intent in relation to was their
16 decision to go to Washington to violate the COVID
17 restriction orders to go on that day and speak on a
18 roster of subject that was occurring on a day that was
19 chosen for a particular purpose by some people, that
20 was a choice that I believe I can infer their intent
21 that they intended to do that and they were aware of
22 what they did. So that's what I'm inferring, and I
23 think that's what the articular says.

24 118. Q. I understand. What roster of subjects
25 did Choujounian and Nagle speak on on January 6th,

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1 2021?

2 A. No, there was a roster of subjects that
3 were spoken on. They spoke about COVID, you know, the
4 conspiracy that's been happening around the
5 government's response and mandates, and a variety of
6 other things.

7 And then holistic medicine and -- It was kind
8 of a rambling speech actually. There's an Instagram
9 post that I watched last night; it's like an eight-
10 minute speech and persecution, some persecution that
11 they discussed as well there.

12 119. Q. So Mr. Horter, I think this is the
13 second time you've referred to that eight-minute speech
14 and you thought it was on Instagram; right?

15 A. I think it's -- the one I watched last
16 night, that version of it, was on Instagram, yes.

17 MR. CHAMP: We can provide you that if
18 that's what you're asking for, Counsel?

19 --- UNDERTAKING NO. 2

20 MR. BOSSONNEAU-LEHNER: Yes, thank you.

21 MR. CHAMP: We can provide a written answer
22 with a reference to that spot.

23 BY MR. BOSSONNEAU-LEHNER:

24 120. Q. Perfect. Thank you.

25 A. But I want to say really clearly, like,

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1 my strongest recollection -- I looked at a lot of
2 subjects. My strongest recollection in relation to the
3 issue of them in Washington, D.C. comes from, you know,
4 the scheduling of events that they went to speak at and
5 their video evidence that was on CBC after the fact.

6 And there was video evidence on CBC before
7 that because there's references about how they -- other
8 people in Canada saw them and called them on the phone
9 from watching on CBC.

10 121. Q. And again, "them" refers to both
11 Kristen Nagle ---

12 A. They were both in the video that was
13 clipped and put on by CBC.

14 MR. CHAMP: Would you like that video also,
15 Counsel?

16 MR. BOSSONNEAU-LEHNER: Sure, yes. Why not?

17 THE DEPONENT: It's one of the links that's
18 in the Affidavit, like, in the article. I think it's
19 one of the first articles.

20 MR. CHAMP: Yes, we've got that separately
21 as well. We'll show you where the article is and we'll
22 give you the video.

23 --- UNDERTAKING NO. 3

24 BY MR. BOSSONNEAU-LEHNER:

25 122. Q. Okay. The video doesn't actually show

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1 them storming the Capitol though; right? I just want
2 to be clear?

3 A. No, but I never said they did.

4 123. Q. Okay.

5 A. Although -- yes, I never said they did.

6 124. Q. I'm just going to keep going through
7 your article here. And whenever I'm saying "your", I'm
8 referring to, of course, Together News as well.

9 Both of these nurses were fired from their
10 jobs for going against the non-essential travel ban to
11 join the MAGA mob at the White House. So what
12 information or evidence did Together News arrive on in
13 support of it's conclusion that they were terminated
14 for joining a MAGA mob at the White House?

15 A. The various different events that were
16 happening on that day that were designed to appease --
17 to attract the MAGA mob and various different subjects
18 related to the MAGA mob. If you look at videos of
19 those which were -- like, I watched live video during
20 the time of people on that day and they were filled
21 with MAGA posters and MAGA paraphernalia. Like, you
22 know, it was pretty hard to miss.

23 125. Q. So Kristen Nagle's evidence is that she
24 was not fired for going against the non-essential
25 travel ban to joining the MAGA mob at the White House,

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1 so what I'm asking for is what evidence or information
2 were you relying upon to ---

3 A. Public reports that she was fired for
4 going against the travel ban and the event -- you know,
5 I'm not certain what her evidence is -- she's denying.
6 Was she denying that she was fired? Was she denying
7 that she was fired because of violating the travel ban,
8 or are you just saying she objects to the last part of
9 that sentence? It's not clear to me which part of it,
10 so I don't want to talk about all three.

11 126. Q. It's your article, right; "fired from
12 their jobs for going against a non-essential travel ban
13 to join the MAGA mob at the White House." So what ---

14 A. It's been widely reported that she was
15 fired, and it's been widely reported that it was
16 because she violated the travel ban, and it's been
17 widely reported, including her own evidence, that she
18 violated that ban to go to the events of that day, so I
19 stand by the sentence.

20 127. Q. I see. Yes. Piece the three of those
21 elements together and we got her getting fired for
22 joining a MAGA mob at the White House; right?

23 A. There was definitely a MAGA mob, and
24 she spoke in front of that, so, yes. So that's my --
25 you know, I think it's pretty self-explanatory. We've

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1 gone over that -- the last part of that over and over
2 again.

3 128. Q. Okay. So she spoke in front of a MAGA
4 mob at the White House and therefore ---

5 A. Well, the event, yes.

6 129. Q. And that applies to both Kristen Nagle
7 and Sarah Choujounian? That's your understanding;
8 right?

9 A. Well, they were at the event and they
10 were -- I think I recall a video of her -- of Sarah on
11 the stage at the event as well. They were referred to
12 nurses from Canada by the person who was speaking.

13 130. Q. Which event, Mr. Horter, just for
14 clarity, are you referring to?

15 A. The place where she spoke on the day of
16 January 6th, at that event.

17 131. Q. What event?

18 A. The nurses and medical people
19 criticizing -- you know, riling people up about COVID
20 restrictions that they disagreed with. There was a
21 roster of speakers for that period of time that were
22 speaking; she was the first. Nagle was the first.

23 132. Q. It's also going to be Sarah
24 Choujounian's evidence that she was not fired for going
25 against the non-essential travel ban to join the MAGA

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1 mob at the White House.

2 I just want to be fair to you. Do you have a
3 reason to disagree with her evidence?

4 A. Yes, for similar reasons. Like, she
5 was fired. I don't think there's controversy. I don't
6 understand if she's disputing that. She was fired --
7 the cause was -- the violation of the non-essential
8 travel. And the reason that violated appears to be
9 that was to go to Washington to participate on the
10 event on January 6th.

11 133. Q. Okay. And being fired for violating
12 the non-essential travel ban, that's due -- did you
13 rely on reports; did you look ---

14 A. Yes, it was widely reported.

15 134. Q. You didn't speak to her employer
16 though; right?

17 A. Pardon?

18 135. Q. You didn't speak to her former
19 employer?

20 A. No, it was widely reported.

21 136. Q. I see.

22 A. And I was aware of -- you know, I was
23 also aware of the Nurses Federation statement.

24 137. Q. What statement is that?

25 A. The statement where they basically -

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1 "Enough is enough" I think is what it was called. Is
2 that the name of it?

3 138. Q. The statement that's quoted later in
4 your article?

5 A. Yes.

6 139. Q. I believe that's found at page 127, the
7 third -- starting at the third paragraph of that page.
8 That's the statement that you're referring to?

9 A. Yes.

10 140. Q. "Nursing organizations have condemned
11 Canadian Frontline Nurses. The Canadian Nurses
12 Association attack their anti-vax disinformation as
13 conspiracy and are released, entitled "Enough is
14 Enough."

15 A. Yes.

16 141. Q. So you understood the Canadian Nurses
17 Association article to be a reference to Canadian
18 Frontline Nurses and Choujounian ---

19 A. Well, no. I understood it to be a
20 reference to a whole variety of different people in the
21 medical community that were nurses that were basically
22 using their nurses' credentials to spout, you know,
23 anti-scientific, anti-mask, anti-mandate, anti-
24 government in some cases, you know, propaganda,
25 including the Canadian Frontline Nurses. So I didn't

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1 read that assuming this is only applicable to the
2 Canadian Frontline Nurses, but as a voice speaking on
3 behalf of Canadian nurses that was spouting all of
4 those things.

5 You know, I assumed that it applied to them,
6 yes. I don't know anything about the motivation of the
7 association about the timing of why they did it at that
8 particular time or whatever, but it clearly was an
9 issue of public concern that they clarify. And I took
10 it as applicable directly to both the plaintiffs and
11 their organization.

12 142. Q. Yes, that's how you understood -- you
13 understood that the statement applied to them; right?

14 A. Yes.

15 143. Q. Okay.

16 A. And if you read the Facebook posts that
17 are a part of the article as well, it fits exactly with
18 their characterization; not Facebook, other social
19 media posts.

20 144. Q. When you say "their" characterization,
21 you're talking about the Canadian Nurses Association?

22 A. Yes.

23 145. Q. Just one moment. So I'm looking at the
24 top of page 126, and then about four paragraphs down
25 the article gets into another nurse who was behind this

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1 protest, Kristal Pitter.

2 A. Yes.

3 146. Q. So it's going to be Kristal Pitter's
4 evidence that she didn't organize the protests that
5 took place on September 1st, 2021. Do you have reason
6 to doubt that evidence?

7 A. I don't have evidence to doubt it. I
8 understand her claiming that. Her name was on the
9 front page of who's involved in the Canadian Frontline
10 Nurses.

11 Canadian Frontline Nurses was calling for
12 these actions, so I took it as her participating in
13 that as one of the -- you know, if you clicked on it --
14 I don't remember how many it was, but it was three or
15 four faces that appeared with bios as a part of
16 Canadian nurses.

17 That's who Canadian nurses was, and she was,
18 you know, highly visible in that role. So, you know, -
19 - you know, when an organization is behind something,
20 what does that mean in relation to the people that are
21 involved in the organization?

22 You know, I can't attribute to what her
23 specific role in -- you know, did she make phone calls
24 or anything, I don't know. But she was a named entity
25 associated with the association that was calling for

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1 these things.

2 147. Q. So you don't know what role she may or
3 may not have played, --

4 A. No.

5 148. Q. -- but you published that she is behind
6 these protests; right?

7 A. Yes. No, just her role in the Canadian
8 Frontline Nurses.

9 149. Q. Okay. Moving on to the next sentence.

10 "She used to work in long-term care as a Home
11 Inspector, but she was fired after spewing garbage
12 about Bill Gates using COVID-19 vaccine to alter
13 peoples' DNA."

14 So what information or evidence did Together
15 News rely upon to support its statement that Pitter was
16 fired from her position as a Long-Term Care Inspector
17 for spewing garbage about Bill Gates using COVID-10?

18 A. I have no specific recollection of
19 that. I'd have to go back and look. The fact that she
20 was fired, I think, was matter of public record that
21 was discussed quite broadly.

22 The reason she was fired, I think, was
23 connecting a number of dots from both what her Facebook
24 page said and some of the other things. Not Facebook,
25 her social media things said, and some of the other

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1 things that are out there.

2 So yes, I don't know where that connective
3 tissue is there, but from memory, I'll have to go back
4 and look at that and identify it.

5 MR. CHAMP: We can answer that question in
6 writing for you, if you' like, Counsel?

7 MR. BOSSONNEAU-LEHNER: That's fine. I
8 would like; thank you.

9 MR. CHAMP: Yes. So he'll answer the
10 question about what sources he was relying on, et
11 cetera, yes.

12 --- UNDERTAKING NO. 4

13 BY MR. BOSSONNEAU-LEHNER:

14 150. Q. Thank you. So Mr. Horter, the next
15 paragraph, "Wait - didn't a huge percentage of
16 Ontario's COVID death occur in long-term care
17 facilities?"

18 So it's going to be Ms. Pitter's evidence
19 that she had nothing to do with COVID deaths that
20 occurred in long-term care facilities. Do you agree
21 with that?

22 A. I have no idea. And I didn't say that
23 she did.

24 151. Q. So what is this article saying by
25 mentioning didn't a huge percentage of Ontario's COVID

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1 deaths occur in long-care facilities after describing
2 Mr. Pitter as a former worker, as a Long-Term Care
3 Inspector?

4 A. Well, the positions that she pronounced
5 on her social media feeds are fairly outlandish, and I
6 would say anti-science, you know, on numerous fronts.
7 And that's disturbing that somebody in a position there
8 would hold such views in terms of the oversight
9 requirements of like what's actually happening.

10 If somebody doesn't believe in viruses and
11 whatever, then what are they -- you know, then what's
12 their take on hygiene. It raises a series of pretty
13 disturbing questions; right?

14 152. Q. Did Kristal Pitter not make a statement
15 that's said she didn't believe in viruses?

16 A. I don't remember specifically, but if
17 you go through her -- you know, some of her posts, her
18 views on a variety of pretty mainstream things are
19 fairly outlandish about, you know, what causes a
20 variety of different things.

21 I don't remember the specifics, but I
22 remember looking at it and being pretty appalled at the
23 time that a medical professional could publicize those
24 views that run against basic biology in some
25 situations.

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1 153. Q. So your evidence is that Together News
2 didn't mean to insinuate that she's responsible for
3 COVID-19?

4 A. I can' really hear your question;
5 sorry.

6 154. Q. Your evidence is that Together News -
7 the article did not mean to insinuate that she's
8 responsible for COVID deaths occurring in long-term
9 care facilities; right?

10 A. My evidence is that I have a concern
11 about -- I mean there's a broad concern about
12 government oversight of long-term care facilities;
13 right?

14 Like, it's a matter of public record that
15 lots of people are concerned about that because that
16 branch of government oversight would fail miserably in
17 the COVID scenario, so that's an established fact t hat
18 everybody knows.

19 The very high percentage of people who died
20 in Ontario died in long-term care, so that's well-
21 known. And then you have somebody who is in a position
22 within that ministry who holds some very out of
23 mainstream views about what causes illness and other
24 things is of concern.

25 155. Q. Okay.

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1 A. So that's the point that I was trying
2 to make there.

3 156. Q. I see. I'd like to take you to the
4 next page, page 127. And in this version of the
5 article the sentence that I'm going to ask you a
6 question about is actually underlined.

7 It says, "Where did these conspiracy spewing
8 nurses, who have no jobs, get the money to launch a new
9 organization with nationwide protests, fancy expensive
10 signs and scripted talking points?"

11 So what information or evidence is Together
12 News relying upon to support it's assertion that
13 Canadian Frontline Nurses has fancy, expensive signs?

14 A. When I watched the video of the
15 protests of the day of live, right, on a variety of
16 things, I saw evidence of some signs that were -- and
17 having been involved in protests myself, I know a fair
18 bit about sign making.

19 And, like, you didn't see a lot of, you know,
20 hand scribbled, you know, made up, you know, quippy
21 signs; you saw the same signs in the various different
22 protests. It requires money to do that; somebody paid
23 for those things. And so it's just a question; I'm
24 just asking the question.

25 I don't know the answer to that, but it

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1 raises concerns and, you know, as does the timing of
2 the launch of the organization after they returned from
3 Washington, D.C.

4 157. Q. I see.

5 A. So that's why that's a question.

6 158. Q. Got it. What information or evidence
7 did Together News rely upon in support of its assertion
8 that Canadian Frontline Nurses paid for scripted
9 talking points?

10 A. I didn't say that they paid for them.
11 Where did I say that? I just said that the same points
12 were being in a variety of protests and a variety of
13 places. And given my experience involved in a variety
14 of different movements is unusual; right?

15 It raises questions about a level of
16 coordination that is kind of unheard of for a
17 grassroots movement of a couple of nurses who don't
18 have jobs just showing up and all of a sudden this is a
19 national organization running these kinds of protests.
20 I have been involved in the environmental movement, for
21 example, for decades and I know how much coordination
22 it takes to run one event, let alone events across the
23 country.

24 And you know, it raised a series of
25 questions, which I have no evidence on, and that's why

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1 I put it in the form of a question. It is suspicious
2 in my view. It implies -- it raises questions. It
3 doesn't confirm, but it raises questions that there's
4 other folks involved that are not involved. So I have
5 no evidence of that. That was my concern; that's why I
6 put it in the form of a question.

7 159. Q. Got it. But you do assert that they
8 used scripted talking points. What did you mean by
9 that, or what evidence were you looking at?

10 A. I mean, on the day of these events I
11 watched them live; right? Like, you know, I can't
12 remember which stations, you know, news wire and
13 whatever, but I was watching it as the feeds were
14 happening and I noticed an odd amount of similarities,
15 much more synchronized messaging than you see in a
16 typical environmental event, for example, of the people
17 hitting the same talking points; right?

18 I don't remember the specifics of that. I
19 remember my impression watching it live as I was
20 surfing through the news on the day of.

21 There was a level of message discipline that
22 is very unusual and anything except for, you know, a
23 fairly organized process, and so I was surprised given
24 the way that these nurses have been portraying
25 themselves is kind of like, you know, kitchen table

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1 activists with no experience, that the level of
2 coordination that was occurring to have an event in
3 multiple places across the country on one day.

4 Having been involved in a number of those, I
5 know the massive amount of time and energy and money it
6 takes to coordinate that, and I saw a level of
7 discipline that occurred on that day in terms of the
8 message, not in terms of what the crowd did. I think
9 there was not any discipline there.

10 But in terms of the messaging, the words that
11 were spoken, you know, the targets that were focused
12 on, there was a level of coordination or a message
13 discipline that was unusual to me, and I watched it
14 live as I saw it. That was my impression, you know.

15 160. Q. So Mr. Horter, just two clarifying
16 questions. When you're saying "watching it live"
17 you're talking about an event that Canadian Frontline
18 Nurses gave speeches at?

19 A. I'm looking at the events that incurred
20 in front of hospitals on the day across the country.
21 And you know, I watched a bunch of different news -- I
22 was surfing the news of people who were covering that
23 over the course of the day and I saw it.

24 161. Q. I see.

25 A. I watched that. Right?

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1 162. Q. And your reference to "synchronized
2 speeches", that's a reference to the fact that similar
3 speeches were being made around the country
4 simultaneously?

5 A. Well, I refer to what I said in the
6 thing. The talking point seems fairly message
7 disciplined; right?

8 163. Q. I see.

9 A. People were hitting on the same themes,
10 the same points repeatedly in multiple jurisdictions,
11 which apparently were unrelated to one another, other
12 than somebody is coordinating them; right?

13 So it's just having done many of these
14 events. I was involved in climate events or whatever,
15 and I know how difficult it is to get people to do
16 that.

17 And it was fairly tightly messaged from the
18 people speaking on the podium. The people in the
19 audience, or whatever, you know, but the people who
20 were there and the kind of main things they were
21 hitting were fairly well coordinated countrywide, which
22 is, you know, hats off to them.

23 An impressive feat for, you know, some
24 unemployed nurses and a brand new organization with no
25 track record, so kudos for that. It's not easy to do

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1 and they did it. You know, it was impressive. And so
2 it implies to me that they maybe had some help, and
3 that was the point of the question.

4 You know, I don't know, I have no evidence of
5 that, but it was like oh, this is pretty impressive in
6 that regard.

7 164. Q. I just have a few more questions for
8 you, Mr. Horter. So do you consider yourself a
9 journalist or an opinion writer? What do you consider
10 yourself? Editor?

11 A. I'm the Editor. I don't consider
12 myself -- yes, it's not -- I don't consider -- I have
13 no training as a journalist.

14 I've written extensively in a variety of
15 different forms over the years from blogs to Op-Eds to
16 a variety of different things; Facebook, social media
17 things, and this is just the latest iteration of that.

18 I'm published widely in Globe and Mail and
19 Canadian -- you know, the National Post, and, you know,
20 a variety of different aggressive journals. And I had
21 a blog that was quite widely read for quite a long
22 time.

23 And in those things I tend to pull together
24 to try to connect the dots and threads of what's going
25 on with current events.

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1 165. Q. Got it. And doing that exercise, you'd
2 agree with me that it's important to verify the factual
3 accuracy of the reporting, particularly when the
4 reputations of others are involved; wouldn't you?

5 A. Yes, we take seriously -- like, you
6 know, I understand defamation law and we, you know, we
7 try to find multiple sources for different positions we
8 take that might be controversial.

9 I would say for the record that nobody from
10 Canadian Frontline Nurses has ever sent us any
11 information where they said anything in this article is
12 inaccurate; never pointed out one instance where
13 anything in the article is inaccurate all the way
14 along.

15 166. Q. Together News did not receive a Libel
16 Notice?

17 A. But it didn't say what was inaccurate.
18 It just listed a whole bunch of stuff, some of which
19 didn't even apply to us, but it didn't say, hey, this
20 sentence is wrong, please change it, or we stand by
21 that this is not -- you know, that this is a
22 misrepresentation or inaccurate; nothing -- we never
23 received any specifics that said that.

24 And if we had got something where it said
25 this is inaccurate because of "X", and evidence had

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1 been provided, we would have corrected that. And we've
2 done with other stories, or in other articles, and that
3 never happened.

4 167. Q. Did you respond to the Libel Notice in
5 any way?

6 A. I didn't respond on the Libel Notice on
7 recommendation of counsel.

8 MR. BOSSONNEAU-LEHNER: Okay. Mr. Horter,
9 thank you. Those are my questions, subject to, I
10 guess, the undertakings that I will be receiving. But
11 that concludes my cross-examination of Mr. Horter.

12 --- WHEREUPON THE EXAMINATION WAS ADJOURNED AT 4:08 P.M

13

14 I hereby certify that this is the
15 examination of WILLIAM HORTER taken
16 before me to the best of my skill
17 and ability on the 21st day of July,
18 2022.

19

20

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Jody Sauve - Court Reporter

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23

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original signature of the Court Reporter

Court File No. CV-21-00673636-0000

CANADIAN FRONTLINE NURSES ET AL.

-and -

CANADIAN NURSES ASSOCIATION ET AL.

Plaintiffs
(Responding Parties)

Defendants
(Moving Parties)

**ONTARIO
SUPERIOR COURT OF JUSTICE
(PROCEEDINGS COMMENCED AT TORONTO)**

**JOINT SUPPLEMENTARY MOTION RECORD
(Transcripts of Cross-Examinations)
VOLUME 1 of 3**

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