



NATIONAL CITIZENS INQUIRY

Vancouver, BC

Day 1

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EVIDENCE

Witness 6: Serena Steven

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[00:00:00]

Shawn Buckley

So our next witness is Serena Steven. Serena, can you hear me?

Serena Steven

Yes, I can. Can you hear me?

Shawn Buckley

I can hear you. So can I start by asking you to state your full name for the record, spelling your first and last names.

Serena Steven

Serena Dawn Steven, S-E-R-E-N-A S-T-E-V-E-N.

Shawn Buckley

Serena, do you swear to tell the truth, the whole truth, and nothing but the truth?

Serena Steven

I do and may it set us free.

Shawn Buckley

Now my understanding is that you were a nurse at the time that the COVID pandemic hit us.

Serena Steven

Yes.

Shawn Buckley

And my understanding also is that you are a little apprehensive about testifying today.

Serena Steven

Yeah. I am.

Shawn Buckley

Can you share with us why?

Serena Steven

Ah, fear of retribution on different levels.

Shawn Buckley

Okay, can you be any more specific than that?

Serena Steven

Well, one of the ones that hit me kind of hard today was Bill C-36 and the implications of being somebody who works in, or formerly worked in, healthcare who speaks out against anything that is being propagated—for fines and jail time. So that's one of them. And the other one, well there's a few, is the name-calling, as we all know, from people in our daily lives but also prime ministers, et cetera, for being "unacceptable."

Shawn Buckley

Okay. Many of the people that are going to be watching your testimony are not from the province of British Columbia and will not understand what you're speaking about when you say Bill C-36. So can you just briefly explain for them what Bill C-36 is and why that's a concern?

Serena Steven

It's a big concern for many reasons. I have yet to read the whole thing, portions of it that I am aware of— So Bill C-36 has been pushed through without being fully read. It's been pushed through our provincial government, and it is changing some of the healthcare implications. I was briefly reading some of it today. It's changing quite a few things.

But as far as I'm concerned, for the purposes of this testimony, if a health care worker, presently or formerly, speaks against what is being touted by our upper-ups in healthcare throughout the province, throughout Canada, health care workers can be fined. My understanding is that can be up to \$200,000 in fines and jail time or jail time. If I'm saying something that is, I think, spreading misinformation or hate speech, they could fine me, I suppose.

Shawn Buckley

You know it's interesting because we had a witness earlier today also speaking about that bill. I forget the page number but over 200 pages and that the legislative assembly was

really not given the time to read the bill and understand the bill and yet sweeping changes. So it's interesting that you brought that up as a specific concern today.

Now you were working as a nurse during the earlier parts of the pandemic, and my understanding is you saw some things that didn't fit with the official narrative. I'm curious if you can share your experience and your initial thoughts of what was going on in the hospital system at the beginning of the pandemic.

Serena Steven

Okay, so I'll just speak from my personal experience so that I don't spread any misinformation. So things that I was seeing, things that I was reading, things that I was experiencing at work were not matching up. So for example, I'm working in this healthcare system and it's quite regimented as a healthcare system ought to be for various reasons. I don't even know where, I feel a bit lost.

Shawn Buckley

We were being told that the hospitals were full and basically being overrun, and we all basically had to do our part, like don't go to the hospital because they can't handle it. What was your experience when that messaging was going on?

Serena Steven

So what I was told and what I had read from my hospital emails—when I was told by people who were upper-ups

[00:05:00]

in the health authority that I worked for—is within the Vancouver Island Health Authority [VIHA], there were two hospitals designated for COVID patients. So if someone was going to get admitted to the hospital and tested positive for COVID, they would be shuttled off. I worked in a small rural community hospital. So they would get shuttled off to one of these two hospitals that are designated for COVID-19.

Now, I was only working from the time of declared lockdown pandemic stuff until the time I left, for approximately four months, maybe a bit more. So I only saw the early days of that. So what was happening was our hospitals were emptied. We have 21 beds in the hospital, but we had sent a lot of people home. People do heal better at home. They heal faster. They have their own comforts, their own space, better food, all that stuff. People tend to heal better at home. So people were sent home before they may have been sent home prior to the pandemic and making space in the hospitals for maybe an onslaught of people that might have been coming in.

So we were as hospital staff, as nurses, I can speak for myself, we were being paid extra money for pandemic pay, I guess dangers. Yet our workload went down. And also, we were being directed to send people home if they came to the hospital seeking help. Basically not any words from anybody else, I'm just putting this into layman's terms. But if someone was blue in the lips or having a heart attack, bring them in. But if they were just coming for some minor complaints, which a lot of people do, send them home.

What I was seeing, as somebody who was on the front lines and going outside and greeting potential patients to come into the hospital, I was told to send them home after questioning

to make sure they didn't need proper medical attention, like emergency medical attention or not. People were coming in with a lot of fear. And as a health care person, that's part of healthcare. That's mental health, part of healthcare, and we were sending them home.

Shawn Buckley

My understanding is that you were starting to get stressed out by what you were seeing and also by the messaging that you were getting. I'm just wondering if you can speak about both your stress and the messaging you were getting.

Serena Steven

So I was getting emails, which I consider indoctrination-style wording, which was saying stuff such as, "These are your only sources of truth," and then they would list the WHO and VIHA, and there was one other. So these are your only sources of truth. With health sciences background, my experience is that there's not just one source of truth, and there's lots of avenues to look into in healthcare, in anything. And then I was seeing what was happening in the hospital with it being empty.

Shawn Buckley

Serena, can I just slow you down?

Serena Steven

Yes.

Shawn Buckley

Who were you getting these emails from?

Serena Steven

My health authority. So basically it gets filtered down. So then it comes down from management.

Shawn Buckley

Okay so these are actually emails; so they're work emails.

Serena Steven

Yes.

Shawn Buckley

So they're coming to you because you're a nurse employed in the hospital, and they're basically telling you what the trusted sources of information are for COVID.

Serena Steven

Mm-hmm.

Shawn Buckley

Had you ever experienced anything like that before, where your employer was sending you a barrage of emails telling you what are verified sources and what aren't on any health issue?

Serena Steven

No. No, not like this. There are sources that you're supposed to trust, like *The British Medical Journal* or certain sciences for certain papers for published studies and whatnot.

But this type of stuff was very bizarre because when I was reading it, I could tell that the language being used—it felt indoctrination-like. I would literally look to my left and my right and see doctors and nurses, and no one was batting an eye. Now, maybe they weren't reading the same email at the same time, but it felt weird.

Shawn Buckley

And how did you react to that personally?

Serena Steven

Well, between stuff like that, between what I was experiencing at the hospital being told to send people away, yet our hospitals were empty, the setups that were happening, policies changing sometimes,

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literally, on an hourly basis. And then what I was doing, my own research, reading worldwide studies from other parts of the world and looking at worldwide data, information that wasn't available here in British Columbia; you had to go outside the province, the country really, to find what was happening.

Things weren't adding up and I guess, well I don't guess, I know I was having inner turmoil, inner arguments with where I was at with it. Because here I was doing everything I was supposed to in my profession, but everything I knew and learnt was not adding up. So I started having stress, a lot of stress to the point where I had my very first ever panic attack and another second anxiety attack a couple weeks later, which I both reported as workplace injuries because they were directly related to stuff that was happening at work around all of this.

Shawn Buckley

Okay, so had you ever had a panic attack before this?

Serena Steven

I've never experienced anything like that.

Shawn Buckley

Okay, so you basically started having work-related panic attacks because of what was happening at work.

Serena Steven

Yes.

Shawn Buckley

Now, my understanding is that you decided to get vaccinated.

Serena Steven

Yes.

Shawn Buckley

Okay. And can you tell us why?

Serena Steven

Basically, I can sum it up in a nutshell. It's a lot more than that. The coercion basically got me. It got to me even though I knew that I didn't want to. I knew that it wasn't working. I knew that people were having vaccine injuries. I don't call it a vaccine. Basically, I feel like I was inoculated. Even a specialist, who read my Holter monitor later on, acknowledged that my body does not respond well to this. He used the words, "the modified spike protein." So yeah, coercion, basically.

Shawn Buckley

Okay, and so did you just march down there and get your vaccine?

Serena Steven

No. I basically had to build myself up to it. I knew that I didn't want to do it. But then taking my hard-earned profession away from me, which was the coercive threats, would bring me fear, the fear tactics. So I would crumble a little bit and think, "Maybe I'll just get this, maybe I'll just take this inoculation and hope that I'll be okay." I'd get strong within myself again, knowing that it wasn't right. This went back and forth for quite some time, well over a month. Basically, it was like I desensitized myself by trying to drive myself several times to the health clinic to take this. So I didn't just march in and take it, no. When I went in, I went in fully aware that it was under coercion. I went in eyes wide open.

Shawn Buckley

I just want to make sure that people understand what you're sharing with us. So you literally would get in the car and start driving and then turn around and go back. And this happened a number of different days because of this inner turmoil. So you felt you had to get it. You used the word coercion and you had to keep your job. But at the same time you were so apprehensive and scared that you would turn around. Is that accurate?

Serena Steven

I would literally start shaking and crying, yeah. My body was telling me not to do it, literally, yeah.

Shawn Buckley

So when you went to get the vaccine, can you share with us where you basically give an informed consent? As a nurse, you'd understand what that is? Can you share the experience with us on the information that you were given?

Serena Steven

I wasn't given very much information. In fact, I gave the inoculating nurse, the nurse who I allowed to inoculate me, I gave her more information than she gave me. I told her why I didn't want to do it. I told her I'm just praying that I'll be one of the people that are okay.

Shawn Buckley

Okay.

Serena Steven

So she didn't tell me much, "a sore arm, you might feel some flu-like symptoms," type of information, but she didn't give me information.

Shawn Buckley

And to use your words, were you one of the people that were okay?

Serena Steven

No.

Shawn Buckley

So what happened?

Serena Steven

I'm going to try and make the story as short as possible. I know we're limited for time. Within an hour, I started having my first heart palpitations. I kind of brushed them off, thinking, "Oh, that wasn't the vaccine. That wasn't that inoculation. I'm just a bit anxious about having taken it," although I hadn't felt heart palpitations like that before.

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And then that night, that evening, it was early evening, maybe late afternoon, I was sitting on the couch, and I started feeling extreme headache, very, very unwell. You know, I expect a sore arm, especially because I had the— I actually told the nurse I wouldn't take the injection unless she withdrew on the needle, which can make the arm more sore. So I did expect to have a sore arm. That's par for the course with taking a lot of intramuscular injections.

But I was having a bit of shortness of breath. Then when I was changing, I noticed the whole left side of my body, the corpse, was in a full rash. It was the side that I had been inoculated on. Through talking to someone else who I know on the phone, who's a nurse—

“Should I take some Benadryl tonight?” I took some Benadryl, and it knocked me out and then the rash went away.

But the next day I was on a hike and my heart started pounding so ferociously, I got really scared. I was up in the forest by myself. No one knew where I was. I thought, “Maybe this is it. This is one of the unlucky ones with this inoculation.” I got really scared and I basically had to work my way out of the forest very slowly. I did some medical maneuvers on myself, like the Valsalva maneuver, to try and slow my heart rate and got out of the forest. My body started having, over the course of 10 days, I had several different physical reactions. And then on the 10th day, I finally brought myself to the hospital because I thought I was having a heart attack.

Shawn Buckley

And I’m just going to slow you down. My understanding is that for that 10 days, following what you’re speaking about, you literally would write down passwords for your bank accounts, and the like, in case you didn’t survive the night.

Serena Steven

Yeah, there’s no tissues in here. Yeah, I was literally deathly scared on several occasions, and I didn’t think I was going to wake up some mornings.

Shawn Buckley

Okay, so after 10 days, you end up going to the hospital. And my understanding is because when you go to the hospital, you’re literally having typical heart attack symptoms.

Serena Steven

Yeah.

Shawn Buckley

And what happened at the hospital?

Serena Steven

They did an ultrasound on my heart. They did an echocardiogram. They did a lot of blood work and they sent me home with a prescription for a Holter monitor.

Shawn Buckley

Right, and what did the Holter monitor show?

Serena Steven

By the time I got my Holter monitor, it was over two weeks, maybe even three weeks, since I first took the inoculation. My heart rate had started to not be as severe as that first 10 to 12 days, although, it was still quite bad. It was showing heart rates up to almost 160 beats per minute while I was at rest, just sitting on the couch, thinking I was relaxing.

Shawn Buckley

Right, okay. So my understanding also is that this exacerbated your asthma. Can you share with us that and then how the tachycardia kind of complicated you treating your asthma?

Serena Steven

Right. So I have asthma, which is very, very mild. You know, it comes on with allergies. I maybe taken inhalers two to three times a year.

I basically had difficulty breathing, shortness of breath, and wheezy breathing every single day, almost all day long. But I wouldn't take my inhaler because one of the side effects of the inhalers is increased heart rate, which I experience when I take that inhaler the two to three times a year that I need it. I was so afraid already that I was going to have a heart attack and every time my heart pounded like crazy, I was very genuinely terrified. So I didn't take any inhalers to treat my respiratory system. And it's still not good. Yeah, it's been a year and a half.

Shawn Buckley

And you're still avoiding inhalers.

Serena Steven

Yes.

Shawn Buckley

Now something else happened that actually made it difficult for you to leave your house for a period of time. Can you share with us what happened?

Serena Steven

Yeah.

[00:20:00]

So I became incontinent of bowel. I'm a very healthy person. I've never had issues with my bowels in my life. And basically, yeah, incontinent of bowel. I wouldn't even feel anything. People, as humans, we know if you're going to pass gas; you know if something's going to happen. I wouldn't feel anything and I would be basically soiled. But it was so— And still is, it's very embarrassing to say this on a camera. It was so traumatizing for me that I started—and didn't realize I was doing it—but I was mentally blocking it out.

And then, I don't even know how long later it was, I decided I'm going to go on a walk. Fortunately, it was in the forest not far from where I live. It happened again. It kind of all came tumbling in from my subconscious back to my conscious that, "Oh, yes, this has been happening to my body. I've been putting it aside and ignoring it and pretending it wasn't happening and not saying anything." So once I acknowledged that, I got brave enough to slowly, slowly start telling people about that.

Shawn Buckley

Right, including your doctor.

Serena Steven

I didn't. No. I haven't seen my doctor since she gaslit me. But I did go back and see the specialist who read my Holter monitor. And I told him.

Shawn Buckley

I have to ask you about the gaslighting, just the way you introduced that. So can you share with us what happened?

Serena Steven

Well, I have a doctor who might fire me if she ever hears me saying this now. But she gaslit me on a couple of occasions. One time was over the phone, prior to taking the vaccination, when I tried to explain to her my concerns of taking the inoculation. She gaslit me on the phone and said, "Oh, it's just a little mRNA vaccine. I don't know what everyone's so worried about." And poo-pooed the fact that I was going to her with anxiety around this, which was the point of the doctor's appointment.

And then the second time she gaslit—well, I think she gaslit me more than twice—but another big time that she gaslit me was basically downplaying the results on my Holter monitor to me, in front of me, in her office, which surprised me because knowing full well that I'm a nurse and, in fact, worked alongside of her in the small hospital.

Basically, she said, "Well your heart rate was only up to 130 beats per minute. And really, we don't pay much attention to anyone whose heart rates are less than 35 beats per minute." Well, I know that that's not true. If someone comes in with excess heart rates, we're going to pay attention to that. And second of all, my heart rate was almost 160 beats per minute. So she just basically gaslit me, downplayed what was going on, and didn't even acknowledge that my condition was as bad as it is.

Shawn Buckley

I'll just ask you to speak about one more topic. And that is after you were injured by the vaccine, you tried to get an exemption so you wouldn't have to take a second dose. And can you share with us what happened and what steps you took?

Serena Steven

Yeah, I had to go to see my doctor. So the time that she gaslit me about my 130 beat per minute heart rate, during that appointment it came out that, yes, I do want to talk to the specialist who read my Holter monitor. So I had to push for that. She got me an appointment with him.

I got an appointment with him. And when I went in there it was about an hour-long appointment, and he was lovely and very gracious. And he agreed with me that I should not take any more of this inoculation. He, in fact, called it the "modified spike protein." He acknowledged that my body didn't respond well to it. And then he wrote a note to my doctor, which I later on got a hold of—I wanted my medical records. When I was talking to him, he was saying, "Oh, your heart rate was 150," which of course it was more than that. And then he sent the letter to my doctor saying that "Serena does not want to take any more of this.

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“Her heart rate was up to 140 beats per minute.” So it was a bit of a downplay, as well. So when I read this letter that he sent to her, I was kind of beside myself.

And then about a week later, I decided that this wasn't okay. So I sat down and hand-wrote a two-page letter to the specialist, typed it out and went and delivered it to his office, in person to make sure that it was there. The very next day, I got a phone call from his office saying that he would like to speak to me. He would like to have an appointment to follow up on that letter that I sent to him. So I was able to get an in-person appointment with him, which was about another week or so later, maybe even two weeks later.

I know that letter must have hit him or touched him because when I went into his office, he had all the paperwork laid out on his desk. He was, indeed, filling out all the paperwork to report my situation as a vaccine injury, and also, to start the process to request a medical exemption, which went to the medical health officer of VIHA, who then denied my medical exemptions, this is over the course of months.

So I insisted, through support from somebody in my community, to have a follow-up appointment with that medical health officer. I did. It was over the phone. He's never met me. He only had apparently read what the specialist had sent to him for the information. When I was talking to him on the phone, I asked him basically why he denied me a medical exemption when all the evidence is right there. And he said, “Oh, just a minute.” He says, “Oh, I'm just reading this now. Oh, so yes, okay. Basically after this phone call, I think I will support you in pushing this medical exemption request up the chain of command.” But the way he indicated that he's just reading it now, presented to me that perhaps he hadn't even read my whole medical record at the time for this. Because he admitted that he was just reading it or just seeing it at that time.

Shawn Buckley

I don't know which inference is worse: that he changed his mind now that you were calling on him or that he hadn't read it in the first place and denied your exemption.

Serena Steven

So it got sent up to the Public Health Office of British Columbia. And many, many, many months later, I think it was in February of this year, I finally got a letter from the provincial health office granting me what they call a temporary medical exemption that they can revoke at any time under specific conditions, you know, wear a mask, do this, do that.

Shawn Buckley

Okay, I know those are the questions I have for you. I'll ask if the commissioners have any questions of you.

Serena Steven

Okay, thank you.

Shawn Buckley

And there are questions.

Commissioner Drysdale

Good afternoon. Thank you for coming out and telling us your story. When you were talking about you were working in a hospital and the pandemic came and the hospitals were emptied out, and you were getting extra pay or pandemic pay, how much training did you get in the British Columbia emergency pandemic plan prior to that or during that?

Serena Steven

What training? The only education I have had on any type of pandemic training or anything like that was in nursing school, and it was touched on very, very briefly.

Commissioner Drysdale

You didn't mention how many years you have been a nurse.

Serena Steven

Yeah, not very long. I went to school late in life, so I graduated in 2016.

Commissioner Drysdale

Okay, did you get any training in the Canadian influenza pandemic plan?

Serena Steven

I didn't know there was one.

Commissioner Drysdale

We've heard testimony over the last several weeks about informed consent, and I'm curious about that. Nurses are trained in informed consent, are they not?

Serena Steven

Yep.

Commissioner Drysdale

It's legislated under the nursing regulations, isn't it?

Serena Steven

Mm-hmm. Yeah, yes, yes.

Commissioner Drysdale

We had testimony a day or two ago, I can't remember if it was in Saskatoon or in Red Deer, where, I think, it was a doctor testifying.

[00:30:00]

They said that part of informed consent on the part of the practitioner is that if they get a sense that their patient is being influenced by a third party, then they're obligated to know that they're not getting informed consent if they're influenced by a third party. Is that your understanding of that as well?

Serena Steven

No, no, no, basically for me, it's more like making sure— As a practising nurse, which I'm not allowed to call myself a nurse anymore, so I'm talking in past tense. If I'm going to be administering you a medication or a procedure or a treatment of some sort, I have to ensure that, let's say aspirin, I have to ensure that you are aware of potential major side effects of it. No nurse has time to go through every single side effect. So that's just one example. If I'm going to be doing wound care, I have to talk to you, tell you what the procedure is, what's going on, let you know this might sting. Are you okay with me doing this? That's basically the scope of my informed consent. Doctors would be very different, I imagine.

Commissioner Drysdale

Okay. Because I was really aiming at, and my follow-up question, too, after hearing your answer, was going to be, well, if you've got a patient there and you're going to give them an aspirin, and the patient says, "Well, I really don't want to take that aspirin, but the person outside in the hallway is telling me I have to take it."

Serena Steven

I would tell that patient that it's their choice.

Commissioner Drysdale

Okay. Okay. I was curious on some of the last things that you talked about. You talked about that you went to the specialist and through a process or other, as your doctor, he, in his opinion, wanted to give you an exemption, but it had to go through a third-party bureaucrat who was not your doctor.

Serena Steven

Two, two different bureaucrats.

Commissioner Drysdale

Two different bureaucrats? Doesn't that violate the sanctity relationship between a patient and a doctor when a third or fourth party is making the decision on your medical treatment?

Serena Steven

Well, there's a lot of my medical stuff that has been violated since this whole thing went down. Just like confidentiality.

Commissioner Drysdale

Thank you very much.

Shawn Buckley

And there are no further questions. I just want to make sure that people understand what you're meaning when you're speaking about confidentiality.

It's one thing to go to your doctor and speak to your doctor about your conditions. For example, one of your conditions you found extremely embarrassing. It's another thing for other people that you don't even know and aren't even aware of getting access to your medical records to make decisions about you without even speaking to you. That's what you're referring to, right?

Serena Steven

That is one of them. But the other one is, with this whole declaring what your status is in this day and age, a new manager at my place of employment has privy and is very aware of what my inoculation status is. He or she can go in and find out if I have taken one, two, three, four, five or however many boosters people take these days. Sorry, a little bit cynical about that at this point. Yeah, they have that information.

Shawn Buckley

Okay, and well those are our questions for you, Serena. On behalf of the National Citizens Inquiry we sincerely thank you for coming and testing.

Serena Steven

Thank you very much.

[00:34:18]

Final Review and Approval: Margaret Phillips, August 25, 2023.

The evidence offered in this transcript is a true and faithful record of witness testimony given during the National Citizens Inquiry (NCI) hearings. The transcript was prepared by members of a team of volunteers using an "intelligent verbatim" transcription method.

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