



## NATIONAL CITIZENS INQUIRY

Regina, SK

Day 2

May 31, 2024

### EVIDENCE

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**Witness 8: Mark Varga**

**Full Day 2 Timestamp: 09:14:54–09:58:35**

**Source URL: <https://rumble.com/v4z9kv2-nci-regina-hearings-day-2-may-31-2024.html>**

**Wayne Lenhardt**

Our next testimony is going to be by Mr. Mark Varga. So, Mark, if you could give me your full name and spell it for me, then I'll do an oath with you and we'll proceed.

**Mark Varga**

Yeah. My name is Mark Varga. M-A-R-K V-A-R-G-A.

**Wayne Lenhardt**

And do you promise to tell the truth, the whole truth, and nothing but the truth during your testimony?

**Mark Varga**

Absolutely. Before God. He is my witness.

**Wayne Lenhardt**

Perhaps we could just start with your background. Perhaps you could go back to your qualifications, your degrees, your certificates, whatever that is, and we'll get to the point where you're at the [Windsor] Regional Hospital and we'll go from there.

**Mark Varga**

So my background is I have a bachelor in psychology and a master's in kinesiology with about 25 years within the health and safety field. I worked at Chrysler in the automotive industry and health and safety for approximately ten years. I was at Diageo, a beverage company, doing health, safety, and risk management for approximately five years, and then moved to Windsor Regional Hospital as the Safety Manager there for about five years. And then the most recent just before COVID, in 2018, my family and I moved up to London as part of a church plant. And I was hired at London Health Sciences Centre as a Clinical Educator in Workplace Violence.

**Wayne Lenhardt**

So and you grew up in Windsor, did you?

**Mark Varga**

Yes. Spent most of my time up in Windsor until 2018. And that was when, for the first time moving outside of Windsor, we moved up to Glencoe, a small little farming community, maybe 45 minutes southwest of London.

**Wayne Lenhardt**

What titles did you have in your job in the—

**Mark Varga**

Everything from Ergonomic Specialist to moving into a health and safety role and risk management at Diageo, then into health and safety management, and then finally to a clinical education position.

**Wayne Lenhardt**

At some point, you and your family got COVID and you recovered. So when was that?

**Mark Varga**

So very early on in the spring of 2021, our whole family got it. I don't remember who got it first, but it went through our family systematically. And it was interesting to watch the difference in our family, how we all reacted to it. The youngest child was over it within a day or two, the next oldest, a couple more days, the third oldest, maybe four or five days, and then my wife and I, me being the oldest, lasted the longest—a couple weeks. But we all recovered just like you would from normal flu, not really any lingering symptoms.

And we kind of carried on because we believed, even as Dr. Thorpe put up at the very beginning, we believe that God made our bodies incredibly complex. And with the immune system that we have, that as long as we keep feeding that with the proper nutrition and food and any supplements to increase that immunity and immune response, that we had everything we needed to fight COVID without having man-made manipulation being injected into us. And so that's kind of how we went about towards COVID. And we just took extra vitamin C, extra vitamin D during that entire time, kept a good balance of diet, and very quickly went through the house and it was done.

And I knew I had natural immunity, but because I worked in the hospital industry, I knew that I needed to prove that. And where that came from is my time at Windsor Regional Hospital for those five years. As a Health and Safety Manager, I managed all the vaccine immunization policies. That was my responsibility. I ran and organized immunization clinics for the flu shots, and all of those things. So I knew that every policy that I'd ever seen regarding immunization, all of them said that you can prove vaccine status. Even on the bottom of page one of this, that I believe the commissioners have, it says "to prove immune status through laboratory test results."

So knowing that that has been the history forever on vaccinations and immunizations, I went and got my blood tested, because I wanted to prove to myself first of all, but also to my company, that I had natural immunity. And so I went got my blood tested out of my own

pocket, brought it into the Employee Health Office or Occupational Health and Safety Office, and said, “Here’s my results. I’m immune to the COVID virus, and I won’t be taking the vaccine.” They weren’t sure what to do with that. They were quiet and they accepted it.

And that was kind of it, because very shortly after that or around that same time, the new COVID policy came out which didn’t match very well with the immunization policy. Because the new COVID policy instead said that immunization/vaccination was only through vaccination. There was no immunization through natural means anymore. That’s not considered. In their definition, it even stated “immunization is only through vaccination,” which really stunned me, because that went against decades of known science that had been in every policy of immunization for every disease that we had listed in our policy. I managed these policies. I knew them.

And so it was kind of shocking to me that all of a sudden I’m being told that the science has changed. There’s new science out there that says, “No, you can’t get this immunization through natural means,” that God’s design of your body is not good enough, and somehow we are better at playing God than he is, and we can figure out ways to make that happen better. So that was kind of a big shock to me.

The messaging was coming through mandatory e-learns at the hospital to daily emails that were being sent out on the status of the cases—within the hospital, within the community, from the public health unit to obviously Public Health Canada—that the vaccines were safe and effective, there was nothing wrong with them, and that COVID was the pandemic of unvaccinated. And so I began tracking those numbers as they came out from the hospital because just like at the beginning, I take an oath to tell the truth—not just in front of an inquiry, but all the time. Because before God, he expects truth. He is truth.

And so I began to track the numbers and challenge my bosses, my manager, and my director, because they were the head of health and safety within the hospital, to say, “So, yes, early on it seems like the cases of COVID in the community and in the hospital are unvaccinated,” I said, “but that’s because no one’s seen the effects of the vaccine yet.” And so I just silently kept tracking them until things began to change. And all of a sudden, the numbers started to become pretty close to equal. Actually, the day before I was fired, the cases had crept up amongst the vaccinated so that 40% of the COVID cases within the community and within the hospitals were amongst vaccinated individuals.

And I sent that to my manager and my director the day before I was fired to say, “So this is clearly starting to change.” Within two months to the day that I was fired, the vaccinated accounted for two times the number of cases within the hospital. Within three months of me being fired, it was up to six times the cases of the unvaccinated. And clearly the numbers kept on skyrocketing from there. And so clearly, this wasn’t an issue of vaccinated or unvaccinated. There was things that were happening unrelated to the virus that clearly were associated more with the vaccines, but no one wanted to admit that or to look at those data points.

And that’s why I kept tracking them and even followed it up even after I was fired, with emails to my boss. I don’t think it got through, or maybe it did, I don’t know. But I want it to be clear that even after we were fired from LHSC (London Health Sciences Centre), it was fascinating that it wasn’t until you removed all the unvaccinated staff that absenteeism related to COVID and sickness skyrocketed amongst the staff—because you took all the healthy people out that were coming to work and were doing the job because they had natural immunity, or whatever the case may be.

And so it was a rather fascinating time to go through that at work, because my job was to train the staff. So every day I was interacting with different staff from all over the hospital. And one of the things that I found rather disturbing was that as soon as you take staff outside of their environment of the department they work in, and outside of the auspices of their managers and their directors and the hospital administrators that were all touting the narrative—as soon as you took them out of that environment to an off-site where they're training with me, every day I'm hearing about side effects from a bunch of staff that now feel free to be able to talk amongst themselves about that they felt coerced and bullied and harassed into taking a vaccine that they didn't want, and then now dealing with the side effects of that.

And it was really disturbing to that, because they would never say that in front of their manager because of fear of reprisal, fear of censorship, fear of being fired, even though they were vaccinated. And so it became somewhat of a safe place for them to share those things amongst other colleagues and to me. But again, there was no "if" I brought that up to my director and manager, because we managed the health and safety of staff. That was our job, so they needed to hear that. But of course, it's only my word, and there's no corroboration to what I would say. And so that very quickly became a point of vilification against me because, well, I'm just bringing up the negative points, "And it's only because you're unvaccinated and you're trying to make this seem like it's worse than it is." And so all of a sudden my name's getting smeared for simply just telling the truth.

So it was a difficult time to go through all of that, and especially this idea of knowing that I'm going to be fired—not for doing something evil or wrong. I didn't steal anything from the company, I didn't kill a patient, I didn't follow a wrong protocol. I simply did my job and told the truth. And even through all of this, there were so many little elements of manipulating data, manipulating the messaging, to just keep shouting to the staff of how they must get vaccinated or you're going to be fired.

### **Wayne Lenhardt**

Let me bring you back to the timeline again. So at a certain point, I understand that the mandates came in, but the mandate was that you were allowed to test three times a week rather than get vaccinated, if that was your choice. Do you remember when that happened?

### **Mark Varga**

That would have been probably right around August. So I was fired in October, and it was about three months or so of testing that I had to do. So we were basically given the mandate that according to the new policy, you have to test—and the policy that changed six to seven times in a matter of months because every two or three weeks, another version came out to deal with some other issue that had come up. But it was either you're going to be put on a leave of absence, effective, it would have been probably July-ish, around there, of 2021, or you can test for the three times a week for the next several months until termination date at the end of October. So I chose to prove that I am a good worker and to make the point that I'm immunized to it, so I had no fear of it. So I said, "I'll test as many times as you want to, just to show that I can be a good worker, a worker with a good work ethic and that wasn't afraid to keep going."

**Wayne Lenhardt**

So the three times a week testing, was that going to allow you not to have to get vaccinated? Or were they saying you could do this for a certain period of time, but at the end of that period of time, you better get vaccinated?

**Mark Varga**

Yes. It was simply going to be a temporary measure. And so I knew that. I knew going into it that, temporarily, I'm going to have to do this for a few months, but in the end run, I'm still going to get fired anyhow. But we're a sole income family, and so I knew that the longer that I worked, the longer we had a paycheck, the better our family situation was going to be.

**Wayne Lenhardt**

And when did they terminate you then, and how did they do that?

**Mark Varga**

So in the middle of October, I was pulled into a meeting where they basically asked three questions: "Are you aware of the vaccination policy?" "Yes, I am." "Our records indicate that you are not immunized or vaccinated per the policy. Is that correct?" I said, "No, that's not correct." They kind of stopped. "Oh, were you vaccinated?" I said, "No, I was immunized. I got COVID. Per the test results which Occupational Health has, I am immunized. So I'm not vaccinated, but I'm immunized." There was quiet. They didn't know what to say because I said, "Your own policy says that it's immunized/vaccinated. I'm immunized, but I'm not vaccinated." And then the third question was, "Well, because you're not, then you know that come October 22nd, you will be terminated unless you are going to get a vaccination. Are you going to?" was their third question. I said, "No."

So then they set a date for October 22nd as my termination date. And at that meeting, same three questions were asked—exactly the same three questions, the same way, and I answered in the same way. I said, "No, you're wrong again. I asked you to document it in a meeting two weeks ago that I am immunized." "Well, per the policy, it says vaccination only." I said, "Then your policy is wrong and goes against the previous policy that has been in place for decades that immune status is acceptable by laboratory results." So that was kind of the end piece of it.

**Wayne Lenhardt**

So as of October 22nd, then, of 2021, you were terminated.

**Mark Varga**

That's correct.

**Wayne Lenhardt**

Did they give you any severance or did you apply for unemployment insurance or anything?

**Mark Varga**

So they initially said, “You can also apply for a vaccine exemption per the human rights code.” And so I did that as well because that was allowed under here. But even that, I gave it to my director to look it over and to give me some advice and feedback before I submitted it. And she says, “It looks great, you should,” If it were up to her, she said “You would get an exemption based upon what you’ve written.” She said, “But I’m just going to tell you ahead of time off the record, the hospital has made a point. They are accepting no exemptions, and they are denying every single one of them because they want people to go to the tribunal, to get the tribunal to make a decision and not make a decision at that level.”

And in the letter that came mere days after I submitted, the response from the hospital was: “According to the human rights code, you are not entitled to an accommodation from the vaccine mandate because of the health and safety risk to the general population”—even though I’m immune. And so that was the one piece of it. And then, there was no, “You’re going to be given a record of employment.” But at that time we were also told, and that was in the news, that EI (Employment Insurance) was not accepting any submissions for employment insurance from anyone who’s not vaccinated and was fired from their job.

So I was kind of in this tough spot. The government says the Human Rights, I’m not accepted under that. The government under EI, even though they’ve forced me to pay for 30 years into the system, I can’t ever access that money because I’m not vaccinated. And then on top of that, because they mandated it to health care, and that’s where I was working, and all hospitals at that time had the vaccine mandate, I couldn’t work within my field, and I couldn’t go back into health and safety because most of the health and safety roles as managers also had vaccine mandates.

So I couldn’t get EI because I’m unvaccinated. I couldn’t get another job within my area of expertise because I’m not vaccinated. So I was in this spot of: “So I’m without a job and without any prospective job in the future related to what I do because I chose not to be vaccinated.” And part of that choice—and I guess I should have started with that part of the story—is back in 2015, I went on a mission trip to Zambia, Africa, to Lifesong Harmony Schools, where a friend of mine was operating a school for orphan children.

And when I went there, because we were travelling through Ethiopia, I had to get the yellow fever vaccine. And it was a requirement. And at that time, I believed the science, I believed the pharmaceutical industry, I believed, you know, that everybody had my good health in mind when doing things like that. And so I took the vaccine and went to Zambia and I came back with allergies to eggs, gluten, and dairy. So now my diet is forever changed or I have a messed up gut from a vaccine that I was forced to take.

So with that kind of brooding in the back of my mind, I’m now put into another situation where I’m forced to take a vaccine that nobody tells me what the side effects are to. And I know what happened the first time; I’m not exactly too excited to have it happen the second time. And so that was kind of also lingering in the back of my mind.

### **Wayne Lenhardt**

So how long were you unemployed then, at that point?

### **Mark Varga**

So I went through one whole year of just literally living on savings. I took all my pension out of the hospital, which obviously hospitals have great pensions. So being in the hospital for almost ten years, I had at least a decentable size of money to be able to draw from. So

for the first year, I just pulled out savings from retirement, and by year two knowing that I can't do that for that long. I'm only 50 years old at that point in time, a little early for retirement. And so my wife and I were talking about it and trying to, like, "What do we do? How do we get an income?" And we were praying about it, and really just—my wife's a phenomenal baker, and so we said, "You know what? Why don't we start self-employment and just do a gluten-free bakery?"

And so that's what we started. A year later after that, so in 2023, my youngest teenage son decided he wanted to open up a coffee bar. So I've helped him launch that as well, pulled a little bit more from savings. So, yeah, we're definitely not in the black yet, from a financial perspective. I'm still pulling from my savings, but I have to say, God is faithful. The stress of not going into that environment of health care anymore, and instead working with my family every day is fantastic. Because the health care industry, I was proud to work in it when I was there, because you were there to help people. You were there to heal people. But over these last few years, the health care industry has turned into the death care industry.

And it's insane. Everything that I was taught going into health care was thrown out the window. From, "Well, you can't wear a surgical mask into a TB room because, well, that's airborne and you're going to get TB. You have to wear an N95, and you have to be properly fitted." I was a mask fit tester for N95 for the staff, and then all of a sudden now we have this new airborne virus, supposedly that it's safe now to wear a surgical mask? "And don't worry, you won't— It's okay, but wear it all the time, even outside the hospital—even outside."

It's just all of science, everything that I knew growing up that I was taught in school, from textbooks, from teachers, from experts, from reading journal studies—all of that was thrown out the window to say, "No, we have new science that tells us differently." But nobody could actually show that science. And it didn't matter, because if you questioned that, you were censored, you were shut down, and you were fired.

**Wayne Lenhardt**

Were these mandates ever lifted? Are they still in place in Ontario right now?

**Mark Varga**

In Ontario, as far as to my knowledge, all of the hospitals still require a COVID vaccine to work there.

**Wayne Lenhardt**

Right. And was that a provincial requirement, or was that just the hospital doing this?

**Mark Varga**

To be honest with you, I'm not 100% certain. I know it came down from, I believe it came down from the Ontario government at the time. Then I believe that was lifted from the government's perspective, but all the hospitals kept it in place in spite of that.

**Wayne Lenhardt**

I think at this point I'm going to ask the commissioners if they have any questions they'd like to ask.

**Commissioner Kaikkonen**

Thank you, Mark, for your testimony. I have a couple of questions. The first one: You referenced the policy changing every couple of weeks. Do you have copies of that? And did you submit those to the commissioners?

**Mark Varga**

I submitted the final version six of it, but I can go back and I can submit all of those. Yes, I made sure I kept a copy of every one of those policies, because it just kept on growing and growing and growing, and it was just like, that doesn't make sense to me.

**Commissioner Kaikkonen**

But it would be helpful for us when we write the report.

**Mark Varga**

Yes. Yeah, I will make a point of doing that.

**Commissioner Kaikkonen**

And then the second one: I just want some clarity around the human rights tribunal. Which code was it? Was it religious exemption that you were looking for?

**Mark Varga**

So I applied under the religious creed, and I believe in the documents that I did submit is the letter, and in there they reference the code and where it talks about where those that are applying under the religious exemption were not entitled to accommodation in there, and they gave their reasoning for it. So it was a way of saying, "You can apply, the policy says you can apply, but we're really not going to accept any of them." And to my knowledge, not one of the exemption letters were accepted by the hospital.

**Commissioner Kaikkonen**

And did you get a letter from London Health Sciences that refused you as well for the religious exemption, or there was no—

**Mark Varga**

That was their reference. Their part of the letter is one little paragraph, and then the bigger paragraph is the human rights code, and then basically saying, so on behalf of it, we thank you for your time, but we're not accepting it.

**Commissioner Kaikkonen**

Okay, thank you.



**Wayne Lenhardt**

Any other questions?

**Commissioner Drysdale**

Just a couple of questions. When you were employed at the hospital, were you under a collective agreement? Did you have a union?

**Mark Varga**

So when I was first hired by LHSC, I was. And so I came in actually for the first time in my life as a unionized worker. Up until then, I was never unionized in all my career. And so I came in as a unionized worker, and then within probably by about the first year or two into that, my time at LHSC as a clinical educator with ONA, the Ontario Nursing Association, they petitioned to change that role to a non-union position because I didn't carry a nursing designation. I didn't have a BHSc in nursing, so therefore how can I be part of ONA when I'm not a nurse? So then halfway through my time at LHSC, I switched from unionized to non-unionized. So in a sense that kind of maybe hurt me, too, because I had nobody covering my back—not that they did a lot for them, but.

**Commissioner Drysdale**

How busy was the hospital? I mean, you left the hospital in the fall of 2021, right? And so through the period of time that the government was messaging that the hospitals were overcapacity and that they couldn't handle the load, what did you observe?

**Mark Varga**

So, obviously, training various staff in various departments, I was all over both campuses at LHSC. And so what you saw was overcapacity in one area because the other areas were undercapacity. Because they had certain wings of the hospital completely shut off. No patients there, no staff there, because that was just in case COVID ramps up and we have thousands of people and thousands of cases at once, so we're keeping that as a separate COVID wing, even though we may have nobody on it or only one patient on it.

And so, yeah, the overcapacity was much like it always has been as long as I've been at the hospital. It's in Emerg, or in potentially ICU, because what we saw throughout the pandemic was the rush to ventilate. And so, of course, that can only be done in ICU. So those two areas of the hospital had always had more people in it, but the rest of the hospital was not. Staff were walking around bored on certain departments and certain floors because there was no patients to take care of, or only two because they wanted to cohort COVID patients together. And so, yeah, there was a lot of number-switching, if I can call it that, to make things look worse than they are.

**Commissioner Drysdale**

Understood.

**Mark Varga**

At least that's my observation.

**Commissioner Drysdale**

So, obviously the policy of the hospital for everyone to be vaccinated applied to all staff. And so my question is: Are you aware or do you have an estimate or a feeling of how many people in that hospital that work there were in the same position as you and lost their jobs, or they took early retirement, or they quit or they were fired?

**Mark Varga**

So here's funny you should ask that. This is, again, another one of those areas where truth was trampled in the streets, as Ezekiel says, or Isaiah, one of the prophets, right? Where truth was not relevant, not important. LHSC reported to the London Free Press that they only terminated 84 employees for not being vaccinated. And yet at the same time, I'm watching the numbers they're reporting, because they started by reporting it in June by department: how many of the staff were vaccinated, how many were not vaccinated, as a way to force those that weren't vaccinated. "See how many of your colleagues are getting the vaccine."

And so in June, it was 70% were fully vaccinated. By September, it was 80% were fully vaccinated. And then within just a period of from September to October 21st, there was only an additional 325 staff according to their numbers—and I have those, I saved those—according to their numbers, there were only 325 more staff that were vaccinated the day before I was fired. And it said that there were 8500 staff in the hospital that were fully vaccinated that amounted to 92% of the hospital being vaccinated.

So then I'm thinking, so if 8500 amounts to 92%, then what happened to the other 700 that weren't vaccinated? Because if your policy says you're going to terminate them, well, 700 doesn't amount to 84, which is what you're reporting to the public. And then at the same time, in order to get 92%, our staffing rates at the hospital consistently over the years has always been around ten and a half thousand. Well, to get to 92% when 8500 are vaccinated means you're missing about 1000 people in addition to the 700 that didn't get vaccinated. So according to the numbers, it sure looks like there's between 1000 and 1500 that no longer are working at LHSC that were prior. So I don't know where those numbers went to, but according to them, they only fired 84.

**Commissioner Drysdale**

I want to ask you with regard to your expertise about occupational health and safety, particularly with PPE: We've heard testimony from a number of witnesses that the vaccines have caused injury. As an employer, when you provide an employee with PPE or a procedure, and that procedure or PPE is faulty and causes harm, is that employer liable for having provided or forced you to use that PPE or that procedure?

**Mark Varga**

Of course, because it's inadequate. I mean, that's been always the history, and that's why, I mean, within the health and safety realm, we were always retraining and training again. And if there was any discrepancy between a person's following or not following, I guess, the prescribed PPE, there was always education, instruction, discipline, and potentially up to the point of termination if you didn't follow the proper PPE.

Now, if the company was wrong on the PPE side and an employee was injured, there's always going to be an investigation from the Ontario Labour Board or the Ministry of Labour who would come in and they would then, after review say, "That wasn't adequate

training, that wasn't adequate PPE, that wasn't adequate managing and disciplining of the employee for not wearing the proper PPE," whatever the case may be. And then there would be charges and a fine, typically, to the employer for not following the proper—

**Commissioner Drysdale**

Right. So the employer had a responsibility then to ensure that the procedure or the PPE was safe.

**Mark Varga**

Correct.

**Commissioner Drysdale**

They had a responsibility and a requirement to inform you of what the risks were of those procedures or those PPE they provided you with. So in your experience, or in your opinion, as someone who's worked in that area for a long time, enforcing somebody or mandating somebody to take a vaccine to supposedly prevent something from happening in the workplace, would that not cause that vaccine, or the mandate to take a vaccine, wouldn't that then become an item of PPE that the employer was responsible for?

**Mark Varga**

That's an interesting question, actually, that I've never actually heard posed before or thought about. Because typically, personal protective equipment, PPE, was always something that was external to the body. And so you could put on gloves, you can put on masks, you can put on a whole suit, all kinds of stuff like that, because it's something that you're just simply wearing or putting over the body. Whereas their vaccine and the policies and the messaging that they were saying is that this vaccine is protective against COVID. But yet if it's protective, then it should fall under some sort of personal protective—maybe it's PPI, injection? I'm not sure.

But, yes, technically, an employer should be liable, especially those industries that didn't deal with patients, that didn't deal with vulnerable sector, people that had all sorts of comorbidities and all those other things that go on: fast food restaurant or, you know, even auto manufacturing, or whatever. Because I had friends from Chrysler that were still back at Chrysler, even though I wasn't there, that Chrysler put in a mandate for their auto workers to be vaccinated or be terminated. And a matter of fact, a friend of mine was told he was going to be terminated. He chose early retirement instead. But yeah, that was the thing, and yet it's not personal protective equipment. You're saying it is, but then if it is, then you're liable.

And so it's, again, throughout this whole pandemic, it's this doublespeak. It's okay for you, but not for me. And I think that was, again, frustrating because truth is so important. We can't survive, this country can't survive if you don't live on truth.

**Commissioner Drysdale**

Did you feel pressure or coerced? Would you feel coerced to take the vaccine?

**Mark Varga**

Absolutely. And that was the other thing that was frustrating too, because as a health and safety manager, not only did I deal with policies that related to immunization and vaccination, I dealt with policies related to bullying and harassment in the workplace. I wrote those policies, I knew those policies back and forth. I participated in meetings with staff members that were accused of that, with labour relations and all that kind of stuff, and with unions.

And it was mind boggling to me that we all know the policies and what they say and that you can't do that, but yet when the employer does it, it's okay because they got the rubber stamp to bully from the government. And yeah, it was frustrating because I couldn't point out to a policy and say, "But you're not following the policy." "But that doesn't apply, because this is for the health and safety of the patients." But yet you can't prove that unvaccinated people are actually giving COVID to the patients.

**Commissioner Drysdale**

Thank you very much.

**Wayne Lenhardt**

Are there any other questions from the commissioners?

**Commissioner Robertson**

So you were working in the capacity of occupational health and safety?

**Mark Varga**

Yes.

**Commissioner Robertson**

And I know you're in the hospital. Do you know of other criteria that was being imposed on people in the outside world? Because I know of some people, they're iron workers and they were going 40-60ft in the air. And we're told, "They're on their own, they have to wear masks, they have to wear face guards." Like, do you have any knowledge on that?

**Mark Varga**

It was across many industries, and not just the mask, because again we were all told: "You go into a grocery store, you got to have the mask on. You go into the restaurant, you got to have a mask on until you sit down and take your mask off because COVID can't happen here, it can only happen over there." And so, yeah, there was a lot of that within every industry, even something as—and we had this at the hospital too—even remote workers at the hospital that didn't work [there].

Because that was one of the things: My bosses supported me, and I have nothing bad to say about my bosses, because they really tried hard. When I was told that I was going to be terminated at the end of those three months of testing every other day, my boss was working to try to get me— Because up until then, up until just before the vaccine mandate, I was the only one doing all the workplace violence training in the hospital. And then just at the beginning of that year, January-February of 2021, they hired six more to help me out because they had made a commitment to the unions to train staff faster. Because if

everybody's got to come through me, I'm a bottleneck for training 10,000 people. So more staff were hired that were going to report to me, and I was going to oversee the whole program and the rollout of it.

And when they told me that I was going to be terminated at the end of the three months of testing, my boss said, "You know what? Let me see if I can figure out a way to get you to remotely, because you're the expert on this. You have the best training. You set up the whole program. I want to keep you overseeing it. So if I can do this remotely, would you be willing to stay on it?" "Absolutely." And very quickly, as much as she pushed, the hospital pushed back and said "No, even remote workers who don't come into the hospital must be vaccinated." Which is ridiculous, but yet that was the ludicrously. There was no rationale, there was no logic to any of the arguments. It was just, this is—and I appreciated Dr. Thorp's testimony—this is what we're being paid to say, and therefore this is what we have to do.

So, yeah, every industry, from auto workers to iron workers, as you said, to remote workers that don't even come into a workplace, it was rolled out because everybody was scared of what the government was going to do if they didn't follow it. Yeah, unfortunately, a lot of people—well you know. Of anybody, you know the best the extent of the people that were injured by the vaccine mandates—whether physically in their flesh, mentally, spiritually, emotionally. The ramifications are so disastrous.

**Commissioner Robertson**

I agree.

**Wayne Lenhardt**

Any other questions? Going once. On behalf of the National Citizens Inquiry, I want to thank you very much for your testimony.

**Mark Varga**

I want to thank all of you as well. I appreciate it.