

# **NATIONAL CITIZENS INQUIRY**

Regina, SK Day 2

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### **EVIDENCE**

Witness 13: Glenn Aalderink

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# **Kasey Baker**

Hello. I believe we have our next witness ready. Glenn, can you hear me okay?

#### Glenn Aalderink

Yes, I could hear you.

### **Kasey Baker**

Very good. Can you please begin by stating and spelling your name clearly for the record.

# **Glenn Aalderink**

Glenn John Aalderink. G-L-E-N-N J-O-H-N A-A-L-D-E-R-I-N-K

### **Kasey Baker**

And do you promise to tell the truth at the proceedings herein?

# **Glenn Aalderink**

So help me God.

### **Kasey Baker**

Good. I understand that you're here to testify about your experience as a nurse working on a COVID ward in a hospital in British Columbia. Before we jump into that, can you please just give us a little bit more information about yourself? I understand that you are married and have a family, is that right?

## **Glenn Aalderink**

Yes, I do.

### **Kasey Baker**

Very good. And can you just briefly describe your education and your previous work experience.

#### **Glenn Aalderink**

So first five years of my adult working life, I worked in a chemical plant. I was a first aid attendant for 20 years, volunteer firefighter for 15, and a nurse for the last five years. I went to Sprott Shaw College after my mom passed away. I used her estate to advance my education. And because I spent so much time previous to that getting very sick and injured people to hospital, I thought the next logical step was for me to go to the hospital and work there.

# **Kasey Baker**

Very good. And just before we leave your background, I just want to touch on a couple of points here. You've noted that you worked as a firefighter and that you worked in a chemical plant. And I presume that during your work in both of those areas would also give you some additional experience regarding personal protective equipment. Is that a fair assumption?

#### Glenn Aalderink

Yes very fair.

#### **Kasey Baker**

You underwent some specific and extensive training in that area.

#### **Glenn Aalderink**

Yes, we did.

### **Kasey Baker**

Very good.

#### **Glenn Aalderink**

We were working in life-hazardous environments.

### **Kasey Baker**

All right, if we can just jump ahead a little bit in time. How long had you been working as a nurse when COVID hit in 2020?

#### **Glenn Aalderink**

I was in my third year.

# **Kasey Baker**

And had your entire career as a nurse been completed at the same hospital?

Yeah, the same facility.

### **Kasey Baker**

And what was your relationship like with your employer?

#### **Glenn Aalderink**

I would have said up to that point was very good.

### **Kasey Baker**

Can you tell us what you observed when COVID first came around in or around March of 2020?

#### Glenn Aalderink

I remember sitting there on that day, and I always took the last break. Because I like getting everything done before I took any breaks. So I did all my morning assessments, handed out my morning meds, and my partner said she was going to go for coffee. Then it seemed like it took her forever to come back. And I finally poked my head in the nursing staff room, and I went, "Are you coming out?" And she said, "Oh, yeah, sorry, I got sidetracked." And by this point it was like four hours into my shift and I was pretty hungry, so I gave her the update on what was going on with my patients and her patients.

I sat down and just started devouring my coffee snack, and it was silent in the nurses staff room. Not a voice was being spoken. The TV was on, and I could just feel these palpable waves of fear washing over me. I took like a half-bite and I stopped. I looked around and I looked up on the TV, and that was the day that they started announcing the worldwide pandemic.

### **Kasey Baker**

And can you describe what your duties were generally in the hospital up until that point?

#### **Glenn Aalderink**

I was a surgical nurse, so I would deal with normally pre-op, post-op patients, getting people back up after—at that point, it was orthos of knee and hip surgeries and broken bones—and I get them up and get them ready to go home after the surgeries.

### **Kasey Baker**

So when the pandemic was first declared, what changed in your facility? How did the hospital respond and what measures were implemented at that point?

### Glenn Aalderink

So when they announced the pandemic, they asked for volunteers, and I volunteered to be on the COVID floor. As I was an older male nurse, I figured it would be better for me if it

was going to be as disastrous as they were predicting, that if I could sacrifice myself for one young female co-worker, I was more than willing to do that. Yeah, I got that mentality. I was one of the ones that ran into burning buildings.

And then the hospital, it decanted everybody it could. Surgeries actually slowed down for a while. We went into that ridiculous PPE protocol in there, and it was like we're being told that one mask had to last us all day, and we'd have Tupperware dishes to put our masks in. And on our floor for the most part, well before I got injured, it was fairly empty. We had one patient who was there for about a three-week stay with a COVID diagnosis. Most of the time I was either pulled to other wards or I was sent to screening at the entrances to the hospital, just checking everybody who came in if they had any symptoms. And I had way too much time on my hands.

# **Kasey Baker**

All right, I want to go back and just highlight a couple of points here. So I believe you're testifying that the capacity of patients that you saw coming into the hospital decreased. Is that a fair summaries? And what percentage do you think you observed as a decline in capacity?

#### **Glenn Aalderink**

Prior to the pandemic it was very common for our hospital to be at 120% to 125% capacity, consistently.

### **Kasey Baker**

And during COVID?

#### **Glenn Aalderink**

And there was days I would hear 55% to about 65% capacity after the pandemic.

#### **Kasey Baker**

And you also— Pardon me, I apologize, I believe there's a bit of a delay here. You also mentioned, or I believe the word you used was "ridiculous,"—a ridiculous mask policy. Can you just elaborate a little bit on what in particular you were concerned about regarding the policy?

### Glenn Aalderink

Well, okay. From my previous experience, not once in any dangerous situation—whether it was at the chemical plant, or in a firefight, in a fire scene—was I given a procedure mask to protect my life. It was always forced air. The bare minimum in the chemical plant was a respirator with special filters.

# **Kasey Baker**

And just to clarify for everyone, a procedure mask is just a surgical mask, is that correct?

Yeah. The blue or white mask that they like to wear in healthcare.

### **Kasey Baker**

So from your previous experience as a firefighter or working in a chemical plant, if you had respiration concerns, you would be fitted with different equipment, is that correct?

#### **Glenn Aalderink**

Yes. You'd either have forced air, self-contained breathing apparatus, or a respirator at the bare minimum.

# **Kasey Baker**

And that, of course, was to aid you in your defense against chemicals or smoke particles. Can you, for the less educated of us, just describe your understanding of the difference in particle size between smoke or the chemicals you would have been working with compared to the COVID virus?

#### **Glenn Aalderink**

Sure. So in 2017, Bonnie Henry during the wildfires we had in British Columbia announced that procedure masks, or surgical masks, were not effective against wood smoke. In my experience, even in a wildlands fire like grassland fire or forest fire were we given anything other than our breathing apparatus if the smoke was that bad. Smoke particles are much larger, like almost 100 times larger than a viral particle. And if they weren't going to stop—according to Bonnie Henry in 2017—going to stop smoke particles, what were they going to do to try and stop a viral particle?

# **Kasey Baker**

Did you raise your concerns regarding the mask policy with any of your colleagues?

### **Glenn Aalderink**

Yeah, anybody I could talk to. And a lot of it was the standard answers: "Well that's what we're supposed to do." And I just felt that in my experience, it's not what you would do if it was such a dangerous environment. And I even opined to some people that if the government really truly cared about safety, they would just supply every Canadian with a respirator which is actually designed for you to breathe and wear for long term, and give them a viral filter just like they use in the level four viral labs, and replace them whenever the filters needed replacing.

### **Kasey Baker**

So how were your concerns dealt with by the other staff? How did they respond to your concerns?

A lot of them were very reticent to actually even engage. They just followed the procedures. There were some heated debates, some refusal to actually have any discussion, but it was not very well received. Everybody just wanted to wear a mask, it seemed.

## **Kasey Baker**

And what was your response to not only the masking policy, but the lockdown policy and the COVID measures that were then implemented?

#### Glenn Aalderink

Well from the very start, to understand basic nursing and stuff, a masking mandate is a non-pharmaceutical medical intervention. And at that point I started looking at that, going, "Well, that's starting to go against informed consent and against basic nursing ethics." I in no way could see putting something that was produced with chemicals on your face and breathing through that as being optimum for our health. Neither was locking people in their houses, not allowing people to go on trails to be active outdoors away from other people.

And to me, it went against informed consent and medical autonomy. We all should be allowed to measure our own risks and rewards and make our own decisions based upon what we know and our understanding, and then move forward in the direction we choose—not what was forced upon us by government leaders.

#### **Kasey Baker**

So I understand that based on these convictions that you've held, you ultimately started a protest group. Is that correct?

# Glenn Aalderink

Yes, I did.

#### **Kasey Baker**

Can you describe the protests and what you were protesting and when, and just describe that experience for us a little?

### Glenn Aalderink

It was basically the protests were against the government mandates. I felt if you wanted to do it, that was up to you. That is your choice. But the other side of it is that we should have a choice to not do it if we don't want. We started off a very small group. At some times we'd have only six people. Other times we actually started going, we got up to 200 to 300 people at a time. And then, of course, the September 1st rally: That was in September 1st, 2022, right before they terminated the nurses in BC. I helped organize that nationwide Stop the Mandate protest.

# **Kasey Baker**

And did your involvement in the protest affect your relationship with your employer?

Yes, it went sour fast.

### **Kasey Baker**

Can you elaborate on the souring of that relationship?

#### **Glenn Aalderink**

So I was disciplined after I—like I had hurt my shoulder and I was awaiting surgery, and they disciplined me then. And then after the September 1 rally, the BC nurses college started an investigation into me. And then after the mandate and after I healed—well, forced healing—they terminated me in January of 2023.

### **Kasey Baker**

So I just want to clarify a little bit of your testimony. You noted that initially when the vaccination mandate came into effect, you were in fact on sick leave. Is sick leave the correct word? You had been injured in an incident at the hospital, correct?

#### **Glenn Aalderink**

Yes.

#### **Kasey Baker**

And as a result of that injury, you were not, in fact, in the building working for several months before the vaccination mandate was implemented, correct?

# **Glenn Aalderink**

Correct.

### **Kasey Baker**

Okay. So in the time leading up to the vaccination mandate, what was your employment status? Were you asked to complete any forms disclosing your vaccination status at that point?

### **Glenn Aalderink**

It wasn't until the final termination meeting or final disciplinary meeting where they terminated me that they asked me what my vaccine status was. And I refused to answer, as none of the people that were present there were on my medical health team. And the employer at that time stated that they knew my vaccine status, and that was just another grounds for termination.

# **Kasey Baker**

So regarding the vaccination, you've indicated that they presumed you were not vaccinated. What concerns did you have specifically regarding the vaccination mandate?

So the vaccine—well, I hate calling it—the injection mandate, it flies against four of the eight basic nursing ethics that all of nursing is built upon: informed consent. So if I give you a Tylenol, I can explain to you how it works, the benefits of it, and the side effects of that medication, and you can make that choice. I like to use the analogy of heroin. If you take a needle of heroin and you stick it in your arm, if I try and stop you I can be arrested for assault. If I stick that needle of heroin in your arm, even if you beg me to do it, I can be guilty of assault. If you die from that needle of heroin, I am then guilty of murder. So if you buy that heroin, you have informed consent. You hopefully had talked and went through that.

With the mRNA injections, there was no admitted side effects, which we have all seen started coming out. And in my opinion, I cannot give you medication unless I can fully explain to you the risks and rewards of it. Then with a mandate, well that's being forced upon you, and they may dither about whether holding a person's job over their head is coercion or not. I felt it was, because you're not allowed free will. So medical autonomy, again, that plays into the heroin. If I force that heroin into your system, I'm guilty of assault or murder.

### **Kasey Baker**

I was just going to ask, that explains your concerns regarding the injections on a mass level. But personally, did you have any particular concerns regarding your own health and the injections?

#### **Glenn Aalderink**

Yes. So my family history on my dad's side, him and three of his siblings all died of massive heart attacks. My one aunt would have probably died of a heart attack, except she was murdered after a second one. My son had died just two years previously due to a brain aneurysm. So I was very concerned about that with what side effects they actually were kind of letting start slip: the myocarditis, pericarditis, thrombocytopenia. And knowing what those mean through my training and my education, I wanted to be able to have a very frank and honest discussion with my doctor.

And then when I went in, my doctor, literally after I explained and him looking at my medical history, he turned to me and said, "I don't care what it says, I am forced to recommend that you take the vaccine," his words. And then he went on about how he was the care director for one of the old age homes here and he injected every one of his residents, and I just was mortified with that. And I haven't been back to see him since.

#### **Kasey Baker**

So following your termination, did you have a union that you could apply to for assistance?

### **Glenn Aalderink**

Yes, the BC Nurses Union. And we just finished our arbitration here two weeks ago, and the union used a charter rights argument rather than just labour law. So in that, the agreement that came with the employers was that if Bonnie Henry changes the mandate or drops a mandate for all healthcare workers to be vaccinated by January 1st, then the companies,

the employers, have to bring us back and reinstate all our sick bank, all our vacation pay, our seniority and everything. If she doesn't do it but if falls after January 1st up until May, I believe—March or May, I can't remember at this point—the employer can do that if they so wish and rehire us.

### **Kasey Baker**

And at this point, has the mandate been lifted in British Columbia?

#### **Glenn Aalderink**

No, it has not. It is still in effect.

# **Kasey Baker**

So at this point, are you able to practice as a nurse at all in British Columbia?

### **Glenn Aalderink**

I am not. I am spray welding right now on a remanufacturing plant.

### **Kasey Baker**

Do you have any further options of appeal that you can pursue which might allow you to work as a nurse again in British Columbia?

#### **Glenn Aalderink**

We are trying one last Hail Mary attempt. Even the lawyer says that he doubts it, because they formed an agreement between the union and the employer. It's going to be really very hard to get that to change. So I would say, realistically, no.

#### **Kasey Baker**

So what does the future hold for you in terms of your nursing career at this point?

#### **Glenn Aalderink**

If I stay in BC, I can never be a nurse again.

# **Kasey Baker**

Is there anything else that you would like to mention that we haven't discussed already?

#### **Glenn Aalderink**

I just would like to express my gratitude to everyone involved who's set this up and running it. It's sorely needed, and I'm just very appreciative of having this opportunity to speak.

# **Kasey Baker**

I believe that concludes my questions. I'll just have a look over and see if the commissioners have any further questions for you. It looks like there are no further questions. That being said, I would like to thank you very sincerely for your testimony here today on behalf of the National Citizens Inquiry. Thank you.

# **Glenn Aalderink**

Thank you very much.

