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Executive Summary

This Legal Opinion was commissioned to explain the impact of the new legislative amendments to the *Psychotherapy Act*, the *Psychology Act* and the *Registered Health Professions Act (RHPA)* on over ten thousand Ontario *regulated* and *unregulated* healthcare practitioners and to provide the background on who created these three amendments and what the intended consequences of these three amendments are to ALL traditional, holistic, energy, hypnosis, spiritual care practitioners, therapists, and counselors in Ontario.

This Legal Opinion provides options for resolutions of this issue for the over then thousand directly and indirectly impacted *regulated* and *unregulated* healthcare practitioners to protect their traditional practice activities and is based upon extensive research into the legislation itself, case law, historical perspectives of similar legislation in the non-drug healthcare industry, the analysis of holistic, traditional, energy, hypnosis and spiritual care practitioners and treatments in Ontario, as well as correspondence from the College of Registered Psychotherapists of Ontario and reports by the Ministry of Health's own Advisory Council.

Highlighted herein is the existence of the *Written and Unwritten Constitution of Canada* and related Canadian Rule of Law and details on how it can be utilized in Court challenges to strike down ill-conceived legislation that is not consistent with the *Constitution of Canada*.

Contained herein is a detailed analysis of the negative impact that all *regulated* and *unregulated* healthcare professionals who primarily rely upon non-pharmaceutical based healthcare products and services are facing. This Legal Opinion confirms that the situation is as follows:

- (a) the *RHPA* legislation is already law; at the time of this writing, it merely awaits proclamation;
- (b) the *Psychotherapy Act* has been proclaimed and the new College of Registered Psychotherapists (CRPO) has enforcement powers over the title Psychotherapist and the profession of psychotherapy. 'Psychotherapy' and 'serious' are well-defined terms, as are 'health practitioner' and 'treatment'.
- (c) once the *RHPA* amendment--specifically the *14th Controlled Act (of Psychotherapy)*--is also proclaimed, the new College (CRPO) will have immediate enforcement powers over ALL treatments in Ontario, verbal and non-verbal, for the purpose of assisting others with emotional, cognitive, thinking, reasoning, social functioning and mental issues, regardless the name of the treatment, the terminology used in the practice, or the present title of the practitioner.
- (d) the sole purpose of the legislation is to eliminate all *unregulated* practitioners from the healthcare field, as well as to eliminate all non-pharmaceutical *regulated* practitioners through regulation, dilution and forced new scopes of practice.
- (e) the consequences of this combination of legislation is already apparent, even though the *RHPA* amendments have not yet been proclaimed. This legislation is designed to suppress all opposing views to the present medical/pharmaceutical cartel.
- (f) all definitions and case law exists that will allow for prosecution by the new College of any and all practitioners who treat others in Ontario, but who are not one of the authorized healthcare professionals noted in the legislation.

(g) all practitioners who are not one of the authorized professionals—psychiatrists and medical doctors, psychologists, registered psychotherapists, nurses, occupational therapists and social workers—are presently violating the *RHPA controlled act of psychotherapy* and can and likely will be investigated and prosecuted the instant the *RHPA* amendments are proclaimed.

(h) only two options exist to remedy the gross violations of human rights caused by the legislation: political pressure to repeal the offending legislation and failing that, a full Court challenge.

(i) if several thousand affected individuals do not get organized immediately, the *14th controlled act of psychotherapy*, once proclaimed, will end their practice and livelihood. It will certainly end free-choice in healthcare in Ontario and detrimentally affect the health and well-being of every Ontarian until it is knocked down by the Courts.

(j) millions of Ontario citizens will be deprived of lower cost, safer, and in some cases equally or more effective non-pharmaceutical healthcare products and services. This in turn will drive up the public healthcare costs significantly and further exasperate the already out-of-control public healthcare costs.

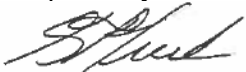
(k) thousands of *regulated* and *unregulated* healthcare practitioners, primarily those oriented towards non-pharmaceutical products and approaches, will be put out of business and/or lose large percentages of their current practices and annual incomes. This in turn will have a negative impact on small family businesses.

Recommendations:

1. The *Constitution of Canada* provides specific protection to ensure that against-public-interest legislation is not passed and implemented that is contrary to the *Constitution* and best interests of the citizens. It is recommended that the directly and indirectly *regulated* and *unregulated* healthcare professionals organize themselves to both challenge the three legislative amendments politically and legally, as well as create a mutual defense legal fund in order to be prepared to litigate to the Supreme Court of Canada any early attempts to charge anyone in the province of Ontario under these new regulatory amendments.
2. In addition, this new coalition needs to draft its own legislation and related regulations and to lobby and develop, riding-by-riding in Ontario, a coordinated legal and political action movement that needs to have as its goals, not only the repeal of these three legislative amendments, but the passing of Ontario 'Safe Harbour' legislation, such as is in place in Quebec, California, and Oklahoma to ensure such takeover attempts by the pharmaceutical cartels will never happen again in Ontario.
3. It is my estimate that there are well over 10,000 *regulated* and *unregulated* practitioners who are being targeted with restrictions to their non-pharmaceutical based traditional healthcare, trade, and commerce activities involving several billion dollars of revenue.

This whole scheme is ill-conceived, constitutionally flawed, against public interest, and will create another government boondoggle, similar to the federal gun registry. Every current member of the Ontario Legislative Assembly needs to carefully research the issues outlined herein and champion, legally and politically, the best interests of their constituents without allowing undue influence from the world's most powerful cartels, being those involved in the pharmaceutical industry.

Respectfully submitted,



Trueman Tuck
Paralegal Litigator/Counsel
LSUC # P07521

Dated: July 15, 2015

LEGAL OPINION

The impact of the controlled act of psychotherapy on traditional, holistic, energy, hypnosis and spiritual care practitioners, therapists and counselors in Ontario

By Trueman Tuck

This legal opinion was commissioned by concerned traditional, holistic, energy, hypnosis, and spiritual care practitioners, therapists and counselors, to determine what the legal impact on their Ontario traditional practices would be as a result of the three new psychotherapy-related legislative amendments [See **Exhibits 1, 2 & 3**].

Please note that this legal opinion is not intended to be relied upon by any individual practitioner as specific legal advice pertaining to their individual situation. Each of you needs to seek specific legal assistance for your individual situation if you believe that part or all of your current practice may fall within the prohibitions created by this new 14th controlled act within the practice of medicine.

My legal opinion is intended to:

- (a) Provide clear indications of the impact of these new legislative amendments on the estimated ten thousand or more holistic, traditional, energy, hypnosis, natural nutrition, counselors, and spiritual care practitioners in Ontario;
- (b) Provide the background on who created these three amendments and what the intended consequences of these three amendments are to ALL traditional, holistic, energy, hypnosis, spiritual care practitioners, therapists, and counselors in Ontario; and
- (c) Provide options for resolution of the issue.

INTRODUCTION OF THE AUTHOR

I am a registered lobbyist with the Province of Ontario, the Canadian and US federal governments, a crisis management consultant, and licensed by the Law Society of Upper Canada [LSUC # P07521] to provide legal services as a paralegal litigator. I am the founder and owner of two professional service operations – *Tuck's Professional Services* and *Tuck's Paralegal Services* both based in Belleville, Ontario, Canada.

My involvement in the traditional natural remedies industry in Ontario, Canada goes back some 40 years, including co-authoring with Dr. Carolyn Dean, the awarding winning book "*Death by Modern Medicine*".

I act as the legal representative for defendants in those jurisdictions where I can provide legal services within the authorized scope of practice for licensed paralegals as designated by the Law Society of Upper Canada. As well as being a registered lobbyist and crisis management consultant, I have specialized in legal advocacy and the defense of individuals and businesses victimized by government abuse for the past 20 years.

During the past two decades of legal and advocacy practice, I have been pivotal in the successful conclusion of a number of criminal and civil legal matters involving Health Canada and issues pertaining to traditional natural remedies and other government entities.

In collaboration with a number of legal experts in civil, constitutional and criminal law, I have successfully defended clients for forty years against the constant stream of schemes by the Canadian Medical Association, the Ontario College of Physicians and Surgeons, Health Canada and the pharmaceutical cartel and its allies. My firm's details and experience in dealing with healthcare legal issues are at **Exhibit 4**.

I am uniquely qualified to speak as an expert on these psychotherapy-related legislative amendments, not only as a paralegal litigator, lobbyist and crisis management consultant with substantial experience and knowledge in assisting clients dealing with Health Canada and other government legal entities, but also as a former federal public servant in regulatory roles.

In addition, as a self-employed professional in Ontario for some 40 years in many different roles within the traditional natural remedies industry, I have a solid, hands-on understanding of the hardships imposed on business owners by unjust regulations.

In 1995 and 1997 respectively, I co-founded two of Canada's leading *Informed Freedom of Choice* advocacy organizations, Friends of Freedom International [www.fofi.ca] and the Canadian Coalition for Health Freedom [<http://www.cchf.ca>]. These organizations serve some 100,000 subscribers and supporters through *Health Freedom Natural News* [www.hfnn.ca], *Health Canada Abuse* [www.healthcanadaabuse.ca] and *The Paralegal Litigator* [www.theparalegallitigator.com].

I have been involved with clients and organizations such as Friends of Freedom [See www.friendsoffreedom.org] and the Canadian Coalition for Health Freedom [See www.cchf.ca] both of which are operated by Freedom of Choice in Healthcare Inc. who have also previously filed lawsuits and commissioned Reports on the constitutional, legal, scientific and Public Interest issues associated with the centuries-old quest for total monopoly over every aspect of Healthcare by the Allopathic investment industry and their powerful allies [See **Exhibits 5, 6 & 7**].

Please find attached a sampling of some client appreciation letters in regards to my firm's successful resolution of client crisis [See **Exhibit 8**].

In January, and again in May 2015 working with our civil lawyer, Mr. Paul Starkman, we have had two major victories in the ongoing war with Health Canada. Please see attached **Exhibits 9, 10 & 11**.

My legal team is composed of Mr. Paul Starkman and Derek Lee [See **Exhibits 12 & 13**].

It takes a well-financed, professionally-organized combination of lobbying, grassroots uprisings and legal actions to repeal unconstitutional legislation, regulations and government enforcement-related prosecutions. It is possible for enough 'Davids' to join together to defeat the coalition of public and private sector 'Goliaths' driving these three new legislative amendments.

It is imperative, if we are all to remain free citizens, to immediately finance, organize, and implement counter measures.

BACKGROUND OF THE THREE PSYCHOTHERAPY-RELATED LEGISLATIVE AMENDMENTS

History shows it is very common for wealthy and powerful interests in the British legal and political systems to conspire to create legislation that delivers exclusive monopolies to favor lobbyists' interests. Regulating the practice of medicine has been controversial in the British system for over 400 years. Allopathic medical doctors, their organizations and pharmaceutical investment interests have manipulated legislation federally and provincially in Canada & the USA since at least the mid-1800s, thereby enhancing their control of healthcare, enforcement activities, and legislative wording [See **Exhibits 14, 15 & 16**].

The Province of Ontario has a sad history of providing wealthy and powerful individuals with special legislative treatment. It also has an equally dismal history of refusing to pass legislation that would in fact protect and enhance the good health and well-being of Ontario citizens. One example is its refusal to embrace

a proven safe and effective herbal product for the prevention, treatment and cure of cancer in 1938 [See **Exhibit 17**].

The Premiers, Cabinets, and especially the Ministers of Health of Ontario have demonstrated a very disturbing pattern of bias and prejudice against all traditional and natural wellness approaches and remedies. Another sad example was the December 2004 delisting of ALL chiropractic services from OHIP [**Exhibit 18**].

The pharmaceutical investment cartels have been conspiring for several decades to find the right opportunity to manipulate the Premier, Minister of Health, and governing party MPPs to expand the powers of the allopathic-based colleges. The intent of such actions is to:

- (a) Eliminate ALL *unregulated* Healthcare practitioners in Ontario from the healthcare scene,
- (b) Seize control of ALL significant non-allopathic *regulated* practitioners, and
- (c) Stifle opposing views to critical issues, such as vaccines and psychiatric drugs.

What the medical/pharmaceutical cartels refer to as Alternative or Complimentary medicine, I refer to as traditional natural remedies/treatments. Traditional natural remedies/treatments are, and always have been, the number one leading primary healthcare approach for the majority of the world's population. Only 20% of the world relies on conventional healthcare approaches. In fact, conventional allopathic/ pharmaceutical medical approaches are the new 'fad'.

The triumph of the pharmaceutical-based healthcare system over all others that we presently experience is dependent on the voluntary and involuntary reliance of the public on allopathic medical personnel trained almost exclusively in patented pharmaceutical drugs and products.

Once natural treatments had begun to detrimentally affect conventional medical doctor (allopath) earnings, they came under attack, one after the other, just as they are today, as the public demonstrates they are willing to spend billions annually on non-drug treatments [See **Exhibit 19**].

Not only were natural treatments impacting drug company profits, but nature-based approaches were threatening the entire allopathic business model of illness-creation by advocating, teaching and recommending proper diet, fresh air, sunshine, plenty of rest, spiritual grounding, and gentle natural remedies to maintain health and wellness at all levels of the human being, just as is happening today as a result of holistic education.

Medical doctors of ancient times were relying on bloodletting, blistering, large doses of mercurous chloride and tartrate of antimony, arsenic compounds and opium tonics (all deadly toxins), just as is happening today, with radiation, chemotherapy, and unproven testing.

Controlled acts essentially facilitate monopolization in many areas of trade and commerce, because by definition, any 'practice-of-medicine controlled act' makes it illegal for anyone to engage in that controlled act unless they are a health professional specifically authorized to do so.

The impact of these three new legislative amendments to ALL traditional, holistic, energy, hypnosis, and spiritual care practitioners, therapists, and counselors, is the elimination of any part of their practices that could be legally argued by the new College of Psychotherapy as falling within the legal definition of the new 14th controlled act of psychotherapy. The definitions that many people seem to think are vague or undefined in the legislation are in fact well defined, as I will explain.

The new legislative definition of the *14th Controlled Act of Psychotherapy* is stated as follows;

"[14]. Treating, by means of psychotherapy technique, delivered through a therapeutic relationship, an individual's serious disorder of thought, cognition, mood, emotional regulation,

***perception or memory that may seriously impair the individual's judgment, insight behavior, communication or social functioning"* [See [Exhibit 1](#)].**

The expected consequence of the passing of the 14th controlled act (of psychotherapy) was stated by the lawyer representing the Coalition of Mental Health Professionals in their Executive Summary as far back as 1999-2000. The intention of the pharmaceutical investment interests in lobbying for these three legislative amendments was therefore never a secret. No one today should be ignorant of what is going to happen in regards to legal enforcement of these changes [See [Exhibit 20 & 21](#)].

Any confusion that is currently occurring is very deliberately created as part of the pharmaceutical investment cartels' implementation plan/strategy. This document seeks to dispel that confusion.

Pharmaceutical investment cartels deliberately create vague use-based legislation in order to assert complete control over all aspects of healthcare. One of the earliest examples occurred in Canada in 1920 and in the USA a few years earlier. The effect of that early legislation is that the current definition of "Drug" now incorporates natural products and remedies [See [Exhibit 22](#)]. This explains the current Health Canada harassments of natural products manufacturers and distributors that focus on deeming traditional natural remedies as either pharmaceutical sub-class of drugs called "natural health products" or pharmaceutical prescription drugs.

The Wrigley's case is a good example of how Canadian Courts are now interpreting the 1920 and 1927 use-based definition of pharmaceutical drug very broadly to now include natural products and dietary supplementation [See [Exhibit 23](#)].

Such broad interpretation of terms will happen with the vague use-based definitions found in the psychotherapy-related legislation, once the proclamation of the controlled act of psychotherapy is complete.

At [Exhibit 24](#), you will find case law compiled by the Coalition of Mental Health Professions in 2007, which illustrates how the interpretation of 'serious disorder' and 'serious impairment' has been broadened by the Courts in Ontario over the decades.

From this Ontario case law, you are able to recognize that anyone disabled or reduced in their quality of life could be deemed to be suffering a "serious impairment" whether it is diagnosed or not. This will be a real problem for all counselors, including faith-based counselors.

The 14th Controlled Act eliminates the traditional exemption for faith-based spiritual care counselors when there is a 'Therapeutic Counseling Relationship' dealing with any human issue that can be legally argued to be a 'serious health condition/disability'.

It is my legal opinion that the pharmaceutical cartels have purposely designed and lobbied into law, these three psychotherapy-related amendments for the express purpose of eliminating any part of holistic and traditional practice that falls within this very vague definition of psychotherapy. As you will learn, one or more aspects of EVERY practice, whether *regulated* or *unregulated*, will fall within the definition of psychotherapy and will be prosecutable.

ANALYSIS AND IMPACT

My research reveals that there has been considerable debate about what impact these three legislative amendments will have on the over ten thousand practitioners, therapists and counselors involved in traditional, holistic, energy, hypnosis and spiritual healthcare activities in Ontario.

In early 2015, I was retained to analyze a Discussion Paper by BC lawyer Ms. G. Eliany, dated September 2014. Ms. G. Eliany is an associate of the Buckley and Co., (BC Law firm). Interestingly enough, the Law Society of Upper Canada directory indicates that Ms. Eliany surrendered her license to practice in Ontario [See [Exhibits 25 & 26](#)].

My detailed analysis of Ms. Eliany's Paper found it to contain many errors of fact, with a heavy focus on the impact of the *Psychotherapy Act*, when in fact it is the controlled act of psychotherapy that is of critical importance. In my legal opinion, her Paper was very misleading as a result of this oversight.

Please see my February 23, 2014 correspondence to Mr. Shawn Buckley, Buckley and Co., intended to encourage immediate correction of the errors [See **Exhibit 27**], which to date has not come about, as well as my April 17, 2017 response to Mr. Buckley letter dated April 14, 2015 [See **Exhibit 28**].

The reason I do not agree with Ms. Eliany's perspective is primarily because a "prohibition" by means of a controlled act is legally enforceable against ANY individual deemed to be violating the legislation. In fact, College authorities have a legal mandate to not only report the violation, but to investigate and prosecute.

It is very important to understand that a licensed professional of any College in Ontario has a professional duty to report to their College and/or the legal authorities, anyone that they encounter that might be unlawfully violating any controlled act!

As I will discuss later, the "innocent until proven guilty" aspect of the prosecution may be eliminated by new Ontario AMPs legislation that is currently being pushed through by the Premier of Ontario. This would result in an automatic finding of "guilt" if accused, with no recourse in the Courts.

In addition, I have been advised that a lawyer, Mr. Glen Rumbell, in a recent speech at the Toronto Reiki Conference, may have suggested that holistic and traditional practitioners, and particularly Reiki practitioners, could continue in their traditional practices without fear of being investigated and prosecuted under the *Psychotherapy Act*. But as already noted, it is the controlled act of psychotherapy (*RHPA 14th Controlled Act*) which causes the prohibition that affects all practitioners who are not one of the authorized professionals.

It is my intention to discuss this legal opinion with Mr. Rumbell, a Toronto lawyer, as I am certain he would be interested in a dialogue on these matters that would benefit the effort to have the legislation repealed [See **Exhibit 29**].

After careful review and extensive legal research, I have concluded that there cannot be any doubt that the three psychotherapy-related amendments, in combination, have made illegal any *treatment* that can legally be argued as falling within the definition of practice of medicine as now defined in the new 14th controlled act--the "controlled act of psychotherapy".

This means that any current treatment approach used by holistic, energy, hypnosis, traditional, spiritual care practitioners, and counselors, can be argued to fall within the definition of the practice of medicine as it is now defined in the controlled act if these criteria can be proven to exist:

[1] A therapeutic relationship

[2] The client has a diagnosed or diagnosable 'condition', and

[3] If a psychotherapy technique is involved.

Further, the legal argument would be easy to make against all non-authorized professionals, both *regulated* and *unregulated* because of the background work that has gone on, out of public view, to ensure a solid foundation for prosecution.

Legally, it is that simple.

By definition a “practice of medicine controlled act” makes it illegal for anyone to practice that controlled act that is not specifically authorized by the *Registered Health Professions Act* to do so. By definition, ONLY specific regulated Ontario healthcare practitioners authorized by the legislation can practice medicine in any of the fourteen control acts, which now includes the new controlled act of psychotherapy.

Legally, ALL unregulated healthcare practitioners are prohibited by law from practicing any of the existing fourteen controlled acts. The controlled act of psychotherapy, already passed into law in 2009, will be fully enforceable once proclaimed, as are the other thirteen “practice-of-medicine controlled acts” that presently exist. These are detailed in the attached Policy Statement #5-12, Delegation of Controlled Acts, 2012, CPSO Dialogue, Issue 3 2012 [See **Exhibit 30**].

Please note who are the controlling Medical Doctors that are creating these policies and significantly controlling the Ontario Government’s legislative and related regulatory and enforcement agendas. A list of the names of the CPSO key decision makers who dictate all healthcare policy in Ontario is found at **Exhibit 31**. The OMA is also part of the ruling cartel’s key influencers and their names are also listed in the public records.

In addition, NO regulated practitioner can practice any controlled act unless specifically authorized by the legislation. In the case of the controlled act of psychotherapy, the ONLY regulated practitioners permitted to engage in the controlled act of psychotherapy are psychotherapists, psychologists, psychiatrists, medical doctors, nurses, social workers, and occupational therapists. It is very black and white legally.

Please see **Exhibit 32** as an example of nurses which are permitted to practice mental health and psychotherapy by virtue of inclusion within their scope of practice.

Please see **Exhibit 33** as an example of regulated practitioners that are not allowed to practice mental health and psychotherapy, being the College of Respiratory Therapists.

Enforcement against *regulated and unregulated* practitioners would proceed as follows:

(a) An investigation;

(b) Provincial Offences charges laid under the *RHPA*;

(c) Processing of charges in the Provincial Offences Court, unless higher Court injunctions or writs are required, in which case the matter would go to an Ontario Superior Court as well.

A violation of the controlled act legislation is a ‘*strict liability offence*’ and it is very difficult to defend oneself if it can be proven that you practiced unlawfully any part of a controlled act.

In addition, the new Ontario legislation introducing Administrative Monetary Penalties (AMP) will eventually affect targeted practitioners, once it too is passed by the Provincial Government into law. This law would make it even more difficult to defend oneself, since everyone charged would be automatically guilty upon being charged and only the amount of the penalty would be negotiable.

The AMP is presently scheduled for testing on parking violations, but there are no restrictions in the AMP legislation to protect one of the most sacred constitutional rights we have enjoyed for over a thousand years in the Judeo-Christian legal system--the presumption of innocence until proven guilty.

HOW CONTROLLED ACTS AFFECT YOU AND WHY

What a controlled act does is create a ‘legal prohibition’. Statutes that contain *prohibitions* under threat of investigation, prosecution and possible conviction, are generally created under the pretext of ‘protecting the public’. Unofficially, the purpose is marketplace domination and monopolization by a group, or groups, over their competition.

The two enclosed Fraser Institute Reports in **Exhibits 35 and 36** combined with the Friends of Freedom and Canadian Coalition for Health Freedom Reports and charts in **Exhibits 5 and 6** prove that traditional and holistic remedies and related treatments are far safer, just as effective, more affordable and critical to actually correcting the underlying causes of most modern day chronic health conditions.

See the website: www.StopPsychotherapyTakeover.ca/statistics for further evidence to support this statement.

ALL *regulated* and *unregulated* healthcare professionals in Ontario must understand the exact legal definition, intention, and breathtakingly broad reach of the new *14th controlled act of psychotherapy*. They must understand that all terms are in fact defined in the profession's reference manuals that can be used in Court to justify prosecution, as well as in other healthcare-related legislation, such as the *Healthcare Consent Act*, where the terms "Health Practitioner" and "treatment" are defined clearly. – see **Exhibit 37** being the extract from this legislation of the definitions.

I will explain shortly how important a profession's reference manuals and literature are in developing case law and how the College itself does not need to define anything.

In fact, the legislation is so vague and all-encompassing that I have, in my research, discovered statements by the Registrar of the Transitional Council (CRPO) to the Canadian Reiki Association that attempt to interpret that definition in a way that presumably makes it more acceptable and/or confusing:

"Please note that the controlled act of psychotherapy is defined in terms of the seriousness of the condition of the person being treated, not in terms of the particular technique used to treat the person. Unregulated people will be able to provide services, as long as they do not engage in the controlled act, i.e. treat individuals with serious disorders... The College will not be defining the meaning of "serious disorder" or "seriously impair" [Exhibit 38].

Recently, I have seen a reply from the CRPO to a practitioner of Therapeutic Touch who was trying to get confirmation as to whether her modality was "safe" from the legislation. The new College seemed to have taken advantage of the fact that the practitioner did not know about or understand that the *RHPA controlled act of psychotherapy* was what affected her directly, but instead responded that she was not affected by the *Psychotherapy Act* [See **Exhibits 21**].

The CRPO also neglected to mention that she was unaffected by the *Psychotherapy Act* ONLY until the controlled act was proclaimed, which could be any day and without notice. Once the controlled act is proclaimed, she was squarely in the sights of the CRPO as an *unregulated* practitioner engaged in a controlled act of psychotherapy.

As can be seen, the sheer lack of transparency and truthfulness about these legislative amendments has nurtured confusion and a false sense of "safety" amongst those already in violation of a law that already exists and is just awaiting a signature to be enforced.

Further, the definition of "controlled act of psychotherapy" is comprised of far more than the one term of "serious". It does refer to particular techniques, but as all psychotherapeutic techniques collectively. These techniques are listed in the professional reference sources—dictionaries—as an equally all-encompassing set of 'approaches', with each approach potentially comprising hundreds of techniques [See **Exhibit 39 and 41**].

As to *unregulated* healthcare providers in Ontario whose associations may have claimed they had "an understanding of exemption" for their members, or "special" consideration if members adhered to certain terminology, such "safety" is impossible.

Once a controlled act such as this 14th controlled act becomes enforceable by proclamation, treatment of the entire range of human issues can be undertaken only by those health professionals specifically authorized in the legislation. The **ONLY** authorized health professionals permitted to engage in the treatment of the entire range of human issues, serious or not, are psychiatrists, psychotherapists, psychologists, nurses, medical doctors, social workers, and occupational therapists.

Every individual involved in traditional, holistic, energy, hypnosis, and spiritual care one-on-one, verbal and/or non-verbal communication in Ontario is impacted to the point of eventual elimination.

Whether currently regulated or not, all practitioners need to understand:

1. The Ontario government is heavily influenced by the drug industry and intends to regulate ALL healthcare professionals (self-employed or otherwise) by statutes, acts, and colleges, until all mind-body-spirit, non-drug healthcare treatments are eliminated, even when provided by a regulated professional.
2. The Ontario government, at the prompting of the pharmaceutical investment cartels and their allies, have been and will continue to be targeting chiropractors, homeopaths, and naturopaths since they are not an 'authorized profession' under the controlled act of psychotherapy. Further, all counseling and spiritual care is now deemed to be psychotherapy [See **Exhibits 39**].
3. The government's mind-set is that ALL *unregulated* healthcare providers (self-employed or otherwise), supplying one-on-one services to "clients", pro bono, or for a fee are 'dangerous' and must be closed down or forced to become regulated by the existing colleges. As noted in 1 above, even if a practitioner becomes a member of a *regulated* group, they are still prohibited from engaging in the controlled act if their profession is not specifically authorized by the legislation.
4. The entire mental health industry is founded on the "opinion" of a select few who have positioned themselves in the media and academia as "opinion leaders" –nothing is based on science or fact. This new legislation is an extension of these opinions.
5. This same monopolistic scheme has also been implemented in Ontario in other fields with similar tragic consequences. One example that may help readers understand the consequences of such schemes is in the practice law, where as you will see, healthcare practitioners will again be severely impacted.

Presently only lawyers can practice law in certain Courts and, as an example, ALL competition has been prohibited by law in family court. This is strictly enforced against anyone, everywhere in Ontario, even though non-lawyers were proving to be extremely effective and far less expensive, especially in simple matters.

There has been a dramatic increase in self-represented parties, which in turn increased burdens on the Court systems and expense to the Province of Ontario and the affected parties. Those having to hire lawyers are experiencing unaffordable legal fees without any competitive non-lawyer options. In other words, choice has been eliminated for all Ontarians in many simple legal matters.

The next step in the complete domination of the legal system by lawyers is to eliminate self-representation of an accused through the new law the Provincial Government is pushing through--the AMP--already described above. This will directly affect all healthcare practitioners prosecuted by the College of Psychotherapy, as they will automatically be guilty, with no recourse in the Courts.

Be sure to study carefully **Exhibit 40** to understand what will happen in regards to enforcement and the power that the colleges have.

6. This identical scenario (described in 5 above) is now playing itself out within the practice-of-medicine issues associated with the new 14th controlled act, and directly or indirectly will happen to all drug-free therapies and treatments.
7. **This new 14th controlled act eliminates from the healthcare field, anyone directly or indirectly involved in the practice of traditional and holistic healthcare. All providers of natural treatments will be forced, under threat of prosecution and conviction, to cease previously traditional, lawful trade and commerce activities once the controlled act gets its final proclamation, which is, essentially, a mere formality.**

It does not matter whether the practitioner is currently regulated or not, the practitioner will eventually be eliminated from the healthcare scene. If the practitioner is *regulated*, the authorities will ensure that the practitioner does not stray from an increasingly limited scope of practice under threat of losing their license.

If the practitioner is *unregulated* they are effectively eliminated entirely from the healthcare scene unless they join the pre-emptive fight now.

8. Medical/pharmaceutical attacks on traditional and holistic healthcare providers and natural remedies and products have reached a crisis level in Ontario.
9. The Ontario regulatory and enforcement models are similar, regardless the profession targeted.
10. All harmful legislation is passed out of view of the affected public, with campaigns to “divide and conquer” those affected always operating at full throttle. As has been seen from historical events, confusion and distress of innocent citizens is always the result, accompanied by apathy from those misled by deliberately confusing communication from the regulators, such as is seen with CRPO responses to practitioners.

BACKGROUND OF THE PSYCHOTHERAPY LEGISLATION AND THE 14th CONTROLLED ACT in ONTARIO: IMPLICATIONS TO YOUR PRACTICE

Research indicates that the Coalition of Mental Health Professionals advised the government, as early as 1999-2000, that both options the psychologists were planning with regards to these legislative amendments were morally and ethically wrong on all levels and would definitely and systemically deprive of their livelihoods, all those who were not specifically authorized to perform the 14th controlled act . The psychologists’ influence with government bureaucrats allowed them to bulldoze over all concerned parties.

As it turns out, it is also depriving even those who have registered with the College of Registered Psychotherapists from (a) practicing their livelihoods as they were trained, and (b) of exclusively using their own earned titles. A relevant example is what has happened to Family Therapists.

One of the most deliberately confusing aspects of this crisis seems to revolve around the lack of definition of the terms in the legislation, particularly the terms psychotherapeutic technique, psychotherapy and serious disorder, treatment and health practitioner.

Definitions of legal terms:

The 4 criteria (tests) that I use to determine the legal meaning of words in legislation are:

1. The specific definitions in the legislation itself, if any

2. The definitions of same or similar terms in other legislation, if any
3. The existence of case law wherein a Court has previously defined the terms, and
4. References in professional pharmacopeias, practice manuals and the profession's educational materials, such as DSM (Diagnostic and Statistical Manual) and the profession's dictionary(s). See below for the relevance of this in this issue.

If one still cannot determine the meaning of words, then one must look to *regular* dictionaries such as Oxford and Webster.

How the legislative terms were defined in the background in professional reference materials:

- At the same time as the takeover was put before legislators (2005-2006), a Dictionary of Psychology (1st edition) was published that incorporated some 300 treatment approaches suddenly deemed “ ‘psychotherapeutic techniques’”, when prior, psychotherapeutic techniques were, for the most part, understood to be electroshock, lobotomy, drug therapy (chemical lobotomy), long talk therapy, Gestalt and related approaches and diagnoses.
- This new APA Dictionary of Psychology definition of psychotherapeutic techniques is in the form of a list of approaches [See **Exhibit 39**].
- Subsequently, the APA Dictionary of Clinical Psychotherapy, 1st edition 2013, included some 300+ alternative, traditional, holistic and spiritual care approaches, with more to be added to the list in the future, without public consultation.

Remember, an approach may have many, if not hundreds, of varying techniques, therefore the dictionary definition noted above encompasses all possible techniques, verbal and non-verbal, regardless the name of the technique. Definitions of all approaches known at this time to be considered psychotherapeutic are found at **Exhibit 39 and 41**.

- The definition of ‘psychotherapeutic approaches’ is not a list of names of techniques or titles of approaches; it is a list of general approaches, such as holistic education, exercise therapy, dietary supplementation and coping skills training, Zen, hypnotherapy, counseling that then encompass all possible communication and interaction between two people.
- Evidence suggests that spiritual counseling was specifically targeted by the three new legislative amendments [See **Exhibit 20**].
- The main reference documents to be used by the College appear to be the *APA Dictionary of Psychology*, the *Oxford Dictionary of Psychology*, the *Dictionary of Psychology by Ray Corsini*, and the DSM (*Diagnostic and Statistical Manual of Mental Disorders*) that has a mental illness diagnosis for virtually every human issue, including shyness and difficulty with mathematics.

According to some literature on the matter, daydreaming and obsession with healthy eating (orthorexia nervosa) may well be added as mental illnesses shortly. Recall that these will satisfy legal criteria #4 for establishing definitions.

Terms such as ‘**counseling**’ and ‘**spiritual care**’ are, in fact, all well defined in such a way that the definition of ‘psychotherapeutic approaches’ in the most recent Dictionaries of Psychology and Clinical Psychology encompass every possible treatment, approach and technique involving counseling and spiritual care known. In the end, nothing is exempt.

For instance, the APA Dictionary of Psychology definition of ‘**psychotherapeutic approaches**’, includes **counseling** and **spiritual care**, **holistic education**, and even **Zen meditation**, along with some

other 300 approaches used by traditional, holistic, energy:

COUNSELING: *professional assistance in coping with personal problems, including emotional, behavioral, vocational, marital, educational, rehabilitation, and life-stage (e.g. retirement) problems. The counselor makes use of such techniques as active listening, guidance, advice, discussion, clarification, and the administration of tests.*

COUNSELOR: *an individual professionally trained in counseling, psychology, social work, or nursing that specializes in one or more counseling areas, such as vocational, rehabilitation, educational, substance abuse, marriage, relationship, or family counseling. A counselor provides professional evaluations, information, and suggestions designed to enhance the client's ability to solve problems, make decisions, and effect desired changes in attitude and behavior.*

COUNSELING PROCESS: *the interpersonal process engaged in by counselor and client as they attempt to define, address, and resolve specific problems of the client in face-to-face interviews. See also COUNSELING.*

COUNSELING RELATIONSHIP: *the interaction between counselor and client in which the relationship is professional yet also characterized by empathic warmth and authenticity, with the counselor bringing professional training, experience, and personal insight to bear on the problems revealed by the client. Their relationship is considered be of central importance in bringing about desired change.*

HOLISTIC EDUCATION *is a form of psychotherapy, derived from the approach of holistic medicine, in which the therapist serves as a teacher and the client as student. The therapist aims to create conditions within which the student may choose to learn. For maximum growth, all aspects of the client's physical, spiritual, emotional, and intellectual life should be explored and enveloped.*

In addition, in order to eliminate all possible loopholes, the term '**psychotherapist**' was defined in the new Dictionary of Clinical Psychology, 2013, 1st edition, as follows:

PSYCHOTHERAPY: *any psychological service provided by a trained professional that primarily **uses forms of communication and interaction to assess, diagnose, and treat dysfunctional emotional reactions, ways of thinking, and behavior patterns of an individual, family (see family therapy), or group (see group therapy).** There are many types of psychotherapy, but generally they fall into four major categories: psychodynamic psychotherapy, cognitive therapy or behavior therapy, humanistic therapy, and integrative psychotherapy.*

PSYCHOTHERAPIST *is an individual who has been professionally trained and licensed (in the United States by a state board) to treat mental, emotional, and behavioral disorders by psychological means. He or she may be a clinical psychologist (see clinical psychology), psychiatrist, counselor (see counseling psychology), social worker, or psychiatric nurse.*

THERAPEUTIC RELATIONSHIP: *Due to the definitions in the various professional Dictionaries, all human interactions, whether fee-based or pro bono, verbal or non-verbal, are considered a therapeutic relationship if the individual you are interacting with intends to discuss any of the whole range of possible human issues listed in the legislation as part of obtaining assistance.*

SERIOUS DISORDER *of thought, cognition, mood, emotional regulation, perception or memory that may seriously impair the individual's judgment, insight behavior, communication or social functioning.*

Most clients consider their issue 'serious' for them. Further, since most of your clients will have seen a medical-model professional before calling you, they likely have a mental illness diagnosis on file. Mental illness diagnoses will stand as 'proof' that the individual's issue is 'serious'.

Here is a definition of serious mental illness as provided to the US Congress:

“Adults with a serious mental illness are persons: (1) age 18 and over, (2) who currently or at any time during the past year, (3) have a diagnosable mental, behavioral, or emotional disorder of sufficient duration to meet diagnostic criteria specified within the Diagnostic and Statistical Manual of Mental Disorders (DSM)-III-R, (4) that has resulted in functional impairment which substantially interferes with or limits one or more major life activities...All of these disorders have episodic, recurrent, or persistent features; however, they vary in terms of severity and disabling effects.”(Source: Federal Register Volume 58 No. 96 published Thursday May 20, 1993, pages 29422-29425)

Please note that the definition does not state ‘diagnosed’ but rather ‘diagnosable’, therefore theoretically, anyone walking into your office could be diagnosable and therefore ‘seriously impaired’.

In addition, lest there be any question that the terms ‘serious disorder’ and ‘serious impairment’ are not defined, see **Exhibit 24**, which is a compilation of case law by the Coalition of Mental Health Professions in 2007. This compilation clearly illustrates how well these terms have been defined by the Courts. This satisfies criteria #3 discussed above.

As can be seen, the terms are defined very broadly by Ontario Courts, such that anyone on disability from work or having difficulty in their relationships as a result of their issue, may be deemed suffering a ‘serious disorder’ or ‘seriously impaired’. If the issue affects one’s quality of life, it can be ‘serious’.

In addition, please note that the *Healthcare Consent Act* defines the terms ‘health practitioner’ and ‘treatment’ and thus, as per criteria #2 noted above, other legislation has already defined these terms [See **Exhibit 37**].

The combination of the three key legal trigger words, such as ‘*psychotherapy treatment*’, ‘*therapeutic relationship*’, and ‘*serious disorder*’ have set up anyone and everyone for investigation and prosecution by the College that the legislation has not specifically authorized to perform this ‘controlled act of psychotherapy’

It is important that you also understand how Colleges are created, by whom and for what reasons. A College is often run by wealthy and powerful individuals that are not generally in public view. Colleges are unaccountable and extremely powerful [See **Exhibits 16, 17, 18, 37, 42, 43, 44, 45 & 46**].

To this day, as illustrated by the actions of the Ministry of Health, the new College and those advocating for this legislation, the entire natural healthcare industry does not exist and does not warrant being acknowledged or respected, let alone dignified for their contribution to saving taxpayers \$7-10 billion annually, which is a huge chunk out of drug company profits and arguably a serious motivating factor behind this legislative assault on natural therapists [See **Exhibit 19**].

There can be no question, given the horrific experiences over the last few years of other Ontario natural healthcare practitioners, such as the Traditional Chinese Medicine doctors, homeopathic practitioners, chiropractors, herbalists, and health food stores, that the entire intent of these three legislative amendments had nothing to do with protection of the public.

The intention behind the sneaky manner in which three legislative amendments have been created was to ensure the delivery of one of the fastest growing economic sectors of healthcare – mental health—to the pharmaceutical-controlled allopathic medical cartel [See **Exhibit 34**].

Medical doctors dominate the Ontario healthcare system politically--the Minister of Health, Dr. Eric Hoskins, is a medical doctor, as are a number of key government MPPs.

Recent Ontario Liberals have shown significant bias in favor of the medical doctors and related pharmaceutical cartel, as evidenced in how this legislation has been hidden from public and MPP scrutiny in huge Omnibus bills, and now, in how the Minister of Health has refused to acknowledge his duty of care to the public, where, in a democracy, all citizens are considered equal. The Minister has failed in his duty of care in regards to these three amendments [See **Exhibit 47**].

Let's now look at the various sectors of natural therapies to see the depth of the impact of this legislation.

Naturopaths and Natural Nutritionists: oppressed on all flanks

Since 1925, Ontario's Naturopathic Doctors (NDs) have been regulated under the *Drugless Practitioners Act*. NDs will soon be proclaimed as a *regulated* health profession under the *Naturopathy Act, 2007*. The proclamation of the *Naturopathy Act* means that NDs will join other primary healthcare colleagues from other disciplines who are regulated in Ontario under the *Regulated Health Professions Act, 1991*.

Ontario's NDs are currently regulated by the Ontario Board of Drugless Therapy – Naturopathy (BDDT-N). Post-proclamation of the *Naturopathy Act, 2007*, they will be regulated by the College of Naturopaths of Ontario.

BUT they are not one of the professions AUTHORIZED by the legislation to engage in the controlled act of psychotherapy.

Therefore the same restrictions regarding the treatment of human disturbances that chiropractors and holistic practitioners are now facing, naturopaths experience as well. All treatment of human issues of the entire range, from cognitive to emotional and social functioning, is now a 'controlled act'...this group is not exempted from the legislation.

Naturopaths and Natural Nutritionists are deeply affected by this new psychotherapy-related legislation because not only has Health Canada restricted or outright banned many of the vitamins, natural supplements and products they recommend and/or administer regularly as an essential aspect of their treatments, but now, even the action of *holistically educating* clients is a prohibited activity, restricted to the authorized professions of psychiatrists, psychotherapists and psychologists, nurses, occupational therapists and social workers, even though those groups have absolutely no training or background in these areas.

It was no coincidence that Vitamin D in 1,000 or less dosage was made a subclass of pharmaceutical drugs in 2004 called *Natural Health Products* and Vitamin D over 1,000 IU dosage form is now a restricted prescription pharmaceutical drug under the *Canadian Food and Drugs Act*.

And it is also no coincidence that holistic education and the use of vitamin therapies and dietary supplements are now restricted for use to those very medical groups who are neither trained in, or supportive of, nutritional approaches...and who have historically worked extremely hard to discredit, through falsified 'studies' and media manipulation, those who promoted health and wellness.

The use of dietary supplementation, dietary education, holistic education and vitamin supplementation is a psychotherapeutic technique... I will explain below just how that happened and why it is foolhardy for anyone to suggest that they are safe from prosecution who works in this field. You are now seeing a similar interference in the Naturopathic profession in Ontario, as I will discuss shortly [**Exhibits 44, 45 & 46**].

While the Ontario Board of Naturopathic Doctors boasts that their graduates have been trained and educated in basic and diagnostic sciences – including anatomy, clinical physiology, biochemistry, pathology, embryology, immunology, **pharmacology**, physical and clinical diagnosis, and lab diagnosis – as well as

conventional and naturopathic approaches to improving and maintaining patients' health, the psychotherapy legislation has eliminated the mental healthcare aspects of their scopes of practice and the new legislation in the works will coerce them into prescribing pharmaceuticals, without proper testing and laboratory access.

In the next leg of the elimination of the Naturopath is the fact that Naturopaths have now been given drug prescribing rights...even drug compounding and drug dispensing rights. But, as the other shoe always drops as well, they have lost a number of vital privileges that would (a) protect their clients from harm and (b) ensure there is tracking of the results of treatment [See **Exhibits 45 & 46**].

The ability of Naturopathic Doctors to order necessary and essential tests for a Naturopathic assessment, diagnosis and treatment will be limited if the pending regulatory amendments to the *Laboratory and Specimen Collection Centre Licensing Act, 1990* are not amended.

Naturopathic Doctors will also not be authorized to order tests from laboratories outside of Ontario. Many of these tests are essential to Naturopathic medical care both to properly assess and diagnose, and to track patient progress.

In addition, the government is proposing that Naturopathic Doctors be prohibited from collecting specific specimens in their office, forcing patients to instead visit laboratories to have specimens collected.

Thus, Naturopaths, in their hurry to become regulated by the medical/ pharmaceutical cartel in order that they can cash in on the lucrative insurance-reimbursement schemes, have made it impossible for themselves to do anything but prescribe and dispense drugs. Further, they are trapped at the most junior level in the College pecking order in Ontario.

It would seem to a reasonable observer that the complete takeover and annihilation of an entire natural treatment group by pharmaceutical advocates has been effected and there is no longer 'natural' in Naturopathy.

Along with the coup of having eliminated one entire group, future generations will be conditioned to believe that natural therapy means pharmaceutical drug therapy. After all, there are 23,000 medical doctors and roughly 1,000 Naturopaths, thus the profound imbalance in lobbying power will ensure that Naturopaths will become a lesser version of the medical doctor [See **Exhibit 48**].

Hypnosis Services: on again, off again, on again...now off again!

While Health Canada was busy closing down natural health products at the federal level, in 1990 the *Hypnosis Act of Ontario* also made it illegal for anyone but a licensed medical professional to offer hypnosis treatments. Subsequent to the huge scandal that erupted as a result of the victimization of patients by these licensed groups, who used hypnosis and drugs to create false memories of satanic cults, sexual abuse and multiple personalities, this *Act* was repealed in 1997 (Source: Sybil Exposed, D. Nathan).

Undaunted, the medical profession has found another clever way to eliminate unlicensed hypnosis practitioners from the hypnosis services industry -- the controlled act of psychotherapy. The Canadian Society of Clinical Hypnosis--membership open only to licensed medical professionals—advocated heavily for the 14th controlled act because it effectively restores full control of hypnosis approaches to those very licensed professions who, just 25 years ago, abused the process while eliminating safe, ethical non-medical hypnotists from the healthcare field.

Any claims that hypnosis services are not impacted are unsupportable and any suggestions that hypnosis practitioners in Ontario are protected by manipulating terminology and following NGH Standards of Practice, as has been suggested by the National Guild of Hypnotists in their various newsletters to members that were brought to my attention, and in E. Eliany's Discussion Paper, is wholesale misinformation in my view.

If you review the NGH Standards of Practice, you will find that they cannot protect any hypnotism provider as claimed because coping skills training, suggestion therapy, hypnosis and hypnotherapy, as well as motivational therapies and imagery therapy are included in the definition of psychotherapeutic approaches. Hypnosis is defined as a tool (technique) of psychology/psychotherapy.

Homeopathy's experience: déjà vu

Homeopathy was initially equal in every way to allopathic medicine [See **Exhibit 16**]. By 1859, Canadian homeopaths had their own Board of Examiners, and a separate training program.

Unable to dismantle their most popular traditional and holistic competitors, try as they might, allopaths (conventional medical doctors) instead coerced homeopaths into joining them in one College, with one Board and one training facility, in 1869.

The hook was that each modality that joined this medical College would have equal representation on the Board of this College, would develop its own curriculum, and examine its own candidates.

As logical as this merger may have appeared to the homeopaths at the time, in entering this agreement they had unwittingly signed themselves into oblivion: homeopaths and eclectics were gradually squeezed out of key positions and their treatments and theories dropped from the curriculum. By 1928, it was illegal to practice homeopathy in Ontario, despite the fact that the British and European Royals and wealthy relied on homeopathy and hypnotherapy almost exclusively, and do to this day.

Because homeopaths are not one of the groups authorized to perform the controlled act of psychotherapy, they too are prevented from treating any diagnosed or diagnosable human disturbance.

Family Therapists, Marriage Counselors and Spiritual Care Practitioners

The same ploy that was used on homeopaths described above has been used today to convince Family Therapists, Marriage Counselors and Spiritual Care practitioners to join the new College of Registered Psychotherapists.

Family Therapy has always been considered a well-regarded profession. Psychotherapy has never been a profession until its creation by the recent psychotherapy-related acts in 2006. Psychotherapy was described as a psychological intervention, thus one should wonder why psychotherapy is not regulated under the already existing *Psychology Act*.

While they were led to believe this was the way to 'protect' their earned titles of Family Therapist and Marriage Counselor, in fact they must use the title 'Registered Psychotherapist', and there are no separate scopes of practice for a family therapist, marriage counselor or spiritual counselor. Worse, they are obligated to adhere to the scope of practice of 'psychotherapist', which involves making diagnoses and eventually prescribing drugs.

Dilution, demotion, and then elimination... much as is happening to Naturopaths.

Chiropractors: hard won gains again being diluted

Only the chiropractors have managed to evade the many attempts to discredit their profession into oblivion.

It is no coincidence that the chiropractors in Ontario were delisted from OHIP a number of years ago in Ontario, just when most popular [See **Exhibit 18**].

The Ontario Chiropractors have been harassed for many years now to refrain from expressing their professional opinions that vaccines are not only deadly and dangerous, but largely ineffective and fraudulently promoted to the citizens of Ontario as being essential for the good health and well-being of Ontario citizens.

The Wilk et al., v. American Medical Assn. et al., 671 F. Supp. 1465 (1987), aff'd, 895 F. 2nd 352 (7th Cir. 1990), cert. denied, 498 U.S. 982, 111 S. Ct. 513 (1990) case had shown the decades of the American Medical Association attempts to eliminate chiropractic and it exposed the drug company/medical industry conspiracy in the USA [[Exhibits 42 & 43](#)].

Today the new psychotherapy-related legislation has restricted the ability of a chiropractor to treat any human disturbance such as depression, ADHD, and anxiety because such human issues are now regulated under the controlled act psychotherapy. Again, Chiropractors are not one of the health professionals authorized by the legislation to engage in such treatment. This severely impacts the range of issues chiropractors can now treat, whether they realize it yet or not.

Traditional Chinese Medicine and Acupuncturists

Alternative, traditional, holistic, and spiritual care professionals are in exactly the same predicament as the Traditional Chinese Medicine (TCM) group. The RHPA did not make TCM unlawful, it made 'acupuncture'--a vital component of TCM treatments--a controlled act that only certain registered TCMs can undertake, despite many other groups offering this service, including groups that do not wish to be regulated by the College of TCM, or do not meet its arbitrary credentialing requirements.

Now homeopaths, naturopaths and non-registered acupuncturists, who utilize acupuncture in their practices, as well as TCMs, have lost some, or all, of their livelihoods. Those who have registered with the College of TCM report finding it impossible to comply with new bizarre reporting requirements.

Non-registrants, many who far surpass the College of TCM registrants in knowledge and effectiveness with TCM, as well as several TCM associations who have taught pure TCM for years, have reportedly been slapped with an Interim Injunction, despite some lawyers telling them in 2003 that they really had nothing to worry about.

Since Traditional Chinese Medicine practitioners are not an "authorized health profession" permitted to engage in the controlled act of psychotherapy, even the registered TCM practitioners will be restricted from treating anyone with any of the whole range of human issues noted in the 14th controlled act's wording.

Energy Treatments and Body Therapies, including Reiki, Zen, Meditation, Transcendence, BodyTalk, Reflexology and Trager

Besides the fact that virtually all energy-based and body treatments, including Rolfing, Polarity, Trager, Reiki, Reflexology, BodyTalk and numerous eastern energy healing concepts are listed as psychotherapeutic therapies in at least one Dictionary of Psychology, the following are more indications that all energy work by non-authorized professionals will be at risk of prosecution once the controlled act is proclaimed:

- 1) Energy work is part of the Spiritual Psychotherapy **program** offered by Toronto's Transformational Arts College includes the following areas of study: *Somatic and Energetic Approaches - Body and Chakra Psychotherapy*
- 2) The Ontario Society of Psychotherapists **advertises** training in energy treatments:
Energy Diagnostic & Treatment Methods (EdxTM) ... (also known as Advanced Energy Psychology)
- 3) The Institute of Noetic Sciences' website **discusses** the field of Energy Psychology:

Modern psychotherapy's enfant terrible, Energy Psychology... The term energy psychology describes a new field of innovative interventions that balance, restore, and enhance human functioning by stimulating the human subtle energy system... EP modalities combine intentionality with imaginal exposure and energetic stimulation, energetic balancing, or both.

4) The International Center for Reiki Training **uses** the term '*Psychotherapeutic Reiki*' "...a technique that blends Eastern energy concepts and Western psychological perspectives."

THE CONTROLLED ACT OF PSYCHOTHERAPY AFFECTS ALL PRACTITIONERS NOW

As indicated previously the new legislative definition of the 14th controlled act is stated as follows;

"[14]. Treating, by means of psychotherapy technique, delivered through a therapeutic relationship, an individual's serious disorder of thought, cognition, mood, emotional regulation, perception or memory that may seriously impair the individual's judgment, insight behavior, communication or social functioning".

The 'controlled act of psychotherapy' is law as of 2009; proclamation is the mere formality (signature) required to make it enforceable. Any claims that this is still in 'discussion' is categorically incorrect. This is further evidenced by the fact that:

- (a) The College of Physicians and Surgeons of Ontario's Policy Statement Number 5-12, effective September 2012 [See **Exhibit 30**] had already built into their future list of controlled acts in Ontario, the 14th controlled act – the controlled act of psychotherapy-- even before it is even proclaimed [See **Exhibit 3**].
- (b) Guidelines and policies [**Exhibits 32 & 33**] of various other leading colleges illustrate that legal implementation of the 14th controlled act of psychotherapy has been assumed for a number of years.

Essentially, once this 14th controlled act is proclaimed, unless you are a member in good standing of a profession authorized by statute to practice this 14th controlled act, you CANNOT legally continue any part of your practice that falls within the legally enforceable definition, which is shown above, without risking prosecution.

A practitioner must be a member of one of the following authorized professions to be legally authorized to practice medicine in the new 14th controlled act, which is the treatment of individual for the whole range of human issues:

[1] A registered psychotherapist, [2] psychiatrist, [3] psychologist, [4] nurse, [5] medical doctor, [6] occupational therapist, or [7] social worker.

A PRACTITIONER'S OPTIONS

A legal prohibition has made traditional self-employed trade and commerce activities illegal! Practitioners have very limited options in order to protect themselves, as follows;

[1] Cease all areas of practice that are now legally prohibited by the new 14th controlled act regulating the practice of medicine. This means ceasing all treatments of individuals, by verbal or non-verbal means, in the areas of cognition, thinking, reasoning, social functioning, emotional, mental and physical, because the former are now restricted to psychotherapy and selected licensed professionals and the latter, physical, are restricted to medical doctors and nurses.

[2] Apply to the new College of Registered Psychotherapists (CRPO) and become regulated, assuming you qualify. Once accepted as a member, your new scope of practice becomes that of a Registered Psychotherapist and you, the practitioner, will no longer be permitted to practice as trained, whether a spiritual counselor, family therapist, hypnotherapist or other, but ONLY as dictated by the College.

[3] Continue doing what you are doing and hope that the new College does not discover your illegal activities and investigate and prosecute you. Once the new Administrative Monetary Penalty (AMP) is also implemented, no investigation will be required; you will be guilty without recourse.

[4] Organize with others in the holistic healthcare field and politically force new legislative amendments to be passed to undo what has been done by these three harmful legislative amendments.

[5] Organize with others in the holistic healthcare community to legally challenge, on a collective basis, the new controlled act of psychotherapy in order to have it repealed—based upon Charter and division of powers and other Constitutional violations.

[6] Organize with others in the holistic healthcare field to have “Safe Harbor” legislation installed to ensure holistic, energy, traditional, hypnosis and spiritual care practices are protected. An example of this is found in Quebec, where various human-to-human approaches are deliberately and specifically noted NOT to be considered psychotherapy [See [Exhibit 49](#)].

WHAT LEGAL REMEDIES ARE AVAILABLE TO HELP TRADITIONAL AND HOLISTIC PRACTITIONERS?

Under the *Canadian Written and Unwritten Constitution* and related Rule of Law, you do have constitutionally protected rights, freedoms and liberties. Regardless of which choice or choices listed above you decide to pursue, you need to develop a better understanding of the details of what your legal rights actually are, and how they can be legally enforced [See [Exhibits 50 & 51](#)].

The *Canadian Constitution* is a *Written and Unwritten Constitution*, generally defined as a set of rules that establish both the structure and the fundamental principles of the government. While most people tend to think of the ‘Constitution’ as a written document, the truth is explained in the words of the Supreme Court of Canada: “*constitutional conventions plus constitutional law equal the total constitution of the country.*”

As explained by the Parliamentary website ‘*the Canadian Constitution is composed of written and unwritten statutes, customs, judicial decisions, and tradition.*’ The written part of the Constitution consists of the *Constitution Act, 1867*, which created a federation and the division of legislative powers between the federal and provincial governments. All of this was formalized as the *Constitution Act, 1982* [See [Exhibit 52](#)].

Under *Section 91* of the *BNA*, certain areas of jurisdiction, which include healthcare, local trade and commerce, and property and civil rights within a Province, were all *exclusively* assigned to the Provincial governments [See [Exhibit 53](#)].

In 2006/2007, and continuing today, the Ontario Liberal government became very aggressive in its efforts to exert its jurisdiction, by passing legislation to create new controlled acts in many fields, including high profile trade and commerce activities in healthcare and law.

Similar to the US Medical Association’s conspiracy to discredit, marginalize, control the growth of, and destroy the US Chiropractors, it is my opinion, based upon the research currently available to me, that many individuals, businesses, organizations and their FRIENDS got together and plotted for a very long time to create the three amendments and deliberately, with premeditation, ensured that the new law would deliver to these conspirators very legally and carefully designed vague legislative amendments.

As already mentioned, statutes that contain *prohibitions* under threat of investigation, prosecution and possible conviction, are generally created under the pretext of ‘protecting the public’.

There is, however, a legal onus on the Province to exercise its jurisdictional authority based *solely upon a good faith intention to actually protect the Public. This imperative, in my opinion, has not been met in these psychotherapy amendments and especially in the new 14th controlled act of psychotherapy. If this initiative cannot be stopped by the current lobbying efforts, it will become necessary to challenge them in Court.*

It is very important that those most affected by these dramatic legal changes take the offensive and vigorously defend in Court, any charges laid under the new legislation. If legal precedents get established as case law, particularly in the higher Courts, it will become increasingly more difficult to stop these schemes.

What is not well known, even by elected public officials, public servants and even some lawyers, is that the *Constitution Act, 1982* states:

52. (1) *The Constitution of Canada is the supreme law of Canada, and any law that is inconsistent with the provisions of the Constitution is, to the extent of the inconsistency, of no force or effect.*

(2) *The Constitution of Canada includes*

- (a) *The Canada Act 1982, including this Act;*
- (b) *The Acts and orders referred to in the schedule; and*
- (c) *Any amendment to any Act or order referred to in paragraph (a) or (b).*

(3) *Amendments to the Constitution of Canada shall be made only in accordance with the authority contained in the Constitution of Canada.*

This has enormous implications when legislative amendments occur under false pretenses contrary to the *Written and Unwritten Constitution of Canada.*

Further, *Section 24.1* of the *Constitution Act, 1982* states:

“Anyone whose rights or freedoms, as guaranteed by this Charter, have been infringed or denied may apply to a court of competent jurisdiction to obtain such remedy as the court considers appropriate and just in the circumstances.

Exclusion of evidence bringing administration of justice into disrepute

(2) Where, in proceedings under subsection (1), a Court concludes that evidence was obtained in a manner that infringed or denied any rights or freedoms guaranteed by this Charter, the evidence shall be excluded if it is established that, having regard to all the circumstances, the admission of it in the proceedings would bring the administration of justice into disrepute.”

This empowers negatively-affected citizens to bring to a ‘*Court of Competent Jurisdiction*’ any alleged violations of not only the *Charter Rights and Freedoms*, but also of the *Constitution* in general, including the division of powers contained in sections 91 and 92 [See Exhibits [52](#) & [54](#)].

The government is then put into a reverse onus legal situation to not only defend their legislation, regulations and related enforcement actions, but to justify the validity of the legislative regime in its application being made to the citizen filing the constitutional challenges.

An example of a relevant and successful case law can be seen at **Exhibit [55](#)**.

My research has also uncovered an important Report [**See extracts at Exhibit [56](#)**] provided to the Provincial Government in 2006 by the government’s own advisors, the Health Profession Regulatory Advisory

Council (HPRAC), in which the Council found, in its investigation of the matter of regulation of psychotherapy starting at Page 204 that:

- (a) There was no definition of psychotherapy, no training and no specific professional requirements, even amongst licensed professionals, Page 209, Section 3.5 [See extracts at Exhibit 56].
- (b) Psychotherapy should not be unduly regulated so as to not curtail services, nor be unduly restrictive in terms of College admission, Page 214 [See extracts at Exhibit 56].
- (c) Counseling is not psychotherapy, Page 215 bottom [See extracts at Exhibit 56].
- (d) The report states that regulation of the professionals by means of a College and the *Psychotherapy Act* may be helpful; BUT A CONTROLLED ACT OF PSYCHOTHERAPY was not viable. Page 217, Section 7.5. [See extracts at Exhibit 56].

Also interestingly, this advisory council noted it as important that all rules, regulations and acts ensure the protection of personal liberties. (Pages 66 and top 67 and 2nd bullet) [See extracts at Exhibit 56].

TRUEMAN TUCK'S CONCLUSIONS

Every *regulated* and *unregulated* practitioner in Ontario that is not pharmaceutical-based and not regulated by one of the three most powerful lobby groups positioned at the top of the medical regulatory system in Ontario, is being victimized or will eventually be victimized systematically by the manipulations of the pharmaceutical cartels that are so wealthy and powerful that they have more billions of dollars than all but the top two or three dozen nations in the world.

At the end of the day however, these cartels are no match for sustained, massive, well organized and financed grass roots public freedom campaigns using lobbying, legal actions and grassroots uprising on a sustained basis over several years that demand change, particularly since the government's own advisors stated in 2006 that regulating psychotherapy by means of a controlled act of psychotherapy was not viable. Of course, as we have seen, this was also the conclusion of the lawyer who reviewed this legislation for the Coalition of Mental Health Professionals in 2006.

No legislation that so profoundly violates personal liberties of so many millions of Citizens can be viable constitutionally if challenged effectively with enough financial and grassroots support.

There are enough affected non-pharmaceutical-based healthcare professionals in Ontario to organize legally and politically in order to become a major voice for **FREEDOM OF CHOICE IN HEALTHCARE** and to force, both politically and legally, the installation of a new legislative amendment to the definition of psychotherapy that is concise, clear and very limited, in order to neutralize the pending pre-planned enforcement strategies against selected targets. This type of "Safe Harbour" legislation is already in place in Quebec, as well as California and other US States.

If several thousand affected individuals do not get organized immediately, the 14th *controlled act of psychotherapy* will increasingly threaten their practices and livelihoods. It will certainly end free choice in healthcare in Ontario and detrimentally affect the health and well-being of every Ontarian until it is knocked down by the Courts.

Please note it takes an average budget of approximately \$5,000 to \$10,000 per month for a year or more to challenge flawed government legislation and related regulations and enforcement practices. As you can see from the Exhibits 9, 10 & 11 offered for your scrutiny, the government is notorious for engaging in stalling tactics and other undemocratic actions, driving the costs up for those taking action in the hopes of financially and emotionally exhausting them.

I have been retained by the Stop Psychotherapy Takeover organizers, who you can contact at admin@stoppsychotherapytakeover.ca for further information on their campaign for freedom of choice in healthcare in Ontario, both for individuals and for professionals.

Stop Psychotherapy Takeover organizers need your immediate donations to their legal and lobby fund in order to provide the financing needed continue their legal and political challenge to these three ill-conceived and against-public-interest legislative amendments.

Respectfully submitted,



Trueman Tuck
Paralegal Litigator/Counsel
LSUC # P07521
Dated: July 15, 2015

EXHIBIT INDEX

Exhibit No.	DOCUMENT DESCRIPTION
1	<u>Sections 27 and 28 of the Regulated Health Professions Act, 1991, S.O. 1991, c 18</u>
2	<u>Psychotherapy Act, 2007, S.O. 2007, c 10, Sch R</u>
3	<u>Psychology Act, 1991, S.O. 1991, c 38</u>
4	<u>Trueman Tuck's Curriculum Vitae</u>
5	<u>Canadian Coalition for Health Freedom's Analysis of Relative Risks and Levels of Risk in Canada</u>
6	<u>Comparison Chart of the Different Risks of Dying</u>
7	<u>David W. Rowland and Freedom of Choice in Healthcare Inc. v. Her Majesty the Queen in the Right of Canada and the Minister of Health – Applicant Record</u>
8	<u>Letters of Reference regarding Trueman Tuck</u>
9	<u>BIE Health Products o/b 2037839 Ontario Ltd. v. Attorney General of Canada et al. – Amended Fresh as amended Statement of Claim</u>
10	<u>BIE Health Products o/b 2037839 Ontario Ltd. v. Attorney General of Canada et al. – Motion Record Volume 1, filed January 13, 2015</u>
11	<u>BIE Health Products o/b 2037839 Ontario Ltd. v. Attorney General of Canada et al. – Endorsement Record dated May 27, 2015</u>
12	<u>Biography of Paul Starkman, Starkman Barristers</u>
13	<u>Biography of Derek Lee, Sun & Partners</u>
14	<u>Herbalist's Charter of Henry VIII by Ralph Fucetola</u>
15	<u>Bonham's Case, Judicial Review. And the Law of Nature by R.H. Helmholtz, Journal of Legal Analysis, Volume 1, Number 1, 2009</u>
16	<u>Homeopathic Medicine by S.S. Sandhu, D.H.M.S., Homeopathic Physician</u>
17	<u>Challenging the Establishment by René Caisse, January 1979</u>
18	<u>Delisting of Chiropractic in Ontario Takes Effect by Michael Devitt, Dynamic Chiropractic Canada</u>
19	<u>Statistics of Conventional v. Alternative Therapies</u>
20	<u>Exemption or Inclusion: Who Should Register in the College? CASC Perspectives – Marvin Shank, December 2013</u>
21	<u>The New College of Registered Psychotherapists (CRPO) Withholds Vital Information from Distressed Practitioners</u>
22	<u>Food and Drugs Act, R.S.O., C. F-27, s. 1</u>
23	<u>Wrigley Canada v. Canada, 2000 CanLII 15485 (FCA)</u>
24	<u>Summary Case Law excerpts from Ontario Coalition of Mental Health Professionals, March 2007</u>
25	<u>Psychotherapy Takeover Fears – Discussion Paper by Geneviève Eliany, Buckley & Co., September 21, 2014</u>
26	<u>Geneviève Eliany's Law Society of Upper Canada Directory Profile</u>
27	<u>Letter to Shawn Buckley, Buckley & Company from Trueman Tuck, Tuck's Paralegal Services dated February 23, 2015</u>
28	<u>Letter to Shawn Buckley, Buckley & Company from Trueman Tuck, Tuck's Paralegal Services dated April 17, 2015</u>
29	<u>Biography of Glenn Rumbell BA, LL.B. on the Ross Rumbell Professional Corporation</u>
30	<u>Delegation of Controlled Acts, Policy Statement 5-12, CPSO, Dialogue, Issue 3, 2012</u>
31	<u>The College of Physicians of Ontario Council Member List</u>
32	<u>Medical Delegation – Big Brother, or Best Friends? By Sameer Mal and Adam Dukelow, London Health Sciences Centre</u>
33	<u>Interpretation of Authorized Acts, Professional Practice Guideline, College of Respiratory Therapists of Ontario, September 2014</u>
34	<u>Mental Health Strategy, Mental Health Commission of Canada</u>
35	<u>Complementary and Alternative Medicine in Canada: Trends in Use and Public Attitudes, 1997-2006 by Nadeem Esmail, The Fraser Institute, Public Policy Sources, Number 87, May 2007</u>

36	Unnatural Regulation: Complementary and Alternative Medicine Policy in Canada by Cynthia Ramsay, Studies in Healthcare Policy, September 2009
37	Healthcare Consent Act, 1996, S.O. 1996, c 2, Sch A
38	Email from Joyce Rowlands to Alice Creighton, Vice-President, Canadian Reiki Association of Canada dated June 27, 2014
39	Recognized Psychotherapy Approaches as of May 2015
40	Letter to Christine Massey from John Amodeo, Director, Ministry of Health and Long-Term Care Health Force Ontario dated April 9, 2015
41	APA Dictionary of Psychology definition of psychotherapeutic
42	The Chiropractic Antitrust Suit Wilk, et al vs. the AMA, et al, Frank M Painter
43	Antitrust – Chiropractors sue AMA for antitrust – Wilk v. American Medical Association, 895 F.2d 352 (7th Cir. 1990)
44	Ontario's move toward alternative medicine draws sharp criticism by Tom Blackwell, National Post, September 30, 2011
45	CMAJ News Article, Naturopathic doctors gaining new powers, January 10, 2010
46	Requesting Your Support for Ontario's Naturopathic Doctors, Ontario Association of Naturopathic Doctors
47	Health Minister of Ontario Failure in His Duty of Care to Ontarians
48	Canada has more doctors, making more money than ever by David Andreato, The Globe and Mail, September 26, 2013
49	Québec's Psychotherapy Definition
50	The Rule of Law and the Courts, How Canadians Govern Themselves, 6th Edition
51	The Written and Unwritten Constitution, Canada in the Making
52	Constitution Act, 1982
53	Sections 91 and 92 of the British North America Act
54	Canadian Constitutional Law 2002-2003; Prof. Colleen Sheppard, Summary by Derek McKee
55	The Assisted Human Reproduction Act Reference and the Federal Criminal Law Power by Ian B. Lee
56	Letter to the Honourable George Smitherman, Minister of Health and Long-Term Care from Barbara Sullivan et al. dated April 27, 2006