

**ONTARIO SUPERIOR COURT OF JUSTICE
(EAST REGION)**

B E T W E E N:

STEVEN REYNEN

Appellant

-and-

DR. TABITHA ROGERS

Respondent

-and-

PUBLIC GUARDIAN AND TRUSTEE

Respondent

FACTUM OF APPELLANT

Steven Reynen
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Appellant acting in person

*The appellant is a Christian
The Bible is the Word of God
Romans 13*

Romans 14:23

Luke 17:1-3

Psychotropics are sin.

Psychotropics are Pharmakeia and Pharmakeia is sin.

Hunger and water striking to death is lesser sin (if need be) than being forced to submit to Pharmakeia.

The right to die is to be respected. To forcefully feed and hydrate him would be torture.

He is already being double-bound into being lured into sin. If he dies by such a hunger and water strike he would have been walked to suicide by the parties involved.

Even if he is tortured by forced feeding and hydration, he will rip the feeding tube and IV out at every opportunity and eventually he will die from the experiences.

The appellants wishes express both matters of conscience and religious beliefs as rationale as to why he never should be treated with psychotropics ever again, under any circumstance.

WISHES EXPRESSED WHILE CAPABLE ON JULY 7, 2024

Hi Family and Robert,

I wanted to take the time to write this letter.

As you all know, I have a diagnosis of Schizoaffective Disorder. As well as ADHD Inattentive Type. And, if I am not mistaken, Generalized Anxiety Disorder.

I have a history of substance abuse (primarily marijuana but also alcohol).

I also have a history of suicide attempts and suicidal ideation.

And a long history of things I wish I never did.

Over the past couple years, you guys have been helping me in my journey to get off of the medication (Clozapine, which in turn caused me to take a heart medication and metformin to treat the pre-diabetes). Without your support this would likely never have happened. The withdrawal of this medication is no laughing matter. I am down to 68.75 mg from 250 mg. It will likely take more time to completely get off of it.

As you also all know – I now consider myself to be a Christian. Saved by the grace of God alone – completely unmerited – especially after all I have done.

This doesn't mean I don't make mistakes – I do every day unfortunately. But I am battling my sinful nature and trying to do less of a disservice to God and to the church (the believers in Christ).

But it is important to note that I no longer believe in suicide as an option. Nor do I now believe it is appropriate to commit violence.

The topic of Power of Attorney (PoA) and Substitute Decision Maker (SDM) has recently come up.

I am not going to assign a PoA. But, after my recent appointment with Doctor Baines (Robert was there with me) – where doctor Baines told me I was presently considered mentally capable - I have thought about the idea of my wishes (also known as an advance directive) should I ever be ruled incapable again according to the Mental Health Care Act.

I am not going to make a lengthy list of things that I wish are adhered to.

Only one thing.

And I will provide my reasoning.

I never, ever, wish to be put on any psychotropic medication (including anti-psychotics, anti-depressants, etc.) ever again. Under any circumstance.

As a human being:

The psychotropics damaged my physical health. They caused me to gain over 200 pounds. This caused me to develop heart problems and pre-diabetes. I was told that I was at risk for stroke and heart failure. I had to resist more prescriptions than this – which could have resulted in severe polypharmacy.

The psychotropics damaged my cognition. This interfered with my ability to think and do things.

The psychotropics sedated me. This caused me to sleep most of the day away and severely limited my ability to do things.

The psychotropics damaged my ability to feel. This scares me the most. God willing this is not irreversible – and I am experiencing more emotion again presently.

As a Christian:

The scariest piece for me is the dampening of my ability to feel love.

There are so many quotes in the bible stressing the importance of feeling love for one another.

If you don't believe me, just do a quick search.

I am not saved by my capabilities. Most days I am reminded of my failings.

I am saved by what Christ Jesus did for me at Calvary. Period. And I **know** it is unmerited.

All this being said.

This is my only wish I care to state while I am mentally capable.

I never wish to be put on psychotropics **ever** again.

Yours,

Steven

Primary Argument

Section 21(1)2 and Section 35 of the Health Care Consent Act are constitutionally invalid and are therefore of no force and effect

Secondary Argument

The appellants wish is applicable to the circumstances the incapable person expressed while capable.

It would be in the appellants best interest that his wish would be respected and he never be treated with psychotropics under any circumstance, given the relevant matters of conscience and his strongly held religious beliefs. He will hunger and water strike to death if his wishes are not respected.

The appellant should never be treated under any circumstances, even emergencies, with psychotropics ever again, both for his matters of conscience and strongly held religious beliefs. Measures should be taken to ensure his Section 2(a) freedoms guaranteed by The Charter are never infringed upon again under any hospitalization in Canada.

If he is never treated again, once the courts rule in his favour, he will no longer have to hunger and water strike to death.

In the alternative, the appellant asks that he may flee Canada, and seek refugee status elsewhere in the world where they would respect his religious freedoms which are protected by the United Nations Universal Declaration of Human Rights Article 18.

Canada is a member state of the United Nations.

The appellant intends to seek help from the United Nations should Canada continue to infringe upon his human rights and freedoms with its laws that violate said freedoms.

LEGISLATION TO BE CITED

Constitution Act, 1982

PART I

Canadian Charter of Rights and Freedoms

Whereas Canada is founded upon principles that recognize the supremacy of God and the rule of law:

Rights and freedoms in Canada

1 The Canadian Charter of Rights and Freedoms guarantees the rights and freedoms set out in it subject only to such reasonable limits prescribed by law as can be demonstrably justified in a free and democratic society.

Fundamental Freedoms

2 Everyone has the following fundamental freedoms:

(a) freedom of conscience and religion;

Primacy of Constitution of Canada

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.

Health Care Consent Act, S.O. 1996, Chapter 2, Schedule A, as amended
Sections 4, 80.

Principles for giving or refusing consent

21 (1) A person who gives or refuses consent to a treatment on an incapable person's behalf shall do so in accordance with the following principles:

1. If the person knows of a wish applicable to the circumstances that the incapable person expressed while capable and after attaining 16 years of age, the person shall give or refuse consent in accordance with the wish.
2. If the person does not know of a wish applicable to the circumstances that the incapable person expressed while capable and after attaining 16 years of age, or if it is impossible to comply with the wish, the person shall act in the incapable person's best interests. 1996, c. 2, Sched. A, s. 21 (1).

Best interests

(2) In deciding what the incapable person's best interests are, the person who gives or refuses consent on his or her behalf shall take into consideration,

- (a) the values and beliefs that the person knows the incapable person held when capable and believes he or she would still act on if capable;
- (b) any wishes expressed by the incapable person with respect to the treatment that are not required to be followed under paragraph 1 of subsection (1); and
- (c) the following factors:
 1. Whether the treatment is likely to,
 - i. improve the incapable person's condition or well-being,
 - ii. prevent the incapable person's condition or well-being from deteriorating, or

- iii. reduce the extent to which, or the rate at which, the incapable person's condition or well-being is likely to deteriorate.
- 2. Whether the incapable person's condition or well-being is likely to improve, remain the same or deteriorate without the treatment.
- 3. Whether the benefit the incapable person is expected to obtain from the treatment outweighs the risk of harm to him or her.
- 4. Whether a less restrictive or less intrusive treatment would be as beneficial as the treatment that is proposed. 1996, c. 2, Sched. A, s. 21 (2).

Application for directions

35 (1) A substitute decision-maker or a health practitioner who proposed a treatment may apply to the Board for directions if the incapable person expressed a wish with respect to the treatment, but,

- (a) the wish is not clear;
- (b) it is not clear whether the wish is applicable to the circumstances;
- (c) it is not clear whether the wish was expressed while the incapable person was capable; or
- (d) it is not clear whether the wish was expressed after the incapable person attained 16 years of age. 1996, c. 2, Sched. A, s. 35 (1); 2000, c. 9, s. 33 (1).

Notice to substitute decision-maker

(1.1) A health practitioner who intends to apply for directions shall inform the substitute decision-maker of his or her intention before doing so. 2000, c. 9, s. 33 (2).

Parties

(2) The parties to the application are:

- 1. The substitute decision-maker.
- 2. The incapable person.
- 3. The health practitioner who proposed the treatment.
- 4. Any other person whom the Board specifies. 1996, c. 2, Sched. A, s. 35 (2).

Directions

(3) The Board may give directions and, in doing so, shall apply section 21. 2000, c. 9, s. 33 (3).

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