

Re: Formal request for an investigation by the UW Board of Governors and UW Senate into a violation of Policy 69 (Conflict of Interest) by UW President Vivek Goel

Cindy Forbes <cindy.forbes@uwaterloo.ca>

Fri 4/22/2022 11:19 AM

To: Edward Vrscaj <ervrscaj@uwaterloo.ca>; Richard Mann <mannr@uwaterloo.ca>; Xiaosong Wang <xiaosong.wang@uwaterloo.ca>

Dear Professors Mann, Vrscaj and Wang

Thank you for bringing your complaint to my attention. I have reviewed your document and assessed whether, as you allege, whether Dr. Goel's membership in the COVID-19 Immunity Task Force (CITF) represented an undisclosed conflict of interest with respect to the University of Waterloo's Vaccine Policy and its implementation.

As I indicated previously, and as you acknowledge in your complaint, Dr. Goel's membership in the CITF was announced at the time of his introduction as the next President of the University of Waterloo. Thus his membership in CITF was in the public domain.

To your question as to whether or not his membership in CITF created a conflict of interest with respect to the University's vaccine policy, I find that it does not. The links to CITF's mandate in your letter of complaint clearly show that CITF's mandate is to support knowledge about the state of SARS-CoV-2 immunity in the population. There is nothing in their mandate nor in the work they support or have supported that is associated with promoting vaccinations. The studies they have supported with respect to vaccines are with respect to the safety of those vaccines studied rather than their promotion.

To support my finding I include the text, verbatim, from the CITF website.

“The COVID-19 Immunity Task Force's mandate

On April 23, 2020, the Government of Canada launched the COVID-19 Immunity Task Force (CITF). The Task Force's mandate is to catalyze, support, fund and harmonize knowledge on SARS-CoV-2 immunity for federal, provincial, and territorial decision-makers in their efforts to protect Canadians and minimize the impact of the COVID-19 pandemic.

SEROPREVALENCE

We support seroprevalence studies focussed on assessing how many Canadians have antibodies to SARS-CoV-2, the virus that causes COVID-19. People with antibodies have either likely a) had SARS-CoV-2 and have developed some form of immunity (see our Immune Science area), what is called “infection-acquired immunity,” or b) have been vaccinated against COVID-19 and have what is called “vaccine-induced immunity”. Estimating seroprevalence continues to be highly important in the vaccine era. Vaccine rollout in the real world is not going to follow ‘textbook’ results, due to the rise of variants of concern, the deviation of dosing schedules from what was used in clinical trials, and potential mix & matching of different types of vaccines. In addition, we don't yet know how long immunity lasts and therefore when an additional dose of vaccine may be needed. Seroprevalence will therefore continue to be a useful broad mechanism to survey people's immune responses at a macro, population level.

VACCINE SURVEILLANCE

All vaccines approved in Canada go through rigorous testing during clinical trials and are given approval by Health Canada prior to use. That said, as millions of Canadians get vaccinated against COVID-19, the ongoing monitoring of both the effectiveness and safety of the various vaccines authorized in this country are of utmost importance. The CITF is contributing to ongoing monitoring and has launched several studies relating to comprehensive vaccine surveillance efforts across Canada. A consortium of Canadian organizations, including the Public Health Agency of Canada (PHAC), the Canadian Research Immunization Network (CIRN), the National Advisory Committee on Immunization (NACI) and the CITF, are collaborating through the CITF's Vaccine Surveillance Working Party to identify studies that will support the safety and effectiveness of COVID-19 vaccines across Canada.

IMMUNE SCIENCE

Despite considerable advances in our understanding of the immune system in relation to SARS-CoV-2 and COVID-19 since the beginning of the pandemic, there remain many questions related to understanding immunity. Individuals who become infected generate antibodies to the virus, but the evidence does not yet definitively show that antibodies are fully protective from future reinfection. Although studies we have funded suggest an immune response lasts up to eight months, more research must be done to ascertain the complexities of the immune response, whether it prevents re-infection, and how long that immune response will last.

OPTIMIZATION OF IMMUNOLOGICAL TESTING

All the work of the above priorities, be it related to monitoring trends in SARS-CoV-2 infection with immune measures and/or assessing the degree and durability of immune protection from infection or vaccines, is dependent on accurate measures of immunity. Ensuring precise and trustworthy immune testing is therefore central.

PEDIATRIC VACCINATION

The research we catalyze and fund in this category includes ongoing safety monitoring to ensure we know immediately if ever an issue were to arise. Our funded research also looks at a variety of questions such as: What are the effectiveness and immunogenicity of SARS-CoV-2 vaccination in children (be they healthy, immunocompromised, have cardiovascular complications, etc.)? What is the effect of SARS-CoV-2 vaccination on children who have already had Multisystem inflammatory Syndrome in children (MIS-C) or long COVID symptoms? When will children need boosters, if at all? What is the durability of vaccine-induced immune responses (humoral, cellular, absolute antibody level, neutralizing antibodies, cellular responses, recall responses) in children?

BOOSTERS

With growing evidence that the immune response generated by COVID-19 vaccines is efficacious against death, hospitalization, symptomatic infection and transmission, the question arises as to the duration of this protection. Monitoring and modelling the rate of decline of immune protection from vaccination (clinical outcomes, humoral immunity and cellular immunity), together with information on the changing nature of SARS-CoV-2, will help inform the timing and type of booster vaccine to prevent a resurgence of COVID-19. In addition, the need and timing of booster doses may be different in the general population and in various specific sub-groups such as long-term care residents, those with other health conditions and children.

CROSS-CUTTING THEMES

This category may be a bit of a catch-all, but an important one nonetheless. With over 100 studies in

the field, comparing results is very interesting. However, comparisons are tricky when studies are using different measurements. The CITF therefore is working on generating measures of immunity that can be compared between studies. The correlates of protection (measurable signs that a person is immune, in the sense of being protected against becoming infected and/or developing disease) still need to be better understood, whether it be with respect to cellular immunity or humoral (antibody) levels following infection and vaccination. The duration of protection after one, two or three vaccines is still an open question. This information is required to determine the need for and optimal timing of further vaccination and to prevent or mitigate future waves of SARS-CoV-2 infection in a timely manner.

IMMUNITY MODELLING

With vaccination coverage in Canada among the highest in the world, public health restrictions have eased. School is back in person, workplaces are coming alive again, restaurants are open, and borders crossings have increased and rules are evolving. However, close monitoring of the level of SARS-CoV-2 immunity in different settings across Canada and internationally is required to sustain these re-openings and avoid further outbreaks of COVID-19. The CITF requests that all its funded studies share anonymized data with its Secretariat, so it can be integrated into immunity monitoring and mathematical modelling work. This modelling will provide information on immunity to guide decisions about public health measures. Moreover, information gathered from studies on a broad array of factors such as the duration of infection and/or vaccine-induced immunity or the impact of new variants of concern on vaccine effectiveness, can be incorporated into our mathematical models that explore possible pandemic scenarios to help policy makers understand levels of effective population immunity.”

Given that it is clear that the CITF’s mandate and activities are focused on understanding the level of immunity in the population and the safety and effectiveness of vaccines, I do not find that Dr. Goel failed to disclose critical conflict of interest information to the UW community.

This matter was discussed at the University of Governors April Board of Governors’ meeting.

From: Edward Vrscaj <ervrscaj@uwaterloo.ca>

Date: Sunday, April 3, 2022 at 11:09 PM

To: Edward Vrscaj <ervrscaj@uwaterloo.ca>

Subject: Formal request for an investigation by the UW Board of Governors and UW Senate into a violation of Policy 69 (Conflict of Interest) by UW President Vivek Goel

Respected members of the UW Board of Governors and UW Senate:

Please find below, and attached, a request for an investigation into a violation of Policy 69 (Conflict of Interest) by UW President Vivek Goel.

We apologize for the lateness of this request and hope that it will receive attention at your next meetings (e.g., Board of Governors on Tuesday, April 5).

Sincerely yours

Richard Mann, Computer Science, UW
Edward R. Vrscaj, Applied Mathematics, UW
Xiaosong Wang, Chemistry, UW

To: Dominic Barton, Chancellor, UW
Cindy Forbes, Chair of the Board of Governors, UW
Paul Fieguth, Stanley Woo, En-Hui Yang, Achim Kempf – faculty members of the Board of Governors, UW

Veronica Kitchen, Daniel O'Connor, Paul Fieguth, Anne Bordeleau, Chao Tan, Johanna Wandel, Neil Craik, Erin O'Connell, Ellen MacEachen, Luke Potwarka, Sivabal Sivaloganathan, Achim Kempf, Martin Karsten, William Power, Graham Murphy, Moira Glerum, Carmen Bruni, David Ha, Natalie Hutchings, Zoran Miskovic, Neil Randall, Siva Sivoththaman, Nancy Worth, George Freeman, Christiane Lemieux, Blake Madill, Paul Ward, Clarence Woudsma, Stanley Woo, En-Hui Yang, Nasser Mohieddin Abukhdeir, Trevor Charles, Joan Coutu, Kristine Dalton, Kelly Grindrod, Kevin Hare, Xianguo Li, Graeme Turner – faculty members of the Senate, UW

Cc: Vivek Goel, President, UW
James Rush, Vice President Academic and Provost, UW
Karen Jack, University Secretary, UW
Charmaine Dean, Vice President, Research and International, UW
Sandra Banks, Vice President, University Relations, UW
Dennis Huber, Vice President, Administration and Finance, UW
Jeff Casello, Associate Vice President, Graduate Studies and Postdoctoral Affairs, UW
David DeVidi, Associate Vice President, Academic, UW
Christopher Taylor, Associate Vice President, Human Rights & Inclusion and Anti-Racism, UW
Marilyn Thompson, Associate Provost, Human Resources, UW
Chris Read, Associate Provost, Students, UW
Bruce Campbell, Chief Information Officer, UW
Lili Liu, Dean of Applied Health Sciences, UW
Sheila Ager, Dean of Arts, UW
Mary Wells, Dean of Engineering, UW
Jean Andrey, Dean of Environment, UW
Mark Giesbrecht, Dean of Mathematics, UW

Bob Lemieux, Dean of Science, UW

Lori Curtis, President, Faculty Association of UW

Roydon Fraser, Jasmin Habib and Jean-Paul Lam, Co-chairs, Academic Freedom & Tenure Committee, FAUW

From: Richard Mann, Computer Science, UW

Edward R. Vrscaj, Applied Mathematics, UW

Xiaosong Wang, Chemistry, UW

Re: Formal request for an investigation by the UW Board of Governors and UW Senate into a violation of Policy 69 (Conflict of Interest) by UW President Vivek Goel

Date: March 28, 2022

We are extremely concerned that the decisions made by UW President Vivek Goel with regard to the University's mandatory vaccination policy – the so-called “Requirement” – may have been significantly influenced by his membership in the federal COVID-19 Immunity Task Force[20] (<https://www.covid19immunitytaskforce.ca>), thereby representing a conflict of interest (COI) and therefore a violation of Policy 69 (Conflict of Interest). UW Policy 69 requires proactive disclosure of conflicts and potential conflicts, but Professor Goel failed to do this.

A brief look at the COVID-19 Immunity Task Force

The federal COVID-19 Immunity Task Force (<https://www.covid19immunitytaskforce.ca>) promotes “COVID-19 vaccines” as it “work[s] closely with” partners that include “public health agencies” and seeks to support “public health efforts.” The COVID-19 Immunity Task Force funds and publicizes research that strongly supports “mandatory vaccination” against COVID-19, strongly supports “immunity passports” and other policies that “require people to provide proof of immunization” against COVID-19 and considers it “urgent” to “vaccinate the world” against COVID-19. One of the “guiding principles” of the COVID-19 Immunity Task Force is to “establish an ethos” in which “the broad public interest overrides any considerations of” what might serve an individual's “personal” interests regarding information on COVID-19 (<https://www.covid19immunitytaskforce.ca/mandate-strategy/>).

President Vivek Goel's service to the COVID-19 Immunity Task Force has been a source of accolades and **personal benefit**. For example, the Fields Institute recognized his “contributions to the COVID-19 Immunity Task Force” when it awarded him a fellowship (UW Senate, September 20, 2021 agenda). And public reports, including UW's coverage of his “installation” (November, 2021), claim that he resigned a position as a Vice President at the University of Toronto in order to serve the COVID-19 Immunity Task Force, which suggests substantial personal commitment to that external organization and its agenda.

Failure of President Goel to disclose his association with the COVID-19 Immunity Task Force when he instituted UW's vaccine mandate

Having searched the public University of Waterloo archives, we were able to find **only one** public document in which President Goel's association with the COVID-19 Immunity Task Force was mentioned prior to UW's vaccine mandate, namely, the UW Media Relations article of November 17, 2020 entitled, “Vivek Goel named president and vice-chancellor of the University of Waterloo.” In Paragraph 4 of this document is the sentence,

“The public health physician currently serves as a member of the federal government’s COVID-19 Immunity Task Force and Scientific Advisor for the CanCOVID Research Network.”

This was, however, only a passing remark of Vivek Goel’s association with the COVID-19 Immunity Task Force and **not** a statement from him. **It cannot in any way qualify as a disclosure of potential conflict of interest because it contains no information about how Vivek Goel’s association with the Task Force could affect, or could be perceived to affect, the decisions he would make as President of UW.**

A July 22, 2021 memo from President Goel announced mandatory vaccination for all students living in residence. In an August 16, 2021 memo to all UW employees and students, President Goel announced the first form of UW’s mandatory vaccination and attestation which allowed for antigen testing. In his memo dated October 14, 2021, President Goel then dramatically changed the UW vaccination and testing policy by making the following declaration,

PLEASE NOTE: All employees will be required to be fully vaccinated by the start of the Winter term in January 2022.

According to Policy 69 (Conflict of Interest), Professor Goel was obligated, in July 2021, the first month of his Presidency, to declare a conflict of interest – either actual, perceived or potential – because of his association, past and present, with the COVID-19 Immunity Task Force, **an organization which, as mentioned earlier, promotes mandatory vaccination.**

President Goel is well aware of the need for formal written disclosure of conflicts of interest. His own disclosure of a conflict of interest was made in writing to the COVID-19 Immunity Task Force when he was affiliated with the University of Toronto [1]. Why, then, did he not, as President of UW, inform the University about possible conflict of interest between the COVID-19 Immunity Task Force and decisions he would be making, and continues to make, with regard to UW’s “Requirement”?

We also point out that Professor Goel is also a member of UW’s Board of Governors. Members of this Board have the following duty (<https://uwaterloo.ca/secretariat/governance/board-governors/conflict-interest-declaration>)

“Each Governor is further required to submit a Supplemental Conflict of Interest Declaration to the Secretary of the Board at such further time throughout the year that an actual, perceived, or potential conflict of interest may arise.”

Furthermore,

“Governors who have an actual, perceived or potential conflict of interest, with respect to any matter under consideration by the Board or a committee thereof:

- shall declare the nature and extent of the interest immediately and refrain from taking part in any discussion or vote in relation to the matter, and*
- withdraw from the meeting when the matter is being discussed.*

The nature and extent of the Governor's interest will be recorded in the minutes of the meeting of the Board.”

Did Professor Goel, as a Governor, provide a statement of conflict of interest to the Secretary of the Board with regard to UW’s vaccination policy? Even if he did, he would also be required to provide a COI statement as President of UW. There also remains the question whether President Goel should have disqualified (recused) himself from any decisions made on UW’s vaccination policy because of

his COI. [2]

President Goel's other associations are also of concern

It is not surprising that President Goel has been associated with other organizations that are dedicated to mass vaccination. For example, a paper he co-authored for the CanCOVID Research Network (<https://cancovid.ca>) entitled, "Commentary: Covid-19 mitigation strategies and considerations," is concerned, among other things, with how to combat factors such as 'vaccine hesitancy' that can inhibit 'full immunization coverage'. His paper advocates 'communication strategies to curb parental hesitancy and other hesitant subgroups' [3]. The following statement in the paper is particularly distressing (emphasis ours) [4],

*"An important determinant of increased vaccine hesitancy may be the overwhelming number of negative messages, **even from credible sources**, and the very little positive messaging around vaccine uptake."*

President Goel was also the founding President and CEO of Public Health Ontario (<https://www.publichealthontario.ca>), which is dedicated to immunization.

These associations in themselves, of course, do not involve any direct conflict of interest. They are, however, further testimony to President Goel's dedication to mandatory vaccination. Such a dedication was responsible for UW's "Requirement" which, as mentioned earlier, went beyond the Instructions of the Province's Chief Medical Officer of Health. Unfortunately, the "Requirement" has not worked [5]. **President Goel must address the question of whether the "human cost" of the "Requirement"- which unfortunately includes trauma and, indeed, destroyed lives [6] – was worth the "zero benefit".**

As such, we, the undersigned faculty, staff, alumni, and students represent a large body of UW community members who believe that the vaccine mandates enacted by President Vivek Goel (a) were excessive, (b) infringed on individual health and autonomy and (c) unjustly manipulated the University of Waterloo community. Moreover, these actions were performed without full disclosure of a conflict of interest residing with President Goel. **We therefore demand that the UW Board of Governors and UW Senate perform the following:**

(A) A thorough investigation into President Goel's undisclosed conflict of interest and its possible role in decisions regarding UW's vaccine mandate. This will include an investigation of the following questions:

1. Why did President Goel adopt the strictest form of vaccination policy allowed in the Instructions of the CMOH, namely a mandatory vaccination policy, as opposed to a policy which allows a person to decide whether or not to be vaccinated (as per Point No. 1(c) of the Instructions). The COVID-19 Immunity Task Force with which President Goel has had extensive affiliation encourages a mandatory vaccination policy.
2. Why did President Goel declare in advance that accommodation requests would be "rare"?
3. Can President Goel confirm that the "Requirement" does not violate Policy 34 (Health, Safety and Environment) in placing public health concerns ahead of individual health concerns?
4. Why did President Goel fail to proactively disclose his affiliation with the COVID-19 Immunity Task Force, signaling a possible COI, in the context of issuing a coercive medical order to tens of thousands of UW community members?

5. Why did President Goel deny requests from members of UW's community to meet with him to discuss possible alternatives to a vaccination mandate as well as alternative "disciplinary procedures" for noncompliant faculty, staff and students?
6. Why has President Goel claimed, falsely and repeatedly, in documents to UW employees that "The University was required by statute to adopt a COVID-19 vaccination mandate"?
7. Why did President Goel decide to expel students and terminate the appointments of UW employees who could not satisfy the conditions of the "Requirement", thereby causing a tremendous amount of harm and trauma to the UW community? [6]
8. Has President Goel ever investigated the extent of the harm and trauma caused to the UW community by his vaccination mandate? Given that from UW's own data, the "Requirement" did not reduce cases on campus [5], will President Goel admit that the "human cost" of his vaccination mandate far exceeds any "benefit" of the mandate?
9. When will President Goel order the rewriting of the LEARN training module on the "safety" of COVID-19 vaccines in order to remove all misinformation?
10. Why did the University of Waterloo continue to enforce a vaccination mandate after March 1 when the CMOH recommended removing any mandates?
11. Why is the University of Waterloo now adopting a semi-permanent form of vaccine mandates from May 1st forward stating that vaccination mandates may be invoked at any time?
12. On March 24, 2022, it was reported (Robert Williams, the Record) that there were no firings of staff or faculty on the campus of Wilfrid Laurier University because of its vaccine mandate. On the next day, it was reported (Jennifer K. Baker, CTV News) that the University of Waterloo has terminated 49 employees because of its vaccine mandate. Why the tremendous difference, not merely in terms of numbers but also in terms of implementation?
13. At least one of the employees fired at UW was a tenured faculty member. Professor Michael Palmer (Chemistry, UW) was fired on March 21, 2022, well beyond the date that the CMOH recommended the removal of mandates. At this time, the UW administration is engaged in an attempt to terminate several other faculty members, presumably before the end of the Winter 2022 term, before the May 1 "suspension" of the "Requirement" takes place. Why is President Goel so intent on removing these faculty members? And so quickly? Is it truly in the interest of "public health"?
14. On the day after his Instructions were sent to post-secondary institutions, CMOH Dr. Kieran Moore sent a memorandum to the Province's 24 regional Medical Officers of Health. In this memo, which was made public by Independent MPP Roman Baber, see [post](#), Dr. Moore stated that "recent data from the Delta variant shows that when breakthrough cases occur, fully vaccinated individuals have similar levels of infectiousness as in unvaccinated cases." Why would President Goel, who has stated publicly that he has kept in touch with the CMOH about what to do and what not to do (e.g., testing), choose to continue with a vaccine mandate that discriminated between vaccinated and unvaccinated persons and continues to cause harm to his own people?
15. Record reporter [Robert Williams interviewed President Goel](#) after learning about the firing of Prof. Michael Palmer (Record, March 25, 2022) and asked him to respond to Prof. John Turri's comments that (i) UW's own data shows virtually no change in cases on campus and (ii) Ontario's COVID-19 data show that there is no clear evidence that unvaccinated individuals who comply with regular testing pose an elevated risk to a community that is overwhelmingly vaccinated. Williams wrote, "In response, Goel said the success of the mandate is shown in the high level of compliance the school has had." If the success of the mandate is not to be

measured by the reduction in cases (which was zero) but rather in the degree of compliance, does it not seem that the principal goal of the mandate is **not** health and safety but rather **compliance and control** over the university community?

16. Has President Goel's affiliation with the COVID-19 Immunity Task Force been relevant to any or all of the above questions? In other words, has his affiliation affected his judgment during the entire response of the UW administration to COVID-19?

17. Should President Goel, in fact, have disqualified himself from all decisions regarding UW's vaccination policy because of his conflict of interest?

(B) An end to President Goel's coercive vaccination orders.

In summary, we have put before the Board of Governors and the Senate of the University of Waterloo a clear violation of Policy 69 (Conflict of Interest) by President Vivek Goel. President Goel failed to disclose critical conflict of interest information to the UW community prior to implementing the coercive vaccine mandate known as the "Requirement". Moreover, President Goel failed to transparently communicate the motivations behind the mandate.

We trust that the UW Board of Governors and the UW Senate will perform a complete and thorough investigation of all aforementioned points, thereby fulfilling their duties as the governing bodies which oversee all policies of the UW senior administration. The tremendous responsibility that these bodies have, not only to the UW community but to academia in general, cannot be emphasized enough.

Respectfully yours,

Richard Mann (faculty), Computer Science, UW

Edward R. Vrscaj (faculty), Applied Mathematics, UW

Xiaosong Wang (faculty), Chemistry, UW

Rosina F. Kharal (terminated faculty), Computer Science, UW

Paula Petrie (terminated staff), UW

Sandra McDermott (alumna), UW

Dimple Arora (alumna), UW

Celeste Loccisano (alumna), UW

Hajera Khan (alumna), UW

Joe Pharaon (PhD, Mathematical Epidemiology), Applied Mathematics, UW

Randy Boehm (terminated staff), UW

References

[1] Conflict-of-Interest declared by Vivek Goel to The COVID-19 Immunity Task Force:
https://www.covid19immunitytaskforce.ca/wp-content/uploads/2020/10/CITF_COI-Form_Vivek-GOEL-.pdf

[2] John Turri, “The University of Waterloo’s “vaccination requirement” and the Covid-19 Immunity Task Force: UW president Vivek Goel’s undisclosed conflict of interest,” at <https://mandates.substack.com/p/the-university-of-waterloos-vaccination-f66?s=r>

[3] “Parental hesitancy to vaccinate their children is affected by experiences, emotions, ways of thinking, informational sources, peers/family, risk perceptions, and trust. If there is vaccine hesitancy among parents, and they choose not to get vaccinated, it is likely that they will also choose not to vaccinate their children. Communication strategies to curb parental hesitancy, and other hesitant subgroups should be considered and implemented to increase vaccination rates and limit the spread of Covid-19 and variants (13).” [page 10](#)

[4] “An important determinant of increased vaccine hesitancy may be the overwhelming number of negative messages, even from credible sources, and the very little positive messaging around vaccine uptake. There needs to be effective and positive communications around vaccines, including how vaccine uptake is related to loosening public health restrictions. One consideration is to put together an agency, or gather community trusted communicators and influencers, that disseminate appropriate messaging to those that are vaccine hesitant, especially in settings with low vaccine uptake.” [page 10](#)

[5] Letter by Professor John Turri (Philosophy and Cognitive Science, UW) to members of UW’s senior administration as well as faculty members of UW’s Board of Governors and UW’s Senate, dated February 16, 2022. See also, John Turri, “The University of Waterloo’s own data show that its “vaccination requirement” failed to make campus safer,” at <https://mandates.substack.com/p/the-university-of-waterloos-own-data?s=r>

[6] [Descriptions on the strife and trauma experienced by the UW community under the mandatory vaccination policies.](#)