Summary Brief – MAiD for Mature Minors.

Inclusion Alberta

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We remain vehemently opposed to assisted death on the basis of disability or disabling medical condition (death not reasonably foreseeable) including to mature minors.

Canada's MAiD legislation restricts death by MAiD to those 18+ with good reason. Fewer Canadian youth than older Canadians report having excellent or very good mental health.¹ Suicide is the second leading cause of death for Canadian youth ages 10-19², behind only accidental death³.

Unique Vulnerabilities of Children with Disabilities

- Children with disabilities are more affected by suicidal ideation: They have greater exposure poverty, lack of belonging, unrecognized mental illness, and childhood maltreatment⁴. 32% of First Nations people living off reserve, 30% of Métis and 19% of Inuit ages 15+ have disabilities⁵ and Indigenous youth are dying by suicide at disproportionate rates⁶.
- Minors are reliant on adults; this is especially the case for minors with disabilities: Most minors rely on adults for social and economic support.⁷ Youth with disabilities may be uniquely dependent due to the extra costs and challenges of having a disability⁸ or to supports being provided by or through the family unit.
- Minors with disabilities are twice as likely to live in households that live in poverty: Parents of children with intellectual disabilities have to turn down employment opportunities; work less; and/or decline promotions⁹. 17% of people with disabilities in Canada live in core housing need, with lone parent households (32%) at higher rates¹⁰.

¹ Health Canada. 2021. Portrait of youth in Canada: Data report Chapter 1: Health of youth in Canada. Accessed June 2021: <u>https://www150.statcan.gc.ca/n1/en/pub/42-28-0001/2021001/article/00001-eng.pdf?st=Bs0s-oRX</u>

²Public Health Agency of Canada. 2016. Suicide in Canada: Infographic. Accessed June 2021: <u>https://www.canada.ca/en/public-health/services/publications/healthy-living/suicide-canada-infographic.html</u>

³ Common examples of unintended or accidental death in youth are falls, car and bike accidents, drowning, and choking.

⁴ McConnel et al. 2016. Suicidal Ideation Among Adults with Disability in Western Canada: A Brief Report.Community Ment Health J (2016) 52:519–526 and Moses, Tally. 2018. Suicide Attempts Among Adolescents with Self-Reported Disabilities. Child Psychiatry & Human Development. 49: 420–433.

⁵ Statistics Canada. 2019. Indigenous people with disabilities in Canada: First Nations people living off reserve, Métis and Inuit aged 15 and older. <u>https://www150.statcan.gc.ca/n1/daily-quotidien/191212/dq191212c-eng.htm</u>

 ⁶ Statistics Canada. 2019. Suicide among First Nations people, Métis and Inuit (2011-2016): Findings from the 2011 Canadian Census Health and Environment Cohort. <u>https://www150.statcan.gc.ca/n1/en/catalogue/99-011-X2019001</u>
⁷ See the Homeless Hub : Youth <u>https://www.homelesshub.ca/about-homelessness/population-specific/youth</u>

⁸ Sophie Mitra, Michael Palmer, Hoolda Kim, Daniel Mont, Nora Groce, Extra costs of living with a disability: A review and agenda for research, Disability and Health Journal, Volume 10, Issue 4, 2017, Pages 475-484.

⁹Inclusion Canada. 2013. Assuring Income Security and Equality for Canadians with Intellectual Disabilities and their Families.<u>https://inclusioncanada.ca/wp-content/uploads/2018/05/CACL-Brief-Finance-Committee-Income-Equality-in-Canada-April-2013-2.pdf</u>

¹⁰ Canada Mortgage and Housing Corporation. 2018. Population with Disability in Housing Need by Sex and Living Arrangement. <u>https://www.cmhc-schl.gc.ca/en/professionals/housing-markets-data-and-research/housing-data/data-tables/household-characteristics/population-with-disability-housing-need-by-sex-living-arrangement</u>

- **Minors with disabilities too often feel like burden to their families:** 1 in 4 Canadians with disabilities cannot afford necessary aids, devices, or prescriptions.¹¹ Minors are aware of the parental stress created by bureaucratic and unfeeling systems; leading them to think of themselves as a burden.
- Minors with disabilities are often ostracized and segregated: "This can impact mental, social, and emotional wellbeing increasing the likelihood of depression, anxiety, loneliness, and low self-esteem¹².
- **Minors with disabilities are more likely to have experienced abuse**: Children with intellectual disabilities are more likely to experience abuse¹³. This can lead to perceptions that their life is not valued, and neither are they worthy of life.
- Minors with disabilities are overrepresented in child welfare and move between foster homes more frequently. Suicide attempts are more than three times as likely in young people in care compared to non-care populations¹⁴.
- Health care practitioners may have an outsized influence: When assisted death is framed as medical "treatment", the possibility or desirability of more complex, longer-term, life affirming interventions that lie outside the health care system may be eclipsed from view.

To this point, Canada's mature minor doctrine has evolved in response to disputes where a) a minor has disagreed with their parent or guardian about a particular healthcare decision (e.g., abortion), and b) where healthcare decisions triggers child protection laws (e.g., refusing life sustaining treatment). On a case-by-case basis, courts have decided whether or not circumstances allow for the standard process of consent to be modified, allowing for a mature minor to make their own healthcare decisions.

The process by which a court reviews and assesses a minor's maturity and capacity for decision making in exceptional circumstances is a vitally important protection in and of itself. It would be extraordinary for the government to usurp the role of the courts in assessing individual eligibility

¹¹ Morris, Stuart, Gail Fawcett, Laurent Brisebois, Jeffrey Hughes. 2018. A demographic, employment and income profile of Canadians with disabilities aged 15 years and over, 2017. Canadian Survey on Disability Reports. Statistics Canada. <u>https://www150.statcan.gc.ca/n1/pub/89-654-x/89-654-x2018002-eng.htm</u>

¹² See Campbell, W.N., Missiuna, C., & Vaillancourt, T. 2012. Peer victimization and depression in children with and without motor coordination difficulties, Psychology in the Schools 49: 328-341.

And Hawker, David, and Michael Boulton. 2000. Twenty Years' Research on Peer Victimization and Psychosocial Maladjustment: A Meta-analytic Review of Cross-sectional Studies. The Journal of Child Psychology and Psychiatry and Allied Disciplines 44(1): 441-455.

¹³ Poverty and gaps in disability supports have been identified as part of the bigger picture as to why children with disabilities end up in care.

¹⁴Evans et al. 2017.Comparison of suicidal ideation, suicide attempt and suicide in children and young people in care and non-care populations: Systematic review and meta-analysis of prevalence. Children and Youth Services Review 82: 122-129.

in exceptional circumstances. The alternative, legalizing MAiD for minors more broadly, would be utterly irresponsible & unconscionable.

Inclusion Alberta is a family-governed non-profit federation that advocates on behalf of children and adults with developmental disabilities and their families in their desire to be fully included in community life.