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**The Right to Choose: Who Does it Belong To?**

 Seven years old. Second grade. It’s Ashley’s birthday. Happy birthday Ashley! A few months after she turned seven, and after being sick for over a month with no explanations except “It’s a virus, just let it run its course”, Ashley Anderson went to the doctor and had blood drawn for testing. Just a few hours later, her mother received a phone call that changed Ashley’s life forever. Ashley had cancer. Acute Mylegenous Leukemia, or AML, was the name of her life-threatening disease. As a seven-year old girl, Ashley should have been thriving in second grade, laughing and playing with her friends. She was not meant to be going into an emergency room, being admitted to the cancer floor, and being placed in the competent hands of numerous doctors who would make the decision to begin chemotherapy immediately in attempt to put Ashley into remission. The odds were not in her favor, as just short of nine months later, Ashley lost her courageous battle with cancer after undergoing a bone marrow transplant, many rounds of chemotherapy, and three brain surgeries. As a seven-year old girl with a life threatening disease, Ashley had to grow up and mature very quickly. And, in a hospital inundated with many other patients battling cancer, Ashley and her parents had to make many decisions regarding medical treatment. Sometimes, Ashley was asked how she felt about treatment and whether or not she wanted to go through it, and other times her parents and her doctors made the decision for her disregarding her opinions. Today, many patients like Ashley struggle to get their voices and their feelings heard and listened to by their doctors. Some doctors feel as if patients as young as Ashley was do not get to make decisions that could determine life or death, while others feel as if ill minors should be given full rights and treated just as any adult would be treated. Therefore, for cases like Ashley’s, a topic of children’s rights as a patient is very important and often takes the front seat in many hospital discussions. If your child was seven and battling Leukemia like Ashley was, would you allow him or her to make a decision regarding medical treatment? Or would you ignore your child and declare that doctors and adults know best?

***PRO: Ill minors SHOULD have the right to refuse treatment***

 One of the main arguments made in a discussion about the rights of ill minors is that children should be granted the same rights and opportunities to voice their opinions as adults. Every day, children of all ages fight deadly diseases: cancers, bacterial infections, viruses, the list is never ending. As children fight these diseases, their parents, armed with teams of doctors and nurses, are forced to make tough and risky decisions that could potentially result in unfortunate outcomes, such as death, for the child. Most times, these choices are made after consultations with numerous doctors, surgeons, and specialists. Recently however, the children who are actually living the nightmare have been granted the opportunity to make a decision, or help influence one that could change their lives. In an article written by Patrick Barkham, a thirteen year old girl named Hannah Jones chose to turn down a heart transplant that had the potential of saving her life. Jones felt that she had struggled for too long and wanted to live a normal life, one without hospitals and treatments every week. She was forced to grow up and mature quickly, and to evaluate her doctor’s ideas for treatment as if she were an adult. Of course, Jones was not forced to make any of the choices herself; she simply concluded that the transplant was not a risk she wanted to take. She stated in the article, “"I'm not a normal 13-year-old," Hannah told the Daily Mail, “I’m a deep thinker. I've had to be, with my illness. It's hard at 13, to know I'm going to die, but I also know what's best for me" (Barkham para 11). Jones knew that this was the best resolution for her, her body, and her disease. Children like Hannah, who go through the daily struggle of fighting these types of diseases, know what is best for themselves regardless of what the doctors think. Furthermore, many of their parents feel the doctors should not only be speaking with themselves, but also with their ill children. In an article titled, “Respect Grows for Sick Kids’ Wishes”, Dr. Ellen Tsai, head of the pediatric intensive care unit, stated, “There are some parents I know of 13- and 14-year-olds who say, 'You can talk to me about this, but you really should be talking to my child.' Some of those parents have opinions, but they also respect their child's right to make decisions and have a voice in their own health care,” says Dr. Ellen Tsai” (Pigg para 9). Dr. Tsai is directly stating that the parents are asking for the doctors to listen to their children’s wishes, instead of turning to the parents to make the decisions. This clearly shows how ill minors have developed and matured beyond their years, and parents have realized their children should be able to make the right decision. Dr. Tsai’s statement also supports Hannah’s choice in refusing treatment as well as the idea that children are capable of making a life-altering decision regardless of their age.

 Moreover, many ill minors have evaluated and ultimately refused treatment due to their religious beliefs which often go against their doctors’ wishes. One article written by Janet I. Tu discusses the story of a teenage boy who refused blood transfusions for leukemia due to his religious beliefs. He was a Jehovah’s Witness and he believed that each person’s blood is unique and should not be used for human aid, but instead given to God. This boy’s choice was brought before a jury and a judge, and after much discussion the judge ruled in his favor saying that the boy was allowed to make his own conclusions regarding his own medical treatment. (Tu para 7-14). This story is significant in that it causes a person to consider the various religious views that can have an influence on whether or not a minor decides to undergo treatment. According to Barkham, Pigg, and Tu, ill minors have the undoubtable right to decide whether they should undergo treatment. Therefore, if ill children have endured diseases so terrifying and frightening to come as far as making a decision about a medical treatment or surgery, then they are competent to examine the risks, the benefits, and how their personal beliefs and feelings would be impacted. Ultimately, they can make the best decision for themselves and their bodies.

***CON: Ill minors should NOT have the right to refuse treatment***

 One of the key arguments that many people make as to why ill minors should not have the right to refuse treatment is that children lack something that adults have: maturity. Maturity is what influences the way a person thinks and how he or she makes concluding decisions. Until the child reaches the age of eighteen, it is argued that they should not be able to have an opinion in refusing a life-saving treatment. When an ill minor is faced against a deleterious disease, many people believe that only adults can have the rectitude to make the best judgment for the child. An article written in 2008 described a court order in Hamilton which forced an eleven-year old boy to receive chemotherapy. Though the boy previously had to suffer through chemotherapy once when he was seven years old, the court believed it was indubitable that the boy must take it again. Refusing the treatment would have inevitably resulted in death. This young boy wanted to refuse the treatment and try natural remedies because he already knew how painful chemotherapy was. He had lost faith in chemotherapy being able to eradicate his disease. Yet, the article argues that this child didn’t have the same capacity that adults have to understand what the consequences are by refusing treatment. According to the article, “It strains credulity to think that any 11-year-old has enough understanding of life to be able to weigh what he is giving up in making a decision to forgo potentially life-saving treatment” (“A Child Can’t Weigh Life and Death”). Another key argument that many people make concerning this issue is that is it the role of the parents to protect their children from harm and to take advantage of every opportunity to ensure their child is healthy. In another case of a thirteen-year old boy from Minnesota, a mother tried to urge her son, Daniel, to refuse treatment due to religious reasons. The article states, “Colleen Hauser is free to suffer and even die for her faith or cause. But she's not free to make her son Daniel suffer and die.” Though a person has every right to enjoy the freedom of religion, that right of theirs diminishes when “someone else’s right begins” (Dennis). The article argues that parents have the duty to make the right decisions for their kids. A third key argument that faces this issue is that children who are ill are sometimes incompetent to make the right decisions for themselves. A young girl in Newfoundland was pronounced mentally ill for consistently consuming metal objects. However, she was tenacious in saying that she would deny all forms of treatment for herself. A court case ruled that this sixteen-year old girl did not have the right to make treatment decisions for herself. “Her illness prevents her from understanding that she will succeed in killing herself unless properly treated” (Makin). Though she was sixteen and appeared to have enough maturity to decide her route, she didn’t have the capacity to understand how pernicious her illness was. The article claims that this case was incontrovertible and it was necessary for her to go through treatment.

***PRO: Sara’s Personal Viewpoint***

When children are sick with a life-threatening disease, their battle to survive is often a long journey consisting of treatments, medical experiments, surgeries, and various dosages of medicine. For these children, they are forced to grow up and mature very quickly. It is amazing that young children, even those who are six or seven years old, have the ability to evaluate the outcomes of a situation to help make a potentially life-changing decision. Therefore, I believe that children are more than capable of making a decision regarding medical treatment and whether or not they feel comfortable undergoing it. After all, many of these children have faced death before, or have discussed it because of their situations. Some people feel that children do not have the ability to make such a decision; however, this is not true. These children who are ill are more mature than other kids their age. They act beyond their years because they are dealing with terrible diseases, ones that children should never have to endure. With these diseases, kids go through the unimaginable and if the time comes to make a decision that could result in the potential for them to survive or for them to loose their lives, then they deserve to help make that decision. Kids act as adults in these types of situations and no person should be deprived of their opinions or thoughts because of their age. I am not saying that a two year old is capable of deciding whether or not they should have a bone marrow transplant if they have cancer, but any child who is able and willing to weigh the risks, the potential outcomes, and the outlook for their future is deserving to make the decision themselves. Furthermore, like Ashley and Hannah’s story, these kids have grown up so quickly that it is often hard to believe that they are only children. Some kids, like Hannah, spend over half their lives living in the hospital, undergoing constant treatments in hopes of curing their diseases. Sometimes though, the kids know best in these situations. They are the ones who endure these difficult diseases, treatments, and surgeries, so they are more than qualified to make decisions regarding medical treatment that could change their lives forever.

***CON: Tarika’s Personal Viewpoint***

 There are often times when we look at a young boy or girl who has to go through traumatizing treatment to cure their illness and we start to think to ourselves, “That treatment is making them suffer. We have to make that child happy and we must not force him or her to take that medication.” We know that if it was that child who could pick whether he or she took the treatment or not, he or she would refuse it. However, the fact is that whether they are taking the treatment or not, that child will be suffering. Not taking the treatment will inevitably make their illness worse; taking the treatment will unfortunately force the child to go through a rough journey to cure. Though we see a child suffering through painful medication, the chances of that child being healthy again are high. Therefore, it is because of this that ill minors should not have the right to refuse treatment. Any ordinary child will refuse treatment because they want to be able to live that normal life they once had. Instead of going to the hospital for treatments or missing out on school, the child wishes to go back to being able to go out with friends and discuss yesterday’s history test. Furthermore, I agree with one of the articles stated above in that children do lack the maturity to differentiate between what is really right for themselves. Any normal kid who wants to avoid the pains of chemotherapy or other types of treatment would refuse it but later on have to face the consequences. However, what they don’t realize is that the consequences for refusing treatment can potentially put themselves in a life or death situation. Though there are many illnesses which actually stimulate a child’s growth and rapid maturity, ill minors are still incapable of making critical decisions for themselves when they have not lived through the same experiences and gained the same amount of wisdom as their parents and doctors. After having a younger cousin being diagnosed with Hodgkins-Lymphoma at the age of twelve, and after seeing her suffer through the doses of chemotherapy but having a successful battle, I have realized my cousin would not have survived had her parents allowed her to make the decision to refuse treatment. Though her illness caused her to mature quicker than other children at that age, she was neither experienced nor competent enough to understand the consequences of refusing treatment. She was lucky to have had parents to make the right decision for her. Sure, there are some parents out there who want to honor their children’s wishes and make them happy by not forcing them to take the treatment. Some parents believe they are doing what’s best for their child as long as they are making them happy. However, what these parents don’t realize is that they are not fulfilling their vital role to protect their children. Children don’t have the right to refuse treatment because they have their parents and doctors to make such critical decisions for them. It is the parents who must do their job in making sure their kids are healthy and are getting all the help they need when it comes to having an illness.

***Negotiation***

 Whether an ill minor should have the option in refusing treatment is a very contentious topic. One argues that they are old enough while the other argues they are too young. One argues they are mature enough, while the other argues they have not matured enough. To what extent exactly, should these minors be able to have the option to refuse treatment? In coming to an agreement, both Sara and I feel that minors should be allowed to voice their opinions and they should be taken into consideration by the parents and doctors. Because children know they will be inundated with doses of medication if they follow through with the treatment, we believe their opinions should not be completely squelched. After all, it is the child that has to go through the traumatizing treatment, not the adults. It should be required by law that doctors and parents need to listen to the child’s opinions; however, they do not have to base the final, medical decision solely on what he or she says. If the child were to say that he or she wants to refuse treatment, the parents and doctors need to weigh the risks and the benefits and create a plan of action as if they were to follow that route. Also, the parents need to discuss the actuality of the situation with their child. They need to make sure the child understands what he or she could be giving up. However, after taking into consideration the child’s opinions, we feel that the doctors and the parents are ultimately the most qualified to make the best decision for the child’s well-being.

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