



18-YEAR-OLD ETHAN

AN INVESTIGATIVE REVIEW

Office of the Child and Youth Advocate, Alberta
April 2026

LEGISLATIVE AUTHORITY

Under my authority and duty as identified in Section 9(2)(d) of the *Child and Youth Advocate Act (CYAA)*, the following is an individual investigative review regarding Ethan. His circumstances meet the criteria for a **systemic review**. Ethan and his family had received Child Intervention through an Assessment within two years of his passing.

Investigative reviews are designed to improve the lives of young people by identifying ways to enhance services and supports, leading to system improvements and better outcomes for young people and their families. Releasing individual reviews ensures that each young person's circumstance is reported in a consistent manner and provides increased transparency and public accountability. I believe that this is in the public interest. I will review and report annually on themes identified across the investigative reviews and include recommendations.

The investigation process includes:

- Examination of critical issues
- Review of documentation and reports
- Review of policy and casework practice
- Personal interviews
- Other factors that may arise for consideration
- Notification and involvement of the young person's family, Band, Delegated First Nation Agency, community or cultural group, relevant Ministry, law enforcement agency, Office of the Chief Medical Examiner, Alberta Health Services, and any other person the Advocate considers appropriate.

In accordance with the *CYAA*, investigative reviews must be non-identifying. Therefore, the names used in these reports are pseudonyms (false names). Great care has been taken to protect their privacy; however, there is no guarantee that interested parties will be unable to identify them. Accordingly, readers and interested parties, including the media, should respect this privacy and not focus on identifying the individuals and locations involved in these matters.

Investigative reviews do not contain findings of legal responsibility or conclusions of law nor replace other processes that may occur, such as investigations or prosecutions under the *Criminal Code* of Canada. The intent of a review is not to find fault with specific individuals but to identify key issues and meaningful findings.

Ethan's experiences were unique, and he left a lasting impression on those who knew and loved him. My heartfelt condolences go out to Ethan's family and those who cared about Ethan.

Respectfully,

[Original signed by Terri Pelton]

Terri Pelton

Child and Youth Advocate (Alberta)

ABOUT ETHAN AND HIS FAMILY

Ethan¹ was 18 years old when he was found deceased in the community. The Office of the Chief Medical Examiner concluded that he died from the toxic effects of cocaine. Ethan and his family had received Child Intervention through an **Assessment**² within two years of his passing.

Ethan was a curious, protective, and charismatic young man. He loved hockey, played guitar and piano, and regularly attended concerts. Ethan's parents, Finn and Felicia, separated when he was four years old. They shared custody and co-parented Ethan and his younger sister, Elena, until Finn passed away when Ethan was 13 years old.

SUMMARY OF ETHAN'S EXPERIENCES WITH GOVERNMENT SYSTEMS

Ethan from Birth to 12 Years Old

Felicia received prenatal care, and Ethan was born healthy. At a year old, he had surgery to remove a birthmark. He had a family doctor and received routine medical care throughout his childhood. Ethan and his family had limited involvement with government systems over the next three years, and little is known about his circumstances.

When Ethan was four years old, Child Intervention received a report about neglect related to Felicia's declining mental health and Finn's difficulty managing his anger. Ethan required medical attention for a minor injury but was not taken to a doctor. His parents were encouraged to access medical and mental health care for their children and themselves, but they struggled to do so, and a **Supervision Order** was obtained.

During this time, Felicia and Finn separated and began to share custody of their children. She was hospitalized following a suicide attempt. A psychiatric assessment indicated she had recovered and could look after her children. Felicia accessed therapy for Ethan, Elena and herself, addressed the children's medical needs, and involvement ended.

Two years later, Child Intervention received a report about emotional injury. Felicia was hospitalized for mental health concerns. Finn told caseworkers that he feared she would harm their children, while Felicia voiced concerns that Finn had abused Elena. A family meeting was held, and it was determined that Ethan and Elena would stay with their grandparents until the concerns could be addressed.

Felicia had supervised visits with Ethan and Elena; however, Finn declined to participate

in safety-planning meetings. Shortly after, the children were returned to their mother, and she entered into an **Enhancement Agreement (EA)**. She agreed to go to therapy, arrange counselling for the children, and take a parenting after separation course. Felicia developed a support network and demonstrated that she and Finn could cooperatively co-parent, and involvement ended.

Ethan attended the same school from Grades 1 to 3. He was a strong student and actively participated in classes. Teachers noted that, at times, he was easily distracted. When Ethan was nine years old, his family moved to a rural area, and he started a new school in Grade 4. He did well academically but had difficulty staying focused. Ten-year-old Ethan was bullied, and his parents moved him to another school halfway through Grade 5, where he remained until the end of Grade 8. He met with a therapist several times, and after changing schools, his mental health improved. Teachers noted that Ethan had difficulty with organization, completing assignments on time, and staying focused; he did not receive additional supports.

Ethan from 13 to 18 Years Old

Following a routine medical appointment, 13-year-old Ethan and his sister, Elena, were both diagnosed with diabetes. They were connected to a specialized clinic, and the family traveled to the city for appointments. Ethan received support from doctors, dietitians, and nurses and he learned to monitor his sugar levels.

When Ethan was in Grade 7, the COVID-19 public health measures were put in place, and school transitioned to online learning. He struggled with the change and his attendance declined throughout junior high school. Ethan's attendance was poor making it difficult for teachers to assess him academically.

Later that year, Finn passed away following an accident and the family went to stay with their uncle, Monty. Felicia was hospitalized after a significant incident of self-harm. Monty cared for Ethan and Elena. Shortly after, Child Intervention received a report about neglect related to Monty's understanding of the children's care. Felicia stayed with her mother after her discharge, and Monty received education about diabetes management. An assessment of the impact of Felicia's mental health on Ethan and his sister did not occur; intervention involvement ended. Weeks later, Ethan and Elena moved back in with their mother.

At 14 years old, Ethan attempted suicide and was taken to the hospital. He was discharged to Felicia's care with education on mental health and coping skills. Hospital staff encouraged Ethan to access community-based mental health services, but he declined. He remained connected to his medical team to manage his diabetes.

1. All names in the report are pseudonyms.
2. Bolded terms are defined in Appendix A.

During high school, Ethan attended outreach programs. He struggled to engage with school and complete coursework on his own. Efforts to engage him in his education were unsuccessful.

Shortly before his 16th birthday, Ethan contacted the police and reported past and ongoing abuse. Felicia shared her history of mental health concerns and the impact they had on Ethan during his early childhood. The police developed a safety plan for Ethan to temporarily stay with family friends.

Child Intervention received a report about emotional injury related to Ethan's mental health needs being unmet. While speaking with caseworkers, it was noted that his thoughts were disorganized, and he was voluntarily admitted to a psychiatric unit where he remained for one month. Ethan shared that he had used cannabis for the past two years and was diagnosed with psychotic and substance use disorders. When he was discharged, he was referred to a psychosis intervention program and worked with them until his passing.

Child Intervention remained involved while Ethan's mental health stabilized. He told caseworkers his concerns about living with his mother. A safety plan was developed that included Ethan living with relatives while Felicia received in-home support for parenting. Intervention involvement ended after the safety plan was implemented, and weeks later, Ethan returned home. Child Intervention did not have further involvement with the family.

Over the following year, Ethan was supported by psychiatrists, nurses, and psychologists at the psychosis intervention program. He had monthly injections for anti-psychotic medication, and his team monitored his medications and discussed strategies for managing his diagnoses. Ethan worked with psychologists on grief and loss, self-esteem, communication skills, and decision-making.

During this time, Ethan's substance use escalated to include cocaine. He asked for help and was connected to addiction counsellors through his school, whom he met with regularly. They encouraged Ethan to attend in-patient treatment and peer support groups, but he refused.

When Ethan was 17 years old, he was taken to the hospital multiple times because of his substance use, mental health concerns, and complications with his diabetes. He was often held overnight for monitoring, discharged with education about managing diabetes, and cautioned about the impact of substance use on his mental health. Once, Felicia voiced significant concerns about him returning home and a safety plan was developed before he was discharged to her care. Days later, his psychiatrist indicated that Ethan should be admitted for review and stabilization if he returned to the emergency department.

Two months later, Ethan was admitted to the intensive care unit following a severe diabetic

incident. Once his physical health stabilized, he was transferred to a psychiatric unit where he remained for two weeks. He was discharged with recommendations to meet with his psychiatrists and access community-based mental health supports, which he did. Felicia was given information about confining Ethan under the *Protection for Children Abusing Drugs Act*, which did not occur.

Over the next five months, Ethan met regularly with his psychosis intervention team and pediatric diabetes specialists. His medical care was gradually transitioned to adult services. It was noted that his ongoing substance use impacted his physical and mental health conditions. His psychiatric team encouraged Ethan to stop using substances and he continued to work with an addiction counsellor.

Ethan stopped attending psychiatry appointments and missed his antipsychotic injections. Psychiatrists spoke to Felicia and cautioned her that without medication, he was at high risk of relapsing. He did not return for subsequent injections. His psychiatric team continued to reach out and encouraged Ethan to attend appointments without success.

Two months later, 18-year-old Ethan was taken to the hospital. He had been using cocaine, had erratic behaviours and a severe diabetic emergency. He received diabetes treatment but refused to speak with psychiatry and left the hospital against medical advice.

Within days, Ethan was found deceased in the community. The Office of the Chief Medical Examiner concluded that he died from the toxic effects of cocaine. A funeral was held in his honour. Ethan is deeply missed by those who knew and loved him.

TIMELINE OF SIGNIFICANT EVENTS

Birth to 12 Years Old	13 to 18 Years Old
<ul style="list-style-type: none">• 1 Year Old<ul style="list-style-type: none">· Surgery to remove birthmark• 4 – 5 Years Old<ul style="list-style-type: none">· Child Intervention involvement<ul style="list-style-type: none">· Supervision Order· Parents separated• 7 Years Old<ul style="list-style-type: none">· Child Intervention involvement<ul style="list-style-type: none">· Enhancement Agreement• 10 Years Old<ul style="list-style-type: none">· Bullied at school· Therapy	<ul style="list-style-type: none">• 13 Years Old<ul style="list-style-type: none">· Diagnosed with diabetes<ul style="list-style-type: none">· Connected to specialized clinic· Online learning· Father passed away· Child Intervention involvement• 14 Years Old<ul style="list-style-type: none">· Attempted suicide· Cannabis use began• 15 Years Old<ul style="list-style-type: none">· Child Intervention involvement• 16 Years Old<ul style="list-style-type: none">· Hospitalized in psychiatric unit<ul style="list-style-type: none">· Diagnosed with psychotic and substance use disorders· Accessed a psychosis intervention program· Began anti-psychotic medication· Therapy· Used cocaine and cannabis· Addiction counselling• 17 – 18 Years Old<ul style="list-style-type: none">· Multiple hospital visits for substance use, mental health, and diabetes-related concerns· Admitted to intensive care for diabetic complications· Stopped taking anti-psychotic medication· Hospitalized for cocaine overdose and diabetic complications<ul style="list-style-type: none">· Left against medical advice <p>18-year-old Ethan passed away</p>

FINDINGS

Children and Family Services

In his first 12 years, Child Intervention was involved with Ethan and his family twice because of his parents' mental health concerns. They received timely services through orders and agreements and were appropriately connected to in-home supports and counselling.

When Ethan was 13 years old, Child Intervention received a report about neglect. His uncle was providing care while Felicia sought treatment for her declining mental health and Monty was unsure of how to manage Ethan's medical needs. Although Felicia's history of mental health was known, the **Intake** concluded without considering the impacts of ongoing exposure to Felicia's mental health concerns.

Child Intervention became involved with Ethan's family again shortly after his 16th birthday because of emotional injury related to his declining mental health. During this time, Ethan was voluntarily hospitalized. Caseworkers collaborated with hospital staff to understand his diagnoses, met with the family regularly to discuss services and develop safety plans, and provided in-home supports before involvement ended.

Health and Mental Health and Addiction

Ethan received routine and timely health services throughout his early childhood. At 13 years old, he was diagnosed with diabetes and was supported by a team of specialists.

At 16 years old, Ethan was hospitalized and connected to a psychosis intervention program. He was supported by psychiatrists, nurses, and psychologists. As his substance use escalated, he received timely referrals to addiction counsellors. Ethan stopped attending appointments shortly after his 18th birthday and efforts to reengage him in services were unsuccessful.

Education

Throughout elementary school, education staff noted that Ethan struggled with focus, organization, and completing assignments on time, but he did not receive additional supports. Ethan may have benefited from an assessment to identify his specific needs to inform educational services.

By Grade 8, Ethan disengaged from school and his poor attendance made it difficult to assess him academically. It is unknown if he received additional supports to reengage him in his education.

THEMES TO TRACK

1. Intake process in child intervention services

Ethan and his sister required a robust intake process that considered the impacts of ongoing exposure to their mother's mental health concerns.

2. Assessment

Ethan would have benefited from an educational assessment to identify his specific needs and inform educational supports.

3. Mental health and addiction services

Ethan received timely and appropriate mental health and addiction services.

4. Toxic drug supply

Ethan started using substances at 14 years old and died from drug toxicity when he was 18 years old. The Advocate remains deeply concerned about the number of young people dying from drug toxicity.

APPENDIX A: GLOSSARY

Assessment

The gathering and analysis of information to determine whether a child is in need of intervention under the *Child, Youth and Family Enhancement Act*.

Enhancement Agreement (EA)

A voluntary agreement under the *Child, Youth and Family Enhancement Act* to provide services and support to a family. It is intended to address protection concerns while the child remains with a guardian.

Intake

A report completed when Child Intervention Services receives a community or professional concern about possible risk to a child as per the *Child, Youth and Family Enhancement Act*.

Supervision Order (SO)

A court order granting the “Director” as defined in the *Child, Youth and Family Enhancement Act* mandatory supervision of a young person. Guardians retain custody.

Systemic Review

Under the *Child and Youth Advocate Act*, the Advocate may conduct a public review when a young person is seriously injured or dies while (or within two years of) receiving designated services (*Child, Youth and Family Enhancement Act* intakes, assessments, post-18 supports, was in open or closed custody under the *Youth Criminal Justice Act*, and/or involvement under the *Protection of Sexually Exploited Children Act*) to determine if systemic issues are present.

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