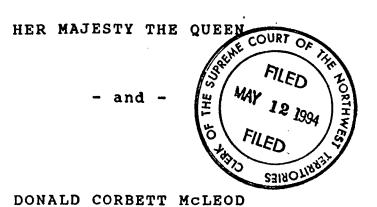
IN THE SUPREME COURT OF THE NORTHWEST TERRITORIES



Reasons for Judgment and Sentence given by The Honourable Mr. Justice J.Z. Vertes, at Arctic Red River, Northwest Territories, on the 14th day of April A.D. 1994

APPEARANCES:

A.R. Regel, Esq., Appeared for the Crown

J.U. Bayly, QC, Appeared for the Defence

Cheryl Mendryk, Ms., Court Reporter

(Charged under Section 234 of the Criminal Code)

THE COURT: Donald Corbett McLeod has entered a plea of not guilty to a charge of manslaughter; specifically, causing the death of his 7-month-old daughter, Raquel.

The undisputed expert evidence is that Raquel died on November 21, 1992 as a result of what is known as "shaken baby syndrome." That is to say, after being violently shaken, causing subdural hemorrhage and a swelling of the brain leading, in the absence of drastic medical intervention, to unconsciousness and death. The issue I have to decide is whether the Crown has proven beyond a reasonable doubt that it was the accused who shook this baby.

Before discussing the evidence, I wish to make some general comments about the crime of manslaughter. In doing so, I rely to a great extent on the majority decision of the Supreme Court of Canada in the recent case of R. v. Creighton.

Manslaughter is the unintentional killing of another person. A person convicted of manslaughter is not a murderer. Murder is the intentional killing of another person. Someone convicted of manslaughter did not intend to kill the victim, but a death resulted from the fault of that person. The fault may arise from criminal

negligence or it may arise as the unintended result of a lesser unlawful act.

Manslaughter, whether it be the result of an unlawful act or criminal negligence, only requires reasonable or objective foreseeability of the risk of bodily harm. If it is the consequence of criminal negligence, the behavioral norm is that of the reasonable person in all cases. It does not vary depending on the personal characteristics, short of incapacity, of the accused. There is no requirement of foreseeability of death.

In my opinion, the shaking of this baby would be an assault which is an unlawful act. Any reasonable person in these circumstances would foresee the risk of bodily harm. The violent shaking of a 7-month-old infant would also be a marked departure from the standards of a reasonable person; and therefore, constitute criminal negligence.

Both the Crown expert, Dr. Jennifer Rice, and the Defence expert, Dr. Graeme Dowling, testified that a significant degree of force is required to cause the harm inflicted. They both said that a normal adult would have to appreciate that the force being used was excessive. Hence, I have no hesitation in concluding that the shaking of

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Raquel, the shaking that led to her death, constitutes manslaughter.

The evidence revealed that while Raquel was almost 7 months old, she was born 2 months prematurely, so she was much smaller and less developed than a normal infant of her age. On the date of her death, and the day before, she was sick. She suffered from a fever, she would not take her food, she vomited frequently, she had a cough, and was alternately cranky and listless. Her mother, Lois Blake, gave her Children's Tylenol. This is recorded in the toxicology report submitted as an exhibit. The child was not, however, apparently so sick as to prevent her parents from going out.

I accept as fact that on November 20 and 21 two young girls, Lena Andre and Patricia Ross, were at the McLeod-Blake household helping to care for the baby. They stayed at the house overnight on November 20th. They were there during the day on November 21st. Both the accused and Lois Blake came and went from the house. The question of who came and went when on November 21st is of some importance.

Lena Andre said that both the accused and Ms.

Blake went out in the afternoon. She and Patricia
took turns caring for the baby. Lena said that

Donald came back later and she left about half an hour after that. Patricia stayed behind.

Patricia Ross said that the accused and Ms.

Blake came back to the house several times that afternoon. She also said that at times she was alone with Raquel and at other times Lena was alone with Raquel. She knew the baby was sick because Lois told her and because the baby vomited on her a couple of times.

Patricia said that the accused came home and then Lena left. After a short time she left. I take from her evidence that this must have been sometime later in the evening, because she also said that when she left the McLeod-Blake household she went to a friend's place, and about 10 to 15 minutes later somebody came and said the baby was dead. But I am satisfied that whatever the exact time was that the accused came home, that he then took control of the child.

Both Lena and Patricia denied grabbing and shaking the baby at any time. They also said the baby, while sick, had no difficulty breathing.

Lois Blake testified as to the baby being sick. She said, however, that she did not leave the house until after 6 or 7 p.m. on November 21st. The accused had gone out before then. When she left, the two babysitters were with Raquel.

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She also testified that she came back a few hours later to check on Raquel and then left again. She did not return again until she was told to come quickly because her baby could not breathe.

Lois Blake, as well, denied grabbing and shaking the baby.

I have to say that I approach Ms. Blake's evidence somewhat cautiously since she could not recall some events (such as the babysitters staying overnight) and because, as she acknowledged, she had been drinking that day.

The accused testified that he came home between 5 and 5:30 p.m. He took the baby into the bedroom. Sometime later the babysitters left, first Lena and then Patricia. He then did various things with the baby. He said she started crying; he changed her diaper; he tried to feed her; she was cranky, so he walked her; he tried to get her to sleep, so he put her in her crib in the parents' bedroom. He then laid down on the bed.

A certain time frame can now be put on the sequence of events, since we have the evidence of Olive Blake, Lois' mother, which I accept, who said that around 9:30 p.m. she came to the house. Only the accused and Raquel were there. The accused was lying on the bed. She asked him where Lois was and he said "I don't know." She also

said that Raquel was in her crib and she was awake. Mrs. Blake then left.

The accused went on to testify that afterwards the baby was crying, so he put her on the bed. He said she was lying on her back, she was awake, she was moving her hands, and she was trying to crawl towards him. He said he went to the bathroom. He then went to the window to see if Lois was coming home. He then went back to the bathroom. He said that then he heard a bang and he saw Raquel on the floor. He said she made some squirming noises, then went stiff, and then went limp. He put her on the bed. He said she was making funny noises and having trouble breathing. He then tried respiration by breathing into her mouth. He said he heard a skidoo and went to the window and saw David Kendo.

David Kendo testified that between 10 and 10:30 p.m. he was driving past the McLeod-Blake house when the accused yelled at him. The accused asked him to go get Lois because the baby stopped breathing. The accused told him that Raquel fell off the bed. He then went to tell Lois.

The accused testified that he was scared and kept up his rescusitation attempts. About 15 minutes later Lois arrived with two others, who then took over the attempt to revive Raquel. At

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that point he was exhausted and upset and went to the bathroom where he cried.

Lois testified that when she got home the accused was trying to revive Raquel. He was upset. He told her that the baby fell off the bed.

At 10:30 p.m. the RCMP received a call from the nurse to attend at the McLeod-Blake residence to investigate a sudden death. The accused, at 1:57 a.m., gave a statement to the police in essentially the same terms as his evidence at trial. This statement was ruled admissible and entered as part of the Crown's case.

The accused denied shaking the baby. He also said he was not feeling frustrated or angry, either with the baby or with Lois for being out that evening. There was no evidence to suggest otherwise.

An autopsy was performed by Dr. Rice. She testified that Raquel showed the signs of shaken baby syndrome: bilateral subdural hemorrhage, small localized areas of bleeding behind the eyes, and the lack of any external signs of blunt trauma. Dr. Dowling agreed, and indeed said that he had no doubt that shaken baby syndrome is the correct analysis for the cause of death.

Dr. Rice also found a "pattern" bruise on

Raquel's left cheek caused by a slap to the face, as well as a small cut in the left corner of her mouth. In her opinion, which I accept, this bruise is unrelated to the head injury, but it was caused before death.

Dr. Rice also gave her opinion, with which Dr. Dowling agreed, that the lethal head injury could not have been caused by a fall from the bed. It was an agreed fact that the bed was 21 inches high. Dr. Dowling also said that there may not be any external or internal signs of any such fall even if it did occur.

I also accept Dr. Rice's opinion that the presence of a viral infection (if the baby was sick) or the subsequent attempts at rescusitation would have no effect on the impact of the head injury caused by the shaking. The only way this baby could have survived would have been through intensive and immediate hospital care to reduce the swelling of the brain. I understood Dr. Dowling to be in agreement with this statement.

I pause to note that the shaken baby syndrome is relatively new in that it has only recently been identified and investigated. Apparently, cases of this syndrome are concentrated in infants 6 months old or younger. After that age, children begin to develop sufficient muscular and other

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control so as to dissipate the effects of such shaking. But generally the smaller the infant, the less force that is required.

The point of the controversy in the expert evidence is over the length of time from the shaking to the loss of consciousness and then death.

Dr. Rice gave the opinion that the time span from the shaking to death is variable, but generally is extremely rapid. It could be as short as 2 to 3 minutes. She placed the outside limit as 2 to 3 hours, even though she has heard of a reported case of 4 hours.

Dr. Dowling, on behalf of the Defence,
testified that in the vast majority of lethal head
injuries, unconsciousness is very rapid (in terms
of minutes) if not immediate. Unconsciousness,
without treatment, is then quickly followed by
death. Unconsciousness and loss of breathing
result from the swelling of the brain.

In Dr. Dowling's opinion, it is possible for consciousness to be maintained for up to 2 to 3 hours and he, too, knows of a rare case where it is reported to last for 4 hours. Dr. Dowling testified that, in this case, if death occurred between 10 and 10:30 p.m., which is based on the evidence I accept, then the absolute outside limit

for the time of the shaking would be between 6 and 6:30 p.m.; although, as he qualified it, in the majority of cases, unconsciousness comes within minutes.

period of consciousness there would be certain symptoms, some of them similar to a sick baby, such as lethargy, vomiting, and crying. But he also said that if these symptoms had been seen much earlier than his outside time limit, he could not ascribe these symptoms to the head injury. Of course, the ordinary observer may not distinguish between the two causes of the symptoms.

Defence counsel's position is that this is a question of opportunity. There is no evidence of motive. So there must be proof of exclusive opportunity for the accused to be convicted. That exclusive opportunity can only be based on the expert evidence in this case.

Defence counsel says that if you take Dr.

Dowling's outside limit of 4 hours, then four

people had the opportunity to commit this crime,

for at least four people had access to the child:

the accused, Lois Blake, Lena Andre, and Patricia

Ross. To accept that proposition, of course, I

would have to reject the accused's evidence that

he came home between 5 and 5:30 p.m. Because if

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opportunity, since he took control of the baby
when he came home. But as will be seen and on
reflection, I do not think the determination of an
exact time as to when the accused came home or
when others left is as important as the evidence,
which I have already accepted, that indicates that
death occurred sometime between 10 and 10:30 p.m.

Defence counsel also says that if the shaking occurred earlier, then it may not be unusual to know the symptoms afterwards, which would be the same as the symptoms the baby had been suffering from for the previous two days. Therefore, no one would think anything was wrong.

assumption that this baby would have remained conscious for an appreciable period of time after being shaken. And, if I understand Defence counsel, he says that I should at least have a doubt on this point, based on Dr. Dowling's expanded time limit according to his rare case.

For the reasons that follow, I reject that argument, and with it, I reject the accused's denial that he shook the baby.

Dr. Rice stated, in a very strong opinion, that this baby, once shaken, would be unconscious immediately. She said that there may have been

of unconsciousness would be very rapid. Dr.

Dowling, when asked to comment on this opinion,
said he "cannot say she is wrong." Dr. Rice had
the opportunity to conduct a thorough examination
of the child's body, and I find her opinion to be
compelling and persuasive.

coupling this opinion with the shared opinion of both doctors that in the vast majority of cases unconsciousness and death are very rapid, if not immediate, convinces me that this child could not have been shaken by anyone but the accused.

Furthermore, Dr. Dowling testified that if this child was crawling and alert, then she was not a lethally head-injured child. Dr. Rice testified that this child would not have been lively after being shaken. Yet the accused said that when he first put Raquel on the bed she was, and I repeat, awake, moving her hands, and trying to crawl towards him. If this child had been shaken earlier, she would not be acting like that.

so I cannot conclude otherwise than that the accused at some point between 9:30 and 10 p.m. shook that baby. I need not find motive. The shaking may have been for any number of reasons. But, according to the expert evidence I accept, it

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had to have been of sufficient force that the accused should have or would have known that it was excessive.

This is not to say that the baby may not also have fallen off the bed. That is conceivable. It would also explain the apparent consistency of the accused's statements. But that was not the primary or a contributing factor in the death. In this case, the substance of the expert evidence convinces me that the only reasonable conclusion is that the baby was shaken shortly before the accused noted her breathing problems at a time when he had exclusive access and control of the child.

The onus on the Crown is not to prove the accused's guilt beyond any possible or speculative doubt. The test is whether, in view of the accused's evidence or the evidence as a whole, I am left with a reasonable doubt as to the guilt of the accused. On the whole of the evidence presented in this case, I have no doubt.

I repeat what I said earlier. There is no evidence that the accused intended Raquel's death. The death was the unintended consequences of what I have found to be a dangerous act that the accused should have foreseen would cause harm to Raquel. For these reasons, I find the accused

guilty as charged.

(BRIEF ADJOURNMENT)

THE COURT: Donald Corbett McLeod stands convicted, after trial, of the charge of manslaughter arising from the death of his 7-month-old daughter. I need not recount the facts. Suffice to say that I found beyond a reasonable doubt that the excused caused this child's death through what is termed the "shaken baby syndrome."

In my earlier reasons for judgment I spoke
about the distinction between the crimes of murder
and manslaughter. Manslaughter is the
non-intentional killing of another person.
Because it is non-intentional, it is less
blameworthy than murder, but it is blameworthy
nonetheless and must be punished.

But the punishment for manslaughter also stands in sharp contrast to that for murder.

Murder carries a mandatory life sentence.

Manslaughter carries no minimum sentence, although it does have a possible maximum sentence of life imprisonment.

Because manslaughter can occur in a wide variety of circumstances, the penalties must be flexible. An unintentional killing while committing a minor offence, for example, attracts

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a much lighter sentence than unintentional killing where the circumstances indicate an awareness of risk of death, just short of what would be required to infer the intent required for murder. The sentence should be tailored to suit the degree of moral fault of the offender.

In this case I find it significant that the expert evidence at trial indicated that shaken baby syndrome is a newly identified and investigated syndrome and that case histories reveal that this crime is usually committed by parents or other caregivers who act out of frustration or momentary impulse. In this case, as well, there was no evidence of any malicious intent or pattern of malicious behavior by the accused toward his child. I am satisfied that, although his actions were criminally dangerous, he had no intention to inflict harm. To his credit, he took immediate steps to try to aid his child when he noticed her difficulty in breathing and he sought help. But, as unintended as it may have been, death was the result, and for that he must be punished.

If I look merely at the circumstances of the offence, I would have to say that this is on a scale of culpability on the lesser side. But, to determine overall moral fault, I must also examine

the circumstances of the offender. For, if someone acts violently and that person has a history of violent behavior for which he has previously been sanctioned, then surely his degree of moral fault must be considered as quite a bit higher than someone who acts out of character.

The accused is almost 23 years old.

Unfortunately, he has already accumulated a serious record of criminal convictions, many of them for crimes of violence.

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Since 1987, when he was 16 years old, the accused has been convicted of 14 offences, four of them in Youth Court. He started out with a conviction in 1987 for sexual assault, for which he served 6 months in secure custody. He has, in addition, among his other convictions, three convictions for assault and one for assault causing bodily harm. Three of these convictions arose from situations of domestic violence toward his partner.

As additional aggravation, at the time of this offence he was on probation, as well as on an undertaking awaiting trial on outstanding assault charges.

He has been in pre-trial custody for 17 months, although 6 months were spent serving a sentence. I do, however, take the 11 months spent

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on remand into account and give it proportionately more credit than the time actually served.

In an affidavit submitted by Defence counsel, Willard Hagen, Chief of the Gwich'in Tribal Council, describes the accused as a mild-mannered, polite young man who previously acted in an appropriate and responsible manner with his child. Mr. Hagen formed these impressions while the accused attended his bush camp in 1992 as part of a probation order.

I have no doubt that the accused can be polite, mild-mannered, caring, and responsible at times. But his personal history also reveals that he is, for one reason or several, incapable of controlling his behavior at all times. This may be indicative of why he is now before this Court.

In my opinion, the circumstances of the offence and this offender would mandate a penitentiary term. This is, in fact, what Crown counsel suggests as being appropriate, even if I take into account the time spent on remand.

But, as Defence counsel reminds me, I should keep in mind that Mr. McLeod is still a relatively youthful offender; that any sentence I impose should be structured so that it is constructive as opposed to being destructive, especially keeping in mind what he says has been a particularly

difficult time for Mr. McLeod in remand.

Considering all that has been said and all of the circumstances surrounding this offence, I have decided to structure a sentence that attempts to both denounce this conduct and establish the opportunity for eventual rehabilitation. Will you stand, Mr. McLeod?

Mr. McLeod, the death of your daughter has been a tragedy. It's been a tragedy for your family and for your entire community, and I am prepared to accept that it has been a tragedy for you as well. But you are still a young man. I hope that you will take the time to think about your life, to think about your behavior, and to try to come to control of your behavior, to try to come to grips with your life because you still have most of your life ahead of you. And I am sure through hard work, I am sure through self-awareness, through an understanding of why you may have acted in the past as you did, you can come to grips with that and still be a credit to yourself and perhaps someday earn back the trust and respect of your community.

It is the sentence of this Court that you serve a term of imprisonment of two years less one day.

Considering your personal history, I will

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have the Warrant of Committal endorsed with a recommendation that the correctional authorities allow you to serve your sentence at the Yellowknife Correctional Centre and with my recommendation that they give consideration to such education and other programs and courses that may benefit you upon your release.

In addition, I direct that for a period of two years after the expiration of your sentence, you be on probation subject to the following terms and conditions: you are to keep the peace and be of good behavior. You are to report when and as required by this Court. Upon your release you are to report immediately to the probation officer in whatever community you may be residing at the time. You are to continue to report to that probation officer as and when directed by the probation officer; and you are to participate in whatever counselling or treatment programs are recommended for you by your probation officer. Do you understand those terms? THE ACCUSED: Yes.

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23 THE COURT: Now, Mr. McLeod, I'm sure 24 your lawyer will explain the significance of the probation order to you, but let me say this: that 25 26 considering your history, and considering the seriousness of this sentence, I have no doubt that 27

if you do not comply with those probation terms or if you commit any other crimes while you're on probation, that you will be dealt with severely; that if you do not comply with the probation order, you could be charged for that, in addition to any other crimes that you may commit, and the terms of the probation order may be changed if you do not comply with them. Do you understand that? Yes. THE ACCUSED: You may have a seat. Under THE COURT: the circumstances, counsel, I'm not going to impose a victim of crime fine surcharge. Is there anything else? Just the mandatory Section MR. REGEL: 100 order, My Lord. I should note the accused is already subject to one for a 10-year period, but I expect this would have to run from the date of his release. I notice that he is already THE COURT: subject to a mandatory 10-year order. Is there much point to my adding on to it? Mr. Bayly?

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I'm not sure there's much MR. BAYLY: point in adding on to it. The effect would be, I suppose, to make 10 years more like 12 years, because I'm assuming they don't run consecutively if they are separately ordered. But I suppose the question is with a 10-year order already, there

1	may be no necessity. You do have some information
2	before you in the affidavit of Willard Hagen of
3	the aptitude of this young man in the bush. It's
4	limited information, but it would certainly burden
5	his options further if it's extended
6	significantly.
7	THE COURT: Mr. Regel?
8	MR. REGEL: I would just simply note the
9	circumstances, My Lord. Section 100 doesn't seem
10	to contemplate not imposing it where it's not
11	really going to accomplish any real seems to be
12	a mandatory type of order unless there's certain
13	specific requirements met in the case, and it
14	doesn't appear in the Crown's submission that they
15	are met.
16	THE COURT: Considering those comments,
17	there will be the mandatory order under Section
18	100 prohibiting the accused from having in his
19	possession any firearms or explosives for a period
20	of 10 years, starting from the expiration of his
21	sentence of imprisonment.
22	Anything else?
23	MR. REGEL: Nothing from me, My Lord.
24	MR. BAYLY: No, My Lord. With the
25	exception, when I spoke to Lois Blake, she said
26	some things had been taken as potential evidence,
27	none of which were presented in Court, but I'm

assuming that Mr. Regel, with the assistance of the RCMP, can see to it that any personal effects that are wanted, I think there's some blankets and some clothing, will eventually be returned. MR. REGEL: I expect that won't be a problem, My Lord. Very well. Then before we THE COURT: close, gentlemen, let me say that, as I'm sure is apparent to everyone, this has been a very difficult case, and I want to thank both of you 10 for the professional manner in which it has been 11 presented, it's been of great assistance to me. 12 If there's nothing further, counsel, then we 13 will close court. (PROCEEDINGS CONCLUDED) 16 17 18 19 20 21 22 23 24 25

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	1	I, Cheryl Mendryk, C.S.R.(A), hereby certify	
1000000	2	that I attended the above Proceedings and took	
	3	faithful and accurate shorthand notes and the	1
	4	foregoing is a true and accurate transcript of my	
	5	shorthand notes to the best of my skill and	
	6	ability.	
	7	Dated at the City of Calgary, Province of	
	8	Alberta, this 24th day of April, A.D. 1994.	
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	12	Cheryl Mendryk, Ms. Court Reporter.	
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