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Child-protection system failed, B.C. report says

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VICTORIA – The infant known as Baby M was the victim of severe bureaucratic mishandling before being assaulted by her foster mother, a report released yesterday by the B.C. Children's Commissioner says.

Baby M, born just over a year ago suffering from methadone addiction, was left with permanent disabilities after being shaken by the foster parent in whose care she had been placed four days before.

That foster parent, Kim Kierkegaard, pleaded guilty earlier this year to criminal negligence causing bodily harm and was given a conditional sentence of two years to be served in the community.

According to the review completed by Cynthia Morton, B.C. Children's Commissioner, Baby M should never have been placed in Ms. Kierkegaard's care because the woman was neither qualified nor equipped to deal with a drug-addicted baby.

This mistake was only one of more than a dozen missteps and unfortunate coincidences identified in the report. The first was a decision by the Crown to ignore police re-

commendations that the baby's parents be charged in an assault case so that the mother could be ordered to take drug and alcohol counselling.

The case is another black eye for B.C.'s child-protection system, which has been overhauled in the wake of a string of tragedies that were tied to bureaucratic blundering and insufficient resources.

A task force struck last year in the wake of the Baby M case made 32 recommendations for overhauling the foster-parent system.

Lois Boone, the Minister of Children and Families, refused to comment on the Baby M case yesterday because it is still before the courts in the form of a lawsuit against the ministry by the infant's relatives, who are now caring for her.

However, Ms. Boone argued that many of the task force recommendations are already being implemented, although she did concede that there is still a shortage of qualified foster parents and facilities for children with special needs.

By the time Baby M was born, workers for the Ministry of Children and Families had concluded that her mother was not fit to care

for her, but they also rejected pleas by relatives that they be allowed to take her home.

One of those relatives, an aunt, now cares for the severely disabled child.

The process was complicated by staff turnover: Three child-protection workers were involved before the baby was sent home with Ms. Kierkegaard.

Ms. Kierkegaard had been approved as a foster parent, but not for special-needs children such as Baby M.

According to physicians who treated the infant in hospital, Baby M suffered from an array of symptoms common to drug-addicted babies, including seizures, severe gas and constant crying in discomfort.

In the hospital, nurses were changed every three hours.

Ms. Kierkegaard was a single mother with two other children in her home and no one to back her up. After two days, she complained to the ministry that Baby M had become inconsolable.

Ms. Kierkegaard later told police that the baby was not sleeping for more than half an hour at a time.

The article EM9804 reprinted above is used in Figure 11.8d of the STAT 221 Course Materials.