

Abandoned Infants Find Safe Haven, But Are Nurses Ready?

Kathleen E. Jones, RN

A study released by the Centers for Disease Control and Prevention concluded that if you are born in the US, you are 10 times more likely to be murdered on the day you are born than any other time of your life. The CDC found homicide to be the 15th leading cause of infant death, with the most homicides occurring during the first four months of life.¹

Among infants murdered on their day of birth, 89% were not born in a hospital, and 89% of known perpetrators were women, usually the mother. Additionally, the CDC reports that mothers who kill their infants are more likely to be adolescents and have a history of mental illness.¹ We have all read about the infants abandoned in trash cans or left in toilets or plastic bags to die.

Since September 1, 1999, many states have adopted laws aimed at this epidemic, and these laws affect nurses. Details of the laws vary from state to state, but the general intent of these laws is the same: Unwanted infants can be

safely abandoned by the birth parent(s) at a designated "safe haven," which in many states, is a hospital. These laws provide for abandonment anonymously and free from prosecution as long as the laws are followed. If there is evidence of abuse, the parent can be prosecuted under any of the state's laws.

The Safe Haven law in New York states "any appropriate person" may accept an infant who is abandoned. In Texas, the infant may be given to an EMS worker. In Ohio, the infant can only be abandoned at a hospital or given to a peace officer or an EMS worker. In North Dakota, the infant may only be abandoned at a hospital. In New York, the child must be 5 days old or younger.

In Texas, the infant must be 60 days old or younger. In Ohio, the infant must be 72 hours old or younger. In North Dakota, the child may be abandoned up to the age of 1 year.

Information at the Child Welfare League of America website (www.cwla.org/programs/pregprev/flocrittsafehaven.htm) lists the specifics for all states that have such a law. Presently, 41 states have Safe Haven laws in place, and the other nine are in discussion or have legislation pending.

Why Are Safe Haven Laws Necessary?

Tim Jaccard, medical officer with the Nassau County (NY) Police Department and founder of the AMT Children of Hope Foundation (www.amtchildrenofhope.com), a nonprofit organization established in New York in 1998, has seen firsthand how Safe Haven laws can work if given the appropriate attention and funding.

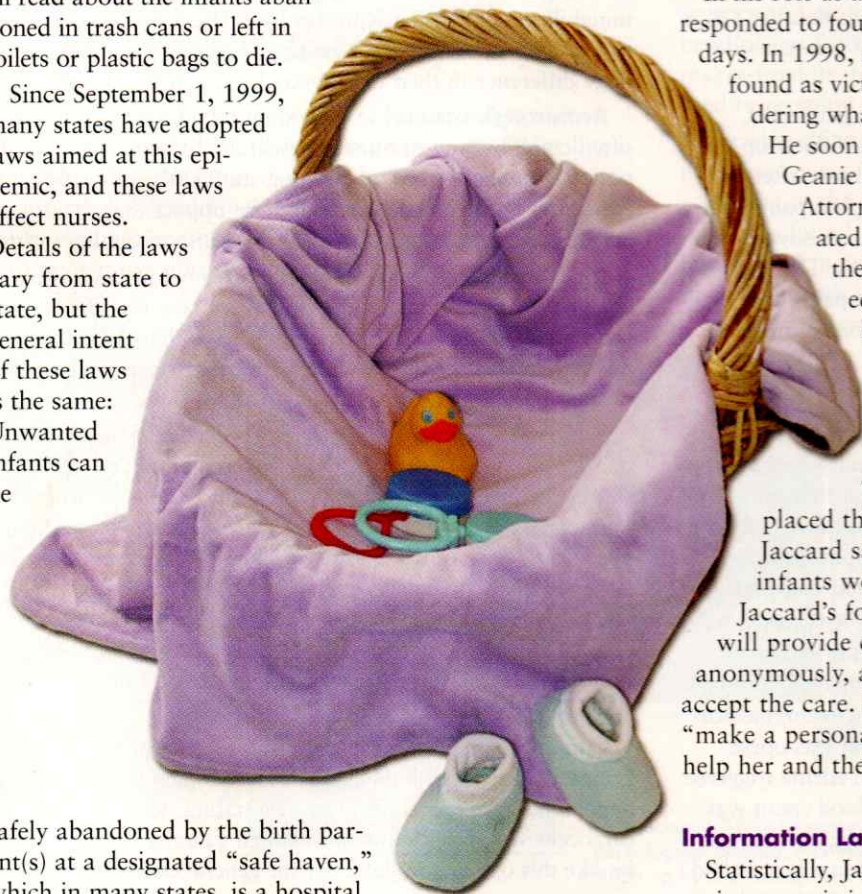
In his role as a medical officer, Jaccard has personally responded to four cases of neonatocide in a period of 90 days. In 1998, in New York alone there were 13 babies found as victims of neonatocide. Jaccard began wondering what could be done to prevent these deaths.

He soon joined forces with Texas state Rep. Geanie Morrison (R-Dist. 30) and District Attorney John Tyson of Mobile, AL. They created a system where parents can safely leave their children without fear of being prosecuted for infant abandonment. Many states have used their prototype to help them enact similar laws.

In 2002, the AMT Children of Hope Foundation received 2,510 phone calls to its crisis line. Of those, "Seventeen mothers were counseled and placed their children by traditional adoption," Jaccard says. He adds that an additional 10 infants were placed into a safe haven. But Jaccard's foundation reaches beyond the infant. It will provide care for the mother who has given birth, anonymously, as well as the infant, if the mother will accept the care. He says that sometimes if they can "make a personal connection" with the mother, they can help her and the infant.

Information Lags Behind

Statistically, Jaccard says baby abandonment is not a socioeconomic issue, and mothers of different ages abandon their infants. "The youngest mother we have had was 12, and the oldest was 42," Jaccard says. In Toledo, OH, a pregnant teenager abandoned her baby in a trash bin after giving birth alone in the back of the family minivan. Both of her parents were physicians, and the student was well-educated. A nurse who heard the infant crying when she went to take out her trash rescued the child, and the infant survived. The mother was then prosecuted for unlawful abandonment of the infant. This might have been avoided had she known about the option of relinquishing the child to a safe haven.



For Safe Haven programs to be effective, Jaccard says information about the laws needs to be provided in parenting programs at the high school level. He says one of the most successful programs has been the use of mechanical dolls that teach students to take care of babies. These dolls require a human response about every two-and-a-half hours.

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But are schools getting the message? We asked health class teachers in two large school districts in Ohio if information about the Safe Haven law was given to the students as a part of their curriculum. One response was: "When our health curriculum was written, this law was not on the books. Many of the health teachers bring in outside agencies to discuss all sorts of health-related topics. The Health Department feels sure that the teachers and/or the agencies are discussing or at least making the students aware of this new law." The other teacher asked for the information so it might be included in the class.

Because of the funding by the not-for-profit organization, New York's Safe Haven program has been expanded to a much larger degree than exists in other states.

Presently, only three states, California, New Jersey, and Oregon, provide funding for the campaigns to disseminate the information to the public. According to the Child Welfare League of America, although Oregon did not specifically allocate funds, the state allows the Department of Human Services to accept gifts, grants, or contributions from any source to carry out the campaign.

But because of the lack of funding, the public in many states is largely unaware of the law. More specifically, the mothers of the infants whom the law is designed to help are unaware. Tragically, more people become aware of the Safe Haven law when an infant is abandoned and dies and the situation receives media coverage.

What Would You Do?

In September 1999, Texas became the first state to enact Safe Haven legislation. Despite that, Sandra K. Cesario, RNC, PhD, assistant professor of nursing at Texas Woman's University, Houston, and a member of the Harris County Baby Abandonment Task Force, says nurses are not adequately prepared for an infant to be relinquished to them. Her study, "Nurses' Attitudes and Knowledge of Their Roles in Newborn Abandonment," addresses this issue. The study was limited to the state of Texas, where she randomly contacted 2,000 nurses, with 605 responding.

"Any care provider employed by any facility or working on any unit may be approached by a distraught woman in the parking lot, hallway, entryway, cafeteria, or any other public place in a hospital setting," Cesario



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says. "If this woman hands her newborn infant to any healthcare provider and expresses the desire to legally abandon the infant, the healthcare provider is responsible for managing the situation regardless of the clinical specialty, including childbirth education." Based on the data obtained in her study, she concluded that, "Nurses generally feel unprepared to manage a newborn abandonment event, regardless of their level of knowledge." Cesario says all nurses should be educated about their role in infant abandonment because "the first person that has white shoes that they [the parent] see may be who the baby is given to."

Susan Goldman, RNC, MSN, CNS, who works at Huntington Hospital in North Shore Long Island, NY, says her facility was the first hospital in New York to be a pilot for the Safe Haven project, and she was instrumental in setting up Huntington's policy. That policy stood the test in early 2001 when a teenager delivered a baby at home, brought the baby to the hospital maternity unit, and then was taken to the ED where the protocol was followed and the infant was relinquished.

Goldman says the law provides for complete anonymity, and says that if the mother can also come to get care, that is the ideal situation. At her facility, the entire staff is educated about the Safe Haven protocols and that "every single hospital employee is given background information" so their response is appropriate if faced with that situation.

Criticisms and Questions Too Important to Be Ignored

Even though there are plenty of individual success stories, questions about the Safe Haven movement remain. There is no mechanism in place for collecting data about the efficacy of the laws, and only eight states are required to collect statistics, according to the Child Welfare League of America.

Another concern about the laws is the right of the infant's father. Some states' laws address that issue, others do not. Proponents say the saving of any infant justifies the means, while those who are opposed to the law say those infants who are placed anonymously will have no information about their history that infants placed by traditional adoption might. Still others say these laws encourage irresponsible behavior by allowing parents to discard their children.

As nurses, we have an obligation to find out what our responsibilities are in regard to Safe Haven laws. The welfare of an abandoned infant could one day be held in your hands.

Kathleen E. Jones, RN, has more than 20 years of nursing experience in med/surg, oncology, pediatrics, and in an outpatient setting. She's currently working on a collection of stories about the many memorable patients for whom she has cared.

Reference

1. Centers for Disease Control and Prevention. Variation in homicide risk during infancy — United States, 1989-1998. Available at: www.cdc.gov/mmwr/preview/mmwrhtml/mm5109a3.htm. Accessed September 17, 2003.



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