Anonymous and Safe Relinquishment of a Newborn Baby

## **Hospital Training**



## The Ideal World

- All pregnancies would be planned and wanted
- Newborns welcomed into the home
- Raised in a safe and loving household





### Why a Pregnancy May Not be Welcomed

Admission of pregnancy

- Sexual assault
- Fear of confronting disapproving family
- Fear of disownment
- Fear of death



### **Consequences of Hiding a Pregnancy**

- No prenatal care
- No mental health counseling or services
- No counseling for a traditional adoption



### **Consequences of Hiding a Pregnancy**

- Deliver on her own with no medical care
- Abandonment of a newborn in an unsafe place

Houston-Hours-old baby found covered in ants 8/12/2017

California-Woman charged with trying to kill baby in toilet 9/4/2017



The Utah Newborn Safe Haven, or 'baby drop-off' law, allows a birth mother or <u>any</u> <u>other person</u> to <u>anonymously</u> turn over a newborn to any employee at a Utah hospital.





### The Law ...

- Protects infants from injury and death
- Provides a safe place for newborns
- Allows secrecy and <u>anonymity</u> for any person dropping off the newborn

(Utah Code Ann. Sec. § 62A-4a-802)



### Utah Law

- Newborns 3 days old (Accept any child any person tries to give you!)
- Newborn taken or dropped off at a hospital
- To emergency room for a health evaluation





## Do not hesitate to accept a newborn from anyone!





### Medical History of the Newborn

A person dropping off the newborn <u>may wish</u> to provide medical information on the health of the infant or medical history of the parents.

Names should not be given.

Medical History Form can be found at

http://www.utahsafehaven.org/wpcontent/uploads/2012/02/Medical\_Questionnaire\_1.pdf



#### **Utah Newborn Safe Haven**

#### **Optional Medical Questionnaire**

If you choose, fill out this form and bring it with your newborn. You may mail it at a later time to the address provided.

Baby's Birth Date:\_\_\_\_\_

Was your Baby born early, before its due date? Yes / No / Unsure

Were there any problems with the pregnancy? Yes / No / Unsure

If yes, what were they?

Did you smoke, use alcohol, drugs or any medication during the pregnancy? Yes / No / Unsure

If yes, explain:

Please check any of the medical conditions that you have. If you know any of the medical conditions that the father might have, please check those as well.

 Condition:
 Mother
 Father

 Diabetes
 A

 Asthma
 Seizures

 Gancer
 High Blood Pressure

 Hental Illness
 E

Please list any allergies that you have, or that your baby's father may have:

Are you aware of any health problems that run in your family, or your baby's father's family? If yes, please decribe what they are:

Please feel free to include a note to your baby, or the people who will adopt your child. If you like, you could use the back of this printed form.



### **Hospital Responsibilities**

- Health evaluation on newborn
- Notify Hospital Birth Certificate Clerk
- Contact Utah Division of Child and Family Services (DCFS)





|  | LOCAL FILE NUMBER  | R                  |                  |                  | DLING      |                  | STATE FILE NUMBER                   |                             |                 |
|--|--|--------------------|------------------|------------------|------------|------------------|-------------------------------------|-----------------------------|-----------------|
|  | 1. CHILD'S NAME  | FIRST              |                  | MIDOL            | E          |                  | LAST                                |                             |                 |
| THIS CHILD   | 2. SEX 3   | Approximate)       | (TH (Month)<br>) | (Day)            | (Year)     | 4. TIME<br>(Appn | OF BIRTH<br>coimate)                |                             |                 |
| PLACE FOUND /<br>ASSUMPTION OF<br>CUSTODY                      | 5a. PLACE FOUND (Give  | Street Address)    | 0                | 5b. CITY OR TOWN | 5c. COUNTY | 6. DATE<br>(N    | OF FINDING OR ASSU<br>tenth) (Dity) | MPTION OF CUSTODY<br>(Year) |                 |
| PERSON OR<br>INSTITUTION WITH<br>WHOM CHILD HAS<br>BEEN PLACED |  |                    |                  |                  |            |                  |                                     |                             |                 |
| INFORMANT'S<br>CERTIFICATION                                   | I certify that the foregoing<br>information is true and con<br>best of my lexowledge and | rect the<br>belief | I. SIGNATURE AND | ADDRESS OF INFOR | MANT       |                  | 10. DATE                            | SIGNED                      |                 |
| CERTIFICATION  | 11. REGISTRAR'S SIGNA  | TURE               |                  |                  |            |                  | 12. DATE RECEIVED                   | BY STATE REGISTRAR          |                 |
| UDCH-OVRS 4, Rev 201   |  |                    |                  |                  |            |                  |                                     |                             |                 |
|  |  |                    |                  |                  |            |                  | DEPARTMENT OF                       | UTAH N<br>Safe              | EWBORI<br>Haver |

# DCFS will find a foster family to take care of the newborn

# A search will then be done to find an adoptive family





### What communities are at risk?

## ALL



- Teens
- Older mothers with other children
- Women in abusive relationships
- Religious beliefs and traditions



### Who can drop-off a newborn?

### Any designee of the birth parent



### What Newborn Safe Haven Program Can Offer

- Materials Posters (English/Spanish)
- Other support?
- Questions?



#### Old poster

Are You Hiding Your Pregnancy?

Have you already ruled out -Keeping the baby? -Adoption?

Line

#### There is a **Safe Place** for Newborns No Questions - No Police - No Names

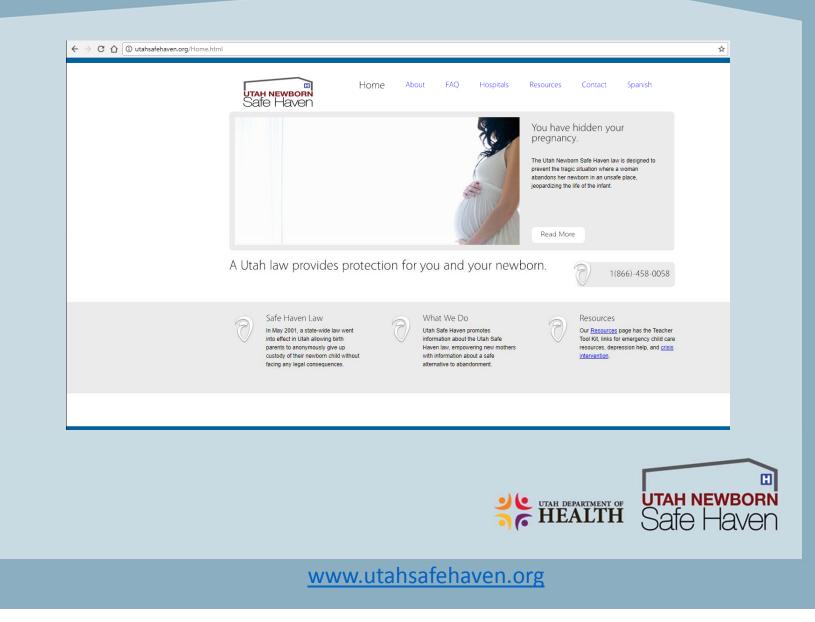
Utah law states, you cannot be arrested for giving up your newborn at any hospital in Utah. You DO NOT need to identify yourself and you DO NOT need to answer any questions.

24/7 Confidential 1-866-458-0058 HEALTH

www.utahsafehaven.org

# New poster design coming up soon!





### Questions

**Utah Department of Health** 

**Utah Newborn Safe Haven** 

Luisa Hansen

801-538-6924

lfhansen@utah.gov



