



## **Neonaticide/Infanticide**

### **Prevention of Neonaticide**

#### *Self-Study*

#### **Contributors**

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#### **Background**

- Neonaticide refers to homicide within the first 24 hours of life, usually right at birth.
- Neonaticide is distinct from other categories of filicide.
- Mothers are the primary perpetrators of neonaticide and almost always act alone.
- Women who commit neonaticide tend to be single and have denied or concealed their pregnancy.
- A typical pattern of neonaticide involves an unwanted pregnancy. (Specific common characteristics are discussed in the Clinical Case Conference.)

#### **Clinical Measures Toward Prevention**

- Efforts aimed at decreasing unwanted pregnancies through sex education, access to contraception (teenage girls should be able to meet with a physician without the presence of parents to discuss safe sex), and a supportive setting in which to discuss contraception and pregnancy may reduce neonaticide by reducing unplanned and unwanted pregnancies.
- Access to prenatal care and social services may serve to identify and manage high-risk mothers.
- The possibility of pregnancy should be considered in women of childbearing age who present with weight gain, abdominal symptoms, and nausea independent of amenorrhea.
- Women who deny or conceal pregnancies should be referred for psychiatric evaluation.
- Women victims of sexual assault or women who have initiated abortions then changed their minds warrant closer evaluation and encouragement of prenatal care.
- Psychiatrists have a role in educating primary care physicians, pediatricians, clergy, teachers, and parents about signs of concealed pregnancy.

#### **Legal Measures Toward Prevention**

##### Safe Haven Laws

- All 50 states have enacted Safe Haven laws allowing a parent to surrender an unharmed infant to a designated place without legal consequences.
- Similarly, internationally, “baby hatches” are incubators outside hospitals where babies can be surrendered without legal consequences.
- States vary in the age limit for utilizing Safe Havens. 11 states have a limit for dropping off unharmed infants which is under three days of age, and 19 states allow the drop-off of infants up to one month. It is important to be aware of the specific limitations in your own geographic area of practice.

- The CDC analyzed infant homicides in the United States to determine the association between infant homicides and state-specific Safe Haven age limits. Between 2008 and 2017, there was no association between infant homicide rates and Safe Haven age limits.
- Though Safe Haven Laws are taken advantage of, both unsafe infant abandonments with the expectation of death and violent neonaticides still occur.
- Despite the absence of empirical data supporting Safe Haven Laws, they should not be abandoned. If one life is saved, Safe Haven Laws have a role. Additionally, increased public awareness of Safe Haven Laws might contribute to prevention.
- For a young woman with denial of pregnancy, who suddenly delivers at home, to use the Safe Haven Laws, she would need to: know about the law, have transportation confidentially to the location, and care for the infant until she handed the infant to the Safe Haven staff. These can be huge obstacles.
- The majority of infanticides occur in infants who are too old for drop-off at Safe Haven locations.

#### Anonymous Birth Options

- Internationally, Anonymous Birth Options or “anonymous delivery laws” refer to laws enacted to allow mothers to give birth in a hospital anonymously, free of charge, if they give the child for adoption.
- To take part in this option, the woman must recognize that she is in labor and present to the hospital for safe delivery. However, many women with denial of pregnancy are not aware that they are in early labor.
- The role of anonymous birth options in the prevention of infanticide is unclear. In Austria, reported neonaticide cases decreased with the introduction of anonymous birth options, in contrast to Sweden and Finland. There is not presently an Anonymous Birth Option in the US.

#### Infanticide Laws

- Approximately two dozen countries have enacted infanticide laws, which are rooted in the concept that women are less responsible for acts of infanticide because “the balance of her mind is disturbed because of her not having fully recovered from the effecting of giving birth to the child.” This was putatively based on the 1922 concept of “lactational insanity,” which is no longer accepted.
- Infanticide laws reduce the culpability and punishment often to short sentences, probation, and mental health treatment for women who commit infanticide.
- Internationally, Infanticide laws vary by jurisdiction, but most refer to mothers who murder children under the age of one.
- The United States does not have an infanticide law.
- Multiple arguments exist against infanticide laws, including whether it is ever appropriate to have one set of laws for women only, and why one law would cover both neonaticide and infanticide, which are very different entities (as discussed in the Motives for Infanticide & Filicide self-study).

## References

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