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Oregon Legislature
Senate Committee on Early Childhood and Behavioral Health
900 Court St. NE
Salem Oregon 97301

Re: Submitted Testimony on HB 2901

Dear Honorable Committee Members:

My name is Rudolf Owens. I am an Oregon resident and an adoptee from the era of mass mother-infant separation in the mid-1960s. I also am a trained public health professional (MPH, University of Washington) and advocate for evidence-based, public health, and policy measures that support infants and mothers, especially those who face great adversity based on race and income.

In 2018 I published a first of its kind book using a public health lens to understand the inequities, history, and numerous shortcomings of the U.S. adoption system called [You Don't Know How Lucky You Are](#). My extensively researched book examines the U.S. adoption system while providing my adoption story. This involved being denied my legal, human, and medical rights to know my birth family and being denied my original identify records by law in Michigan to this day. (Note, I was born and severed immediately at birth from my mother and my biological kin in Detroit, MI, in 1965, at one the largest maternity hospitals ever that promoted thousands of family separations: [Crittenton General Hospital](#) in Detroit, now closed.) Lastly I have six decades of lived experience as an adoptee denied basic legal rights that most Americans assume they have by birth right but are denied to me by state law.

- **I write this letter strongly urging every member of the Senate Committee on Early Childhood and Behavioral Health to vote no on HB 2901 and remove it from any further consideration.**
- **Oregon lawmakers need to prevent any further expansion of so-called “Safe Haven” legislation, as this bill proposes. Past Oregon measures allowing such activities to even start, including increasing the age when a child could be forever separated from its mother, with a system rooted in medieval practices and notions of shame, are bad laws that forever separate infants and mothers and harm both in the process. Oregon needs to pull back these laws, but must start now by saying no to this bill.**

This bill promotes the expansion of harm to vulnerable and likely poor mothers and harm to the child. It creates lifelong severance of kin while denying the child its core and basic human and medical rights to know his or her origins and kin connections. This bill encourages a system of family separation that is medically and morally wrong and should be opposed by all Oregon lawmakers and medical professionals.

- I urge leadership of both caucuses and the House and Senate to pull back any support that may have been pledged to the notion of separating infants from vulnerable others with an unsafe medieval-era tool (the baby box) that has no credible support from any major health organization or maternal and child health expert and no peer reviewed study on their potential risks.

- I strongly urge all members of this committee to spend more time to gather evidence on best healthcare practices that instead support vulnerable mothers and kids and keep them together like nearly all developed countries in the world do with good policy and laws.
- I urge all lawmakers to listen to all adoptees to understand the harm of permanent family severance, which is never an answer for a child or young mother's wellbeing. HB 2901 promotes a system that has been used extensively for decades in the USA leading to over 6 million US-born adoptees separated from kin and likely over 500,000 international adoptees separated from their kin and cultures. This bill would continue a practice of separating families that denies basic medical rights (family health history), human rights, and legal rights to all infants severed from family.
- HB 2901 is counter to published and peer-reviewed maternal and child health research that focuses on moms' and kids' collective wellbeing. This measure also indirectly promotes a for-profit, commercial enterprise (a business run by an Indiana company called Safe Haven Baby Boxes, Inc.) that has no backing by any major organization in the health, public health, maternal health, or child health fields.

Medical evidence strongly suggests governments and health agencies focus on supporting keeping moms and infants together via upstream policy interventions. And those who have investigated baby boxes found them high-risk without any credible medical research validating their use or expanded use.

- **The World Health Organization** strongly recommends more than 60 ways to support newborn kids and moms during a child's first weeks of life as best practices based on evidence. These all focus on keeping moms and kids together and safe and healthy. *"Evidence shows that women and their families want and need a positive postnatal experience that helps them navigate the immense physical and emotional challenges that occur after their babies are born, while building their confidence as parents," said Dr Mercedes Bonet, Medical Officer with WHO's Department of Sexual and Reproductive Health and Research and the UN Special Programme, HRP.* (See World Health Organization, "[WHO urges quality care for women and newborns in critical first weeks after childbirth](#)," March 30, 2022.)
- **The Yale Interdisciplinary Center for Bioethics** sent a letter to the former head of the U.S. Department of Health and Human Services, requesting federal intervention and a more active HHS role in their uses. (See the [group's website](#).) That letter from the Yale group from November 2024 noted: *"We are writing as concerned child welfare and maternal health scholars, clinicians, legislators & policymakers, educators, advocates, indigenous leaders, and concerned citizens - from across the US - to request increased HHS involvement in public health policy responses to crisis pregnancies. Specifically, we seek your oversight of a rapidly expanding network of unregulated devices under your purview. These devices—infant abandonment boxes—are unregulated modern versions of medieval foundling wheels with substantial safety and legal risks."*
- **Infant outcomes are helped by supporting moms:** A country I know well, Finland, where I found my biological family in 2023, in fact does the exact opposite of what these baby boxes in the USA do—they give mothers all the tools they need to keep their young children healthy and supplied the first months of life. Finland, because of its Finnish style "baby boxes"

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([supplies given to moms from the government](#)) and because of a robust national health system, has among the lowest infant mortality rates in the world (seventh best, 2.1 deaths/1,000) compare to the USA (5.1 deaths/1,00, ranking of 173). We need to be learning from the Finnish maternal health experts. (See [CIA World Factbook](#), last updated 2025)

Finally, Oregon has a proud tradition of safeguarding rights of all adoptees. In 1998, voters passed Ballot Measure 58, which restored the right of all Oregon-born adoptees to obtain their original birth records without restrictions or conditions. As result, thousands of Oregon adoptees and their biological families have benefited and had rights restored, by law. Oregon also has passed legislation to secure openness and transparency in its adoption system, access for the adopted and their biological parents to adoption files and courts records, and to dispel overall adoption shame as a tired relic of a bad era for single moms and their kids. Oregon is a model standard of safeguarding adoptee equal rights in USA. If passed, HB 2901 sets the clock back and puts Oregon on the wrong side of history again.

Sincerely,

A handwritten signature in blue ink that reads "Rudolf Owens". The signature is fluid and cursive, with the first name "Rudolf" being more prominent and the last name "Owens" following in a similar style.

Rudolf Owens, MA, MPH