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The Goal: To Give Birth in the U.S.A.

From the Coalition for Immigration Law Enforcement

EL PASO, TX — As the government develops the technology to stop people at our borders, women from Mexico and other countries continue to come here to gain the automatic (given in error) citizenship for their children. Last year a pregnant reporter from the *El Paso Times* went undercover to see the route from across the border into the U.S. delivery room.

Many expectant Mexican citizens travel back and forth, using the border-crossing card that allows 72 hours in the U.S. to find the medical facility, get prenatal care, and later give birth.

The reporter, Emily Jauregui, was weeks away from delivering. In Mexico, coyotes (the smugglers) wasted no time approaching her as she arrived near the bridge. Originally told the price of \$50, which would include being delivered to the county hospital, they finally settled on \$20. The hospital is in view of the border and that spells trouble. The coyote told her about the advantages of having the baby in the U.S.; about the food stamps, welfare and WIC — the Women, Infants and Children program — by which one receives free formula, orange juice and peanut butter for the baby. The smuggler warned her the hospital would turn her away if she wasn't on the verge of delivery so she should wait until contractions begin.

After a long conversation, Emily left that smuggler and found others down the road that would take her across for \$2 or \$3, but that crossing was in an inner tube. Once across, taxis on the U.S. side provide the quick ride to Thomason Hospital.

Problem number one at the hospital: Federal law prohibits questioning a patient's citizenship. Everything goes smoothly once you're inside. The Mexican women share advice and encouragement about having a baby born a U.S. citizen. The reporter sat among them with no identification so she could find out how the system works.

As Emily, our reporter, sounded confused and shy she relayed that she needed information from a doctor. The receptionists asked for identification and upon finding she had none told her how to apply for prenatal care. She only needed a utility bill from a home in El Paso County and a notarized letter from the homeowner verifying residence. When she sat there quietly, the lady took her hand and told her she should have a friend write a simple one-line letter attesting to her residence in the friend's home.

Emily asked if hospital officials would find out — the lady said no one ever checks.

She was told Medicare would pay for the delivery, about \$1,600 for a normal birth and \$2,500 for a Cesarean. Next she could receive WIC, the Women, Infants and Children program.

Later, she was told by other women in the waiting room that she could apply for public housing and food stamps. They chatted about the benefits: better education for the child, the baby protected from deportation, and Medicaid paying for postnatal care.

Emily returned with her phony notarized letter a few days later. The woman that checked her paper ended up telling her that she too had entered illegally through Tijuana about twenty years before. The reporter was coached on what she would be asked and how she should answer. After Emily was asked by a man at a computer her name, address and telephone number, she was handed her El Paso Care Card. In five minutes she was registered to have a baby at Thomason Hospital in the U.S.A.

Another couple Emily met on her investigation lived in Ciudad Juarez and would not stay in El Paso. They want their baby to have the option of living in the U.S. when he or she is older. For them, the Mexican hospitals are too crowded and the service isn't that good. They will pay for the birth at a midwife clinic which costs about \$600.

Since the blockade has gone into effect we suspect that the number of women having their babies in El Paso has been reduced. However, the same set of circumstances still exists in many border cities, including San Diego. It will not end until the mistake of conferring automatic citizenship has ended. ■