



Padres Unidos Links Tobacco with Health Care Access for Low-Income Immigrants

Site Profile

Padres Unidos (which means Parents United) was born in 1992 out of a struggle to protect the educational rights of minority students in Denver. Since its founding, it has expanded its work to include an array of issues that affect Latinos, who comprise a quarter of Denver's 500,000 residents and more than half of its nearly 73,000 students.

It raised its match for the Robert Wood Johnson Foundation (RWJF) grant through its Padres Unidos' Healthcare is a Right Campaign to which the American Cancer Society, Colorado Tobacco Education and Prevention Alliance and the Rose Community Foundation contributed. The presence of unrestricted matching funds enabled it to pay for some activities, such as lobbying, that could not be supported with its RWJF grant.

Tobacco control was not high on its agenda when Padres Unidos joined [PATH](#) in 2003. Though the effect of tobacco on the Latino population nationwide was alarming—with smoking rates rising among Latino youth and higher levels of exposure to tobacco smoke in the workplace than any other ethnic group—many other issues were also threatening Denver's Latino community.

At the time, Colorado was facing a \$1-billion budget shortfall, and many programs to help low-income, working class people were on the chopping block, said Ricardo Martinez, who co-directs Padres, with his wife Pam. So when Padres was asked to join the Citizens for a Healthier Colorado, a statewide coalition of some 100 groups, in its effort to increase the state's tobacco tax, Martinez initially said no. He felt that getting involved would divert time and resources from other priorities of his group.

But Padres operates by consensus. Despite his initial reluctance, Martinez took the request back to his constituency. After much deliberation, Padres decided to join the effort on one condition: that a share of the revenue from any tobacco tax increase be used to subsidize health care coverage for low-income and uninsured people.

This condition became one of several points of contention as Padres and other coalition members struggled to develop a winning strategy for passing the tobacco tax. Several members felt that including the earmark for expanding health care coverage would weaken the possibility of increasing the tax.

What followed was a behind-the-scenes effort to exclude Padres from the coalition's decision-making, according to Makani Themba-Nixon, the PATH director. PATH national program staff, national advisory board members and RWJF staff all intervened at various times to address the situation, and after three months, Padres was voted onto the coalition's key leadership committee.

Padres' insistence on health care funding continued to meet resistance, even after the tobacco tax hike passed in November 2004. "All of the legislators and the governor were seeking support for pet projects," Martinez reported. At one point, he said, the legislature passed a bill, dropping health care from the tax hike language altogether.

To get the earmark reinstated, staff at the PATH national office intervened with key coalition leaders, explaining its importance for tobacco control and prevention. Themba-Nixon says, "A number of tobacco-control advocates did not understand that it was nearly impossible to address cessation without a strategy for ensuring that those most likely to smoke—low-income people—had access to health care and services where cessation could be offered and financed."

Martinez says the process of passing the tax and its enabling legislation taught him about the importance of "sticking to your guns"—but also being flexible when the time is right.

"State legislators work with a different mindset," he said. "There are lots of complexities. Things move really fast and in the end there is always compromise. It was hard to operate within that... You have to figure out what is your drop dead point, your non-negotiables."

In the end, the struggles paid off. The tax hike raised \$175 million a year, with \$80.5 million earmarked for Medicaid and children's health care and another \$33.25 million for health care for uninsured and medically indigent individuals.

In communities of color, addressing tobacco in the context of the many other problems that plague their communities makes sense, said Martinez. "Tobacco is a personal issue, a health issue, but it is also a social justice issue. If you can link up tobacco with other issues, it gives you the ability to mobilize people. Then you can sustain an initiative. It opens other doors."

The work Padres did with PATH taught Martinez another lesson: Don't be shy about demanding a place at the table with mainstream tobacco control groups. "You need to put things in a bigger picture," he says. "We were out of our comfort zone, but you don't go in feeling defensive or apologetic. You have a right to be at the table. Just think about whose lives are being affected."