

**Testimony before the
District of Columbia Council
Committee on Housing and Workforce Development**

Public hearing on the Tenant Access to Justice Reform Act of 2009

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Good morning Chairman Barry and members of the Committee on Housing and Workforce Development. Thank you for the opportunity to testify. My name is Alsan Bellard Jr. I am a pediatrician and I am the medical director of the Children's Health Centers in Southeast, primary care health centers operated by Children's National Medical Center. We have **XX** staff and we see approximately **XX** patients per year. In the population that we serve, we see significant instances of asthma, lead poisoning and injuries, which are all caused by or exacerbated by unsafe housing conditions. I support the Tenant Access to Justice Reform Act of 2009 because it will allow many of the families I care for the opportunity to hold their landlords accountable for failing to properly maintain their houses and ultimately lead to healthier children.

My clinics are part of a medical-legal collaborative with the Health Access Project at the Children's Law Center, and we have attorneys who work on-site at both health centers. As a doctor I am trained to diagnosis and treat medical problems, but my patient's health is often negatively affected by social and legal challenges I can't fix. Fortunately, as part of this medical-legal collaborative, I am able to refer the caregivers of patients to lawyers when we find that there are legal barriers to the child's health. Some of the most serious non-medical barriers to a child's health that we see are the deplorable housing conditions that our patients live in.

We know that there is a clear link between certain types of housing conditions and the medical problems of the children that we treat. Although housing-related health hazards are a problem for all age groups young children have an increased risk. These children often spend the majority of their time in the home and they are more vulnerable biologically.¹ Children's bodies take in a proportionately greater amount of environmental toxins than adults, and their developing organs are especially vulnerable. Since children crawl and play on the floor, they are often in direct contact with areas where contaminants accumulate. Children naturally put their hands in their mouths and therefore are likely to ingest such contaminants.²

When a child has asthma the tubes that carry air to the lungs become narrow and their linings become swollen, irritated and inflamed. Asthma is worsened by dust and dust mites, cockroaches and mold.³ Substandard housing conditions such as water leaks, lack of ventilation and pest infestation can lead to an increase in mold, mites and other allergens associated with poor health. These allergens exacerbate respiratory conditions such as asthma.⁴ Asthma is a huge problem in the District and leads to many children being hospitalized. I have many patients who live in homes that are damp and moldy. Windows are cracked, broken appliances drip and water develops, allowing mold to thrive. My patients also live in apartments with cockroaches, mice and rats. We sometimes associate these pests with bad housekeeping, but even the most determined mother can't clean an apartment well enough to rid it of bugs and rodents if the apartment building itself is infested. I can give a child an inhaler, but unless their apartment is rid of mold and pests and other allergens, that child will continue to suffer.

A recent patient's asthma was getting worse and his mother told me that her apartment had mold all over it. She said the mold was so bad that there were holes in the wall from where it had gotten soft and just fell apart. I referred this family to our in-house lawyers and I wrote a letter describing the health consequences for the child of living in that environment, particularly the problem of exacerbating his asthma. The attorney was able to get some of the conditions ameliorated. Unfortunately, for most families these problems linger for years because we don't have an affordable and easily navigable justice system.

I also treat many patients who are exposed to lead paint and have high lead levels. Lead damages many parts of the body. At times, a child presents with lead poisoning and severe emergency symptoms. More often, however, lead poisoning builds up slowly over time from repeated exposure to small amounts of lead. Lead is much more harmful to children than adults because it affects the child's developing nerves and brain. The younger the child, the more harmful lead exposure is. Lead exposure has been shown to lead to many problems, including, behavior or attention problems, reduced IQ, slowed body growth,

failure at school, kidney damage and hearing problems.⁵ The source of most lead exposure is dust and chips from lead paint on interior surfaces.⁶ Many of my patients live in apartments where there is a great deal of peeling and chipping paint. Despite all the work that has been done over the past decades to reduce the use of lead paint and lead paint abatement programs, poor children and African-American children continue to have higher lead blood level concentrations.⁷ While wealthier families may be able to pay for lead abatement or live in houses that are certified not to have used lead paint, too many of our families don't have this luxury. They rely on their landlords to keep their apartments safe for their children. And too often their landlords let them down. **DR. BELLARD TO ADD IN SPECIFIC PATIENT**

STORY

I also treat patients for injuries they've sustained due to unsafe housing conditions. Children are bit by rats and mice which can cause rabies and other diseases. Children fall from improperly latched windows or ones without screens. Children trip on staircases which have broken slats. **DR. BELLARD TO ADD**

IN SPECIFIC PATIENT STORY

I try to give families assistance where I can and I refer many of these families to the Health Access Project. However, not all families can be represented. Without an attorney, families often cannot get their landlords to make necessary repairs and therefore have no option other than to keep living in these dangerous housing conditions. My patient's parents need access to Landlord-Tenant court to use the power of the law to get rid of the mold, to exterminate the mice, rats and cockroaches or to deal with the innumerable other housing conditions that endanger the health of their children. I believe that by passing this legislation we will be able to see substantial improvements in children's health in the District.

Thank you for the opportunity to testify. I am happy to answer any questions you may have.

¹ Alliance for Healthy Homes, Impact on Families and Communities, www.afhh.org/ifc/ifc_main.htm

² Alliance for Healthy Homes, Impact on Families and Communities, www.afhh.org/ifc/ifc_main.htm

³, American Academy of Pediatrics, Origins of Asthma, <http://www.aap.org/sections/allergy/overviewchild.pdf>

⁴ Robert Wood Johnson Foundation, Commission to Build a Healthier America, Issue Brief 2: Housing and Health, *Where we Live Matters for Our Health: The Link Between Housing and Health* (Sept. 2008). www.commissionhealth.org

⁵National Library of Medicine and the National Institutes of Health, *Lead Poisoning*,
<http://www.nlm.nih.gov/medlineplus/ency/article/002473.htm>

⁶ American Academy of Pediatrics, *Policy Statement: Lead Exposure in Children: Prevention, Detection and Management*, *Pediatrics* Vol. 116, No. 4, 1037 (October 2005).

⁷ *Id.*