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Testimony before the District of Columbia Council Committee on Transportation and the Environment

February 25, 2014

Oversight Hearing for the DC Department of the Environment

Kathy Zeisel Senior Supervising Attorney Children's Law Center Good morning Chairwoman Cheh and members of the committee. My name is Kathy Zeisel. I am a Senior Supervising Attorney at Children's Law Center¹ (CLC) and a resident of the District of Columbia. I am testifying today on behalf of CLC, the largest non-profit legal services organization in the District and the only devoted to children. Every year, we provide services to more than 2,000 low-income children and families, with a focus on abused and neglected children, and on those with special health and educational needs. Many of these children have asthma or other respiratory problems and live in homes with terrible housing conditions that aggravate their health conditions.

I am testifying today about the great work of the DC Department of the Environment's (DDOE) Healthy Homes program of the past year. Because of the successes of the program, we want to encourage the expansion of the Healthy Homes program under the auspices of DDOE. This program also makes DDOE the most appropriate agency to be charged with ensuring that DC's most vulnerable populations are protected from the substantial presence of mold in their housing.

CLC sees the need for the Healthy Homes program, and for expanded protections for DC residents against the substantial presence of mold, in our work every day. CLC serves over 800 children per year through our medical legal partnerships with Children's National Health System (formerly Children's National Medical Center) and with Mary's Center for Maternal and Child Health. In these partnerships, our lawyers work side-by-side with pediatricians in clinics that treat low-income families. Together,

the doctors and lawyers find legal remedies to health problems that get in the way of a child's success.

Both CLC and several of our medical partners have had the opportunity to work with DDOE's Healthy Homes program. DDOE's Healthy Homes program brings public health experts into the homes of some of the most vulnerable children in DC to address. After homes are assessed for threats such as mold, lead and carbon monoxide by trained inspectors, the District works with property owners to reduce risks and provide an interim care plan.² Healthy Homes has had impressive results already. Of the 144 families they have worked with, 93 have had children with asthma who were being impacted by the indoor air quality and others have had other serious health concerns.³ Per data provided by the Healthy Homes Branch Chief, Harrison Newton, through the public health approach coupled with intensive case management, Healthy Homes has achieved some or all of the repairs needed in 93% of their cases. This result is incredible for these families.

As you know Councilmember Cheh, CLC, along with a coalition of other housing advocates, is advocating to prohibit the substantial presence of mold in rental properties in the DC Code. These advocates join me today in our praise of the Healthy Homes program and in our support for the District's mold prevention work in DDOE's Healthy Homes program. The organizations that have signed on to the written version of this testimony are: Legal Aid of the District of Columbia, AARP Legal Counsel for the Elderly and the Washington Legal Clinic for the Homeless. Mold is an area where it is difficult, if not impossible, to get any governmental or judicial enforcement, but we

know that mold substantially impacts the health of DC residents with respiratory illnesses, the elderly and other people who are experience long term exposure to mold. As I testified during the January 2, 2014 hearing at the Joint Hearing on <u>B20-368</u>, the Air Quality Amendment Act of 2013 and <u>B20-569</u>, the Air Pollution Disclosure and Reduction Act of 2013, our clients are turned away by DC Government when they seek help for mold and landlords pass inspections simply by painting over the mold.⁴ As a result, the children we work with continue to go to the emergency room for uncontrolled asthma and they miss school and their parents miss work. The costs, both in terms of health and financial, of allowing this loophole in the law are enormous.⁵

It is our opinion that the public health approach used by Healthy Homes is integral to the success of the program, and that because DDOE already has this program, it is also the natural place to locate any government regulation of mold in rental properties. DDOE has the in-house expertise to inspect for mold, to regulate mold inspectors and remediators and to ensure appropriate remediation of mold. While no program could be successful at DDOE without additional funding, we are confident that there are ways to ensure the needed funding and to leverage the existing program and expertise to have effective protections against mold in the District. The Mayor has also highlighted that Healthy Homes is the natural home for mold prevention work in the District in his recent Sustainability Plan.⁶

At the January 2, 2014 Council hearing, DDOE was noncommittal regarding these proposals. We request that this Committee inquire specifically about DDOE's capacity to specifically inspect for mold, to regulate mold inspectors and remediators

and to ensure appropriate remediation of mold. We, along with our allies in the housing advocacy community, look forward to working with this Committee and with DDOE to ensure that the District's most vulnerable residents are protected from the substantial presence of mold.

Thank you again for the opportunity to testify and I welcome any questions.

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¹ Children's Law Center works to give every child in the District of Columbia a solid foundation of family, health and education. We are the largest provider of free legal services in the District and the only to focus on children. Our 80-person staff partners with local pro bono attorneys to serve more than 2,000 at-risk children each year. We use this expertise to advocate for changes in the District's laws, policies and programs. Learn more at www.childrenslawcenter.org.

² Healthy Homes is a grantee under the federal Department of Housing and Urban Development, which describes the Healthy Homes program as: The Healthy Homes Program addresses multiple childhood diseases and injuries in the home. The Initiative takes a comprehensive approach to these activities by focusing on housing-related hazards in a coordinated fashion, rather than addressing a single hazard at a time. The HHI builds upon HUD's successful Lead Hazard Control programs to expand its efforts to address a variety of environmental health and safety concerns including: mold, lead, allergens, asthma, carbon monoxide, home safety, pesticides, and radon. See

http://portal.hud.gov/hudportal/HUD?src=/program_offices/healthy_homes/hhi.

³ Data provided by the Healthy Homes Branch Chief, Harrison Newton to CLC available on request.

⁴ See attached testimony, Testimony before the District of Columbia Council, Committee on Transportation and the Environment and Committee on Economic Development January 2, 2014, Joint Hearing on <u>B20-368</u>, the Air Quality Amendment Act of 2013 and <u>B20-569</u>, the Air Pollution Disclosure and Reduction Act of 2013.

⁵ Nationally, 9% of children have asthma. In DC, that number soars to 16% of our children who are diagnosed with asthma. Annie E. Casey Foundation, National Kids Count Report, 2011-12, at: http://datacenter.kidscount.org/data/tables/30-percent-of-children-with-asthma-problems?loc=1&loct=2#ranking/3/any/true/1021/any/300. The data available also clearly demonstrate asthma's enormous economic cost due to frequent emergency room visits and hospitalizations. From 2002 to 2007, the annual economic cost of asthma was \$56.0 billion in the U.S.; this includes direct health care costs of \$50.1 billion and indirect costs (lost productivity) contributing an additional \$5.9 billion. American Lung Association. Trends in Asthma Morbidity and Mortality. September, 2012, citing Barnett SB, Nurmagambetov TA. Costs of Asthma in the United States: 2002-2007. Journal of Allergy and Clinical Immunology, 2011; 127(1):145-52. However, this does not account for the thousands of hours of lost instructional time for children who are too sick to go to school, nor the work hours their parents have missed due to taking their asthmatic children to the hospital or caring for them at home.

⁶ The Mayor's recent report, Sustainability DC: A Plan for Sustainabilty, also highlighted that DDOE's Healthy Homes program was the appropriate place to cite the District's work against mold. Available at:

http://sustainable.dc.gov/sites/default/files/dc/sites/sustainable/page content/attachments/DCS-

008%20Report%20508.3j.pdf. Action 3.2: Eliminate environmental health threats such as mold, lead, and carbon monoxide in at least 50% of the District's affordable housing. (Medium Term): The Healthy Homes Program led by the District Department of Environment (DDOE) targets households with children suffering from severe asthma or with a blood lead concentration of concern as well as older properties in poor condition where a young child or a pregnant woman are present. After homes are assessed for threats such as mold, lead, and carbon monoxide the District works with property owners to reduce risks and provide an interim care plan. In addition, the District's Lead Safe Washington program provides funds from the Department of Housing and Community Development (DHCD) to identify and reduce lead-based paint hazards in low-income homes. The District will expand both programs to eliminate environmental health threats in at least 50% of the District's affordable housing stock by the year 2020.