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March 11, 2022

Delegate Maggie McIntosh, Chair House Appropriations Committee House Office Building, Room 121 Annapolis, Maryland 21401

Re: **FAVORABLE** – HB1033 – Environment and Energy – Investment in Overburdened Communities

Dear Chairman McIntosh and Members of the Committee:

On behalf of the Green & Healthy Homes Initiative, I offer this testimony in support of HB1033. GHHI is dedicated to addressing the social determinants of health and the advancement of racial and health equity through the creation of healthy, safe and energy efficient homes. The Green & Healthy Homes Initiative (GHHI) has been at the frontline of holistic healthy housing for over three decades. GHHI is a member of Energy Efficient Maryland, the Maryland Public Health Association Advisory Committee, and the New York State Climate Action Council Energy Efficiency and Housing Advisory Panel. In addition, I represent GHHI as a member of the EPA Children's Health Protection Advisory Committee and the Maryland Lead Poisoning Prevention Commission.

Over its 30-year history, GHHI has developed the holistic energy efficiency, health and housing service delivery model that is implemented in our nationally recognized, Maryland-based direct services program. The model was adopted by the U.S. Department of Housing and Urban Development and is currently being advanced in partner jurisdictions nationally. In addition, GHHI helped to elevate Maryland as a national leader in healthy housing by helping reduce childhood lead poisoning by 99% in the state and helping design over 45 pieces of healthy housing legislation that became law in the State of Maryland and local jurisdictions. GHHI's preventive asthma programs in Baltimore City have produced a 66% reduction in client asthma related hospitalizations and 62% increase in asthma related perfect school attendance.

By delivering a standard of excellence, GHHI aims to eradicate the negative health impacts of unhealthy housing to ensure better health, economic, and social outcomes for children and families with an emphasis on black and brown and low-income communities. Most recently, GHHI's programs and holistic approach was specifically cited by EPA and by HUD as a model for effective coordination of federal healthy homes and weatherization programs and resources.



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Through our own research and evidence-based practice, GHHI has found that a healthy and energy efficient home yields a multitude of energy and non-energy benefits for Maryland residents, particularly low-income residents who can benefit the most from such energy efficiency improvements in terms of economic mobility, housing stability and wealth attainment over the long-term. We are deeply committed in our mission to advance racial and health equity, economic mobility and climate resiliency through healthy housing, energy efficiency standards, electrification and decarbonization for low-income housing. By concentrating state resources on overburdened communities, this legislation will improve outcomes for asthma, lead poisoning and household injury as well other social indicators. HB1033 will improve housing condition, address legacy pollution, advance energy equity and reduce climate impacts on Maryland's most vulnerable low-income families and communities.

Impact of Unhealthy Housing and Environments - Asthma

The burden of asthma, a chronic disease, greatly contributes to social inequalities in health outcomes and health disparities, which are neither inevitable nor irremediable, especially for children in Maryland. Determinants of health related to air quality and indoor environments are known to be significant contributing causes of asthma morbidity and exacerbations and disproportionately burden populations, especially children and minorities. Poor outdoor and indoor air quality and housing conditions such as mold, lack of ventilation, pests and other allergens contribute to asthma episodes for Maryland residents.

25 million Americans have asthma and it has been shown to be the cause of the biggest loss in productivity through school and work absenteeism. Nationally, 14.4 million school days and 14.2 million work days are missed due to asthma episodes. Over 500,000 adults and children in Maryland have diagnosed asthma. Research has shown that race, ethnicity and income are also common risk factors in asthma diagnoses and the impact of asthma episodes. Asthma-related health disparities have disproportionally affected African American residents in Maryland. Data available from the Maryland Asthma and Surveillance Report has demonstrated that African American asthmatics in Maryland visit the emergency room 5 times more often than White asthmatics and are hospitalized 2.7 times more often than White asthmatics in Maryland. Many asthma episodes are preventable, yet high rates of asthma related emergency department visits and hospitalizations result in substantial medical costs for the state and its residents – including \$42.1 million annually for asthma related hospitalizations and \$93.3 million for asthma related emergency department visits.

Impact of Unhealthy Housing and Environments - Lead Poisoning

In 2019, there were 1,526 children with elevated blood levels (EBLs) of 5 μ g/dl or higher in Maryland. Lead poisoning from lead in paint, water, and contaminated soil contributes to significant learning disabilities, loss of IQ, speech development problems, attention deficit

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disorder, poor school performance and violent, aggressive behavior that heavily burdens low income communities. Lead poisoning is irreversible and has a significant impact on societal costs. Lead poisoning directly contributes to the cycle of learning disabilities, poor school performance, steep school dropout rates and juvenile delinquency that prevent low income children in particular from being able to thrive and which burdens the State through increased special education and criminal justice costs.

Why Concentrate Resources on Overburdened and Unhealthy Communities?

As described above, minority populations in Maryland are disproportionately impacted by the unhealthy air and water and hazardous conditions that exist in their homes and communities and are most vulnerable to the impacts of climate change. Maryland needs to advance holistic, comprehensive solutions to improving air and water quality and creating healthy. energy efficient and stable housing that improves health outcomes while reducing the effects of climate change on low income communities. The state should concentrate existing and new program resources on the most burdened communities and more aggressively implement prevention polices and the enforcement of existing laws to mitigate environmental hazards and climate change. These reforms are needed to address unhealthy environments and unsafe and unstable housing that produce health and social disparities for minority children, families and older adults including: rates of lead poisoning, asthma episodes (emergency department visits and hospitalizations), household injury, household income, reduced life expectancy, and energy and medical cost burdens.

- Members of overburdened communities often utilize a higher percentage of their income to meet their basic health and energy needs and maintaining a safe home. These costs represent a tremendous drain of resources and financial stressors.
- Our work providing whole-home housing interventions has shown us that there is high need
 across the state, and that providing these services offers tremendous benefits to our most
 vulnerable families. The energy and non-energy benefits of investing in people's homes and
 addressing toxins in communities can transform lives for generations. This investment also
 strengthens our neighborhoods, our green jobs workforce, and reduces strain on health and
 energy systems.

Benefits of providing resources in overburdened communities for clean energy, energy efficiency and affordable and sustainable housing

Maryland has number of state weatherization programs and these energy efficiency and decarbonization interventions provide not only energy benefits, related to reductions in energy usage and costs, but also non-energy benefits as well. Non-energy benefits are "the wider socioeconomic outcomes that arise from energy efficiency improvement, aside from energy savings." Studies have shown that energy efficiency and weatherization can improve housing conditions relating to thermal comfort, indoor air quality, pest management, and fire safety. Furthermore,

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household energy efficiency upgrades can help mitigate climate change, spur community benefits such as economic growth, neighborhood revitalization, and resilience. These investments can help to support and stimulate the local economy by providing families and individuals with greater disposable income, which can help alleviate poverty and increase purchasing power while generating more local jobs (Bell 2014; IEA 2014). One study found that between 9 and 13 gross jobs are generated per every \$1 million investment.

This Bill also has tangible implications for racial equity. In the US, Black households have the greatest likelihood of residing in older homes with compromised energy systems, aging or ineffective appliances and other assorted structural deficiencies, all of which contribute to making the home energy inefficient (Diana Hernández, Yumiko Aratani, Yang Jiang, 2014; Diana Hernández, Yang Jiang, Daniel Carrión, Douglas Phillips, and Yumiko Aratani, 2016). A 2020 study found that in Baltimore City, neighborhoods that were redlined as least desirable for loans today are 3.2 degrees Celsius warmer on average than neighborhoods that were identified as most desirable for loans (Hoffman, Shandas, and Pendleton 2020). These differences highlight the legacy of environmental and economic issues that burden minority neighborhoods.

Efforts to slow the pace of climate change benefit the health, safety, and economy of the entire population. However, overburdened communities are most vulnerable to the negative impacts that will come with climate change. From our work centered on addressing social determinants of health in the home, we know that factors outside of the home will impact health similarly. For example, numerous studies have demonstrated a link between particulate (PM_{2.5}) levels and premature loss of life. In a major 2012 paper, researchers looked at 35 years of data collected across six US cities and found a statistically significant 14% increase in all-cause mortality for a 10-μg/m3 annual increase in local PM_{2.5} measures, confirming the findings of previous studies (Lepeule et al. 2012; Dockery et al. 1993; Laden et al. 2006). Locally, the 2016 Maryland Climate and Health Profile report found that as a result of the increase in extreme heat events in Baltimore City between 2000 and 2021, "exposures to extreme heat events during summer months increased the risk of hospitalization for heart attack by 43% among residents…This risk of hospitalization was considerably higher compared to Maryland as a whole (11%)."

Furthermore, "exposures to extreme heat events during summer time increased the risk of hospitalization for asthma by 37% in Baltimore City. Exposure to extreme precipitation event during summer month increased the risk of hospitalization for asthma in Baltimore City by 16%." Both of these risks are expected to increase significantly based on climate projections for 2040. During summer months, hospitalization rates for heart attacks are projected to increase 129% from 52.8 to 121.0 per 100,000 residents. Hospitalizations for asthma follow a similar pattern increasing 108% from 86.8 to 180.2 per 100,000 residents. Both of these projected increases are ranked "large" in the report.

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Substantial investments in overburdened communities are needed to address the disparities that exist. HB1033 represents an important commitment to concentrate resources on building a more equitable future for all of Maryland. By addressing environmental risks and legacy pollution while creating healthy, affordable and sustainable housing across the state, we can strengthen our communities for the benefit of all_residents. HB1033 will build resilience and advance racial, health and energy equity by meeting the critical needs of Maryland's vulnerable children, families and seniors. We ask for a Favorable Report on HB1033.

Respectfully Submitted,

Ruth Ann Norton President and CEO