Green & Healthy Homes Initiative®

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January 30, 2024

Senator Brian J. Feldman, Chair
Senate Education, Energy and Environment Committee
2 West
Miller Senate Office Building
Annapolis, Maryland 21401

Re: **FAVORABLE** – SB308 – Housing and Community Development – Just Community Designation

Dear Chairman Feldman and Members of the Committee:

On behalf of the Green & Healthy Homes Initiative (GHHI), I offer this testimony in support of SB308. GHHI is a member of the Maryland Green and Healthy Homes Task Force, Energy Efficient Maryland and has served on the New York State Climate Action Council Housing and Energy Efficiency Advisory Panel. In addition, I represent GHHI as a member of the Maryland Clean Energy Center Board of Directors, EPA Children's Health Protection Advisory Committee, CDC Lead Exposure and Prevention Advisory Committee, Maryland Public Health Association Advisory Committee and as Chair of the Maryland Lead Poisoning Prevention Commission. GHHI is dedicated to addressing the social determinants of health and advancing racial and health equity through the creation of healthy, safe and energy efficient homes. GHHI has been at the frontline of holistic healthy housing for over three decades.

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 service 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 49 pieces of healthy housing legislation that became law in the State of Maryland and local jurisdictions. By delivering a standard of excellence, GHHI aims to eradicate the negative health impacts of unhealthy housing and unjust policies to ensure better health, economic, and social outcomes for children, seniors and families with an emphasis on black and brown low-income communities. GHHI's holistic intervention approach was recently cited by EPA and HUD as a model for effective coordination of federal healthy homes and weatherization programs and resources.

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 and energy efficient low income homes that receive electrification and decarbonization. By concentrating state resources on historically underserved and under-resourced communities, this legislation will improve outcomes for asthma, lead poisoning, household injury, and energy equity as well as other social indicators. SB308 will improve housing conditions, address legacy pollution, advance energy efficiency and reduce climate impacts on Maryland's most vulnerable families.

Impact of Unhealthy Housing and Environments - Asthma

The burden of asthma 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. Recent analysis has also shown the significant contributions of fossil-fuel burning appliances on NOx emissions, which contribute to ozone and asthma hazards at a greater level than power plants in the state. Compared to white residents, people of color are exposed to 60% more pollution from residential gas appliances in Maryland. Over 500,000 adults and children in Maryland have diagnosed asthma. Research has shown that race, ethnicity and income are common risk factors in asthma diagnoses and asthma episodes. 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. Many asthma episodes are preventable, yet high rates of asthma related emergency department visits and hospitalizations result in substantial medical costs for the state – including $42.1 million annually for asthma related hospitalizations and $93.3 million for asthma related ED visits.

Impact of Unhealthy Housing and Environments - Lead Poisoning

Lead poisoning from lead in paint, water, and contaminated soil contributes to significant learning disabilities, loss of IQ, speech development problems, attention deficit disorder, poor school performance and violent, aggressive behavior that heavily burdens low income communities. 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 Just 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 n low income communities. The state should concentrate existing and new program resources on the communities that show a need for reinvestment, negative histories of segregation, high imprisonment rates; and unequal exposure to environmental and health hazards. As Maryland works to reduce greenhouse gas emissions by 60% from the 2006 baseline over the next eight years under Maryland's Climate Pollution Reduction Plan, this Bill ensures that historically under-resourced and overburdened communities disproportionately impacted by legacy pollution and climate change are at the forefront in receiving the maximum benefits available in this clean energy transition. By prioritizing state funding to identified Just Communities facing multiple social, economic, health and environmental vulnerabilities exasperated by climate change, this Bill institutionalizes environmental justice--dismantling a legacy of disinvestment and racist design in Maryland.

In doing so, the state can more aggressively implement prevention policies 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 levels, 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 in maintaining a safe home. These costs represent a tremendous drain on their limited resources and create financial stressors.
- Our work providing whole-home housing interventions has shown us that there is a high housing 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 funding also strengthens housing stability and our neighborhoods, our green jobs workforce, and reduces strain on health and energy systems.

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

Maryland has a 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 produce non-energy benefits as well. Non-energy benefits are "the wider socio-economic 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 among other benefits for low income households. Furthermore, household energy

efficiency upgrades can help mitigate climate change, spur community benefits such as economic growth, neighborhood revitalization, and resilience. These investments can also support and stimulate the local economy in overburdened communities by generating local green jobs that provide families and individuals with greater disposable income and purchasing power and help alleviate poverty (Bell 2014; IEA 2014). One study found that between 9 and 13 gross jobs are generated per every $1 million investment in energy efficiency intervention programs.

This Bill also has tangible implications for improving racial equity. 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). 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 (Hernández, Aratani, Jiang, 2014; Hernández, Jiang, Carrión, Phillips, and Aratani, 2016). These differences highlight the legacy of environmental, energy 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 from climate change. From our work centered on addressing social determinants of health in the home, we know that factors outside of the home will also 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 the summer increased the risk of hospitalization for asthma by 37% in Baltimore City. Exposure to extreme precipitation events during summer months increased the risk of hospitalization for asthma in Baltimore City by 16%." Both 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 if no action is taken. Hospitalizations for asthma follow a similar pattern increasing 108% from 86.8 to 180.2 per 100,000 residents. These energy and health burdens underscore the need to increase and consolidate weatherization and environmental hazard mitigation funding in underserved communities.

SB308 represents an important commitment to prioritize resources to building a more equitable future for all of Maryland. Substantial investments in overburdened and under resourced communities are needed to address the disparities that exist. By addressing environmental risks and legacy pollution while creating healthy, affordable and sustainable housing, we can strengthen our vulnerable communities for the benefit of all residents. SB308 will build resilience and advance racial, health and energy equity by better meeting the critical needs of Maryland's vulnerable children, families and seniors. We ask for a Favorable Report on SB308.

Respectfully Submitted,

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Ruth Ann Norton
President and CEO