BUILDING A FRAMEWORK FOR HEALTHY HOUSING

2008 National Healthy Homes Conference

Stopping Lead Poisoning Before it Starts

Primary Prevention Initiatives in New York City

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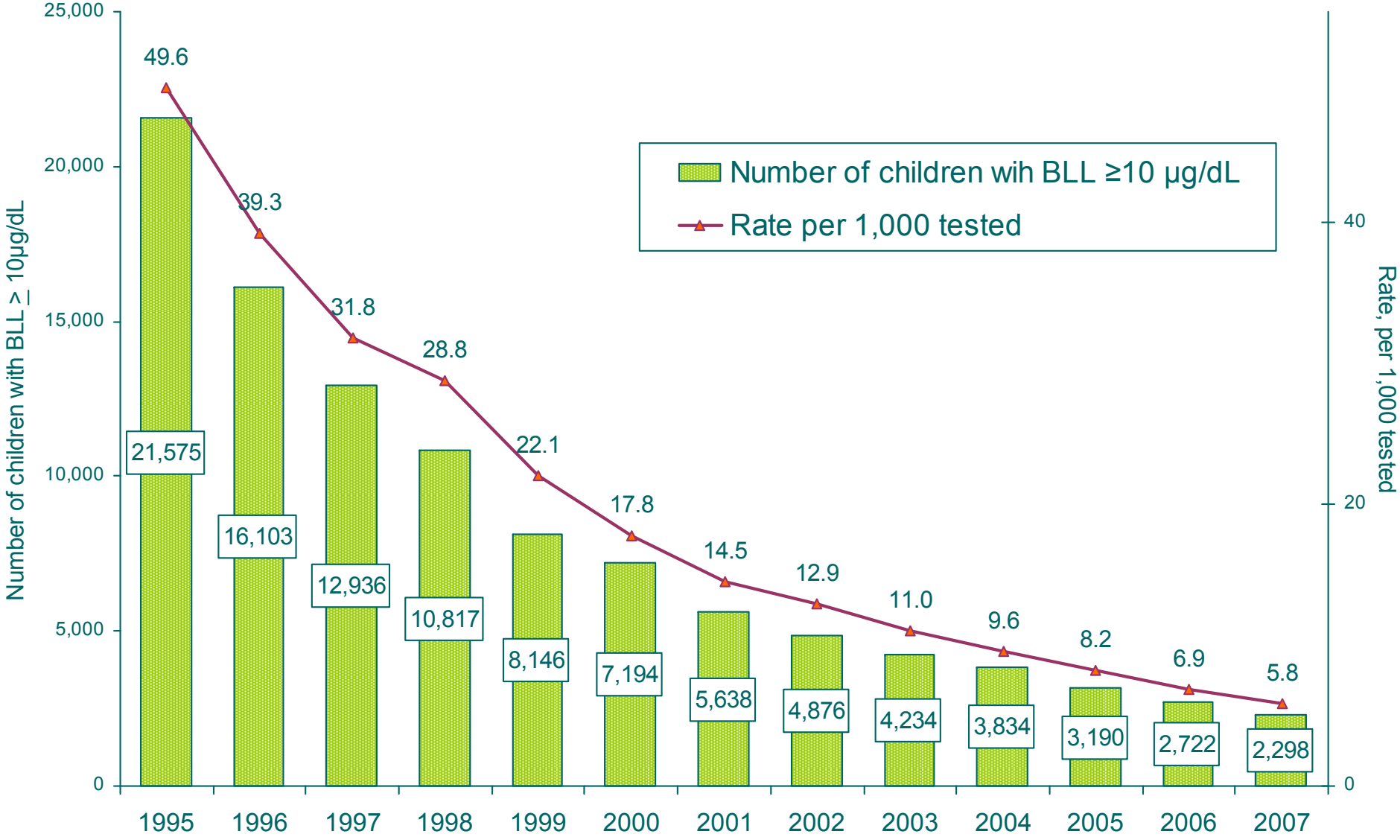
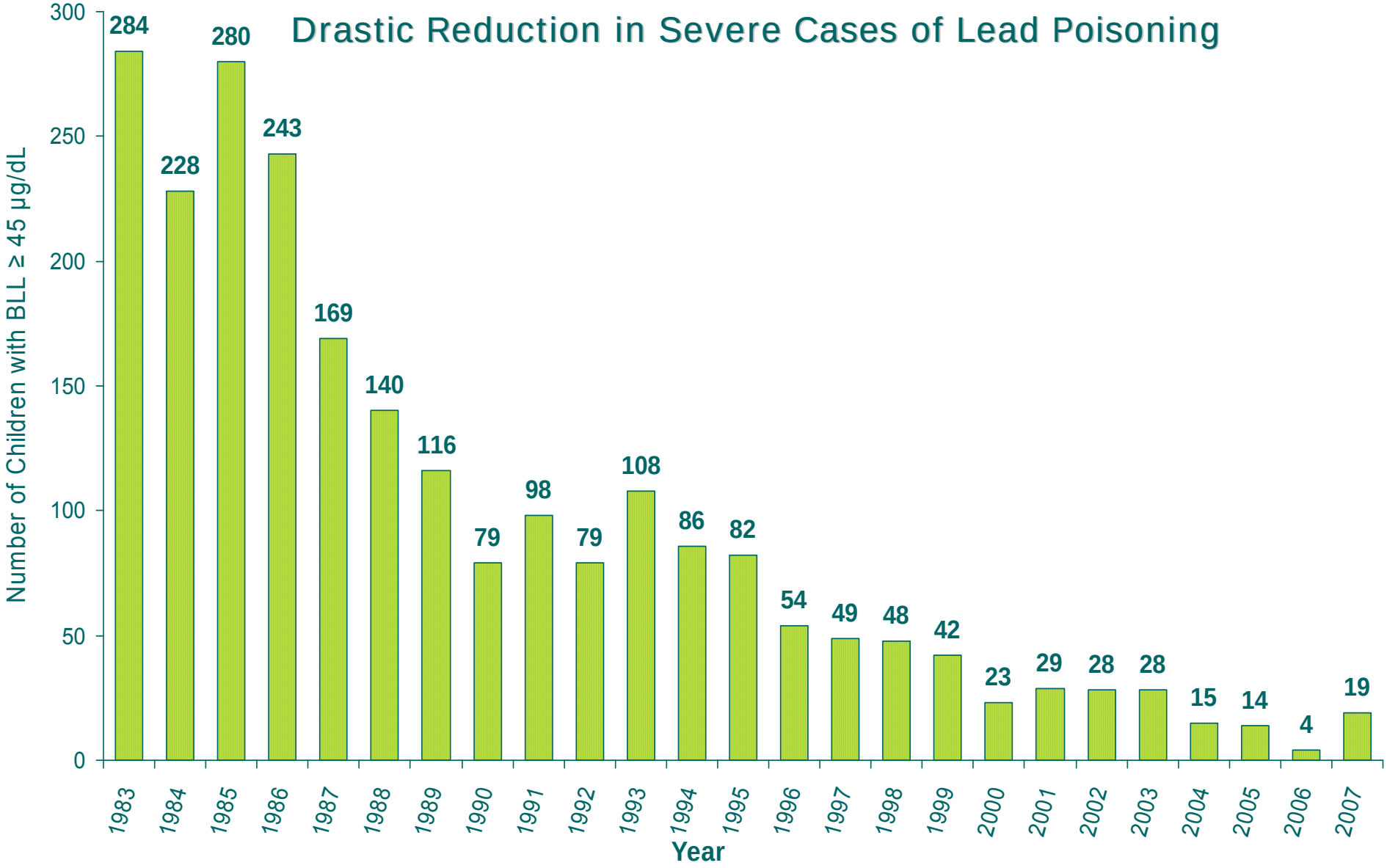
New York City Dept. of Health & Mental Hygiene
Childhood Lead Poisoning Prevention Program

Steady Decline of in Number of Lead-Poisoned Children*



Drastic Reduction in Severe Cases of Lead Poisoning



Problems remain

- Almost 2,300 children with elevated blood lead levels in 2007
- Over 24,000 children with blood lead levels between 5 and 9 in 2007
- Over 70% of the buildings were built prior to 1960

What is Primary Prevention?

- Intervention to reduce or eliminate exposures before a child is lead-poisoned:
  - Prevent the spread of lead in the environment through regulations or other measures
  - Remove lead from the environment before children are exposed

Primary Prevention in NYC: **Key Strategies**

- Policy infrastructure
- Financial incentives for building owners
- Collaboration with other programs that conduct home visits

Primary Prevention in NYC: **Existing Policy Infrastructure**

- Local Law 1
  - NYC primary prevention law
  - Building owners must inspect and safely repair lead paint hazards in the homes of young children
  - All apartments must be lead safe on turnover

Primary Prevention in NYC: **Existing Policy Infrastructure**

- The NYC Dept. of Housing Preservation & Development (HPD) is the lead city agency tasked with enforcing the housing maintenance code

- HPD has the authority to issue violations for many healthy-homes related issues
  - Peeling Paint
  - Mold
  - Carbon Monoxide Detectors
  - Heat/Hot Water

- Applies to buildings with 3 or more apartments

Primary Prevention in NYC: **Existing Policy Infrastructure**

- Enforcement of the code is typically done through a complaint-based system
- In FY 2007, there were over 20,000 complaints of peeling paint by tenants, and HPD issued over 33,000 violations for peeling lead-based paint

Primary Prevention in NYC: **Existing Policy Infrastructure**

- NYC Health Code
  - Gives DOH authority to order abatements/remediations
  - Requires safe work practices
  - Clearance dust wipe testing

Primary Prevention Activities: **Financial Incentives**

- HUD-funded Lead Hazard Control and Demonstration Grant Program
  - Focuses on primary prevention by awarding forgivable loans to building owners for lead hazard abatement/remediation
  - Currently, NYC is implementing five grants
  - Since 1995, over 3,300 apartments have been remediated

Primary Prevention in NYC: **Collaborations with other programs**

- Money to perform abatements
  - HPD

    $1,000,000 for the targeted abatement of windows and doors
  - NYCHA

    Largest property owner in NYC

    $400,000 for window/door replacement in previously foreclosed single family homes

Primary Prevention in NYC: **Collaborations with other programs**

- Incorporating lead poisoning prevention into other home visiting programs
  - Asthma Initiative
  - Newborn Initiative

Newborn Initiative: **Partners**

- DOHMH
  - DPHO
  - LPPP
  - Office of Vital Records
  - Maternal, Infant and Reproductive Health
- HPD

Newborn Initiative: **Background**

- The Newborn Initiative is administered by DOH's District Public Health Offices (DPHOs)
- The mission of the DPHOs is to reduce health inequalities across New York City by targeting resources, programs, and attention to high-need neighborhoods with persistent health problems
- Serve as "mini" health departments
- Located in three communities

Target Neighborhoods for the District Public Health Offices of the New York City Department of Health and Mental Hygiene

East and Central Harlem DPHO

110 Central Harlem
111 East Harlem

Public Health Focus:
Obesity, Access to Healthy Food, Asthma

Bronx DPHO

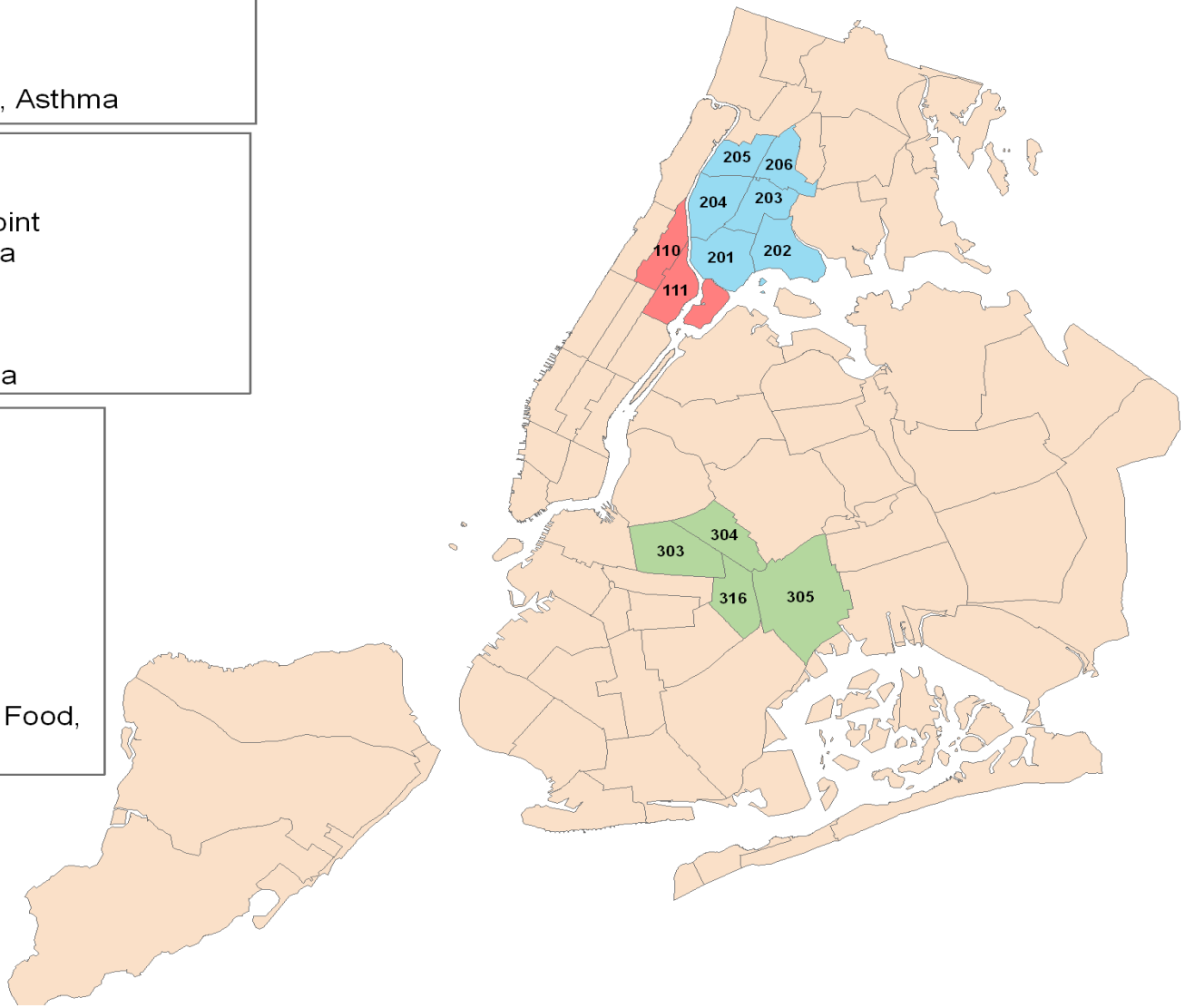
201 - 202 Mott Haven, Hunts Point
203 - 204 Highbridge, Morrisania
205 - 206 Crotona, Tremont

Public Health Focus:
Obesity, Teen Pregnancy, Asthma

Brooklyn DPHO

303 - Bedford Stuyvesant
304 - Bushwick
305 - East New York
316 - Brownsville

Public Health Focus:
Pest Control, Access to Healthy Food, Child and Maternal Health



Newborn Initiative: **Why Brooklyn?**

- Since CY 2000, over 3,500 children have been newly identified with elevated blood lead levels of 10 µg/dL or greater (EBL) in the Brooklyn DPHO target area
  - Bed-Stuy (n = 1,237) ranks 1st in NYC
  - Bushwick (n = 990) ranks 2nd in NYC

Newborn Initiative

- The DOH Office of Vital Records forwards lists of all births within the DPHO target area
- DPHO Public Health Advisors (PHA) will attempt to make a home visit to all families with newborns within the target area

Newborn Initiative: **Goals**

- Provide education about maternal and child health issues
  - Back to Sleep
  - Breastfeeding
  - Depression
  - Physical/Emotional Abuse

- Help mothers get health insurance and find a regular doctor

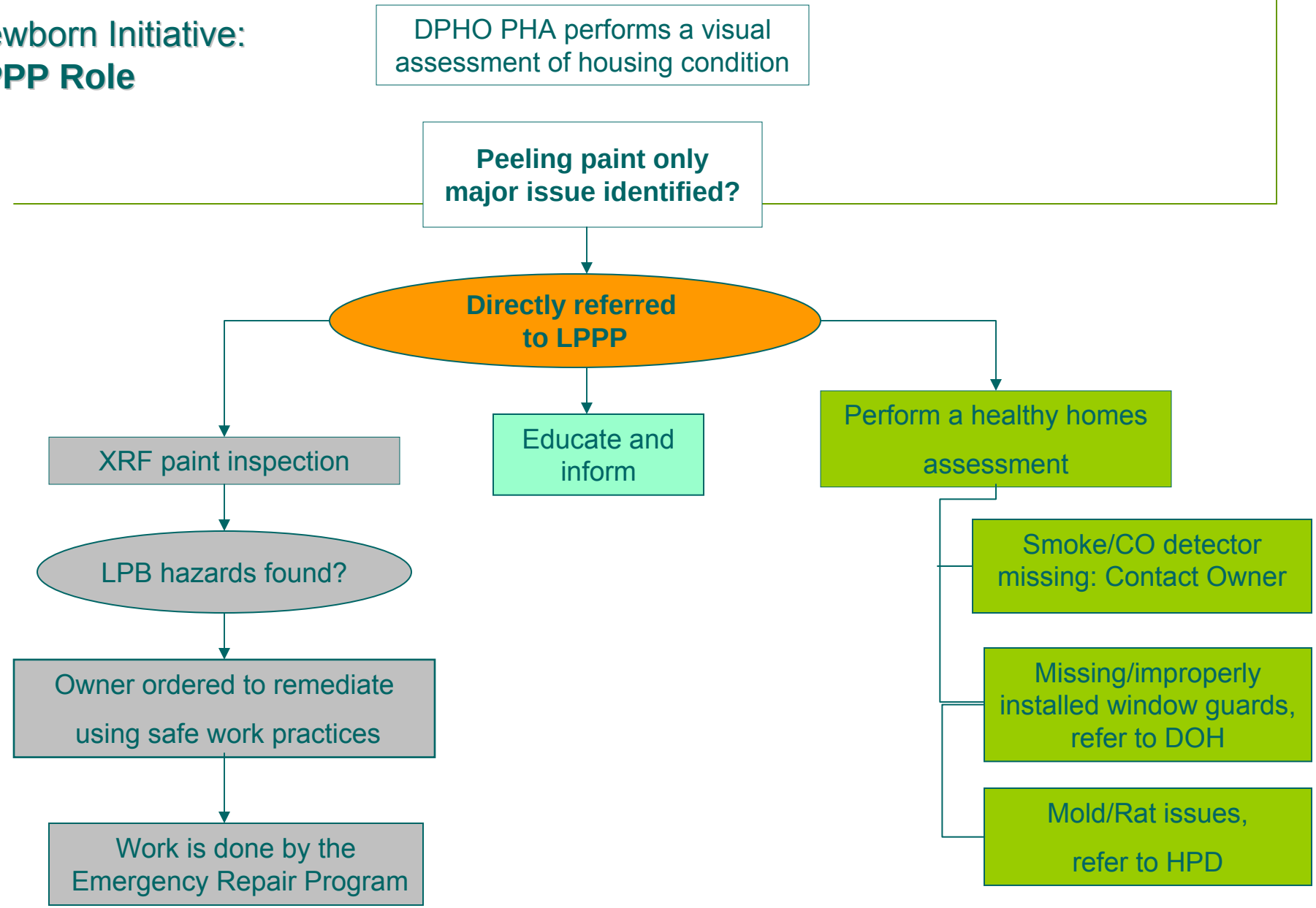
Newborn Initiative: **Goals**

- Identify environmental health hazards in the home
  - General Safety
  - Smoke/CO detector
- Provide referrals for more intensive case management as needed

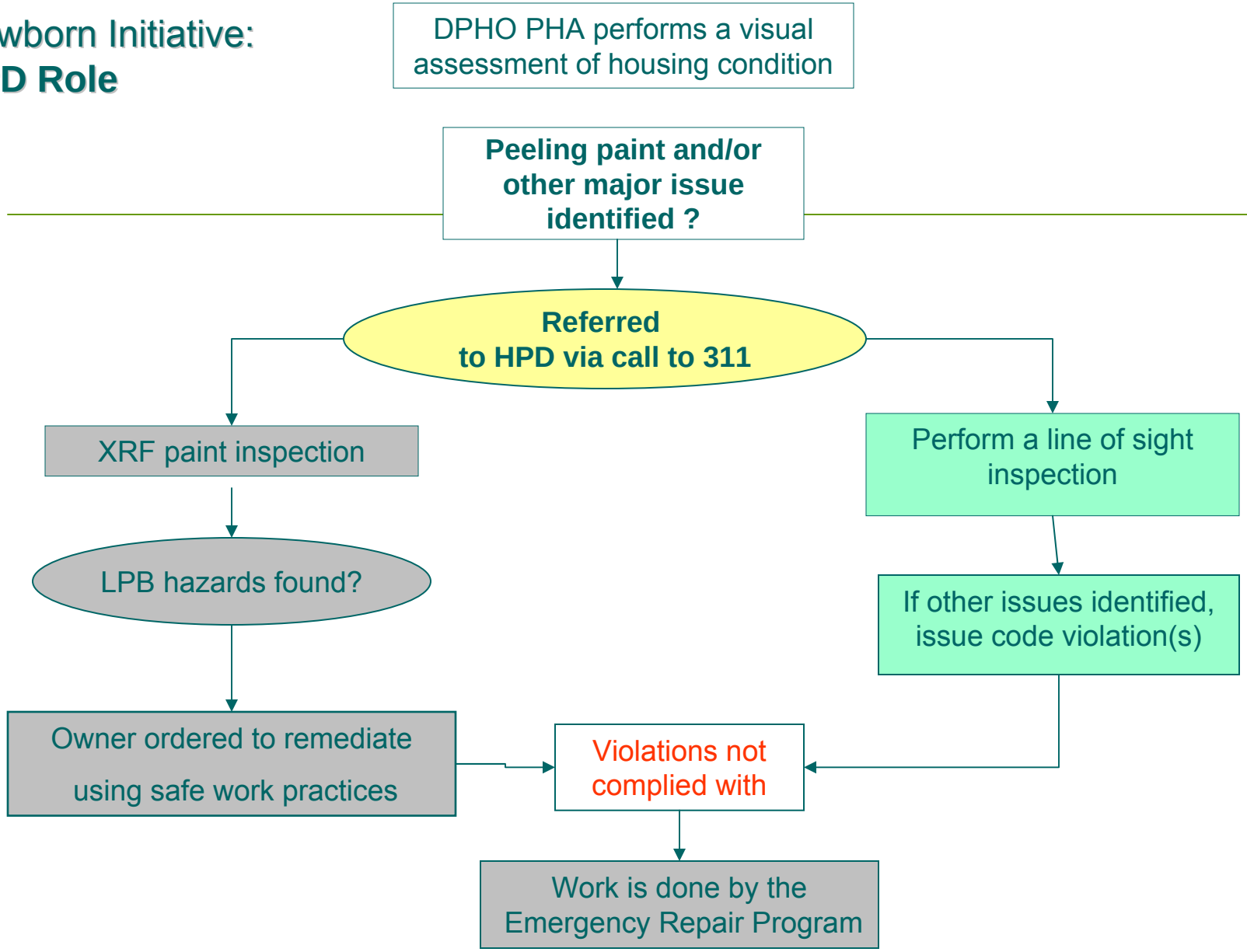
Newborn Initiative: **Process**

- As part of their visit, the PHA will conduct a visual assessment of housing condition
  - If the PHA only identifies peeling paint, then the address is referred to LPPP
  - If the PHA identifies peeling paint and other housing maintenance issues, the address is referred to HPD

Newborn Initiative: **LPPP Role**



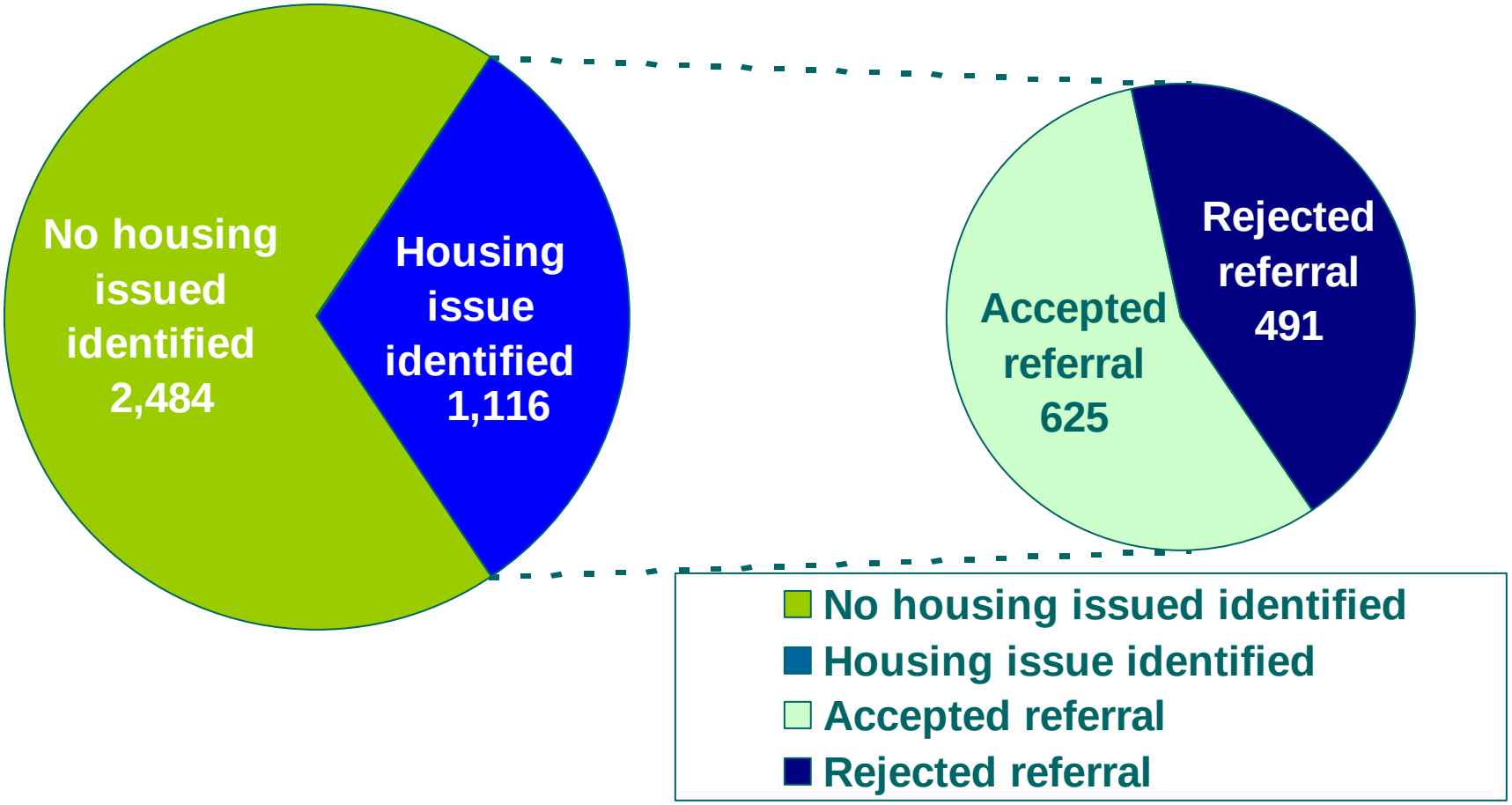
Newborn Initiative: **HPD Role**



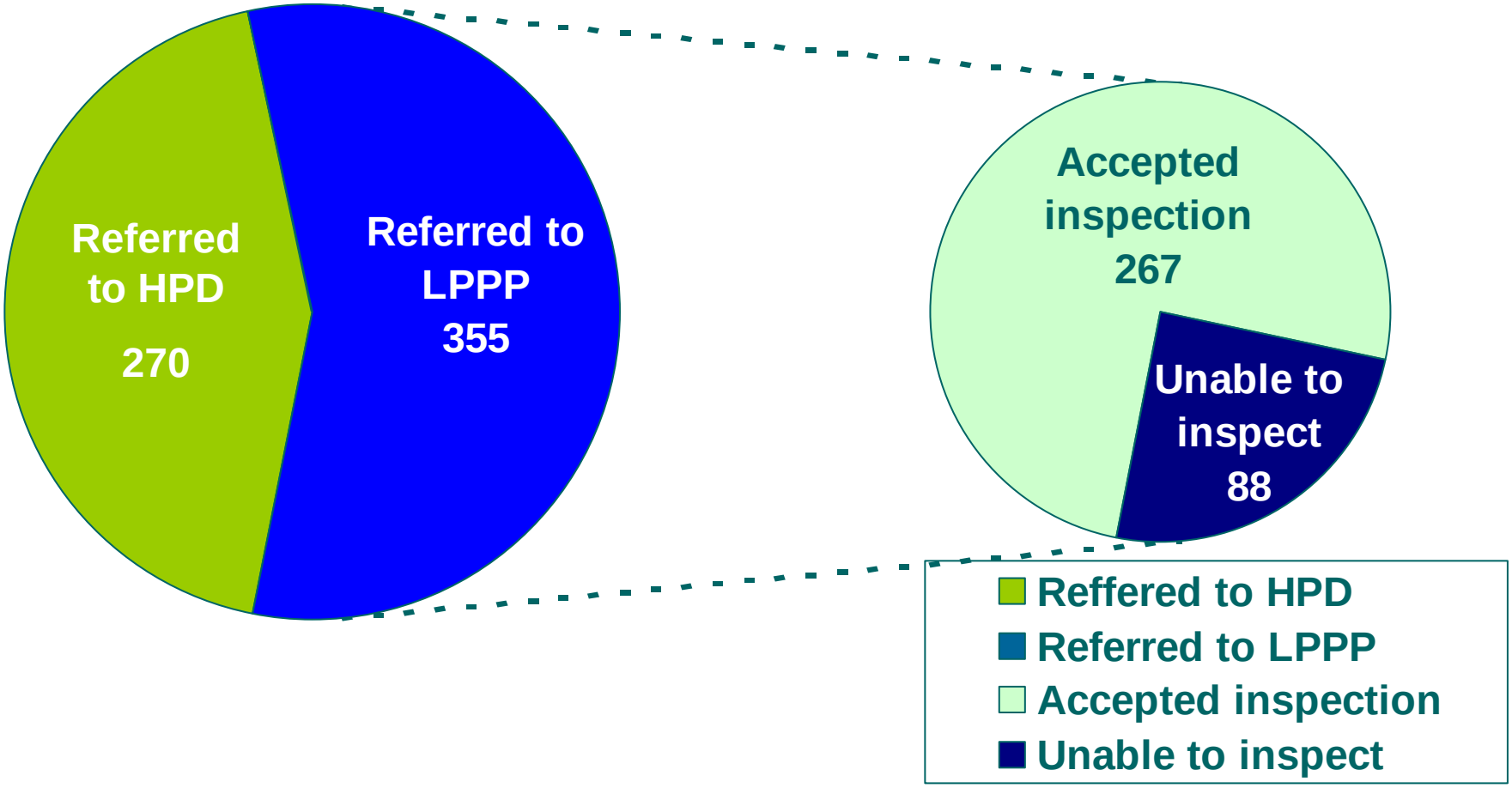
Newborn Initiative: **Program Tracking**

- Necessary to ensure follow up was conducted
- Both DOH and HPD submit quarterly reports to the Brooklyn DPHO
- DPHO also has the ability to view detailed information about referred addresses via remote connection to our database

Newborn Initiative: **Accomplishments**



Newborn Initiative: **Accomplishments**



Newborn Initiative: **Strengths**

- Targets high-risk neighborhoods
- Early prevention
- Not complaint-driven
- Part of a comprehensive intervention

Newborn Initiative: **Challenges**

- Large number of newborn families that refuse initial DPHO newborn visit
- Families with peeling paint that refuse referral to LPPP
  - ~44% refuse
  - Property owner retaliation
  - Lead is one of many issues
  - Fear of government agencies

Newborn Initiative: **Challenges**

- Coordination between multiple agencies
  - Need to cause minimum change and disruption to partners you are collaborating with

- Evaluate and address barriers as they occur
  - Less referrals – why?
  - Less inspections – why?
  - Need to retrain staff and train new staff

Newborn Initiative: **Evaluation**

- We are ending Year 3 of the initiative
  - Newborns visited in the first year should have been tested for lead poisoning at least two times at this point
  - Same goes for newborns in area that refused a referral

Newborn Initiative: **Evaluation**

- LPPP is currently performing one-time revisits to families that were referred in previous years.
- We will revisit a representative sample of families, including
  - Those referred to HPD
  - Those referred to LPPP
  - Those who initially refused a referral
- Hope to include children that did not require a referral

Newborn Initiative: **Evaluation**

Immediate Goals:

- Will perform a healthy homes inspection
- Evaluate the condition of remediated and non-remediated components
  - If new hazards are identified and young children are present, order remediation
- Educate new families/ re-educate families previously visited
- Administer a questionnaire

Newborn Initiative: **Evaluation**

- Do newborns that were successfully visited differ than newborns in same neighborhood that were not?
  - Family Demographics
  - Blood lead testing status
  - Blood lead levels

- Do they still reside in the same apartment?
  - Did they reside at the apartment at their one year birthday?

Newborn Initiative: **Evaluation**

- How well are the remediations holding up?
  - Compare units remediated 3 years ago versus 1 year ago
  - Are there fewer hazard present compared to initial inspection

- Is there a difference between units that were visited by HPD vs. LPPP?

Newborn Initiative: **Next Steps**

- Expand to include the Bronx and Manhattan DPHO
  - Referrals based on housing size
- Take on HPD referrals during winter months
  - Heat/Hot water complaints take precedence

Newborn Initiative: **Next Steps**

- Assign a staff member to recruit families that refuse referral
- Work with building owners to ‘incentivize’ remediation
  - Grants
  - Low interest, subsidized loans

Thanks !

- Yma Andries and the rest of the LPPP staff
- Chris Larkin, Phil Noyes and the rest of the DPHO staff
- Thomas O'Hagan of HPD

Targeting High Risk Pregnant and Post-partum Women in Baltimore City to prevent lead exposure, reduce asthma triggers, and tackle infant mortality.

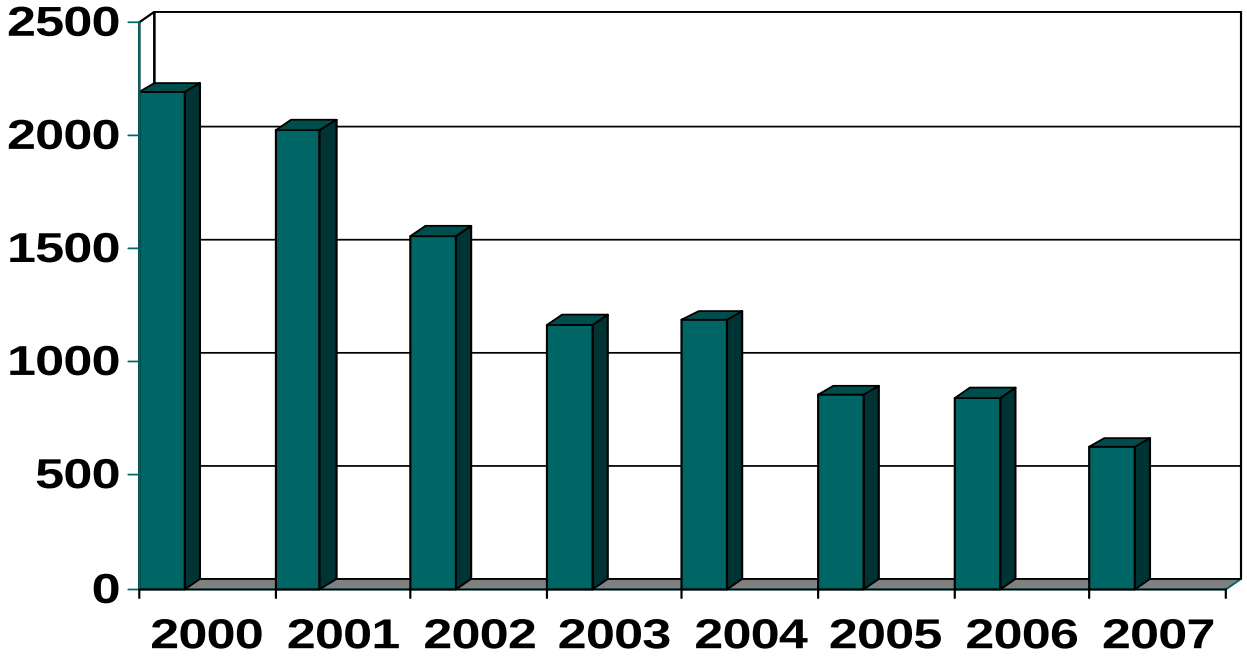
Sarah Norman, MPP

Lauren Necochea, MPA

Baltimore's Housing

- 50 years old on average (US is 30 yrs)
- 75% of rental units estimated to have lead
- Studies of low income housing show:
  - 24% leaking roofs
  - 53% peeling paint
  - 38% mouse droppings
  - 31% roaches present

Lead Exposure in Baltimore



The number of lead-poisoned children under age 6 in Baltimore decreased from 2,189 in the year 2000 to 626 in 2007.

Infant Mortality and Housing Hazards

- 89 Baltimore City infants died unexpectedly while sleeping between 2002 and 2006.

- 81 of these infants (91%) were in unsafe sleeping environments; **many co-slept with parents**, rather than in a crib (BCHD, 2007).

Primary Prevention Initiative

- New initiative in 2007 to improve the safety of pregnant mother's homes in order to reduce the burden of lead, asthma, and injury.
- Trained home visitors from six maternal and infant nursing programs to identify housing hazards and refer to our program.
- Offer home visits, supplies, education, and referrals.

Primary Prevention Initiative

- Received 228 referrals from 6 agencies serving high-risk pregnant women and mothers with young children.
- Made 120 referrals to Maryland Department of the Environment for enforcement of the state lead laws.
- 84 home visits, with assessments, risk-specific education and motivational interviewing techniques, cleaning and other healthy housing supplies, and referral to resources.
- On-going training and communication with referring agencies.

Connecting families to healthy housing resources

Supplies: Cleaning kits, cribs, roach bait stations, caulk, books, mice glue traps, nightlights.

Referrals: Coalition to End Childhood Lead Poisoning, University of Maryland Breathmobile, Lead Abatement Action Program, Health Care Access, Baltimore Infants and Toddlers, Asthma program, Housing, 311, Fire Department, Maryland Department of the Environment, St. Ambrose Housing Counseling Services, Energy Assistance, United Way 211.

Referrals to Maryland Department of the Environment

7/1/07 – 6/30/08:

57 referrals

- 63% - Action taken
- 37% - Violation notice issued
- 18% - Cases referred to Office of Attorney General for issuance of civil complaint order and penalty
- 5% - Settlement agreement and consent order
- 12% - Registration letter
- 16% - Advisory letter

Crib distribution

- Community health workers identified the need for and delivered 23 cribs to 80 of the families visited (29%)

Evaluation

Subset of cases

- 59% were pregnant mothers
- 41% had young children

Population – Household size

- Avg number of people in unit = 4.9
- Avg number of children in unit = 2.5
- Avg number of people with a disability who require care = 0.23

Population – Income

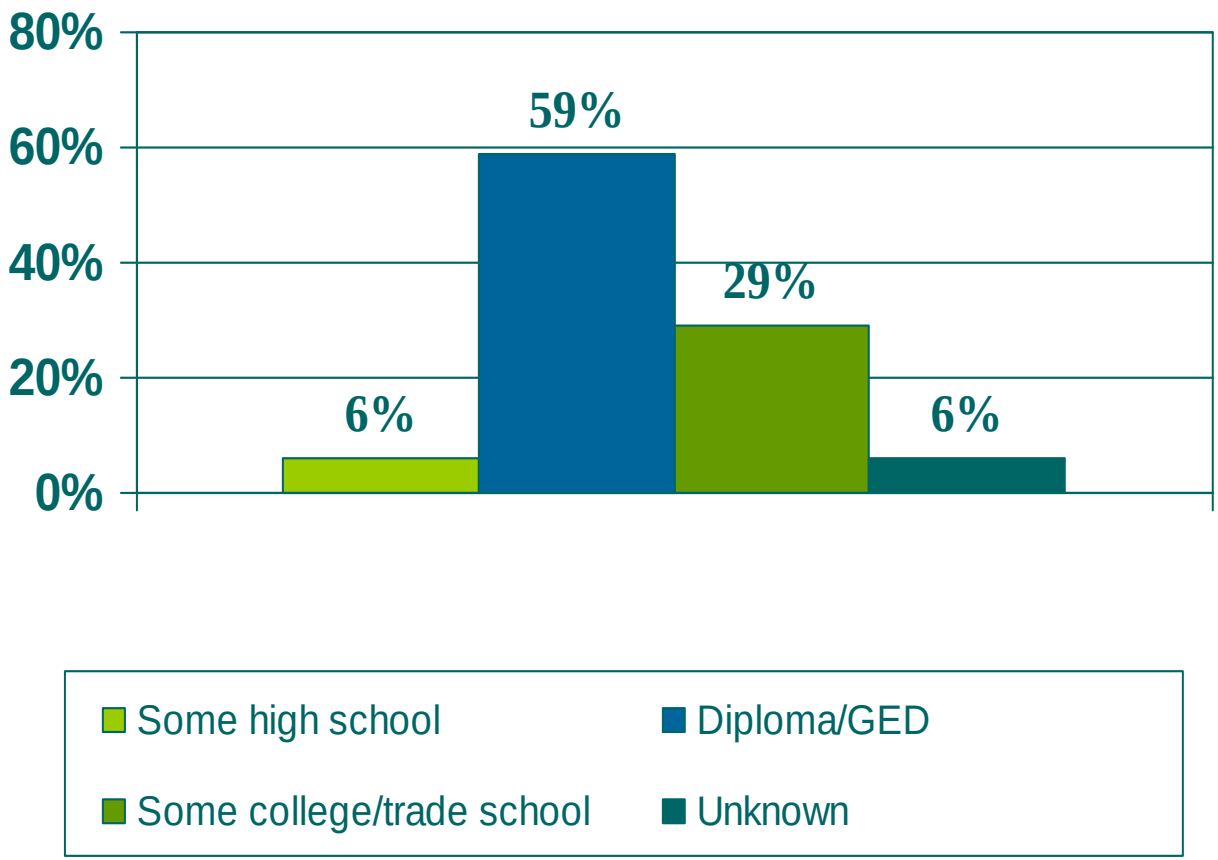
- Median household income is $480/month
- 40% of households reported $0 in income.
- Median income per person = $139

Population

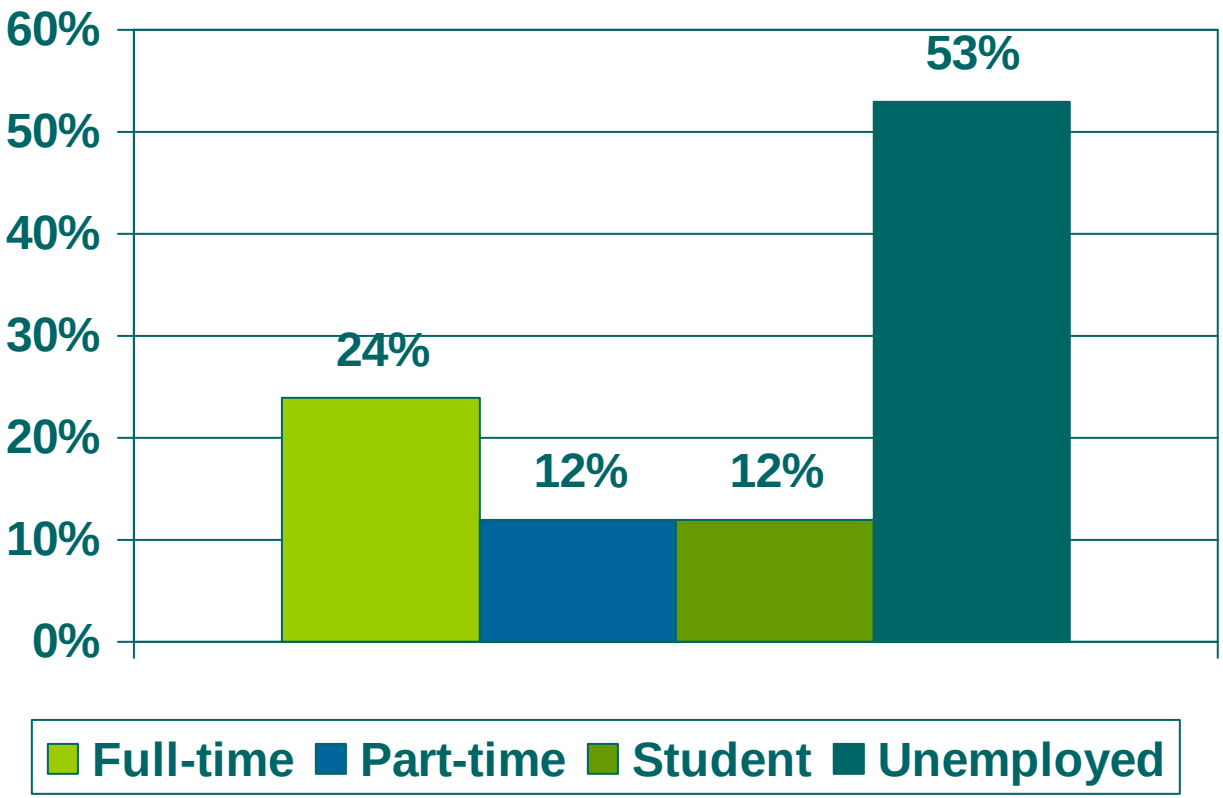
Race/Ethnicity	
Black/African American	76%
White	18%
Other	6%

Two families immigrated to U.S. within last three years. Both spoke English (one also spoke French).

Population - Education



Population - Employment



Population - Renters

- 41% live in rental properties
  - 57% of renters have a written lease
  - 30% of renters have Section 8/Housing Choice voucher
  - Average monthly rent is $648

Evaluation

- Simple Pre/Post Comparison
  - Follow-up visit made 3+ months after initial home visit
  - 17 Primary Prevention Initiative cases had complete initial visits (medical and visual) and complete follow-up

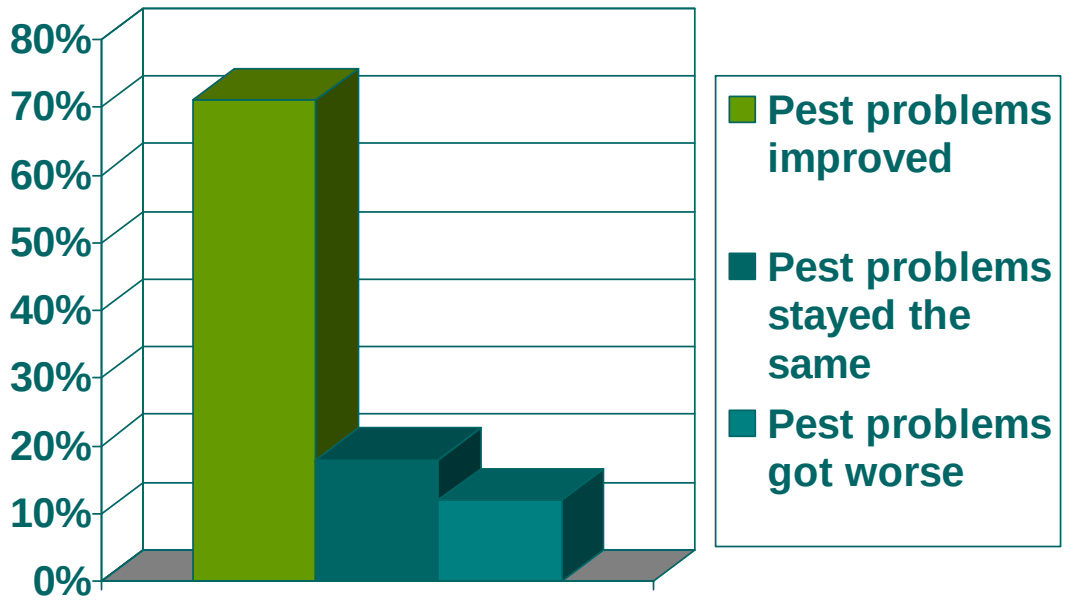
Indoor Smoking

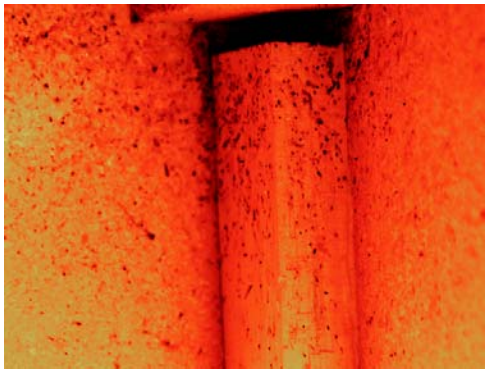
	Initial	Follow-up
Reported indoor smoking	59%	53%
Number of indoor smokers	0.76	0.59
Evidence of smoking	58%	42%

Safe Sleep

- At follow-up, 13 homes had infants (76% of homes visited).
- 100% of infants had their own cribs.

Pests

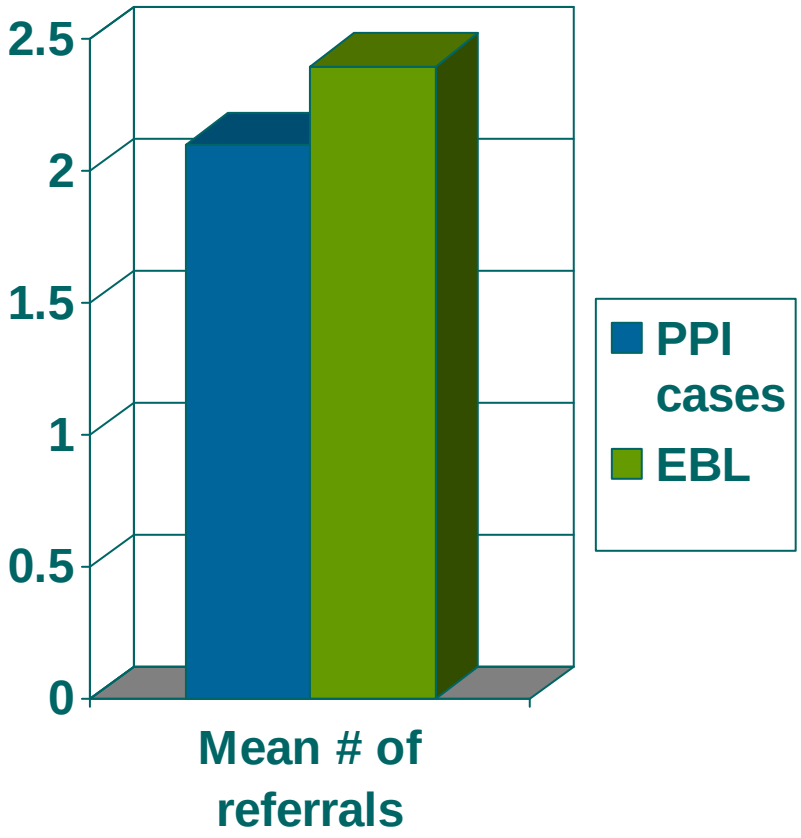

80%
70%
60%
50%
40%
30%
20%
10%
0%
Pest problems improved
Pest problems stayed the same
Pest problems got worse



Housekeeping

	Initial	Follow-up
Home “appeared clean”	31%	63%
Free of garbage/debris	22%	44%
Hoarding Scale 1-10	2.1	3.1
Food debris on gas range	44%	44%

Referrals



Partners:

- Coalition to End Childhood Lead Poisoning
- BCHD – Lead Abatement Action Program
- Housing
- 311
- University of Maryland Breathmobile
- Energy Assistance
- Health Care Access
- Baltimore Infants and Toddlers program

Referrals

	% of cases referred
CECLP (Coalition)	47%
Fire Department	41%
Baltimore Asthma Program	24%
311 (Housing, Rat Rubout)	24%
Baltimore Infants and Toddlers	12%

Referrals

	% of cases referred
Lead Abatement Action Program	12%
LEAP (window replacement)	12%
QUIT (smoking cessation)	6%
Johns Hopkins Safety Center	6%
Other	6%

Success Stories

We visited a pregnant mother with severe asthma, bed bugs, chipping peeling paint, and leaks. By working with a variety of organizations – Coalition to End Childhood Lead Poisoning, St. Ambrose Housing Counseling Services, the mother's physician, and others – the mother was able to eliminate bedbugs, reduce cockroaches, eliminate rat burrows, file multiple home-ownership claims, receive lead abatement funding and repairs, and reduce asthma symptoms.

Lessons Learned

- **One size does <u>NOT</u> fit all.**
- **Investing in a locally-specific, high quality database pays.**
- **Maintaining referral relationships requires extensive communication and training.**
- **Complexity of housing issues requires extensive staff training.**
- **Housing is an economic issue.**

Questions?

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