Healthy Homes Grantees in Region II, New York/New Jersey

Name of Grantee: Mount Sinai School of Medicine
Name of Project: East Harlem Asthma Working Group
Amount Awarded: $950,000
Year of Grant: 2002
Contact Info:

Project Partners: Mount Sinai Division of General Pediatrics, Micro Ecologies, Inc., The Office of Chris Benedict, R.A., STRIVE/East Harlem Employment Service, Inc., The NY City Department of Health; and 6) the NYC Department of Housing Preservation and development.

Summary of Project Activities:
The major collaborative partner in the Healthy Families Healthy Homes project is the East Harlem Asthma Working Group (EHAWG). Members of this group first came together in 1996 through their common desire to address the asthma crisis in East Harlem, and in particular to assist in controlling pediatric asthma in this community. Their efforts have resulted in the identification of a number of issues of housing inequities, and their contributions to urban asthma have been recognized.

The Departments of Community and Preventive Medicine and Pediatrics host one of eight Centers for Children’s Environmental Health and Prevention Research. The Pew Charitable Trusts helped establish the Center for Children’s Health and the Environment, the nation’s first pediatric environmental health policy center. Pediatric asthma is central to their mission. Other collaborative partners include: 1) the Mount Sinai Division of General Pediatrics. The Pediatric Associates Asthma Follow-up Clinic is designed to provide rapid follow-up for patients who have recently presented to the Emergency Department or the Inpatient ward within 24-48 hours post asthma exacerbation; 2) Micro Ecologies, Inc. was founded in 1993 to provide environmental evaluations and clean-up solutions in the New York area. It has conducted health based investigations, performed or directly supervised the decontamination work and implementation of engineering controls for several thousand clients; 3) The Office of Chris Benedict, R.A. a firm specializing in projects that incorporate green building materials, healthy housing practices and energy efficient building systems; 4) STRIVE/East Harlem Employment Service, Inc.: a non-profit employment training and placement agency whose mission is to help men and women find jobs and achieve financial independence; 5) The NY City Department of Health; and 6) the NYC Department of Housing Preservation and development.

Socio-Demographics and Housing Characteristics

East Harlem (EH), located on the northern tip of Manhattan, between E. 96 Street and E. 125 Street in New York City, is one of the poorest communities in the nation. The median annual income is $17,205. The 2000 census population was 117,743. 27.5 percent of EH residents are younger than 18 years and 72.5% are aged 18 years and older. The population is ethnically diverse, with 61% of Hispanic origin and 35.7% African American. East Harlem has a strong Mexican presence, many of which are undocumented. Data from the 2000 census show 36.7% of the population receiving public assistance. Fewer than 24% of households consist of a married couple, and over 35% are female-headed.

East Harlem has a very high incidence of severe childhood asthma, with pediatric asthma hospitalization rates the highest in the nation. The very poor condition of their housing exacerbates the severity of childhood asthma. East Harlem has the highest concentration of public housing
developments in New York City. Forty percent of the total housing stock is in public housing complexes while 22 percent is in other publicly funded, subsidized, or restricted housing. 23 percent of the land use is for multi-family residential housing, and 93 percent of all housing units are renter-occupied. The average age for all housing structures in EH is 50 years or older. In 1999, 14% of the housing stock was rated poor and more than 12% of the buildings had structural deficiencies. In the 1960s, significant areas of EH were set aside as Urban Renewal Areas and cleared of stores, factories, churches and social clubs. But, due to low market estimates and lack of bank support, they were never rebuilt. These vacant areas have had a lasting effect on the neighborhood, and plans are only now being made for their use.

**Scope of the Project**

The intent of this proposal is to provide 150 at-risk families with education in asthma management and also with in-home interventions that will minimize the potential for severe asthma exacerbation for children living in these homes. Project activities include 1) recruitment of families with young children with asthma, 2) assessment of housing for asthma triggers, housing code requirements, structural problems, insect and rodent infestation, sources of mold lead poisoning, 3) development and implementation of a structural remediation plan, 4) relocation of families temporarily, as needed and 5) training of environmental workers by STRIVE and 6) recruitment of community health workers from EH. There will be referral for medical case management, community education and outreach activities and provider education for community physicians.

**How the Work will be Accomplished**

In-home asthma interventions developed by the project team of MSSM/EHAWG to date include IPM, mattress covers, plastic containers, etc. It involves a one-on-one, hands-on approach in working with the families. The community health worker and the parents together apply a low-toxicity pesticide gel, vacuum behind the refrigerator, under the beds, discuss the home maintenance and establish a plan. The CHW follows the family for 12 months, and assists in contacting landlords and city agencies to address structural deficiencies and leaks. We propose to augment these interventions with structural repairs, mold remediation, provision of Hepa-vacuums and room air conditioners for the child’s bedroom as needed and other supplies as required. Micro Ecologies will provide services in IPM and Mold Remediation, using workers trained by STRIVE.

**Product Outcomes/Outputs:**

It is anticipated that approximately 15 homes (10 percent of participating families) will require renovations of 50 square feet, and 20 or more will require renovations of less than 50 square feet. We estimate that 10 homes will have problems with a severity level requiring architectural plans to be filed with New York City. We will retain the services of an architect, who has developed an energy-safe “green building” approach, to assess the homes and prepare and file these plans.

Group educational programs will be provided to teach families how to manage their home environment. Each program will feature an educational component, including demonstrations of how to use equipment, such as peak flow meters and spacers. Equipment and materials will be made available for children who cannot access these resources through their health insurance or other modality.

**Significance**

Healthy Families, Healthy Communities will work to affirmatively further fair housing in this community, thereby addressing HUD’s priority goals of improving the quality of public housing, providing more choices for its residents, and increasing the participation of community-based
organizations and community workers in providing cost-efficient care. This project focuses on preventive measures, both in health and home, to decrease the incidence of asthma exacerbations in children in East Harlem, in the spirit of environmental justice.