



## Connecticut Healthy Housing Fact Sheet

The home is the most dangerous place for U.S. families.<sup>i</sup> Nearly six million families live in housing rivaling that of developing countries, with broken heating and plumbing, holes in walls and windows, roach and rodent infestation, falling plaster, crumbling foundations, and leaking roofs. Millions more in all 50 states live in housing with serious health and safety hazards, including mold, exposed wiring, radon, unvented heaters, toxic chemicals, broken stairs, missing smoke detectors, and other hazards.<sup>ii</sup> Home-based interventions to address health hazards improve health and have a large return on investment: Each dollar invested in lead paint hazard control results in a return of \$17–\$221<sup>iii</sup> and each dollar invested in asthma home-based interventions that include education and remediation results in a return of \$5.30 to \$14.00.<sup>iv</sup>

### The need in Connecticut

Forty-one percent of children in Connecticut live in households with high housing cost burden, and approximately 15% of children in Connecticut live in poverty.<sup>v</sup> The potential effect of high housing cost burden and poverty on children and families is exacerbated by the age of Connecticut's housing stock, which is considerably older than the national average. Of Connecticut's 1.5 million housing units, 73% was built prior to 1980, compared to 57% nationally, and 46% was built prior to 1960.<sup>vi</sup> Nearly a quarter of Connecticut homes were built in 1939 or earlier. Connecticut's older housing stock is concentrated in the urban areas of the state; the city of New Haven has 47,271 pre-1980 housing units, comprising 86% of the total housing stock in the city. Connecticut's cities also have the highest prevalence rates for lead poisoning, asthma, injury, and tobacco use compared to other locations. Poverty rates increased from 9.4% of Connecticut residents in 2009 to 10.1% in 2010. In 2010, 12.8% of Connecticut's children lived in families with incomes below the federal poverty level.<sup>vii</sup>

### The need for funding

To protect the health of Connecticut families and prevent continued increases in associated healthcare costs and societal consequences, full funding in FY 2016 and beyond is needed for the following:

- ✓ **CDC's Healthy Homes and Lead Poisoning Prevention Program = \$29,257,000**
- ✓ **CDC's National Asthma Control Program = \$30,596,000**
- ✓ **HUD's Office of Lead Hazard Control and Healthy Homes = \$120,000,000**

### Funding for healthy housing in Connecticut

- Since 1999, the state of Connecticut, eligible cities, and qualifying nonprofits have received \$116,436,341 in funding from HUD's Office of Healthy Homes and Lead Hazard Control for lead hazard reduction, healthy homes production, and education and outreach activities, including \$3.9 million awarded to the city of Hartford in 2014.<sup>viii</sup>
  - The city of New Haven has received five HUD Lead Hazard Control Grants totaling more than \$11 million for lead abatement and housing rehabilitation since 1994.
- Connecticut has received a total of \$9,790,471 in funding from the Centers for Disease Control and Prevention's Healthy Homes and Lead Poisoning Prevention and National Asthma Control programs from FY05 – FY14. Of this funding:

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- Connecticut Department of Public Health has received a total of \$5,918,677 from the Healthy Homes and Lead Poisoning Prevention Program, most recently in FY14 for \$373,921.
- Connecticut State Department of Public Health has also received a total of \$3,871,794 in funding for asthma-related activities including \$601,000 in FY14.
- The Connecticut Department of Health has been funded by CDC's National Asthma Control Program since 2001.<sup>ix</sup>

### **Lead poisoning**

- In 2012, 4,521 of the children tested in Connecticut had an elevated blood lead level, which is five or more micrograms of lead per deciliter of blood ( $\mu\text{g}/\text{dL}$ ); 533 of them had blood lead levels of 10  $\mu\text{g}/\text{dL}$  or more.<sup>x</sup>
- Each year, approximately 700 children in Connecticut are newly diagnosed with lead poisoning.<sup>xi</sup>
- Black (1.6%) and Hispanic (1.5%) children were more likely to have EBLLs of greater than or equal to 10  $\mu\text{g}/\text{dL}$  than white children (0.8%).<sup>xii</sup>
- 42 children in New Haven were identified as having blood lead levels above 15  $\mu\text{g}/\text{dL}$  in 2012.

### **Asthma**

- The prevalence of current asthma among Connecticut adults increased from 7.8% in 2000 to 9.4% in 2009. In 2009, the estimated prevalence of diagnosed asthma in Connecticut children was 11.9%. Nearly 12% of the population has asthma, a higher rate than the national average.<sup>xiii</sup>
- In 2009, Connecticut spent more than \$112 million for acute care due to asthma as a primary diagnosis, \$80.3 million on hospitalization charges, and \$32.6 million on emergency room visit charges. Three out of four (74.5%) asthma hospitalizations by residents of the five large cities were paid by public funds (Medicaid or Medicare), compared to about half (52.7%) by residents from the rest of Connecticut.<sup>xiv</sup>

### **Radon**

- The majority of Connecticut is located in a high or moderate potential radon zone and four out of eight counties are in "red" or high radon-risk zones.<sup>xv</sup>
- One in five homes in Connecticut has elevated levels of radon in the indoor air. Reducing radon in homes reduces the risk of lung cancer.<sup>xvi</sup>

### **Carbon monoxide deaths**

- There were 52 deaths in Connecticut due to carbon monoxide exposure in 2000-2007.<sup>xvii</sup>

### **Injury-related deaths**

- Unintentional injuries are the leading cause of death for Connecticut residents between the ages of one and 44 years of age. For every 100,000 persons in Connecticut, there were 27.19 unintentional injury deaths caused by dangers other than automobile-related issues.<sup>xviii</sup>

### **National rankings**

- NCHH's 2013 *State of Healthy Housing* report ranks 45 metropolitan statistical areas according to healthy housing related data in the American Housing Survey. The state of Connecticut has one city

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included in this report: Hartford Seattle is tied for 24<sup>th</sup> and is categorized as having “fair” healthy housing characteristics.<sup>xix</sup>

- The Asthma and Allergy Foundation of America’s listing of “Asthma Capitals” for 2014 ranks the 100 largest U.S. metro areas to identify the “most challenging places to live with asthma.” The state of Connecticut has three cities identified in this listing: New Haven, Bridgeport, and Hartford are ranked as the 11<sup>th</sup>, 28<sup>th</sup>, and 39<sup>th</sup> “most challenging” places to live with asthma.<sup>xx</sup>

### Healthcare financing for healthy homes<sup>xxi, xxii</sup>

The National Center for Healthy Housing’s November 2014 [study](#) regarding state Medicaid reimbursement policies for environmental health services in the homes of people with asthma and children exposed to lead shows that in [Connecticut](#) although some level of Medicaid reimbursement is in place for activities related to asthma, none is in place for activities related to lead.<sup>1</sup>

Opportunities for Connecticut to further improve reimbursement of environmental health services include:

- Effecting coverage for healthy homes services addressing lead in the home environment.
- Ensuring that services and supports are included to eliminate or reduce exposure to asthma triggers or lead hazards identified in the home environment.
- Extending coverage for asthma control services to include those administered by non-traditional providers such as certified asthma educators and community health workers.

### For additional information, please contact:

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<sup>i</sup> Centers for Disease Control and Prevention. (2007). Injury in the United States: 2007 chartbook. Retrieved from <http://www.cdc.gov/nchs/data/misc/injury2007.pdf>

<sup>ii</sup> National Center for Healthy Housing. (2013). State of healthy housing. Retrieved from <http://www.nchh.org/Policy/2013StateofHealthyHousing.aspx>

<sup>iii</sup> Gould, E. (2009, July). Childhood lead poisoning: Conservative estimates of the social and economic benefits of lead hazard control. *Environmental Health Perspectives*, 117(7), 1162-1167. Retrieved from <http://ehp.niehs.nih.gov/wp-content/uploads/117/7/ehp.0800408.pdf>

<sup>iv</sup> The Guide to Community Preventive Services (The Community Guide). (2013, September 27). Asthma control. Retrieved from <http://www.thecommunityguide.org/asthma/multicomponent.html>

<sup>v</sup> The Annie E. Casey Foundation. 2014 *Kids Count Data Book: Connecticut State Profile*. Retrieved from [http://www.aecf.org/m/databook/2014KC\\_profile\\_CT.pdf](http://www.aecf.org/m/databook/2014KC_profile_CT.pdf)

<sup>vi</sup> American Community Survey 2004. *Percent of Housing Units That Were Built in 1939 or Earlier by State*. Retrieved from [http://www.statemaster.com/graph/hou\\_per\\_of\\_hou\\_uni\\_tha\\_wer\\_bui\\_in\\_193\\_ear-units-were-built-1939-earlier](http://www.statemaster.com/graph/hou_per_of_hou_uni_tha_wer_bui_in_193_ear-units-were-built-1939-earlier)

<sup>vii</sup> Connecticut Department of Public Health and Connecticut Healthy Homes Data Book. *The State of Housing in Connecticut: A Healthy Homes Initiative*. Retrieved from [http://www.ct.gov/dph/lib/dph/environmental\\_health/ehoa/pdf/hh\\_data\\_book.pdf](http://www.ct.gov/dph/lib/dph/environmental_health/ehoa/pdf/hh_data_book.pdf)

<sup>viii</sup> [http://portal.hud.gov/hudportal/HUD?src=/press/press\\_releases\\_media\\_advisories/2014/HUDNo\\_14-117](http://portal.hud.gov/hudportal/HUD?src=/press/press_releases_media_advisories/2014/HUDNo_14-117)

<sup>ix</sup> <http://www.cdc.gov/asthma/contacts/ct.htm>

<sup>x</sup> Centers for Disease Control and Prevention. Number of Children Tested and Confirmed EBLs by State, Year, and BLL Group, Children < 72 Months Old. Retrieved from <http://www.cdc.gov/nchc/lead/data/StateConfirmedByYear1997-2012.htm>

<sup>xi</sup> Connecticut Children’s Medical Center LAAMP Project.

<sup>xii</sup> Connecticut Department of Public Health and Connecticut Healthy Homes Data Book. *The State of Housing in Connecticut: A Healthy Homes Initiative*. Retrieved from [http://www.ct.gov/dph/lib/dph/environmental\\_health/ehoa/pdf/hh\\_data\\_book.pdf](http://www.ct.gov/dph/lib/dph/environmental_health/ehoa/pdf/hh_data_book.pdf)

<sup>xiii</sup> National Association for State Community Services Programs (NASCSP) on behalf of the U.S. Department of Energy, as part of the Weatherization Plus Health Initiative.

<sup>xiv</sup> Connecticut Department of Public Health and Connecticut Healthy Homes Data Book. *The State of Housing in Connecticut: A Healthy Homes Initiative*. Retrieved from [http://www.ct.gov/dph/lib/dph/environmental\\_health/ehoa/pdf/hh\\_data\\_book.pdf](http://www.ct.gov/dph/lib/dph/environmental_health/ehoa/pdf/hh_data_book.pdf)

<sup>xv</sup> National Association for State Community Services Programs (NASCSP) on behalf of the U.S. Department of Energy, as part of the Weatherization Plus Health Initiative.

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<sup>xvii</sup> CDC Environmental Health Tracking Network (2000-2007). Carbon Monoxide Deaths (#)/Multi-Year Period. Retrieved from <http://ephtracking.cdc.gov/QueryPanel/EPTHQuery.html?c=CO&i=1&n=1#>

<sup>xviii</sup> CDC’s WISQARS Database: Injury Statistics Query & Reporting System. Composite indicator (excluding estimated 20% of unintentional deaths related to motor vehicles). Unintentional Deaths in Home/Death Rate (per 100,000). Retrieved from <http://www.cdc.gov/injury/wisqars/index.html>

<sup>xix</sup> <http://www.nchh.org/Policy/2013StateofHealthyHousing/NationalRankings/tabid/861/healthy/1/Default.aspx>

<sup>xx</sup> [http://www.aafa.org/pdfs/2014\\_AC\\_FinalPublicList1.pdf](http://www.aafa.org/pdfs/2014_AC_FinalPublicList1.pdf)

<sup>xxi</sup> <http://www.nchh.org/Resources/HealthcareFinancing/Snapshot.aspx>

<sup>xxii</sup> National Center for Healthy Housing. (2014). Healthcare Financing of Healthy Homes: Findings from a 2014 nationwide survey of state reimbursement policies. Retrieved from [http://www.nchh.org/Portals/0/Contents/Reimbursement%20Landscape\\_MAIN%20REPORT\\_FINAL%2018%20November%202014.pdf](http://www.nchh.org/Portals/0/Contents/Reimbursement%20Landscape_MAIN%20REPORT_FINAL%2018%20November%202014.pdf)

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<sup>1</sup> Note: (a) These are self-reported results that have not been independently verified, and (b) the existence of a policy does NOT mean that services are actually being delivered on the ground.