

**TESTIMONY PRESENTED TO CITY COUNCIL COMMITTEE ON LICENSES AND
INSPECTIONS
AND THE COMMITTEE ON PUBLIC HEALTH AND HUMAN SERVICES**

Regarding Resolution 160988

BY:

Daniel R. Taylor, D.O., FAAP
Associate Professor of Pediatrics Drexel University College of Medicine
St. Christopher's Hospital for Children

March 20, 2017

First, I would like to thank Councilwoman Gym for initiating this extremely important resolution and for being an unwavering advocate for the health and wellness of the families of Philadelphia and for her demands of justice for the children and families who live in poverty. I would also like to thank council member Quines-Sanchez, a great advocate for the families we serve at St. Christopher's Hospital for Children, and Cindy Bass, a great friend and tireless advocate for families in the great northwest.

This council, and the hearings today, are an important steppingstone in addressing an issue that affects far too many families in Philadelphia, and adversely affects the health of these families.

I am here today, as a pediatrician, dedicated for the past 15 years to working with families affected by poverty, to discuss the science behind housing insecurity, substandard housing, and evictions on the minds and bodies of the families that we are all here to serve and protect. When most people think about the key individuals responsible for keeping children healthy, they think of doctors and other healthcare providers. However, I see every day the limitations of my profession. When children present to us with developmental delays, asthma exacerbations, sickle cell crises, elevated lead levels, poor school performance, and even worse, we know that these are the downstream effects of insecure and poor housing situations. As healthcare providers, we are only able to put band aids on wounds that are much too deep and that require a more interdisciplinary and holistic approach.

One of the tenets of public health is preventative care. Please consider the following example: if someone encounters 99 people out of a 100 with diarrhea, and they all drank out of the same well, one can treat each patient with antibiotics over and over again, or one can go to the well and figure out what is in it that caused this illness and stop it.

In Philadelphia, the most impoverished large American city, in Washington DC, in New York City, in cities and towns across the U.S., the well that far too many of our

children and families drink from is a toxic blend that stems from poverty, adverse childhood experiences, disparities in health and education, racism, food insecurity, and especially what we are discussing today, housing instability and the eviction crises. This crisis crushes the most vulnerable under the thumb of illegal and unfair evictions, the shortage of safe and affordable housing, and the daily unconscionable choices that too many families have to make to eat, heat, or hit the street.

In fact, studies have shown that only 10% of health comes from traditional health care. The rest from social determinants of health such as income, environmental exposures, and behaviors rooted in childhood. The U.S. spends the most on health care out of developed nations, and the least on social care, with the worst outcomes. This hearing, this council, this issue we are discussing, is a way to help clean up the well that many of our families drink from because they have no other choice.

A study in our emergency room screened over 22,000 families and found that 24% had food insecurity, 31% energy insecurity, and 40% housing insecurity. This toxic triad has devastating effects on our children. In this study, those families with housing insecurity had poorer health; their children were more at developmental risk and had lower weights than families without.

Science has shown again and again that children who live in stressful environments, such as substandard housing, the threat of eviction, homelessness and poverty, have changes in their neurological system that affects their ability to learn, to focus, to resolve conflicts. This toxic stress also affects the immune system, endocrinologic system, cardiovascular system, respiratory system, and even one's DNA. Children who live in stressful environments are more likely to be diagnosed with learning and behavioral issues. Are more likely to have weight issues. Are more likely to develop diabetes and cardiovascular disease as an adult. Are more likely to die at a younger age.

In the short term, children living in substandard and unsafe housing are more likely to be hospitalized, are more likely to miss school, are more likely to have elevated lead levels, asthma hospitalizations, sickle cell crises and are more likely to die from these disorders or from unsafe heating methods. One study showed that close to half of fatal fires in children were from alternative heating sources due to a utility shut off.

A harrowing illustration of the toxic effects of poverty and, with it, housing issues, one need only to look at a recent Virginia Commonwealth University study that looked at mortality rates by zip code in 21 cities around the country. In New York City, a city at the forefront of fighting for the rights of lower income tenants, the difference in mortality rates between the higher income zip codes and the lower, was 9 years. In Washington D.C, who are also advocating for low-income tenants, 8 years. In Philadelphia, 20 years. This lottery of birth is immoral.

At St. Christopher's Hospital for Children we have a unique Medical-Legal Partnership with the Legal Clinic for the Disabled and have a fulltime lawyer that meets with our families, where they are, in our exam rooms, in their homes, in the halls of justice, to help families struggling with adverse housing issues, utility issues, and eviction issues. Our families have benefitted tremendously with this distinctive partnership, but this is not enough for the 135,000 children in Philadelphia who live in poverty, and the 24,000 persons who had an eviction filed against them just last year. A stark example of this vital partnership is childhood asthma. 20% of the children we serve have asthma. As physicians we screen for adherence to medications and screen for possible triggers at home, it's not until our Medical-Legal Partnership attorney gets involved, and gets a landlord to fix a leaky roof, black mold or exterminate rodents and infestations of cockroaches, that we can truly make a difference in this child's health.

To help sanitize the well of poverty and housing insecurity, to help level the playing field of landlord tenant disputes, to help protect the health of our children and families as well as the local economy, we must invest in a right to counsel for tenants in Philadelphia. We must act now. Now is the time our children's bones are being formed, their blood is being made, their mind is being developed. To our children, we cannot wait until tomorrow. Our children and families need us today.