

DISTRICT BOARD OF HEALTH

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June 10, 2008

Representative Maxine Waters Chairwoman Subcommittee on Housing and Community Opportunity Committee on Financial Services U.S. House of Representatives 2129 Rayburn House Office Building Washington, DC 20515

Dear Congresswoman Waters:

Thank you for the opportunity to testify before your committee about the impact of home foreclosures and vacant properties on the health of my community. As Health Commissioner of the General Health District in Mahoning County, I have responsibility for enforcing basic sanitary housing standards in the health district. With authority delegated by the Ohio Department of Health, my health department also enforces state laws requiring the remediation of lead hazards in children's homes. This home foreclosure and vacant property crisis has challenged our ability to fulfill these responsibilities due to (1) the growing number of blighted condemned housing units in my health district, and (2) the increased risk posed to children living in deteriorating units with lead hazards.

Blighted, condemned housing units

The crisis in my health district has become manifest over the last three years by the growing numbers of housing complaints received by my health department - the number nearly *tripled* between 2005 and 2007. These complaints stem from the presence of trash on the property or vacant buildings that are unsecured and create safety hazards and harbor disease vectors such as rodents and mosquitoes. When the roof of an abandoned structure leaks, mold growth inside often renders uninhabitable a home that could have been rehabilitated. In many cases we work successfully with the owner to remediate the conditions that gave rise to the complaint before the home is too far gone, but increasingly, we are unable to resolve the problem because the property is now owned by an out-of-state bank or mortgage company that doesn't acknowledge or respond to our property nuisance abatement orders.

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The number of blighted properties whose owners have failed to respond to our demolition or abatement orders in my health district now stands at 122. Although many of these properties are found in our most distressed community – Campbell – not one of our 14 townships and 9 municipalities is now without a blighted property – even our most affluent community Canfield.

Although Ohio health districts, townships, and municipalities have the legal authority to demolish or secure blighted structures and assess these costs as a tax lien, our small townships and municipalities lack the financial resources to do so. Up to this point we have been unsuccessful in identifying a source of local, state or federal funding to assist these communities. We were encouraged when last month our Congressional Representatives Charlie Wilson and Tim Ryan introduced the **Emergency Neighborhood Reclamation Act of 2008**. This legislation would authorize \$1 billion in federal funds for the demolition of abandoned buildings in blighted areas.

Without federal assistance, distressed areas like ours that have suffered population losses in recent decades will never have the local resources needed to deal with our problem of blighted surplus housing. I strongly support Reps. Wilson and Ryan's legislation as a means to provide our communities a helping hand in their war on blight.

Complicated, confusing demolition regulations

Even if the townships and municipalities in my health district had the resources to demolish blighted properties within their borders, understanding and complying with complicated and confusing asbestos abatement regulations can be a barrier to communities taking action. For example, at a seminar for local fire chiefs and zoning officials we sponsored earlier this year in Mahoning County, the state agencies in Ohio that share responsibility for regulating asbestos abatement practices – the Ohio Environmental Protection Agency and the Ohio Department of Health – appeared to offer conflicting guidance on how to comply with asbestos rules in the course of demolishing or burning blighted structures.

The U.S. EPA or HUD should help local authorities who want to take action to demolish blighted, condemned structures by providing clear guidance on how to adhere to asbestos abatement regulations with a minimum of confusion, cost, and delay for local authorities.

More children at risk for lead poisoning

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After making so much progress in recent years toward the elimination of the most preventable pediatric environmental disease in this country – child lead poisoning – we are concerned that this housing crisis may set back efforts to meet our national goal of eliminating this disease by 2010. Many foreclosed homes in Youngstown and Campbell are sold and resold multiple times and sit idle for long periods. When normal maintenance in these units is deferred, the lead paint found in the oldest of these homes can emerge as a hazard for the children who move into them.

Further, nondisclosure of existing lead hazards by sellers is all too common in Youngstown; the frequent property transfers make it difficult for the health department to track ownership and assure that buyers and renters, especially those with young children, are aware of unremediated hazards in these units. We publish a registry of units with unremediated lead hazards and share it widely with community stakeholders like the local landlord and realtors associations. The registry currently has 274 owner-occupied and rental units listed. It is a continuous struggle for my child lead poisoning prevention staff (of 1 full-time sanitarian and a part-time nurse and secretary) to keep ownership information for these properties up-to-date.

Since many of these foreclosed homes are eventually bought or rented by families with modest incomes, these families would benefit from Congress's protection and expansion of HUD's lead hazard control and healthy homes grant and loan programs that target low income home owners and tenants. In addition, if HUD could develop an intervention that was reasonable in cost and mandatory, point-of-sale inspections for lead hazards, and requirements that mortgage lenders remediate any existing lead hazards prior to reselling the unit would be ideal strategies for preventing more children from being poisoned by these units.

Finally, local health departments' capacity to respond to housing concerns and other community health needs is being threatened by the very housing crisis itself. Declining property values translate into flat or declining property tax revenues that my health department depends on for nearly 20% of our revenue. Coupled with declines in building industry-related permit revenue from a slumping housing industry and cuts in federal preparedness funding, we faced an operating deficit at the beginning of this year that forced us to lay off nearly 10% of our public health workforce. As a consequence, we are less able to respond at a time when so many distressed members of our community need our help.

Sincerely,

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Matthew A. Stefanak, M.P.H. Health Commissioner General Health District in Mahoning County