The home is one of the most dangerous places for U.S. families.

Forty percent of U.S. homes have at least one health or safety hazard. This means that 35 million homes have problems ranging from broken heating and plumbing fixtures, holes in walls and windows, roach and rodent infestations, falling plaster, crumbling foundations, and leaking roofs to mold, exposed wiring, radon, unvented heaters, toxic chemicals, broken stairs, missing smoke detectors, lead, and other hazards. These hazards place American families at unnecessary risk for injuries and illness like lead poisoning, asthma, and lung cancer. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic.

For example, in the United States each year...

- **270,000 children** aged 1-5 years old have elevated blood lead levels
- **24 million people** have asthma (1 in 13 children; 1 in 13 adults)
- **32,500 older adults** die from unintentional falls
- **21,000 people** die from radon-related lung cancer
- **400 people** die from unintentional CO poisoning not linked to fires

Housing hazards cost the U.S. billions annually, contributing to:

- **$63 billion** asthma
- **$50 billion** lead poisoning
- **$500 million** residential fatalities from CO poisoning
- **$2.9 billion** radon-induced lung cancer
- **$200 billion** unintentional injuries

Solutions are known, affordable, and provide a significant, positive ROI.

For every $1:

- invested in home visiting programs that address both asthma self-management and indoor environmental triggers, there is a return of **$5.30-$14.00**.
- spent to reduce lead hazards, there is a benefit of **$1.39** and poisonings can be prevented:
  
  HUD estimates that the number of children under five with elevated BLLs in 2010 would have included an additional **265,000 children** if not for HUD programs’ actions to control hazards in over 370,000 housing units.
  
  - spent ensuring compliance with the RRP rule or removing lead service lines, there is a benefit of **$3.10** or **$1.33**, respectively.
  - invested in poison control centers, approximately **$7 to $15 are saved** in unnecessary healthcare expenses.
  - spent to install a smoke detector, there is a **societal benefit of $28**.

February 2021. For references, additional state-specific healthy homes information, and to learn how you can engage your members of Congress on these vital issues...

contact: sgoodwin@nchh.org
Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of Alabama families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of Alabama. For example:

- **CDC’s Healthy Homes and Lead Poisoning Prevention Program**
  - AL received funding since 2018? YES
- **CDC’s National Asthma Control Program**
  - AL received funding since 2018? NO
- **CDC’s Environmental Health Tracking Network**
  - AL received funding since 2018? NO
- **HUD’s Office of Lead Hazard Control and Healthy Homes**
  - AL received funding since 2018? YES
- **HUD’s Community Development Block Grants (CDBG)**
  - AL received funding since 2018? YES
- **HUD’s HOME Investment Partnerships Program**
  - AL received funding since 2018? YES
- **EPA’s Lead Categorical Grants**
  - AL received funding since 2018? YES
- **EPA’s State Indoor Radon Grants**
  - AL received funding since 2018? YES
- **EPA’s Drinking Water Revolving Fund**
  - AL received funding since 2018? YES
- **HHS’ Maternal and Child Health Block Grants**
  - AL received funding since 2018? YES
- **HHS’ Low Income Home Energy Assistance Program (LIHEAP)**
  - AL received funding since 2018? YES
- **DOE’s Weatherization Assistance Program**
  - AL received funding since 2018? YES

In 2017, 382 Alabama children tested had an elevated blood lead level (5 μg/dL or more); 120 of them measured 10 μg/dL or higher. Average blood lead testing activity fell by 53% in the spring of 2020 due to the COVID-19 pandemic.

In Alabama, 26% of children live in households with a high housing cost burden, and 24% of children live in poverty.

In Alabama, 45% of housing was built prior to 1978 and is likely to contain lead-based paint.

211 Alabamans aged 65 years and older died from unintentional falls in 2018.

Homes located in 15 counties throughout northern and central Alabama have a predicted average indoor screening level greater than the EPA action level for radon.

In Alabama, there are no laws regulating building mold standards, testing requirements, or accreditation/certification for contractors performing mold testing or remediation activities.

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Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of Alaska families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of Alaska. For example:

- In Alaska, **25% of children live in households with a high housing cost burden**, and 14% of children live in poverty.
- **40% of Alaska housing was built before 1978** and is likely to contain lead-based paint.
- Approximately **51,000 Alaskan adults have current asthma**, over 9% of the adult population (2018).
- **Unintentional falls were responsible for 29 deaths** in Alaska in 2018. Total charges billed to older Alaskan adults for fall-related injuries was **$135 million** in 2016 – triple that of 2012.

Less than **8% of Alaskan children under 6 years of age were tested for elevated blood lead** in 2018; the percentage of elevated blood lead levels among children tested was highest in the southwest region of the state. Average blood lead testing activity **fell by 42% in the spring of 2020** due to the COVID-19 pandemic.

On average, **14 Alaskans die annually from carbon monoxide exposure** (2014-2018).

In 2005, the total **direct cost for asthma care** in Alaska was approximately **$118 million**.

In Alaska, **21% of collected radon tests had levels above the EPA action level** for indoor air (1990-2014).
Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of American Samoa families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of American Samoa. For example:

- **CDC’s Healthy Homes and Lead Poisoning Prevention Program**
- **CDC’s National Asthma Control Program**
- **CDC’s Environmental Health Tracking Network**
- **HUD’s Office of Lead Hazard Control and Healthy Homes**
- **HUD’s Community Development Block Grants (CDBG)**
- **HUD’s HOME Investment Partnerships Program**
- **EPA’s Lead Categorical Grants**
- **EPA’s State Indoor Radon Grants**
- **EPA’s Drinking Water Revolving Fund**
- **HHS’ Maternal and Child Health Block Grants**
- **HHS’ Low Income Home Energy Assistance Program (LIHEAP)**
- **DOE’s Weatherization Assistance Program**

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Approximately **21% of occupied housing units** in American Samoa were built before 1978 and are likely to contain lead-based paint (2010).

An estimated **34% of American Samoa renters** spend over 30% of their income on rent (2010).

Over **15% of American Samoan high school students** have been diagnosed with asthma by a medical professional (2008).

Many American Samoans use **roof-collected rainwater** for their drinking water supply, but the majority of sampled rainwater violated the AS water quality standards for the presence of microbial bacteria.

In American Samoa, approximately **27% of housing** lacks complete plumbing facilities, **24% lacks complete kitchen facilities**, and **67% lacks air conditioning** (2010).

There are approximately **20 deaths per year from indoor air pollution** as a result of certain cooking fuels in American Samoa.

Approximately **5 American Samoans are poisoned annually by carbon monoxide**.

A study in American Samoa discovered **lead in the sediments and water of coastal streams** at a presence **3-10 times higher than anticipated**, likely a result of poor solid waste disposal practices or remains from abandoned American military stations.

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**AMERICAN SAMOA**

**2020 Healthy Housing Fact Sheet**

Approximately **5 American Samoans** are poisoned annually by carbon monoxide.

Over **15% of American Samoan high school students** have been diagnosed with asthma by a medical professional (2008).

Many American Samoans use **roof-collected rainwater** for their drinking water supply, but the majority of sampled rainwater violated the AS water quality standards for the presence of microbial bacteria.

In American Samoa, approximately **27% of housing** lacks complete plumbing facilities, **24% lacks complete kitchen facilities**, and **67% lacks air conditioning** (2010).

There are approximately **20 deaths per year from indoor air pollution** as a result of certain cooking fuels in American Samoa.

Approximately **5 American Samoans are poisoned annually by carbon monoxide**.

A study in American Samoa discovered **lead in the sediments and water of coastal streams** at a presence **3-10 times higher than anticipated**, likely a result of poor solid waste disposal practices or remains from abandoned American military stations.

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Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of Arkansas families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of Arkansas. For example:

- **In Arkansas, 26% of children live in households with a high housing cost burden**, and 25% of children live in poverty.
- **42% of Arkansas housing was built before 1978** and is likely to contain lead-based paint.
- **Approximately 10% of adults have current asthma** in Arkansas; 15% have been diagnosed with asthma during their lifetime (2018).
- **Unintentional falls were responsible for 211 deaths among Arkansans above the age of 65 in 2018.**
- **Arkansas has no state statutes regarding carbon monoxide detectors or radon.**
- **Asthma is the third leading cause of hospitalization for children** between 1 and 17 in Arkansas (2014).
- **15% of Arkansan households face severe housing problems**, such as overcrowding or lack of kitchen or plumbing facilities.

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Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of Arizona families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of Arizona. For example:

- In Arizona, 29% of children live in households with a high housing cost burden, and 20% of children live in poverty.
- 33% of Arizona housing was built before 1978 and is likely to contain lead-based paint.
- Over 480,000 adults and 174,000 children have current asthma in Arizona (2014), approximately 10% and 11% of the populations, respectively.
- In 2016, unintentional falls among Arizonans aged 65 years and older resulted in 983 deaths, 14,384 inpatient hospitalizations (total charges over $933.6 million), and 42,808 emergency department visits (total charges over $344.7 million).

In 2017, 256 Arizona children tested had an elevated blood lead level (5 μg/dL or more); 65 of them had blood lead levels of 10 μg/dL or higher. Average blood lead testing activity fell by 55% in the spring of 2020 due to the COVID-19 pandemic.


In 2014, there were more than 27,000 emergency department and hospital discharges due to asthma in Arizona; estimated costs totaled $115 million.

1 in 15 Arizona homes may have radon in their indoor air above the EPA action level.
Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of California families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of California. For example:

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In California, **42% of children live in households with a high housing cost burden**, and **17% of children live in poverty**.

60% of California housing was built before 1978 **and is likely to contain lead-based paint**.

Approximately **8.5% of adults and 6% of children have current asthma** in California (2018).

In 2017, **2,134 Californians over the age of 65 died from falls**. In 2014, **74,645 were hospitalized** and **208,564 were treated in an emergency department**.

In 2018, **7,141 California children tested had an elevated blood lead level** of 4.5 μg/dL or higher; **1,291 of them measured 9.5 μg/dL or higher**. Average blood lead testing activity fell by **55% in the spring of 2020** due to the COVID-19 pandemic.

On average, **49 Californians die annually from carbon monoxide exposure** (2014-2018).

In 2018, there were **over 163,000 emergency department visits** and **16,700 hospitalizations due to asthma** in California.

California is home to **more than 4.7 million adults over the age of 65**, the largest older adult population in the nation.

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contact: sgoodwin@nchh.org
Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of Colorado families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of Colorado. For example:

- CDC’s Healthy Homes and Lead Poisoning Prevention Program
- CDC’s National Asthma Control Program
- CDC’s Environmental Health Tracking Network
- HUD’s Office of Lead Hazard Control and Healthy Homes
- HUD’s Community Development Block Grants (CDBG)
- HUD’s HOME Investment Partnerships Program
- EPA’s Lead Categorical Grants
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- EPA’s Drinking Water Revolving Fund
- HHS’ Maternal and Child Health Block Grants
- HHS’ Low Income Home Energy Assistance Program (LIHEAP)
- DOE’s Weatherization Assistance Program

In Colorado, 30% of children live in households with a high housing cost burden, and 12% of children live in poverty. 45% of Colorado housing was built before 1978 and is likely to contain lead-based paint.

Despite testing less than 7% of Colorado children under 72 months old in 2016, 260 children tested had an elevated blood lead level (5 μg/dL or more); 64 of them were 10 μg/dL or higher. Average blood lead testing activity fell by 64% in the spring of 2020 due to the COVID-19 pandemic.

Between 2005-2018, 17 counties in Colorado had 80% or more of their homes test above the EPA radon action level, and only one county (Sedgwick) had less than 20% of its homes test above the EPA action level.

In 2018, there were over 17,500 emergency department visits and approximately 2,235 hospitalizations due to asthma in Colorado.

Approximately 9% of adults have current asthma in Colorado (2018).

In 2018, unintentional falls were responsible for 790 deaths among Coloradans over the age of 65.

Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of Connecticut families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of Connecticut. For example:

- CDC’s Healthy Homes and Lead Poisoning Prevention Program
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- CDC’s Environmental Health Tracking Network
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- HHS’ Low Income Home Energy Assistance Program (LIHEAP)
- DOE’s Weatherization Assistance Program

In Connecticut, 35% of children live in households with a high housing cost burden, and 14% of children live in poverty. In 2017, 1,610 Connecticut children tested had an elevated blood lead level (5 μg/dL or more); 488 of them measured 10 μg/dL or higher.

In Connecticut, 71% of housing was built prior to 1978 and is likely to contain lead-based paint; 21% was built in 1939 or earlier.


Approximately 10% of adults and 10% of children (about 290,000 adults and over 62,000 children) have current asthma in Connecticut (2018).

Connecticut spent over $102 million for acute care due to asthma as a primary diagnosis in 2018: $56 million on hospitalization charges and $46 million on ED visits; 73% of these expenses were charged to Medicaid or Medicare.

In 2018, 342 Connecticuters over the age of 65 died of unintentional falls.

In Connecticut, half of all counties have predicted average indoor radon levels above the EPA action level.

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Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of Delaware families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of Delaware. For example:

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Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of Delaware. For example:

- In Delaware, **33% of children live in households with a high housing cost burden**, and 19% of children live in poverty.
- In 2016, **104 Delaware children tested had an elevated blood lead level** (5 μg/dL or more); **19 of them were 10 μg/dL or higher.** Average blood lead testing activity fell by 76% in the spring of 2020 due to the COVID-19 pandemic.
- Approximately **10% of adults (2018) and 12% of children (2012) have current asthma** in Delaware.
- In 2015, there were **1,453 emergency department visits and 401 hospitalizations due to asthma** among Delaware children enrolled in Medicaid/CHIP.
- In Delaware, the areas with the **highest percentages of radon over the EPA action level** are Middletown (27%) and Odessa (22%); both are in New Castle County.

In Delaware, the total cost of asthma, including medical costs and loss of productivity, is estimated at **over $200 million per year**.

In 2018, **unintentional falls were responsible for 65 deaths among Delawareans over the age of 65.**

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Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of District of Columbia families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of the District of Columbia. For example:

- In the District of Columbia, 37% of children live in households with a high housing cost burden, and 23% of children live in poverty.
- 77% of District of Columbia housing was built prior 1978 (34% before 1940) and is likely to contain lead-based paint. Due to the age of the housing stock, the District requires a 100% screening rate for children at ages 1 and 2.
- Approximately 12% of adults and 11% of children have current asthma in the District of Columbia (2018).
- In 2018, unintentional falls were responsible for 48 deaths among Washingtonians over the age of 65.
- In 2017, 128 District of Columbia children tested had an elevated blood lead level (5 μg/dL or more); 35 of them were 10 μg/dL or higher. Average blood lead testing activity fell by 61% in the spring of 2020 due to the COVID-19 pandemic.
- In 2010, wards 1, 4, and 5 accounted for 65% of elevated blood lead levels identified in District of Columbia children under 6 years of age.
- Emergency department visit rates for asthma in the District of Columbia are 23 times higher in wards 7 and 8 than Ward 3, and 20 times higher for black residents than white residents (2010-2014).
- Over 21% of District of Columbia households have severe housing problems, including overcrowding or lack of kitchen or plumbing facilities.

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Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of Florida. For example:

- **CDC’s Healthy Homes and Lead Poisoning Prevention Program**
- **CDC’s National Asthma Control Program**
- **CDC’s Environmental Health Tracking Network**
- **HUD’s Office of Lead Hazard Control and Healthy Homes**
- **HUD’s Community Development Block Grants (CDBG)**
- **HUD’s HOME Investment Partnerships Program**
- **EPA’s Lead Categorical Grants**
- **EPA’s State Indoor Radon Grants**
- **EPA’s Drinking Water Revolving Fund**
- **HHS’ Maternal and Child Health Block Grants**
- **HHS’ Low Income Home Energy Assistance Program (LIHEAP)**
- **DOE’s Weatherization Assistance Program**

**FL received funding since 2018?**

- YES
- YES
- YES
- YES
- YES
- NO
- YES
- YES
- YES
- YES
- YES

**In Florida, 37% of children live in households with a high housing cost burden**, and 20% of children live in poverty.

**38% of Florida housing was built before 1978** and is likely to contain lead-based paint.

**Approximately 9% of adults and 7.5% of children have current asthma** in Florida (2018).

**Unintentional falls are the leading cause of injury** for Floridians above the age of 65 and were responsible for **3,013 deaths** in 2019.

**In 2012, 2,946 Florida children tested had an elevated blood lead level** (5 μg/dL or more); **306 of them measured 10 μg/dL or higher**. Average blood lead testing activity fell by **37% in the spring of 2020** due to the COVID-19 pandemic.


**In 2014, total costs for asthma emergency department visits and hospitalizations for Floridians were $1.2 billion**, and 34% of adult Floridians with current asthma reported missed work or limited activity due to their asthma.

**One in five Florida homes has levels of radon** in their indoor air above the EPA action level.
Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of Georgia families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of Georgia. For example:

- **In Georgia, 30% of children live in households with a high housing cost burden**, and 20% of children live in poverty.
- **33% of Georgia housing was built before 1978** and is likely to contain lead-based paint.
- **Unintentional falls were responsible for 607 deaths among Georgians above the age of 65 in 2018.**
- **On average, 19 individuals die annually from carbon monoxide exposure in Georgia** (2014-2018).
- **In Georgia, falls are the leading cause of emergency department visits among people over the age of 65** and the fourth highest cause overall (2015-2019).
- **Radon-related lung cancer kills over 800 Georgians** annually. In 20 northern Georgia counties, more than 29% of homes have tested with high levels of radon.

### Federal Funding

<table>
<thead>
<tr>
<th>Program</th>
<th>GA received funding since 2018?</th>
</tr>
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<tbody>
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<td>HUD’s Office of Lead Hazard Control and Healthy Homes</td>
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<tr>
<td>EPA’s Lead Categorical Grants</td>
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In 2019, **1,746 Georgia children tested had an elevated blood lead level** (5 μg/dL or more); **535 of them measured 10 μg/dL or higher.** Average blood lead testing activity fell by 46% in the spring of 2020 due to the COVID-19 pandemic.

Almost **9% of adults and 8% of children have current asthma** in Georgia (2018).

February 2021. For references, additional state-specific healthy homes information, and to learn how you can engage your members of Congress on these vital issues...

**contact:** sgoodwin@nchh.org
Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of Guam families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

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Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of Guam. For example:

- **1979**: 43% of Guam housing was built before 1979 and is likely to contain lead-based paint.

- **2012**: 3,790 Guamanians over the age of 45 reported injuries from falls.

- **2018**: About 5% of adults have current asthma in Guam.

- **2016**: In 2016, perfluorooctane sulfonate (PFOS) levels that exceeded the EPA standards for drinking water were detected in 5 drinking water wells in Guam; 2 wells remain inactive as treatment systems were not able to bring levels to acceptable concentrations.

- **2015**: 38,482 people are enrolled in the Medicaid and CHIP programs in Guam.

- **2018**: 11% of Guam housing lacks complete plumbing facilities, and 10% lacks complete kitchen facilities (2010).

- **2017**: Approximately 22% of Guamanian high school students report being previously told by a doctor or nurse that they had asthma.

- **2012**: 3,790 Guamanians over the age of 45 reported injuries from falls in 2012.

- **2015**: 38,482 people are enrolled in the Medicaid and CHIP programs in Guam (2015).
Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of Hawaii families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of Hawaii. For example:

- In Hawaii, **35% of children live in households with a high housing cost burden**, and 12% of children live in poverty.
- **53% of Hawaii housing was built before 1978** and is likely to contain lead-based paint.
- About **10% of children** and **9% of adults** have current asthma in Hawaii (2018).
- In 2018, **unintentional falls were responsible for 153 deaths** among Hawaiians over the age of 65.
- Between 2013-2019, **1 of every 100 children in Hawaii tested with elevated blood lead levels** (5 μg/dL or more). Average blood lead testing activity **fell by 47% in the spring of 2020** due to the COVID-19 pandemic.
- On average, **3 Hawaiians die annually from carbon monoxide exposure** (2014-2018).
- Hawaii averaged **22 deaths from asthma per year** between 2013 and 2015. In 2015, **over 7,500 Hawaiians were seen in the emergency department** for asthma-related symptoms.
- Between **2010 and 2040**, the share of adults aged 60 and over in Hawaii will increase by **38%**, from 20.6% in 2010 to 28.5% in 2040.

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Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of Idaho families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of Idaho. For example:

- In Idaho, **24% of children live in households with a high housing cost burden**, and **14% of children live in poverty**.
- **42% of housing in Idaho was built before 1978** and is likely to contain lead-based paint.
- Approximately **9% of adults** (over 111,000) in Idaho **have current asthma** (2018). Over **19% of high school students have had asthma** at some point (2015).
- In 2018, **unintentional falls were responsible for 200 deaths among Idahoans over the age of 65**.
- An estimated **78% of children at high risk for lead exposure in Ada County** (which includes the city of Boise) are **not being tested**.
- On average, **8 Idahoans die annually from carbon monoxide exposure** (2014-2018).
- Idaho has **no state statutes regulating radon, carbon monoxide detectors, or mold**.
- **18 counties in northern and central Idaho** have predicted average indoor radon levels above the EPA action level.

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Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of Illinois families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of Illinois. For example:

- CDC’s Healthy Homes and Lead Poisoning Prevention Program
- CDC’s National Asthma Control Program
- CDC’s Environmental Health Tracking Network
- HUD’s Office of Lead Hazard Control and Healthy Homes
- HUD’s Community Development Block Grants (CDBG)
- HUD’s HOME Investment Partnerships Program
- EPA’s Lead Categorical Grants
- EPA’s State Indoor Radon Grants
- EPA’s Drinking Water Revolving Fund
- HHS’ Maternal and Child Health Block Grants
- HHS’ Low Income Home Energy Assistance Program (LIHEAP)
- DOE’s Weatherization Assistance Program

In Illinois, 29% of children live in households with a high housing cost burden, and 16% of children live in poverty.

66% of Illinois housing was built prior to 1978; 59% of these homes have a prevalence of lead-based paint and 41% have a significant hazard.

In 2017, 4,477 Illinoisan children tested had an elevated blood lead level (5 μg/dL or more); 1,285 of them measured 10 μg/dL or higher. Average blood lead testing activity fell by 58% in the spring of 2020 due to the COVID-19 pandemic.

Over 41% of homes tested in Illinois have radon amounts above the EPA action level in their indoor air. Up to 1,160 people in Illinois develop radon-related lung cancer each year.

988 Illinoisans above the age of 65 died from unintentional falls in 2018.

Almost 9% of adults and 6% of children have current asthma in Illinois (2018).

Illinois' asthma expenditures are expected to reach $2.2 billion by 2020, a growth of 53.6% since 2010. In 12 months, Illinoisan adults with asthma were unable to work or carry out daily activities for a total of 3,089,988 days.

On average, 63 Illinoisans die annually from carbon monoxide exposure (2014-2018). This is the highest number of any state during this period.

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National Center for Healthy Housing
Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of Indiana families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of Indiana. For example:

- In Indiana, 22% of children live in households with a high housing cost burden, and 18% of children live in poverty.
- 57% of Indiana housing was built before 1978 and is likely to contain lead-based paint; 16% was built before 1940.
- Approximately 10% of adults and 9% of children have current asthma in Indiana (2018).
- Falls are the leading cause of injury-related emergency department visits, hospitalization, and death for Hoosiers aged 65 and older. In 2018, 457 older adults died from fall-related injury.

In 2017, 821 Indiana children tested had an elevated blood lead level (5 μg/dL or more); 260 of them measured 10 μg/dL or higher. Average blood lead testing activity fell by 45% in the spring of 2020 due to the COVID-19 pandemic.


In 2019, there were 24,815 emergency department visits and 2,393 hospitalizations due to asthma in Indiana.

Between 2007-2014, over 32% of Indiana homes tested for radon had indoor air results above the EPA action level.

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**CDC’s Healthy Homes and Lead Poisoning Prevention Program**
**CDC’s National Asthma Control Program**
**CDC’s Environmental Health Tracking Network**
**HUD’s Office of Lead Hazard Control and Healthy Homes**
**HUD’s Community Development Block Grants (CDBG)**
**HUD’s HOME Investment Partnerships Program**
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**EPA’s Drinking Water Revolving Fund**
**HHS’ Maternal and Child Health Block Grants**
**HHS’ Low Income Home Energy Assistance Program (LIHEAP)**
**DOE’s Weatherization Assistance Program**
Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of Iowa families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of Iowa. For example:

- **In Iowa, 19% of children live in households with a high housing cost burden, and 14% of children live in poverty.**
- **65% of Iowa housing was built before 1978 and is likely to contain lead-based paint; over 24% was built before 1940.**
- **Approximately 8% of adults have current asthma in Iowa (2018).**
- **Iowa leads the nation in the percentage of homes over the EPA action level for radon (71.6%) as well as the percentage of homes over 20 pCi/L.**
- **In 2019, 981 Iowa children tested had a confirmed elevated blood lead level (5 µg/dL or more); 373 of them were 10 µg/dL or higher. Average blood lead testing activity fell by 47% in the spring of 2020 due to the COVID-19 pandemic.**
- **In 2018, unintentional falls were responsible for 468 deaths among Iowans over the age of 65.**
- **There were 287 emergency department visits (2019), 17 hospitalizations (2018), and 7 deaths (2019) due to unintentional, nonfire-related carbon monoxide exposure in Iowa.**
- **Iowa is designated by the EPA as an entirely zone 1 state for radon, which means that at least 50% of the homes are above EPA’s recommended action level.**

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Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of Kansas families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of Kansas. For example:

- CDC’s Healthy Homes and Lead Poisoning Prevention Program: YES
- CDC’s National Asthma Control Program: NO
- CDC’s Environmental Health Tracking Network: YES
- HUD’s Office of Lead Hazard Control and Healthy Homes: YES
- HUD’s Community Development Block Grants (CDBG): YES
- HUD’s HOME Investment Partnerships Program: YES
- EPA’s Lead Categorical Grants: YES
- EPA’s State Indoor Radon Grants: YES
- EPA’s Drinking Water Revolving Fund: YES
- HHS’ Maternal and Child Health Block Grants: YES
- HHS’ Low Income Home Energy Assistance Program (LIHEAP): YES
- DOE’s Weatherization Assistance Program: YES

In Kansas, 22% of children live in households with a high housing cost burden, and 15% of children live in poverty.

In 2012, 538 Kansan children tested had an elevated blood lead level (5 μg/dL or more); 138 of them were 10 μg/dL or higher. Average blood lead testing activity fell by 43% in the spring of 2020 due to the COVID-19 pandemic.


78 of Kansas’ 105 counties have predicted average indoor radon levels above the EPA action level.

Over 46,000 of 112,000 (41%) indoor radon measurements in Kansas had results above the EPA action level of 4 pCi/L; the statewide average was 4.9 pCi/L.

In 2018, unintentional falls were responsible for 376 deaths among Kansans over the age of 65.
Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of Kentucky families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of Kentucky. For example:

- In Kentucky, 25% of children live in households with a high housing cost burden, and 23% of children live in poverty.
- 50% of Kentucky housing was built before 1978 and is likely to contain lead-based paint.
- Approximately 11.5% of adults and 6% of children have current asthma in Kentucky (2018).
- In 2018, unintentional falls resulted in 312 deaths among Kentuckians over the age of 65.
- In 2016, 80 Kentucky children tested had an elevated blood lead level (5 μg/dL or more); 23 of them had blood lead levels of 10 μg/dL or higher. Only 3.2% of the population under 72 months old was tested.
- 19,678 emergency department visits and 5,111 hospitalizations due to asthma resulted in total billed charges over $192 million in Kentucky in 2014.
- 30 counties in Kentucky have predicted average indoor radon levels above the EPA action level.

KY received funding since 2018?

- CDC's Healthy Homes and Lead Poisoning Prevention Program: YES
- CDC's National Asthma Control Program: YES
- CDC's Environmental Health Tracking Network: YES
- HUD's Office of Lead Hazard Control and Healthy Homes: YES
- HUD's Community Development Block Grants (CDBG): YES
- HUD's HOME Investment Partnerships Program: YES
- EPA's Lead Categorical Grants: YES
- EPA's State Indoor Radon Grants: YES
- EPA's Drinking Water Revolving Fund: YES
- HHS' Maternal and Child Health Block Grants: YES
- HHS' Low Income Home Energy Assistance Program (LIHEAP): YES
- DOE's Weatherization Assistance Program: YES

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Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of Louisiana families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of Louisiana. For example:

- **In Louisiana, 31% of children live in households with a high housing cost burden**, and 26% of children live in poverty.
- **In 2016, over 10% of children tested for lead had levels above 5 µg/dL in five Louisiana parishes**: Claiborne, Winn, St. Martin, St. Mary, and Orleans.
- **Approximately 9% of adults** (2018) and **9% of children** (2015) **have current asthma** in Louisiana.
- **In 2018, 284 Louisianians over the age of 65 died** as a result of unintentional falls.
- **In 2016, 181 Louisiana children tested had an elevated blood lead level** (5 µg/dL or more); **82 of them measured 10 µg/dL or higher**. Average blood lead testing activity **fell by 44% in the spring of 2020** due to the COVID-19 pandemic.
- **In 2016, over 10% of children tested for lead had levels above 5 µg/dL in five Louisiana parishes**: Claiborne, Winn, St. Martin, St. Mary, and Orleans.
- **50% of Louisiana housing was built before 1978** and is likely to contain lead-based paint.
- **There were over 28,000 emergency department visits due to asthma** in Louisiana in 2014.

February 2021. For **references**, additional state-specific healthy homes information, and to learn how you can **engage your members of Congress** on these vital issues...

contact: [sgoodwin@nchh.org](mailto:sgoodwin@nchh.org)
Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of Maine families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of Maine. For example:

- **In Maine, 22% of children live in households with a high housing cost burden,** and 18% of children live in poverty.
- **56% of Maine housing was built prior to 1978** and is likely to contain lead-based paint; 23% was built in 1939 or earlier.
- **Asthma was responsible for over 5,280 emergency department visits** and **421 hospitalizations in Maine** in 2016.
- **Carbon monoxide exposure** was responsible for **107 emergency department visits** in Maine in 2016.
- **Over 13,000 children were screened for lead poisoning** in Maine in 2017; 318 were confirmed to have lead levels above 5 μg/dL. Average blood lead testing activity **fell by 25% in the spring of 2020** due to the COVID-19 pandemic.
- **Approximately 12% of adults and 7% children (2018) have current asthma** in Maine.
- **363 Mainers aged 65 and older died from unintentional falls** in 2018.
- **Approximately 75% of counties in Maine are predicted to have indoor radon levels above the EPA standard.**

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Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of Maryland families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of Maryland. For example:

- In Maryland, 31% of children live in households with a high housing cost burden, and 12% of children live in poverty.
- 53% of Maryland housing was built before 1978 and is likely to contain lead-based paint.
- Approximately 9% of adults and 8% of children have current asthma in Maryland (2018).
- In 2015, unintentional falls among Marylanders above 65 were responsible for over 9,500 hospitalizations and more than 500 deaths.
- In 2017, 1,532 Maryland children tested had an elevated blood lead level (5 μg/dL or more); 341 of them were 10 μg/dL or higher. Average blood lead testing activity fell by 62% in the spring of 2020 due to the COVID-19 pandemic.
- In 2015, there were over 44,000 asthma-related emergency department visits and over 6,000 hospitalizations in Maryland; charges totaled $93.3 and $42.1 million, respectively.
- 8 counties in Maryland have predicted average indoor radon levels above the EPA action level.

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Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of Massachusetts families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of Massachusetts. For example:

- In Massachusetts, 31% of children live in households with a high housing cost burden, and 12% of children live in poverty.
- 71% of Massachusetts housing was built prior to 1978 and is likely to contain lead-based paint; just under one third was built in 1939 or earlier.
- Over 10% of adults and 6% of children have current asthma in Massachusetts (2018).
- Every week, falls send approximately 900 older Bay Staters to the emergency department, with 400 being hospitalized.
- In 2017, 2,754 Massachusetts children tested had an elevated blood lead level (5 μg/dL or more); 556 of them were 10 μg/dL or higher. Average blood lead testing activity fell by 58.5% in the spring of 2020 due to the COVID-19 pandemic.
- On average, 8 Bay Staters die annually from carbon monoxide exposure (2014-2018).
- An estimated 650,000 Massachusetts homes have radon levels above the EPA action level of 4 pCi/L; about 34,000 of these have levels above 20 pCi/L.
- Approximately 628 cases of radon-related lung cancer occur annually in Massachusetts.

In Massachusetts, 31% of children live in households with a high housing cost burden, and 12% of children live in poverty.

In 2017, 2,754 Massachusetts children tested had an elevated blood lead level (5 μg/dL or more); 556 of them were 10 μg/dL or higher. Average blood lead testing activity fell by 58.5% in the spring of 2020 due to the COVID-19 pandemic.

In Massachusetts, 31% of children live in households with a high housing cost burden, and 12% of children live in poverty.
Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of Michigan families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of Michigan. For example:

- **In Michigan, 25% of children live in households with a high housing cost burden**, and 19% of children live in poverty.
- **64% of Michigan housing was built before 1978** and is likely to contain lead-based paint.
- Approximately **11% of adults and 9% of children** (2018) **have current asthma** in Michigan. The 2014 asthma hospitalization rate for adults was **1.8 times higher in Saginaw County** than in the rest of the state.
- Children and adults with asthma in Michigan report an average of between **3.8 and 4 asthma triggers at home**.
- **In 2019, 3,914 Michigan children tested had an elevated blood lead level** (5 μg/dL or more). Average blood lead testing activity **fell by 69% in the spring of 2020** due to the COVID-19 pandemic.
- The **lifetime cost of medical care for hospitalizations and deaths due to falls among older adults in Michigan was estimated at $321 million in 2009**. The percentage of the population in Michigan above age 65 is expected to rise to **20% by 2030**.
- **Nine counties in southern Michigan have predicted indoor radon screening levels above the EPA action level**.
Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of Minnesota families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of Minnesota. For example:

- In Minnesota, 21% of children live in households with a high housing cost burden, and 12% of children live in poverty.
- 54% of Minnesota housing was built prior to 1978 (16% before 1940) and is likely to contain lead-based paint.
- Approximately 7% of adults and 7% of children in Minnesota (2016) have current asthma.
- Unintentional falls were responsible for 1,125 deaths of Minnesotans over the age of 65 in 2018.

In 2018, 1,404 Minnesota children tested had an elevated blood lead level (5 μg/dL or more); 428 of them were 10 μg/dL or higher. Average blood lead testing activity fell by 48% in the spring of 2020 due to the COVID-19 pandemic.


In 2014, asthma cost Minnesotans an estimated $669.3 million including direct medical expenses and lost workdays. In 2017, there were 55 deaths due to asthma in Minnesota.

Two in five homes tested in Minnesota have elevated levels of radon in their indoor air.

February 2021. For references, additional state-specific healthy homes information, and to learn how you can engage your members of Congress on these vital issues,...

visit: http://bit.ly/StatePro contact: sgoodwin@nchh.org
Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of Mississippi families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of Mississippi. For example:

- In Mississippi, 27% of children live in households with a high housing cost burden, and 28% of children live in poverty.
- 44% of Mississippi housing was built before 1978 and is likely to contain lead-based paint.
- In 2016, there were 9 counties in Mississippi with at least 185 asthma hospitalizations per 10,000 people; in Leflore and Coahoma counties, it averaged 238 per 10,000 people.
- Mississippi has no state statutes regarding carbon monoxide detectors or radon.
- In 2017, 200 Mississippi children tested had an elevated blood lead level (5 μg/dL or more); only 17% of children under six years of age were screened. Of Mississippi’s 82 counties, 23 are considered “high-risk” for lead exposure.
- Unintentional falls were responsible for 242 deaths among Mississippians above the age of 65 in 2018.
- Almost 10% of adults and 7% of children (2018) have current asthma in Mississippi.

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Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of Missouri families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of Missouri. For example:

1. CDC’s Healthy Homes and Lead Poisoning Prevention Program
2. CDC’s National Asthma Control Program
3. CDC’s Environmental Health Tracking Network
4. HUD’s Office of Lead Hazard Control and Healthy Homes
5. HUD’s Community Development Block Grants (CDBG)
6. HUD’s HOME Investment Partnerships Program
7. EPA’s Lead Categorical Grants
8. EPA’s State Indoor Radon Grants
9. EPA’s Drinking Water Revolving Fund
10. HHS’ Maternal and Child Health Block Grants
11. HHS’ Low Income Home Energy Assistance Program (LIHEAP)
12. DOE’s Weatherization Assistance Program

In Missouri, 23% of children live in households with a high housing cost burden, and 18% of children live in poverty. In 2017, 1,619 Missouri children tested had an elevated blood lead level (5 μg/dL or more); 444 of them were 10 μg/dL or more. Average blood lead testing activity fell by 67% in the spring of 2020 due to the COVID-19 pandemic.

55% of Missouri housing was built before 1978 and is likely to contain lead-based paint; 28% was built before 1960. On average, 27 Missourians die annually from carbon monoxide exposure (2014-2018).

Over 9% of adults and 8% of children have current asthma in Missouri (2018). Asthma was responsible for over 30,000 emergency department visits in Missouri in 2014; hospitalization charges for these visits totaled over $114 million.

In 2018, unintentional falls were responsible for 695 deaths among Missourians over the age of 65. Between 2005 and 2015, over 30% (6,619 of 20,803) of the homes tested in Missouri had test results above the EPA action level for radon.
Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of Montana families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of Montana. For example:

- **In Montana, 24% of children live in households with a high housing cost burden, and 16% of children live in poverty.**

- **54% of Montana housing was built before 1978 and is likely to contain lead-based paint; 13% was built before 1940.**

- **Approximately 10% of adults and 5% of children have current asthma in Montana (2018).**

- **In 2018, unintentional falls were responsible for 156 deaths among Montanans over the age of 65.**

- **Significant ground water and soil contamination from the state’s history of mining and smelting pose a particular lead risk for Montana.**

- **On average, 8 Montanans die annually from carbon monoxide exposure (2014-2018).**

- **There were over 2,100 emergency department visits due to asthma in Montana in 2017; total charges are estimated at $3.7 million for these visits.**

- **49 of Montana’s 56 counties have predicted average indoor radon levels above the EPA action level.**

National Center for Healthy Housing

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contact: sgoodwin@nchh.org
Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of Nebraska families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of Nebraska. For example:

- In Nebraska, 21% of children live in households with a high housing cost burden, and 13% of children live in poverty.
- In 2015, 344 Nebraska children tested had an elevated blood lead level (5 μg/dL or more); 164 of those cases were in Douglas County alone.
- 61% of Nebraska housing was built before 1978 and is likely to contain lead-based paint; 19.5% was built before 1940.
- Approximately 9% of adults and 5% of children have current asthma in Nebraska (2018).
- Almost 60% of all homes tested in Nebraska have elevated levels of radon in their indoor air. The average test result was 6 pCi/L; the EPA action level is 4 pCi/L.
- Each week, there are 4 deaths, 70 hospitalizations, and 233 emergency department visits due to unintentional falls among Nebraskans over the age of 65.
- In Nebraska, the projected lifetime costs from older adult falls were $355 million in 2014; 59% of these falls occurred in the home.

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Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of Nevada families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of Nevada. For example:

<table>
<thead>
<tr>
<th>Program</th>
<th>Received Funding since 2018?</th>
</tr>
</thead>
<tbody>
<tr>
<td>CDC’s Healthy Homes and Lead Poisoning Prevention Program</td>
<td>YES</td>
</tr>
<tr>
<td>CDC’s National Asthma Control Program</td>
<td>NO</td>
</tr>
<tr>
<td>CDC’s Environmental Health Tracking Network</td>
<td>NO</td>
</tr>
<tr>
<td>HUD’s Office of Lead Hazard Control and Healthy Homes</td>
<td>YES</td>
</tr>
<tr>
<td>HUD’s Community Development Block Grants (CDBG)</td>
<td>YES</td>
</tr>
<tr>
<td>HUD’s HOME Investment Partnerships Program</td>
<td>YES</td>
</tr>
<tr>
<td>EPA’s Lead Categorical Grants</td>
<td>NO</td>
</tr>
<tr>
<td>EPA’s State Indoor Radon Grants</td>
<td>YES</td>
</tr>
<tr>
<td>EPA’s Drinking Water Revolving Fund</td>
<td>YES</td>
</tr>
<tr>
<td>HHS’ Maternal and Child Health Block Grants</td>
<td>YES</td>
</tr>
<tr>
<td>HHS’ Low Income Home Energy Assistance Program (LIHEAP)</td>
<td>YES</td>
</tr>
<tr>
<td>DOE’s Weatherization Assistance Program</td>
<td>YES</td>
</tr>
</tbody>
</table>

In Nevada, 33% of children live in households with a high housing cost burden, and 18% of children live in poverty.

23% of Nevada housing was built before 1978 and is likely to contain lead-based paint. In 2011, 25% of owner-occupied and 38% of renter-occupied units with young children present were built before 1980.

About 8% of adults and 7% of children have current asthma in Nevada (2018).

Nevada has no state statutes regarding carbon monoxide detectors or radon.

From October 2018 - September 2019, less than 4% of all Nevada children were tested for lead; at least 60 had an elevated blood lead level (5 μg/dL or more). Average blood lead testing activity fell by 59% in the spring of 2020 due to the COVID-19 pandemic.


In 2018, unintentional falls were responsible for 269 deaths among Nevadans over the age of 65.

9 counties in Nevada have predicted average indoor radon levels above the EPA action level.

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Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of New Hampshire families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of New Hampshire. For example:

- **CDC’s Healthy Homes and Lead Poisoning Prevention Program**
- **CDC’s National Asthma Control Program**
- **CDC’s Environmental Health Tracking Network**
- **HUD’s Office of Lead Hazard Control and Healthy Homes**
- **HUD’s Community Development Block Grants (CDBG)**
- **HUD’s HOME Investment Partnerships Program**
- **EPA’s Lead Categorical Grants**
- **EPA’s State Indoor Radon Grants**
- **EPA’s Drinking Water Revolving Fund**
- **HHS’ Maternal and Child Health Block Grants**
- **HHS’ Low Income Home Energy Assistance Program (LIHEAP)**
- **DOE’s Weatherization Assistance Program**

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of New Hampshire. For example:

- In New Hampshire, 27% of children live in households with a high housing cost burden, and 11% of children live in poverty.
- In 2017, 652 New Hampshire children tested had an elevated blood lead level (5 μg/dL or more); 106 of them were 10 μg/dL or higher. Average blood lead testing activity fell by 43% in the spring of 2020 due to the COVID-19 pandemic.
- Approximately 12% of adults and 8.5% of children have current asthma in New Hampshire (2018).
- Unintentional falls were responsible for 251 deaths among New Hampshireites over the age of 65 in 2018.

54% of New Hampshire housing was built before 1978 and is likely to contain lead-based paint; 20% was built before 1940.

An estimated 33% of school-age children in New Hampshire have had elevated blood lead levels at some point in their lives; 30% of new refugee children tested had elevated levels compared to 4.6% statewide.

In 2015, asthma was responsible for over 4,200 emergency department visits in New Hampshire.

30% of homes tested in New Hampshire have test results above the EPA action level for radon in their indoor air. New Hampshire’s average radon exposure potential is 44% higher than the national average.

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Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of New Jersey families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of New Jersey. For example:

<table>
<thead>
<tr>
<th>Program</th>
<th>NJ received funding since 2018?</th>
</tr>
</thead>
<tbody>
<tr>
<td>CDC’s Healthy Homes and Lead Poisoning Prevention Program</td>
<td>YES</td>
</tr>
<tr>
<td>CDC’s National Asthma Control Program</td>
<td>NO</td>
</tr>
<tr>
<td>CDC’s Environmental Health Tracking Network</td>
<td>YES</td>
</tr>
<tr>
<td>HUD’s Office of Lead Hazard Control and Healthy Homes</td>
<td>YES</td>
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<tr>
<td>HUD’s Community Development Block Grants (CDBG)</td>
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<td>EPA’s Lead Categorical Grants</td>
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<td>EPA’s State Indoor Radon Grants</td>
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<td>YES</td>
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<td>HHS’ Maternal and Child Health Block Grants</td>
<td>YES</td>
</tr>
<tr>
<td>HHS’ Low Income Home Energy Assistance Program (LIHEAP)</td>
<td>YES</td>
</tr>
<tr>
<td>DOE’s Weatherization Assistance Program</td>
<td>YES</td>
</tr>
</tbody>
</table>

In New Jersey, 36% of children live in households with a high housing cost burden, and 14% of children live in poverty.

In 2017, 5,611 New Jersey children tested had an elevated blood lead level (5 μg/dL or more); 1,828 of them had blood lead levels of 10 μg/dL or more.

In New Jersey, 66% of housing was built before 1978 (18% before 1940) and is likely to contain lead-based paint.

In 2017, 13% of children under age six with a positive blood lead test in New Jersey lived in Newark, despite the fact that less than 4% of the state’s children under age 6 resided in the city.

In 2018, 431 New Jerseyans over 65 died, and in 2015 approximately 17,000 were hospitalized as a result of unintentional falls.

In 2017, carbon monoxide poisoning was responsible for 525 emergency department visits in New Jersey.

Radon is associated with between 140 and 250 lung cancer deaths in New Jersey each year. Only 37% of New Jersey homes have been tested for radon as of 2019.

Approximately 8% of adults and 7% of children have current asthma in New Jersey (2018).

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Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of New Mexico families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of New Mexico. For example:

- CDC’s Healthy Homes and Lead Poisoning Prevention Program
- CDC’s National Asthma Control Program
- CDC’s Environmental Health Tracking Network
- HUD’s Office of Lead Hazard Control and Healthy Homes
- HUD’s Community Development Block Grants (CDBG)
- HUD’s HOME Investment Partnerships Program
- EPA’s Lead Categorical Grants
- EPA’s State Indoor Radon Grants
- EPA’s Drinking Water Revolving Fund
- HHS’ Maternal and Child Health Block Grants
- HHS’ Low Income Home Energy Assistance Program (LIHEAP)
- DOE’s Weatherization Assistance Program

In New Mexico, 26% of children live in households with a high housing cost burden, and 26% of children live in poverty.

44% of New Mexico housing was built before 1978 and is likely to contain lead-based paint.

Approximately 10% of adults and 8% of children have current asthma in New Mexico (2018).

In 2018, unintentional falls were responsible for 345 deaths among New Mexicans over the age of 65.

7 counties in northern New Mexico have predicted average indoor radon levels above the EPA action level.

In 2017, 71 New Mexico children tested had an elevated blood lead level (5 μg/dL or more); 9 of them were 10 μg/dL or higher. Average blood lead testing activity fell by 59% in the spring of 2020 due to the COVID-19 pandemic.

On average, 8 New Mexicans die annually from carbon monoxide exposure (2014-2018). In 2018, CO exposure was responsible for 187 emergency department visits.

In 2016, there were over 7,000 emergency department visits due to asthma in New Mexico.
Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of New York families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of New York. For example:

- In New York, 38% of children live in households with a high housing cost burden, and 19% of children live in poverty.
- 78% of New York housing was built before 1978 and is likely to contain lead-based paint; 31% was built before 1940.
- Approximately 10% of adults and 6% of children have current asthma in New York (2018).
- Unintentional falls were responsible for over 1,432 deaths (2018) and over 100,000 emergency department visits (2014) in New Yorkers over the age of 65.
- In 2017, 5,923 outstate New York children and 5,317 New York City children tested had an elevated blood lead level (5 μg/dL or more); 1,764 of the outstate results were 10 μg/dL or higher. Average blood lead testing activity fell by 45% (outstate) and 66% (New York City) in the spring of 2020 due to the COVID-19 pandemic.
- In 2016, asthma was responsible for over 152,000 emergency department visits and over 21,000 hospitalizations in New York.
- Over half of the counties in New York have predicted average indoor radon levels above the EPA action level. Statewide, 18% of basements are estimated to be above the action level.

In 2020, 5,923 outstate New York children and 5,317 New York City children tested had an elevated blood lead level (5 μg/dL or more); 1,764 of the outstate results were 10 μg/dL or higher. Average blood lead testing activity fell by 45% (outstate) and 66% (New York City) in the spring of 2020 due to the COVID-19 pandemic. To protect the health of New York families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of New York. For example:

- In New York, 38% of children live in households with a high housing cost burden, and 19% of children live in poverty.
- 78% of New York housing was built before 1978 and is likely to contain lead-based paint; 31% was built before 1940.
- Approximately 10% of adults and 6% of children have current asthma in New York (2018).
- Unintentional falls were responsible for over 1,432 deaths (2018) and over 100,000 emergency department visits (2014) in New Yorkers over the age of 65.
- In 2017, 5,923 outstate New York children and 5,317 New York City children tested had an elevated blood lead level (5 μg/dL or more); 1,764 of the outstate results were 10 μg/dL or higher. Average blood lead testing activity fell by 45% (outstate) and 66% (New York City) in the spring of 2020 due to the COVID-19 pandemic.
- In 2016, asthma was responsible for over 152,000 emergency department visits and over 21,000 hospitalizations in New York.
- Over half of the counties in New York have predicted average indoor radon levels above the EPA action level. Statewide, 18% of basements are estimated to be above the action level.

In 2020, 5,923 outstate New York children and 5,317 New York City children tested had an elevated blood lead level (5 μg/dL or more); 1,764 of the outstate results were 10 μg/dL or higher. Average blood lead testing activity fell by 45% (outstate) and 66% (New York City) in the spring of 2020 due to the COVID-19 pandemic. To protect the health of New York families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of New York. For example:

- In New York, 38% of children live in households with a high housing cost burden, and 19% of children live in poverty.
- 78% of New York housing was built before 1978 and is likely to contain lead-based paint; 31% was built before 1940.
- Approximately 10% of adults and 6% of children have current asthma in New York (2018).
- Unintentional falls were responsible for over 1,432 deaths (2018) and over 100,000 emergency department visits (2014) in New Yorkers over the age of 65.
Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of North Carolina families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of North Carolina. For example:

- In North Carolina, 27% of children live in households with a high housing cost burden, and 20% of children live in poverty.
- In 2017, 751 North Carolina children tested had an elevated blood lead level (5 μg/dL or more); 209 of them had blood lead levels of 10 μg/dL or higher.
- 37% of North Carolina housing was built before 1978 and is likely to contain lead-based paint.
- Approximately 9% of adults (2018) and 12% of children (2014) have current asthma in North Carolina.
- In 2014, asthma was responsible for over 58,000 emergency department visits in North Carolina. Asthma hospitalization charges totaled over $139 million.
- In 2018, unintentional falls were responsible for 1,182 deaths among North Carolinians over the age of 65.
- 8 counties in western North Carolina have predicted average indoor radon levels above the EPA action level.
Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of North Dakota families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of North Dakota. For example:

- In North Dakota, 18% of children live in households with a high housing cost burden, and 10% of children live in poverty.
- In 2014, only 3,700 children in North Dakota were tested for lead; of these, 2.4% had blood lead levels above 5 µg/dL.
- 52% of North Dakota housing was built before 1978 and is likely to contain lead-based paint; 12% was built before 1940.
- Approximately 8% of adults (2018) and 8% of children (2012) have current asthma in North Dakota.
- The entire state of North Dakota has predicted indoor radon levels above the EPA action level; 63% of homes have test results above the action level.
- In 2017, unintentional falls were responsible for 62 deaths among North Dakotans over the age of 60 and were the leading cause of preventable death for this age group.
- Approximately 17,000 North Dakotan children (10%) live in crowded housing (2018), an 70% increase from 2012.

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Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of Northern Mariana Islands families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of the Northern Mariana Islands. For example:

- **CDC’s Healthy Homes and Lead Poisoning Prevention Program**: NO
- **CDC’s National Asthma Control Program**: NO
- **CDC’s Environmental Health Tracking Network**: NO
- **HUD’s Office of Lead Hazard Control and Healthy Homes**: NO
- **HUD’s Community Development Block Grants (CDBG)**: YES
- **HUD’s HOME Investment Partnerships Program**: YES
- **EPA’s Lead Categorical Grants**: NO
- **EPA’s State Indoor Radon Grants**: YES
- **EPA’s Drinking Water Revolving Fund**: YES
- **HHS’ Maternal and Child Health Block Grants**: YES
- **HHS’ Low Income Home Energy Assistance Program (LIHEAP)**: YES
- **DOE’s Weatherization Assistance Program**: YES

MP received funding since 2018?

### Housing Conditions

- **Renters**: At least **21%** of renters in the Northern Mariana Islands spend over 30% of their income on rent. Approximately **52%** of the population are below the federal poverty line (2010).

- **Resident Health**: Approximately **4,550 North Mariana Islanders have been diagnosed with asthma**, about 8.4% of the population.

- **Infrastructure**: Some parts of the Northern Mariana Islands lack 24-hour access to water, and practices to combat this (such as cisterns) increase the risk and intensity of cross-contamination.

- **Healthcare Costs**: As of 2015, no system exists to detect or respond to internal corrosion in the water system, allowing for metals and other contaminants to leach into the water.

- **Environmental Impact**: A popular Saipan Island region for fishing has exorbitantly high rates of lead in the soil which pose a significant contamination risk to nearby waters.

- **Deaths**: Approximately **11 people per 100,000 Northern Mariana Islanders die each year from indoor air pollution** caused by cooking and heating fuels.

- **Carbon Monoxide**: About **5 people are poisoned by carbon monoxide each year** on the Northern Mariana Islands.

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Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of Ohio families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of Ohio. For example:

- In Ohio, 25% of children live in households with a high housing cost burden, and 20% of children live in poverty.
- 65% of Ohio housing was built prior to 1978 and is likely to contain lead-based paint; almost 19% was built in 1939 or earlier.
- In 2017, black children in Ohio had over twice the asthma prevalence rate of white children (21.6% versus 9.6%, respectively).
- In 2014, unintentional falls among older Ohioans were responsible for 81,275 emergency department visits, 19,461 hospitalizations, and 1,160 deaths.
- In 2019, 3,533 of Ohio children tested had an elevated blood lead level (5 μg/dL or more); 978 of them were 10 μg/dL or higher. Average blood lead testing activity fell by 46% in the spring of 2020 due to the COVID-19 pandemic.
- Approximately 9% of adults and 8% of children have current asthma in Ohio (2018).
- Of Ohio’s 88 counties, 29 contain radon levels above the EPA action level.

National Center for Healthy Housing

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contact: sgoodwin@nchh.org
Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of Oklahoma families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of Oklahoma. For example:

- **In Oklahoma, 25% of children live in households with a high housing cost burden**, and 22% of children live in poverty.
- **Approximately 10% of adults** (2018) and **10% of children** (2016) **have current asthma** in Oklahoma.
- **In 2012, total charges for asthma-related hospitalizations in Oklahoma were $76.4 million**, $18.5 million of which is attributable to **1,928 asthma-related hospitalizations** for Oklahoman children under 15 years of age.
- **Every year, over 450 Oklahomans over the age of 65 die and 7,000 are hospitalized** as a result of fall-related injuries.
- **9 counties** in Oklahoma are categorized as having “moderate potential” for indoor radon levels above the EPA action level.

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Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of Oregon. For example:

- In Oregon, 32% of children live in households with a high housing cost burden, and 16% of children live in poverty.
- 53% of Oregon housing was built before 1978 and is likely to contain lead-based paint; 11% was built before 1940.
- About 12% of adults and 7% of children have current asthma in Oregon (2018).
- In 2018, there were 1,163 hospitalizations due to asthma in Oregon, totaling $9.2 million in direct charges.
- In 2018, 120 Oregon children tested had an elevated blood lead level (5 μg/dL or more); 28 of them had blood lead levels of 10 μg/dL or higher. Average blood lead testing activity fell by 33% in the spring of 2020 due to the COVID-19 pandemic.
- In 2018, unintentional falls were responsible for 689 deaths among Oregonians over the age of 65.
- 28 ZIP codes in Oregon are considered “high risk” for indoor radon, with as many as 62.5% of homes testing above the EPA action level. There are approximately 276 radon-related lung cancer deaths in Oregon each year.

OR received funding since 2018?

- CDC’s Healthy Homes and Lead Poisoning Prevention Program
  - YES
- CDC’s National Asthma Control Program
  - YES
- CDC’s Environmental Health Tracking Network
  - YES
- HUD's Office of Lead Hazard Control and Healthy Homes
  - YES
- HUD’s Community Development Block Grants (CDBG)
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- HUD’s HOME Investment Partnerships Program
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- EPA’s Lead Categorical Grants
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- HHS’ Low Income Home Energy Assistance Program (LIHEAP)
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- DOE’s Weatherization Assistance Program
  - YES

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Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of Pennsylvania families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of Pennsylvania. For example:

- **CDC’s Healthy Homes and Lead Poisoning Prevention Program**: YES
- **CDC’s National Asthma Control Program**: YES
- **CDC’s Environmental Health Tracking Network**: NO
- **HUD’s Office of Lead Hazard Control and Healthy Homes**: YES
- **HUD’s Community Development Block Grants (CDBG)**: YES
- **HUD’s HOME Investment Partnerships Program**: YES
- **EPA’s Lead Categorical Grants**: YES
- **EPA’s State Indoor Radon Grants**: YES
- **EPA’s Drinking Water Revolving Fund**: YES
- **HHS’ Maternal and Child Health Block Grants**: YES
- **HHS’ Low Income Home Energy Assistance Program (LIHEAP)**: YES
- **DOE’s Weatherization Assistance Program**: YES

In Pennsylvania, **27% of children live in households with a high housing cost burden**, and **17% of children live in poverty**.

**In 2018, 6,585 Pennsylvania children tested had an elevated blood lead level** (5 μg/dL or more); **1,776 of them had blood lead levels of 10 μg/dL or more**.

**69% of Pennsylvania housing was built before 1978** and is likely to contain lead-based paint; **25% was built before 1940**.


**In 2013, Pennsylvania reports over 18,000 inpatient hospitalizations** due to asthma, costing the state **over $496 million**. In 2015, **only 34% of adults with asthma were advised to reduce exposures to irritants** at home, school, or work.

Approximately **10% of adults and 10% of children have current asthma** in Pennsylvania (2018).

**Unintentional falls were responsible for 1,611 deaths among Pennsylvanians over the age of 65** in 2018.

**40% of Pennsylvania homes tested for radon have results above the EPA action level**. In 49 Pennsylvania counties, average indoor air radon levels are predicted to be greater than 4 pCi/L.

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Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of Puerto Rico families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of Puerto Rico. For example:

- **CDC’s Healthy Homes and Lead Poisoning Prevention Program**
  - Status: No

- **CDC’s National Asthma Control Program**
  - Status: Yes

- **CDC’s Environmental Health Tracking Network**
  - Status: No

- **HUD’s Office of Lead Hazard Control and Healthy Homes**
  - Status: No

- **HUD’s Community Development Block Grants (CDBG)**
  - Status: Yes

- **HUD’s HOME Investment Partnerships Program**
  - Status: Yes

- **EPA’s Lead Categorical Grants**
  - Status: Yes

- **EPA’s State Indoor Radon Grants**
  - Status: No

- **EPA’s Drinking Water Revolving Fund**
  - Status: Yes

- **HHS’ Maternal and Child Health Block Grants**
  - Status: Yes

- **HHS’ Low Income Home Energy Assistance Program (LIHEAP)**
  - Status: Yes

- **DOE’s Weatherization Assistance Program**
  - Status: Yes

In Puerto Rico, **29% of children live in households with a high housing cost burden**, and **57% of children live in poverty**.

**54% of Puerto Rico housing was built before 1978** and is likely to contain lead-based paint.

Over **97,000 children** and **303,000 adults in Puerto Rico have current asthma**, about 14% and 11% of the population for each age group, respectively (2018).

Unintentional falls were responsible for 152 deaths in Puerto Rico in 2014; **107 of these deaths were among adults over the age of 65**.

Puerto Rico **does not require blood lead data reporting**. Blood lead prevalence (5 µg/dL) for children under six is **estimated at over 3%**.

In 2013, there were **over 95,000 emergency room visits due to asthma in Puerto Rico**. The **highest percentage** of these claims originated from the Cagus region.

97.2% of the population in Puerto Rico is served by water systems that violate EPA’s Lead and Copper Rule.

FEMA reported a total of **357,492 homes damaged by Hurricane Maria** as of May 11, 2018. About **23% of Puerto Rico’s housing stock was affected**.
Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of Rhode Island families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of Rhode Island. For example:

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In Rhode Island, 33% of children live in households with a high housing cost burden, and 18% of children live in poverty.

In 2017, 815 Rhode Island children tested had an elevated blood lead level (5 μg/dL or more); 170 of them were 10 μg/dL or higher. Average blood lead testing activity fell by 66.5% in the spring of 2020 due to the COVID-19 pandemic.

Approximately 12% of adults and 8% children (2018) have current asthma in Rhode Island.

$21 million in total hospital charges attributable to asthma hospitalizations were charged in Rhode Island in 2012.

One in four Rhode Island homes has elevated levels of radon in their indoor air. In Exeter and Richmond, over half of homes are above the action level.

In Rhode Island, 73% of Rhode Island housing was built prior to 1978 (28% before 1940) and is likely to contain lead-based paint.

Nearly one in four Rhode Islanders is 65 or older, and Rhode Island has the highest proportion of residents 85 and older in the U.S. (15.8%).

Asthma emergency department visit rates per 1,000 Rhode Island children in 2013-2017 were 20.5 for black children and 16.5 for Hispanic children compared to 5.9 for white children (ages 0-4).
Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of South Carolina families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of South Carolina. For example:

- **In South Carolina, 27% of children live in households with a high housing cost burden**, and 23% of children live in poverty.
- **37% of South Carolina housing was built before 1978** and is likely to contain lead-based paint.
- **Over 360,000 adults** (2018) and over **102,000 children** (2013) **have current asthma** in South Carolina.
- **On average, 45 South Carolinians die annually from carbon monoxide exposure** (2014-2018).
- **In 2014, approximately 3% of blood lead tests in South Carolina returned elevated blood lead levels** (5 μg/dL or more).
- **In 2018, unintentional falls were responsible for 515 deaths** among South Carolinians over the age of 65.
- **In 2017, there were over 21,000 emergency department visits and almost 2,500 hospitalizations due to asthma** in South Carolina.
- **Through 2015, indoor radon test results for two South Carolina counties (Oconee and Greenville) showed averages above the EPA action level.**
Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of South Dakota families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of South Dakota. For example:

- Reporting blood lead levels is not required in South Dakota. In 2013, only 1,118 blood lead tests were reported and 68 (6.1%) of those children had elevated levels (5 µg/dL or more).
- In 2017, there were 299 hospital discharges for asthma in South Dakota; average charges totaled $15,201.
- 48 of South Dakota's 66 counties have predicted average indoor radon levels above the EPA action level.

In South Dakota, 20% of children live in households with a high housing cost burden, and 16% of children live in poverty.

54% of South Dakota housing was built before 1978 and is likely to contain lead-based paint; 16% was built prior to 1940.

About 8% of adults (2018) and 6% of children (2017) have current asthma in South Dakota.

In 2018, unintentional falls were responsible for 130 deaths among South Dakotans over the age of 65.

In 2020
Healthy Housing Fact Sheet

2020
SOUTH DAKOTA

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of South Dakota. For example:

- Reporting blood lead levels is not required in South Dakota. In 2013, only 1,118 blood lead tests were reported and 68 (6.1%) of those children had elevated levels (5 µg/dL or more).
- In 2017, there were 299 hospital discharges for asthma in South Dakota; average charges totaled $15,201.
- 48 of South Dakota’s 66 counties have predicted average indoor radon levels above the EPA action level.

In South Dakota, 20% of children live in households with a high housing cost burden, and 16% of children live in poverty.

54% of South Dakota housing was built before 1978 and is likely to contain lead-based paint; 16% was built prior to 1940.

About 8% of adults (2018) and 6% of children (2017) have current asthma in South Dakota.

In 2018, unintentional falls were responsible for 130 deaths among South Dakotans over the age of 65.

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Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of Tennessee families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of Tennessee. For example:

- In Tennessee, 29% of children live in households with a high housing cost burden, and 22% of children live in poverty.
- 44% of Tennessee housing was built before 1978 and is likely to contain lead-based paint.
- Unintentional falls were responsible for 661 deaths among Tennesseans above the age of 65 in 2018.
- 33 counties in eastern and central Tennessee have average indoor air screening levels above the EPA action level for radon.
- In 2017, 349 Tennessee children tested had an elevated blood lead level (5 μg/dL or more); 99 of them had blood lead levels of 10 μg/dL or more. Average blood lead testing activity fell by 35% in the spring of 2020 due to the COVID-19 pandemic.
- Approximately 10% of adults (2018) and 10% of children (2014) have current asthma in Tennessee.
- There were 49.3 emergency department visits due to asthma for every 10,000 people in Tennessee in 2016; Hardeman and Shelby counties had rates over 80.

TN received funding since 2018?

- CDC’s Healthy Homes and Lead Poisoning Prevention Program: YES
- CDC’s National Asthma Control Program: NO
- CDC’s Environmental Health Tracking Network: NO
- HUD’s Office of Lead Hazard Control and Healthy Homes: YES
- HUD’s Community Development Block Grants (CDBG): YES
- HUD’s HOME Investment Partnerships Program: YES
- EPA’s Lead Categorical Grants: YES
- EPA’s State Indoor Radon Grants: YES
- EPA’s Drinking Water Revolving Fund: YES
- HHS’ Maternal and Child Health Block Grants: YES
- HHS’ Low Income Home Energy Assistance Program (LIHEAP): YES
- DOE’s Weatherization Assistance Program: YES
Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of Texas families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of Texas. For example:

- CDC’s Healthy Homes and Lead Poisoning Prevention Program
- CDC’s National Asthma Control Program
- CDC’s Environmental Health Tracking Network
- HUD’s Office of Lead Hazard Control and Healthy Homes
- HUD’s Community Development Block Grants (CDBG)
- HUD’s HOME Investment Partnerships Program
- EPA’s Lead Categorical Grants
- EPA’s State Indoor Radon Grants
- EPA’s Drinking Water Revolving Fund
- HHS’ Maternal and Child Health Block Grants
- HHS’ Low Income Home Energy Assistance Program (LIHEAP)
- DOE’s Weatherization Assistance Program

In Texas, 32% of children live in households with a high housing cost burden, and 21% of children live in poverty.

In 2017, 6,767 Texas children tested had an elevated blood lead level (5 μg/dL or more). Average blood lead testing activity fell over 42% in the spring of 2020 due to the COVID-19 pandemic.

Over 540,000 children (2017) and 1.5 million adults (2018) in Texas have current asthma, about 8% and 7% of the population for each age group, respectively.

In 2018, unintentional falls were responsible for 1,781 deaths among Texans over the age of 65.

In 2016, there were over 6,315 pediatric hospitalizations due to asthma in Texas, amounting to over $149,800,000 in total charges.


The Panhandle region of Texas has the highest risk for radon in the state. While statewide average indoor testing levels fall within a safe range, homes in this area have reported levels over 20 pCi/l (five times the EPA action level).

38% of Texas housing was built before 1978 and is likely to contain lead-based paint.

In 1978, 38% of Texas housing was built before 1978 and is likely to contain lead-based paint.

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Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of Virgin Islands families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

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Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of the Virgin Islands. For example:

- **1978**: Approximately 50% of housing units were built before 1978 and are likely to contain lead-based paint (2010).
- **$:** Approximately 48% of Virgin Island renters spend over 30% of their income on rent (2010).
- **5,011 people from the Virgin Islands have asthma**, approximately 5% of the population.
- **Approximately 1,600 falls** occurred in the Virgin Islands in 2017.
- **The Virgin Islands have no mandatory testing for blood-lead levels in place and don’t collect data on lead-based paint in private residences.**
- **About 6% of housing in the Virgin Islands lacks complete plumbing facilities**, and approximately 7% lacks complete kitchen facilities (2010).
- **52% of all housing in the Virgin Islands was damaged by hurricanes Irma and Maria; more than 50% of Virgin Islands residents reported the presence of mold in their homes following the hurricanes.**
- **Approximately 10 people in the Virgin Islands are poisoned by carbon monoxide annually.**

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Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of Utah. For example:

- In Utah, 23% of children live in households with a high housing cost burden, and 10% of children live in poverty.
- 40% of Utah housing was built before 1978 and is likely to contain lead-based paint. In several central Utah counties, more than 20% was built before 1950.
- Over 49,000 children and 200,000 adults in Utah have current asthma, about 6% and 9% of the population for each age group, respectively (2018).
- 7 counties in eastern and central Utah have predicted average indoor radon levels above the EPA action level. Statewide, over 37% of radon test results returned were above the action level (2019).
- In 2018, 137 Utah children tested with blood lead levels at or above 5 µg/dL.
- Over 20% of Utah households lack carbon monoxide detectors. In 2018, there were 284 unintentional carbon monoxide exposures reported to the Utah Poison Control Center.
- There were over 7,500 emergency department visits and 1,500 hospitalizations due to asthma in Utah in 2014, with total costs of $28 million and $20.1 million, respectively.
- Every week, unintentional falls among Utahns over the age of 65 result in 200 emergency department visits, 63 hospitalizations, and 3 deaths.

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Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of Vermont. For example:

- **CDC’s Healthy Homes and Lead Poisoning Prevention Program**: YES
- **CDC’s National Asthma Control Program**: YES
- **CDC’s Environmental Health Tracking Network**: YES
- **HUD’s Office of Lead Hazard Control and Healthy Homes**: YES
- **HUD’s Community Development Block Grants (CDBG)**: YES
- **HUD’s HOME Investment Partnerships Program**: YES
- **EPA’s Lead Categorical Grants**: YES
- **EPA’s State Indoor Radon Grants**: YES
- **EPA’s Drinking Water Revolving Fund**: YES
- **HHS’ Maternal and Child Health Block Grants**: YES
- **HHS’ Low Income Home Energy Assistance Program (LIHEAP)**: YES
- **DOE’s Weatherization Assistance Program**: YES

In Vermont, **26% of children live in households with a high housing cost burden**, and 12% of children live in poverty.

In 2017, **9,791 Vermonter children received blood lead screenings; 157 of them had lead levels at 5 μg/dL or above.**

Approximately **8.5% of adults and 9% children have current asthma** in Vermont (2018); **81% of them have two or more indoor environmental triggers** at home (2015).

In 2018, **160 Vermonters over the age of 65 died from unintentional falls.**

In 2008, Vermont became **the first state to pass legislation that defined 5 μg/dL as an elevated blood lead level.**

In 2015, there were **2,489 emergency department visits with a primary diagnosis of asthma** among Vermonters.

In 2017, **9,791 Vermonter children received blood lead screenings; 157 of them had lead levels at 5 μg/dL or above.**

In 2008, Vermont became **the first state to pass legislation that defined 5 μg/dL as an elevated blood lead level.**

In 2015, there were **2,489 emergency department visits with a primary diagnosis of asthma** among Vermonters.

One in seven Vermont homes has **elevated levels of radon** in their indoor air (2016).

February 2021. For references, additional state-specific healthy homes information, and to learn how you can engage your members of Congress on these vital issues,...

contact: sgoodwin@nchh.org
Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of Virginia families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of Virginia. For example:

- In 2016, 793 Virginia children tested had an elevated blood lead level (5 μg/dL or more); 229 of them had blood lead levels of 10 μg/dL or higher.
- In 2013, 7,582 Virginians were hospitalized due to asthma, with total charges over $156.5 million.
- In 2018, unintentional falls were responsible for 837 deaths among Virginians over the age of 65.

In Virginia, 29% of children live in households with a high housing cost burden, and 14% of children live in poverty.

46% of Virginia housing was built before 1978 and is likely to contain lead-based paint.

Approximately 9% of adults (2018) and 7% of children (2016) have current asthma in Virginia.

46 counties and 15 cities in Virginia have predicted average indoor radon levels above the EPA action level.

February 2021. For references, additional state-specific healthy homes information, and to learn how you can engage your members of Congress on these vital issues... visit: http://bit.ly/StatePro contact: sgoodwin@nchh.org
Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of Washington families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of Washington. For example:

**CDC’s Healthy Homes and Lead Poisoning Prevention Program**

**CDC’s National Asthma Control Program**

**CDC’s Environmental Health Tracking Network**

**HUD’s Office of Lead Hazard Control and Healthy Homes**

**HUD’s Community Development Block Grants (CDBG)**

**HUD’s HOME Investment Partnerships Program**

**EPA’s Lead Categorical Grants**

**EPA’s State Indoor Radon Grants**

**EPA’s Drinking Water Revolving Fund**

**HHS’ Maternal and Child Health Block Grants**

**HHS’ Low Income Home Energy Assistance Program (LIHEAP)**

**DOE’s Weatherization Assistance Program**

In Washington, 31% of children live in households with a high housing cost burden, and 14% of children live in poverty.

47% of Washington homes were built before 1978 and are likely to contain lead-based paint; approximately 15% are estimated to have existing lead hazards.

Approximately 10% of adults (2018) and 7% of children (2016) have current asthma in Washington.

In 2018, unintentional falls were responsible for approximately 920 deaths of Washingtonians over the age of 65 per 100,000 (60.25 per 100,000 nationally).

In 2018, 448 Washingtonian children tested had an elevated blood lead level (5 μg/dL or more); only 4% of children under six years of age were screened. Average blood lead testing activity fell by 54% in the spring of 2020 due to the COVID-19 pandemic.


In Washington, Native Americans and Alaskan Natives were more likely to have asthma than other racial or ethnic groups (2000-2012).

Approximately 22% of homes tested for radon in Washington in 2018 had levels above the EPA action level.

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Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of Wisconsin families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of Wisconsin. For example:

- In Wisconsin, 23% of children live in households with a high housing cost burden, and 14% of children live in poverty.
- 60% of Wisconsin housing was built before 1978 and is likely to contain lead-based paint; 19% was built before 1940.
- Over 100,000 children and 400,000 adults in Wisconsin have current asthma, about 8% and 9% of the population for each age group, respectively (2018).
- About 1 in 10 Wisconsin homes have indoor radon levels over the EPA action level, and an estimated 488 Wisconsinites die annually from radon-related lung cancer.
- In 2017, 1,994 Wisconsin children tested had an elevated blood lead level (5 μg/dL or more); 672 of them were 10 μg/dL or higher. Average blood lead testing activity fell by 58.5% in the spring of 2020 due to the COVID-19 pandemic.
- There were 430 emergency department visits due to carbon monoxide exposure in Wisconsin in 2016. On average, 20 Wisconsinites die annually from carbon monoxide exposure (2014-2018).
- In 2017, asthma was responsible for over 20,000 emergency department visits and over 2,000 hospitalizations in Wisconsin.
- In 2018, unintentional falls were responsible for 1,530 deaths among Wisconsinites over the age of 65.

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Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of West Virginia families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of West Virginia. For example:

- In West Virginia, 24% of children live in households with a high housing cost burden, and 25% of children live in poverty.
- 58% of West Virginia housing was built before 1978 and is likely to contain lead-based paint.
- Approximately 12% of adults (2018) and 9% of children (2014) have current asthma in West Virginia.
- 20 counties in north and east West Virginia have predicted average indoor screening levels above the EPA action level for radon.
- In 2017, 201 West Virginia children tested had an elevated blood lead level (5 \( \mu g/dL \) or more); only 15% of children 72 months or younger were tested. Average blood lead testing activity fell by 53% in the spring of 2020 due to the COVID-19 pandemic.
- 305 West Virginians above the age of 65 died from unintentional falls in 2018.
- Almost 14% of adults in West Virginia have COPD, the highest rate in the nation.

WV received funding since 2018?

<table>
<thead>
<tr>
<th>Program</th>
<th>Funding since 2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>CDC’s Healthy Homes and Lead Poisoning Prevention Program</td>
<td>YES</td>
</tr>
<tr>
<td>CDC’s National Asthma Control Program</td>
<td>NO</td>
</tr>
<tr>
<td>CDC’s Environmental Health Tracking Network</td>
<td>NO</td>
</tr>
<tr>
<td>HUD’s Office of Lead Hazard Control and Healthy Homes</td>
<td>NO</td>
</tr>
<tr>
<td>HUD’s Community Development Block Grants (CDBG)</td>
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Unhealthy conditions found in hazardous housing can lead to lead poisoning, asthma, respiratory illness, cancer, and unintentional injuries, resulting in missed school days and poor school performance for children, as well as missed workdays for parents. The requirement for safe and healthy housing has become even more urgent as people spend more time than ever in residential environments due to the COVID-19 pandemic. To protect the health of Wyoming families and prevent continued increases in associated healthcare costs and societal consequences, full federal funding is needed for critical programs and services.

Full funding to federal programs such as those listed above will help to address many of the risks and burdens facing the residents and families of Wyoming. For example:

- **CDC’s Healthy Homes and Lead Poisoning Prevention Program**: NO
- **CDC’s National Asthma Control Program**: NO
- **CDC’s Environmental Health Tracking Network**: NO
- **HUD’s Office of Lead Hazard Control and Healthy Homes**: NO
- **HUD’s Community Development Block Grants (CDBG)**: YES
- **HUD’s HOME Investment Partnerships Program**: YES
- **EPA’s Lead Categorical Grants**: NO
- **EPA’s State Indoor Radon Grants**: YES
- **EPA’s Drinking Water Revolving Fund**: YES
- **HHS’ Maternal and Child Health Block Grants**: YES
- **HHS’ Low Income Home Energy Assistance Program (LIHEAP)**: YES
- **DOE’s Weatherization Assistance Program**: YES

In Wyoming, 20% of children live in households with a high housing cost burden, and 14% of children live in poverty. In 2012, only 2,184 childhood blood lead tests were reported to the Wyoming Department of Health; 1.5% of these were elevated.

51% of Wyoming housing was built before 1978 and is likely to contain lead-based paint; 9% was built before 1940. On average, 3 Wyomingites die annually from carbon monoxide exposure (2014-2018).

Approximately 9% of adults (2018) and 7% of children (2012) have current asthma in Wyoming. In 2018, unintentional falls were responsible for 95 deaths among Wyomingites over the age of 65.

Wyoming has no state statutes regarding carbon monoxide detectors or radon. 21 of Wyoming’s 23 counties have predicted average indoor radon levels above the EPA action level.

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