TESTIMONY ON SB 1024

AN ACT CONCERNING ZONING AUTHORITY, CERTAIN DESIGN GUIDELINES, QUALIFICATIONS OF CERTAIN LAND USE OFFICIALS AND CERTAIN SEWAGE DISPOSAL SYSTEM

via email to pdtestimony@cga.ct.gov
By: Lawrence Rizzolo, Yale School of Medicine
March 11, 2021

Dear Chairman Cassano, Chairwoman McCarthy Vahey, Vice Chairman Needleman, Vice Chairwoman Goupil, Ranking Member Senator Hwang, Ranking Member Zullo, and Distinguished Members of the Connecticut General Assembly Joint Planning and Development Committee:

I am Lawrence Rizzolo, Professor Emeritus of Yale Medical School. This testimony is my own, as I do not represent Yale University. I come from a family of Italian immigrants who settled in Newark, New Jersey. Eventually, my grandparents could move into a better neighborhood, and my parents and many of my aunts and uncles moved out into the suburbs. My generation includes doctors, lawyers, and business leaders. We were aided principally by three things: Roosevelt's New Deal and then the GI Bill, affordable housing in the suburbs, and the ability to blend in by losing our Italian accent. My generation and my children's benefit from safe neighborhoods to play in, good schools, good healthcare, and the confidence that each generation could be better off than the next. How has all that been denied the Black community?

New York City developed the first zoning laws in 1916 to protect health and provide a high-quality environment for residents (Fenelon et al. 2017; Wilson, Hutson, and Mujahid 2008). The goal was to separate residential properties from the noxious emissions of industry. As sanitation improved, the emphasis of zoning switched to protect wealth and property values. With this switch, zoning became a tool that compromised the health of minority populations by consigning them to undesirable neighborhoods. After a brief history, I will focus on how health disparities can be reduced through zoning reform and how reform is preferable to public housing located in innercity neighborhoods.

A history of legal and cultural racism led to the current wealth disparities and extreme segregation in Connecticut. Rather than *de facto* segregation, Black Americans were consigned to undesirable neighborhoods by explicitly racist laws and customs. The Homeowners' Loan Corporation offered color coded maps to help banks determine where they could make loans. Realtors refused to show homes to Blacks in these neighborhoods, regardless of their ability to pay. Predatory realtors scared Whites who had a Black family on their block into moving out before the value of their home allegedly would decrease. Realtors would then buy the properties at reduced rates and sell them to Blacks at inflated rates. After World War II, the GI bill supported education and guaranteed mortgages for returning veterans. The law explicitly excluded Black GIs. Government would not

insure bank mortgages for Blacks. Instead, the Black community was offered lease-to-buy loans with unfavorable terms. To make rent, homeowners would sublet to multiple families and skimp on maintenance. Their investment was lost if they couldn't keep up with payments. Even though houses were available in White neighborhoods, Blacks were forced into multifamily, high-density neighborhoods. In the 1960s and 1970s, discriminatory zoning ordinances required minimum lot and house sizes, specified housing types and construction materials, and even minimum dollar values. *Despite race-neutral language*, the ordinances effectively kept out lower-income people and were directed at minorities, primarily at Black Americans, as opposed to poor Whites. Wittingly or not, race neutral language continues to effectively confine many Blacks and other minorities in impoverished neighborhoods, as exhaustively documented in The New Jim Crow and The Color of Law (Alexander and West 2012; Rothstein 2017). A recent report in the Hartford Courant illustrated this by comparing West Hartford to Bloomfield.

Zoning appears to be egalitarian, but it is not a benign or neutral process. Every zone is subject to enforcement under zoning laws, building laws, noise laws, environmental laws, etc. In fact, these laws are only enforced in areas where people have the clout to make the complaints count (Maantay 2001; Alexander and West 2012; Rothstein 2017).

For most families, home ownership is their major source of wealth. *De jure* segregation and racist actors created an insurmountable wage gap over time, even though overtly racists laws have been eliminated. Despite Connecticut law, validated by the State's Supreme Court, most towns have retained their segregated character. Other factors make it difficult to leave inner-city communities. One is the war on drugs. Whereas white and middle-income youth are treated by the "social welfare arm of the state," youth in inner-city neighborhoods are charged as felons (Wildeman 2012; Alexander and West 2012; Blankenship et al. 2018; Cloud, Parsons, and Delany-Brumsey 2014). Once labeled as "felons", they are branded for life with limited job opportunities, disqualified for public housing, unable to support their families, and often resort to crime in a vicious cycle.

What are the health ramifications of this policy? Let's look at each of the issues raised above in turn:

1) Living in a noxious environment: The conditions of impoverished, inner-city neighborhoods lead to abnormally high rates of cancer and other debilitating, chronic, life-threatening, or rare diseases. Health burdens include adverse air quality, noise, traffic safety, congestion, and vibrations from heavy truck traffic; use and storage of hazardous materials; emission of hazardous and toxic substances, which enter the air, soil, and water; illegal dumping of hazardous materials; proliferation of waste handling facilities; and poor enforcement of environmental regulations and inadequate response to environmental complaints (Fenelon et al. 2017).

The presence of rodents, roaches, dust mites, and poor air quality lead to higher rates of asthma. The dearth of healthcare facilities leads to uncontrolled asthma. Children who cannot get a goodnight's sleep are inattentive in school, which inhibits academic advancement (Fenelon et al. 2017; Center for Disease Control 2021; Wilson, Hutson, and Mujahid 2008).

2) High-density housing: Living in close proximity contributes to the spread of infectious diseases. For example, ear infections were a common malady that brought Medicaid children to a pediatrician outside of Meriden. That practice was only one in the Meriden

region that accepted Medicaid. Between arranging and waiting for transportation in and out of the city, a day was lost to take care of their child. Coupled with inadequate childcare, childhood infections cause parents to miss work and potentially their jobs (Alexander and West 2012).

- 3) Unhealthy lifestyle: Impoverished neighborhoods often have few health promoting facilities such as supermarkets, medical facilities, and recreational outlets (e.g., parks, gyms, basketball courts) to promote healthy diets and physical activity. These neighborhoods are also replete with health-restricting facilities (e.g., liquor stores, fast food restaurants), and chronic stressors (e.g., crime, physical disorder) (Wilson, Hutson, and Mujahid 2008).
- 4) Mental Health: All of the above (including the mass incarceration that resulted from the war on drugs) affects the mental health of individuals, families, and communities. Mental health improves for families that obtain assistance to move into public or affordable housing, but the effect was far greater when housing was located outside the city. The benefits were observed for adults and especially for children under 13 years of age (Fenelon et al. 2017; Ludwig et al. 2013; Leventhal and Brooks-Gunn 2003; Newman and Holupka 2015).

Governments run by Whites and acting in our name created segregated communities. Whites were enabled to accumulate wealth, while many Blacks were not. Forced to live in unhealthy environments and denied the ability to accumulate wealth, most inner-city Black people cannot boot-strap their way out of poverty. That is not *de facto* segregation. It is the result of *de jure* segregation perpetuated by laws and policies that sound race-neutral but, wittingly or not, have racist effects. Government created this problem; it has an obligation to resolve it.

References

Alexander, Michelle, and Cornel West. 2012. *The new Jim Crow: mass incarceration in the age of colorblindness* (New Press New York).

Blankenship, Kim M., Ana Maria Del Rio Gonzalez, Danya E. Keene, Allison K. Groves, and Alana P. Rosenberg. 2018. 'Mass incarceration, race inequality, and health: Expanding concepts and assessing impacts on well-being', *Social science & medicine* (1982), 215: 45-52.

Center for Disease Control. 2021. 'Vital Signs, Feb. 2021', Accessed Feb. 2021. www.cdc.gov/vitalsigns/childhood-asthma.

Cloud, David H., Jim Parsons, and Ayesha Delany-Brumsey. 2014. 'Addressing mass incarceration: a clarion call for public health', *American journal of public health*, 104: 389-91.

Fenelon, Andrew, Patrick Mayne, Alan E. Simon, Lauren M. Rossen, Veronica Helms, Patricia Lloyd, Jon Sperling, and Barry L. Steffen. 2017. 'Housing Assistance Programs and Adult Health in the United States', *American journal of public health*, 107: 571-78.

Leventhal, Tama, and Jeanne Brooks-Gunn. 2003. 'Moving to opportunity: an experimental study of neighborhood effects on mental health', *American journal of public health*, 93: 1576-82.

Ludwig, Jens, Greg J. Duncan, Lisa A. Gennetian, Lawrence F. Katz, Ronald C. Kessler, Jeffrey R. Kling, and Lisa Sanbonmatsu. 2013. 'Long-Term Neighborhood Effects on Low-Income Families: Evidence from Moving to Opportunity', *American Economic Review*, 103: 226-31.

Maantay, J. 2001. 'Zoning, equity, and public health', *American journal of public health*, 91: 1033-41.

Newman, Sandra J., and C. Scott Holupka. 2015. 'Housing Affordability and Child Well-Being', *Housing Policy Debate*, 25: 116-51.

Rothstein, Richard. 2017. The color of law: a forgotten history of how our government segregated America (Liveright Publishing Corporation: New York; London).

Wildeman, Christopher. 2012. 'Imprisonment and (inequality in) population health', *Social Science Research*, 41: 74-91.

Wilson, Sacoby, Malo Hutson, and Mahasin Mujahid. 2008. 'How Planning and Zoning Contribute to Inequitable Development, Neighborhood Health, and Environmental Injustice', *Environmental Justice*, 1: 211-16.