

Asthma, Cockroaches, and Public vs. Individual Responsibility

The following is a story that might appear in a newspaper or on public radio. The names and places are all fictional but the facts, issues, and proposed remedy are real. Read the article and think about the questions at the end. Be prepared to discuss both.

For 11-year-old Risha D., a visit to the hospital emergency room every month or two is a normal part of life. Some days, she's too ill to go to school, and even when she's in school, she usually has to skip recess. "I like to play and have fun just like any kid," Risha says, "but I'm afraid an attack might come. If the attack's bad enough, I can't catch my breath and feel like I'm going to die."

Risha has asthma, a condition that affects over 6 million American children annually. Asthma occurs when the airways of the lungs become inflamed. In severe cases, asthma can be life-threatening, requiring immediate medical attention. Asthma causes over 10 million school absences each year and is responsible for nearly half a million hospitalizations. By some estimates, asthma costs the U.S. about \$14 billion per year. Also, the rates of asthma worldwide have sky-rocketed in the last 30 years and nobody knows why.

For a lot of people, asthma attacks are caused by environmental triggers, such as air pollution, tobacco smoke, and allergens like cockroaches, pet dander, and dust mites. For others, exercise, stress, or certain medications can trigger an asthma attack.

Risha lives with her mother, brother, two sisters, and their dog in public-assistance housing. "Thank goodness Risha's the only one of my kids with asthma," sighs Risha's mother, Janet D., while nervously smoking a cigarette. "As a single working mom with no health insurance, it's hard to afford the medication that Risha needs. I can't tell you how many times I've had to miss work taking Risha to the emergency room for her asthma treatments."

Cases of asthma are especially high among poor children in inner-city neighborhoods. Many researchers now think that cockroaches play a big role in triggering childhood asthma. Dr. Brad Ngo of Stanton University Medical School has studied the health effects of these persistent bugs, which plague many inner-city areas. "Because cockroaches are insects," says Dr. Ngo, "they need to shed their outer skeletons periodically in order to grow. These skeletal fragments are highly allergenic and just the right size to get into the airways and trigger allergic reactions."

Janet is aware that Risha's asthma symptoms may be due to conditions at home. "I try to clean as best I can," she says, "but the roaches are everywhere. The landlord doesn't do any upkeep around here, only spraying for roaches maybe once a year when the Board of Health gets on him about it."

Janet also complains about the new trash incinerator, a source of much community outrage, that's down the street from her home. "With all the smoke, stink, and truck fumes around here now, it's no wonder my kid is sick. These big companies don't care how their pollution affects poor people."

Risha and her family may now be in luck. The family has recently learned that they qualify for a new city housing program that targets people with asthma. Dr. Sarah Long, who directs the program, explains that “asthma affects poor people disproportionately, because it’s often triggered by cockroaches, mold, and poor ventilation—all of which are common in substandard housing where the poor are likely to live.”

The Fresh Air Homes Project is a pilot program to provide affordable asthma-reducing housing to some 50 area families. “We’ve incorporated the very best features to reduce indoor allergens,” says Dr. Long. “These pest-free homes have moisture-proof foundations to reduce mold, high quality ventilation with special exhaust fans, hard floors instead of carpet, and low-emission paints that don’t emit harmful fumes.”

Project designers also point out that these features add only a few thousand dollars to the cost of a home, much less than an overnight stay in the hospital for a very sick child.

However, eligibility for the program does come with a catch: participants are not allowed to smoke and pets are strictly forbidden. Janet is philosophical about these requirements, admitting that “as hard as it will be for the kids to give up their dog and me to quit smoking, it’s worth it if it helps Risha’s health.”

Risha and her family are expected to begin moving their furniture and other belongings into their new home May 15.

Questions about the Article:

- 1) The article says that asthma affects 6 million U.S. children at a cost of \$14 billion annually. It implies that asthma is a serious public health concern that ought to be addressed.
 - a) Do research to determine how these figures compare with similar figures for other illnesses in children, such as flu, congenital abnormalities, diabetes, etc.
 - b) Is the morbidity of asthma serious enough that we should divert public funding from treating other, possibly more serious, illnesses?
- 2) The article states that incidences of asthma have increased over the last 30 years and nobody knows why. If true, should resources be allocated more to finding the cause or treating the problem? Should resources be allocated equally? Explain your thinking.
- 3) In the article, Janet is a mother of four who smokes. What role does Janet’s smoking play in Risha’s asthma? What is her personal responsibility?
- 4) How should society deal with the hardships facing many single mothers? Fund more government child support/welfare? Provide universal health care or better enforcement of deadbeat parent laws? Force people to get married before having kids? Let people just suffer the consequences of

bad luck or poor choices? Why are some of these choices better or more acceptable to you than others?

- 5) A lot of Risha's asthma symptoms may be due to cockroaches. Everyone probably agrees that cockroach control is a real public health issue. What ought to be done to control these pests?
 - a) What's Janet's responsibility for ensuring her home is free of cockroaches? How can we best ensure that she meets her obligations?
 - b) How much of the problem is the landlord's responsibility? How can we be sure he meets his responsibilities? Are there mechanisms already in place that ensure he does? How about for Janet? Should there be?
 - c) Should we allocate more societal resources to the eradication of cockroaches?
 - d) Should it be our goal to eliminate all cockroaches from the earth? Would the extinction of cockroaches be a good thing, while the extinction of say, whales, would not be? Why?
 - e) Is it possible that the landlord's use of spray insecticides, rather than the cockroaches themselves, is triggering Risha's asthma symptoms? How would you determine which cause is more likely?
- 6) Janet suspects that some of Risha's asthma symptoms are triggered by the garbage incinerator in her neighborhood. Some in the environmental justice movement claim that polluting industries often locate in poor neighborhoods because residents don't have the political clout or wealth to resist, leaving many residents exposed to dangerous pollutants.
 - a) If true, what ought to be done to solve the problem?
 - b) Critics of the movement claim that these industries provide jobs for residents. Should health concerns trump employment concerns? If so, under what circumstances and by how much?
 - c) People may have moved into industrial areas originally because of the availability of jobs. The old industries closed, leaving brownfields and an economically depressed neighborhood. Should new companies be blamed for locating where property values are now low and rent is now cheap?
- 7) Some programs exist that seek to relocate poor people with health problems into new government-assisted homes built with the goal of reducing indoor pollutants and allergens.
 - a) Is this idea practical? Why or why not? Does anything in the article lead you to believe that the comparative costs may be reasonable?
 - b) What do you imagine the new homes would be like after Risha's family and other families have lived there for 10 years? Better or worse? Is it fair to ask that question? Do we have examples from the past that can teach us about the long-term results of public-housing efforts?

- c) Risha has to give up her dog and her mom has to quit smoking to qualify for the new home. How much should we seek to control people's behavior to achieve our public health goals? How much would you tolerate being told what to do?
- d) The article's ending is intentionally ironic. Why? Do you think the real people running a housing program would ever overlook something so obvious? Do such oversights ever happen in real life?