

Healthy Homes and Lead Hazard Control

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Administering agency: HUD's Office of Healthy Homes and Lead Hazard Control (OHHLHC); Name changing in 2014 to the Office of Lead Hazard Control and Healthy Homes

Year program started: Lead Hazard Control, 1992; Healthy Homes Initiative, 1999

Number of persons/households served: 11,000 households

Population targeted: Low income and very low income families who reside in worst-quality private housing where children under six years of age reside or are likely to reside.

FY14 funding: \$110 Million

Indoor pollution and hazards inside our homes typically pose far greater risks to children's health than outdoor exposure. This is due to the fact that children spend as much as 90% of their time indoors, and toxic substances can reach more concentrated levels indoors than they do outside. Older, dilapidated housing with lead-based paint, and the dust and soil it generates, are the biggest sources of lead exposure for children. Often these units have a combination of health dangers that include dust mites, molds, and pests which can cause or trigger asthma; carcinogens, such as asbestos, radon, and pesticides; and other deadly toxins such as carbon monoxide.

ADMINISTRATION

Both programs are administered by HUD's Office of Healthy Homes and Lead Hazard Control (OHHLHC). As a result of the FY14 Appropriations Act the name of the administering office will now be called the Office of Lead Hazard Control and Healthy Homes. The Environmental Protection Agency (EPA) and the Centers for Disease Control and Prevention administer complementary programs.

HISTORY AND PURPOSE

Lead Hazard Control. The Residential Lead-Based Paint Hazard Reduction Act, or Title X of the Housing and Community Development Act of 1992, was enacted to focus the nation on making housing safe for children by preventing exposure to lead-based paint that has deteriorated due to moisture problems and poor maintenance, and invisible lead dust caused by repair and painting work that disturbs lead-based paint. The law established the Lead Hazard Control Grants Program to provide grants to communities to control lead-based paint hazards in privately owned, low income, owner-occupied and rental housing. In 2003, Congress created Lead Hazard Reduction Demonstration Grants to target additional lead hazard control grants to the nation's highest-risk cities. Both programs and enforcement of related regulations are housed in HUD's OHHLHC. More than 195,000 homes have been made lead-safe under the lead hazard control programs.

Healthy Homes Initiative. The Healthy Homes Initiative was established by HUD in 1999 to protect children and their families from residential health and safety hazards. The goal of this program is a comprehensive, integrated approach to housing hazards through two grant programs which create and demonstrate effective, low-cost methods of addressing mold, lead, allergens, asthma, carbon monoxide, home safety, pesticides, and radon. These grant programs are housed in HUD's OHHLHC.

While these represent just a fraction of the estimated 35 million U.S. housing units with lead-based paint hazards, the programs have rendered some of the nation's highest-risk homes safe for future occupants and have built lasting capacity to continue to prevent and control lead hazards.

The beneficiaries of the lead hazard control program are low income households. Assisted rental units must be available on a priority basis for at least three years for families with children under age six. Ninety percent of owner-occupied units must house or be regularly visited by a child under age six. Because the funds do not cover all housing eligible under federal policy, each grantee develops its local plan and is permitted to target investment of grant funds based on factors such as the presence of a lead-poisoned child and location in a high-risk neighborhood. The programs' funds are awarded via a competitive combined Notice of Fund Availability (NOFA).

ISSUE SUMMARY

Recent research confirms that housing policy has a profound impact on public health, and for any public health agenda to be effective, it must include a housing component. The statistics and key findings regarding the long-term effects of housing-related health hazards are alarming.

Lead poisoning, chronic low-level carbon monoxide exposure, and asthma all greatly interfere with a child's ability to learn and perform in school. In fact, 10% of juvenile delinquency is attributed to lead poisoning. Elevated blood levels are associated with decreased academic achievement cognition problems, increased incidence of Attention Deficit Hyperactivity Disorder, and other behavior problems. In 2008, the economic costs to society of lead poisoning alone were estimated at \$60 billion. Housing-related injuries result in significant costs as well, including: lost learning and earning potential of children; lost work days for parents caring for ill children's medical expenses, including emergency room visits; and, special education costs. Asthma costs the U.S. economy \$16 billion each year in direct and indirect expenses.

The burden of housing-related health hazards falls disproportionately on the most vulnerable children and communities, making for striking disparities in health impacts. African-American children are twice as likely to have asthma and are six times more likely to die from it than white children. Households with annual incomes less than \$30,000 are twice as likely as others to have lead hazards in their homes. Children of low income families are eight times more likely to be lead-poisoned than those of higher income families, and African-American children are five times more likely than whites to be lead-poisoned. In some locales, African-American and Latino children are eight to nine times more likely to enter school with a history of lead poisoning. Children poisoned by lead are seven times more likely to drop out of school and six times more likely to end up in the juvenile justice system.

Those numbers begin to multiply and add up to even bigger consequences when dealing with the cumulative effects of multiple hazards. Thorough visual assessments, air tests, remediation activities, and a 'whole-house' approach are critical. Inadequate ventilation increases the concentration of lethal indoor air pollutants such as radon and carbon monoxide, and exacerbates moisture and humidity problems. Moisture causes paint deterioration, which puts children at risk of exposure to leaded dust and paint chips. Moisture also encourages growth of mold, mildew, dust mites, and microbes, which contribute to asthma and other respiratory diseases. Asthma is exacerbated by allergic reaction to certain triggers such as dust, mold, pests (such as cockroaches, rats and mice), cold air, and dry heat. Use of common pesticides to control infestations contaminates homes with known carcinogens.

The ballooning costs for medical care and other housing-related health hazards justify investments in primary prevention to address unhealthy housing conditions before they cause illness. A whole-house approach must become the focus since housing-related health hazards often have overlapping causes, effects, and solutions. Additionally, solutions and opportunities may arise through existing weatherization and rehabilitation work. Since improperly disturbing lead-based paint may cause lead poisoning, it is necessary to use lead-safe work practices and comply with EPA's renovation rule. Many weatherization treatments have healthy homes benefits. For example, window replacement can help with lead poisoning prevention, and roof repair and insulation may help reduce moisture intrusion and prevent mold. Improving ventilation to ameliorate the ill effects of tightening a building can help ensure no harm from energy-efficiency measures.

Much of the technical infrastructure to achieve healthy housing is in place, but missed opportunities to make housing healthier occur within some existing programs. Modest adjustments in policies and practices could minimize those missed opportunities, maximize resources, and achieve better results.

PROGRAM SUMMARY

Programs based at HUD include:

Healthy Homes Initiative. The President's FY15 budget proposal seeks \$25 million total for healthy homes activities. The Healthy Homes Demonstration /Production grant program funds: preventive and corrective measures to address housing-related health and safety hazards; education and outreach activities to protect children from health and safety hazards; and, capacity building to sustain healthy homes programs. These funds are available via supplemental awards to cities and states that already have lead hazard control grants to enable these programs to address other health hazards in homes with lead hazards. Grants are also awarded through a separate competition open to nonprofits, for-profits, state and local governments, tribes, and colleges and universities.

The Healthy Homes Technical Studies (HHTS) grant program develops and improves cost-effective methods for evaluating and controlling residential health and safety hazards through a separate competition open to academic and nonprofit institutions, state and local governments, tribes, and for-profit organizations. HHTS grantees develop validated assessment tools, improve environmental sampling and Integrated Pest Management protocols, and evaluate interventions. The budget authority for the Healthy Homes Initiative was \$20 million in FY10, \$25 million in FY11, \$10 million in FY12 and FY 13, and \$15 million in FY14.

Lead Hazard Control Grants. The typical award of \$3 million addresses hazards in several hundred homes and provides needed outreach and capacity-building services. Grants can only be awarded to states, counties, and cities for lead hazard control in private housing. At least 65% of the grant must be used for direct activities such as abatement, interim control, clearance, and risk assessment. Grantees are required to partner with community groups, typically by awarding sub-grants, and to provide a match of 10%-25% from local or CDBG funds. More than \$1 billion has been awarded since the program started in 1993. The combined budget authority for Lead-Based Paint Hazard Control Grants and Lead Hazard Reduction Demonstration Grants (described below) was \$197 million in FY09, \$114 million in FY10, \$94 million in FY11, \$107 million in FY12 and FY 13, and \$95 million in FY14. The President's FY15 budget proposal seeks \$93 million.

Lead Hazard Reduction Demonstration Grants. This program targets funds for lead hazard control to the nation's 100 highest-risk cities as defined by the prevalence of lead poisoning and the number of pre-1940 rental housing units. Grants may be as high as \$4 million, but 80% of the funds must be spent on direct activities, and HUD requires a 25% local match from local or CDBG funds. High-risk cities can receive demonstration grants in addition to basic lead hazard control grants.

Lead Technical Studies Program (LTS). This program funds academic institutions, nonprofit and for-profit organizations, states, Native American tribes, and local governments to conduct research to gain knowledge on improving the efficacy and cost-effectiveness of methods for evaluation and control of residential lead-based paint hazards. Each year OHHLHC awards between two and four cooperative agreements of up to \$500,000 each. The President's FY15 budget proposal seeks \$2 million.

Disclosure Law Enforcement. Title X directed HUD to enforce the required disclosure of lead hazards to the potential renter or purchaser of every pre-1978 home. As a result of disclosure enforcement actions, more than 200,000 dwelling units in multifamily rental properties have received ordered repairs. The regulation is published at 24 CFR 35 Subpart A.

Lead-Safe Housing Rule. At least one million federally subsidized homes have been made and kept safe due to requirements under the Lead Safe Housing Rule (24 CFR 35 Subparts B-R).

Programs at Other Federal Agencies include:

Healthy Homes and Lead Poisoning Prevention Program. Until 2012, the Centers for Disease Control and Prevention's (CDC) Childhood Lead Poisoning Prevention Program provided funding to state and local health departments to determine the extent of childhood lead poisoning by: screening children for elevated blood lead levels; helping to ensure that lead-poisoned infants and children receive medical and environmental follow-up; and, developing neighborhood-based efforts to prevent childhood lead poisoning. This program's funding was reduced from \$31 million in FY11 to \$2 million for a small federal effort in FY12 and FY 13. Congress partially restored the lead poisoning prevention program to \$15 million in FY14. With the FY 14 funds, CDC will award grants for surveillance activities to 41 states and cities and support prevention projects in six communities. The President's FY15 budget proposal seeks \$15 million.

Renovation, Repair, and Painting Rule. The EPA's Renovation, Repair, and Painting Rule requires contractor certification and use of lead-safe work practices for paint-disturbing work in all pre-1978 residences (and child-occupied facilities) unless there is proof that lead-based paint is not present. The rule took effect on April 22, 2010. The rule provides a framework for educating and regulating the construction industry to work safely in order to prevent health hazards in housing.

Maternal, Infant, and Early Childhood Home Visiting Grants Program. This is a \$1.5 billion, five-year, state-based formula grant program for home visiting programs that provide services and support to pregnant women, infants, children up to kindergarten age, and their families. In the program's third year, Congress appropriated \$250 million. To secure funding, states completed a needs assessment and developed a plan for addressing these needs. There is growing agreement that programs visiting the homes of high-risk families should include a healthy homes assessment; three states have piloted this approach.

FORECAST FOR 2014

In the first year of the 113th Congress, Senators Jack Reed (D-RI), Mike Johanns (R-NE), Barbara Boxer (D-CA), and Al Franken (D-MN) introduced S. 290, the Title X Amendments Act, to align legislative authority with current needs and practices. Representative Louise Slaughter (D-NY) led a group of other House members in introducing the companion bill, H.R. 1232. This bill would allow lead hazard control grantees to: help families residing in efficiency apartments; address multiple housing-related health hazards; and, accept a family's income eligibility information from other federally funded programs. The bill would also expand the existing Title X statute, which focuses solely on lead hazards, to enable the use of up to 30% of grant funds to correct other health and safety threats. The bill also expands eligibility for grants, presently limited to state and local governments, to include tribal governments, and nonprofit organizations if they have the support of the applicable state or local government.

The Administration's FY15 budget request includes a legislative proposal to provide HUD with subpoena authority for the Lead Disclosure Regulation, allowing HUD to obtain documents from rental housing owners suspected of violating the statute.

TIPS FOR LOCAL SUCCESS

Many communities have improved the quality of their housing stock and have eliminated housing-related health hazards by implementing or better enforcing minimum housing codes. For example, sanitary codes prohibit peeling paint, standing water, chronic moisture, roof and plumbing leaks, and pest infestation. The International Residential Code requires carbon monoxide detectors in new homes with fuel-burning appliances or attached garages. Efforts are underway to: require carbon monoxide detectors in existing housing; add a requirement for radon-resistant new construction; and, prohibit lead hazards and excessive moisture that leads to mold. Increasing public awareness and concern about other housing-related hazards is fueling new attention to state and local regulation of healthy homes issues. The National Healthy Housing

Standard's release in 2014 will provide advocates with a health-centered overlay for the International Property Maintenance Code and a template for comprehensive local healthy housing policy.

WHAT TO SAY TO LEGISLATORS

Advocates should contact their Members of Congress, ask to speak to the person who deals with housing policy, and deliver the message that funding is needed in FY15 to correct health and safety hazards and ensure that privately owned affordable housing is safe and healthy. Advocates should inform legislators of the following ways through which they can lend support for reducing housing-related health problems:

- Fully fund HUD's Lead Hazard Control and Healthy Homes Program through which communities can fix homes with health hazards including lead-based paint problems. Support the President's FY15 proposal for \$120 million, including \$25 million for healthy homes, \$93 million for lead hazard control, and \$2 million for technical studies.
- Restore the full level of funding for CDC's \$29 million Healthy Homes and Lead Poisoning Prevention Program so local and state health departments can promote prevention and respond to lead-poisoned children.
- Pass and implement the Title X Amendments Acts.

FOR MORE INFORMATION

National Center for Healthy Housing, 202-280-1982, www.nchh.org

National Safe and Healthy Housing Coalition, <http://bit.ly/1dvzV04>

HUD's Office of Lead Hazard Control and Healthy Homes, <http://1.usa.gov/1iOKkas>