

Lead Hazard Control and Healthy Homes

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Administering agency: HUD's Office of Lead Hazard Control and Healthy Homes (OLHCHH)

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

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.

FY17 funding: \$145 Million

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 settled interior dust and exterior bare 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 that can trigger asthma; carcinogens, such as asbestos, radon, and pesticides; and other deadly toxins such as carbon monoxide.

RECENT DEVELOPMENTS:

1. HUD published an important revision to its Lead Safe Housing rule on January 13, 2017, that conforms its definition of elevated blood lead level to that of the Centers for Disease Control and Prevention (CDC). The revision also establishes more comprehensive testing and evaluation procedures for the assisted housing where such children reside and certain reporting requirements. See: https://portal.hud.gov/hudportal/HUD?src=/program_offices/healthy_homes/enforcement/lshr
2. The National Safe and Healthy Housing Coalition has developed sign-on letters for appropriations for these two programs. See: [www.nchh.org](http://www.nchh.org/Policy/National-Policy/Federal-Appropriations.aspx) and: <http://www.nchh.org/Policy/National-Policy/Federal-Appropriations.aspx> healthy homes fact sheets are now available for each state (see: <http://www.nchh.org/Policy/StateandLocalPolicy/StateHealthyHousingProfiles.aspx>)

3. New Lead Poisoning Report now available in the wake of lead poisoning in flint, East Chicago and elsewhere: (see <http://www.nchh.org/Policy/10Policies.aspx>)

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 hazards (the statute defines this as deteriorated lead-based paint, lead contaminated settled house dust and lead contaminated bare soil). The law authorized the Lead Hazard Control Grants Program to provide grants to local jurisdictions to identify and 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 OLHCHH.

Healthy Homes Initiative. The Healthy Homes Initiative was established by Congress 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 grants that create and demonstrate effective, low-cost methods of addressing mold, lead, allergens, asthma, carbon monoxide, home safety, pesticides, radon and other housing-related health and safety hazards. These grant programs are housed in HUD's OLHCHH.

The beneficiaries of both the lead and healthy homes programs are low income households and the broader public through education campaigns. Assisted rental units served must be affirmatively marketed for at least three years for families with children under age six. Ninety percent of owner-occupied units served 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 competitive Notices of Fund Availability.

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. The CDC's most recent estimate is that about 535,000 children aged 1-5 in the U.S. have elevated blood lead levels. Childhood exposure to lead can have lifelong consequences including decreased cognitive function, developmental delays, behavior problems, and, at very high levels can cause seizures, coma, and even death. Asthma is one of the most common chronic conditions among children in the U.S.; 26 million people in the U.S. have asthma, including 9.5% of children under 18. In 2007-2008, the economic costs to society of lead poisoning and asthma were estimated at \$50 billion and \$56 billion respectively.

The burden of housing-related health hazards falls disproportionately on the most vulnerable children and communities, contributing greatly to U.S. health disparities. 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. 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.

There are even bigger consequences when dealing with the cumulative effects of multiple hazards. 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 can contaminate homes. Thus, a 'whole-house' approach is critical—including thorough visual assessments, air tests, and remediation activities.

Additionally, solutions and opportunities may arise through existing weatherization, rehabilitation, maintenance and home repair work. Because improperly disturbing lead-based paint may cause lead poisoning, it is necessary to use lead-safe work practices and comply with the U.S. Environmental Protection Agency's (EPA's) renovation, repair and painting rule (and for federally assisted housing, HUD's Lead Safe Housing rule, which was updated in Jan 2017). 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. Healthy Homes and weatherization/building performance are described in a new report from the Department of Energy and the National Center for Healthy Housing: https://www.energystar.gov/campaign/improvements/professionals/resources_library/health_and_home_performance

PROGRAM SUMMARY

Programs based at HUD include:

Healthy Homes Initiative. The Healthy Homes Demonstration Grant Program develops, demonstrates and promotes cost-effective, preventive measures for identifying and correcting residential health and safety hazards. HUD awards Healthy Homes Demonstration grants to not-for profits, for-profit firms located in the U.S., state and local governments, federally recognized Indian Tribes, and colleges and universities.

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 are awarded to states, counties, and cities for lead hazard control in privately owned low income housing. At least 65% of the grant must be used for direct activities such

as abatement, interim control, clearance, and risk assessment (and to a limited extent other healthy housing issues). Grantees are required to partner with community groups, typically by awarding sub-grants, and to provide a match of 10%–25% from local or Community Development Block Grant (CDBG) funds. More than \$1 billion has been awarded since the program started in 1993.

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.

Healthy Homes and Lead Technical Studies Grants.

These grants develop and improve 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.

OTHER FEDERAL AGENCIES:

The CDC Healthy Homes and Lead Poisoning Prevention and Asthma Control Programs, and the EPA provide complementary programs to HUD's OLHCHH. The EPA identifies housing hazards and their impacts and provides training; CDC-funded programs provide surveillance data, education and outreach on resulting diseases and injuries; and HUD-funded programs remediate homes to remove the health hazards.

CDC Childhood Lead Poisoning Prevention Program.

CDC's Childhood Lead Poisoning Prevention Program provides 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 (not all states receive these grants).

FUNDING

HUD FY17 funding includes \$145 million for the Office of Lead Hazard Control and Healthy Homes,

including \$115 million for Lead Hazard Control and Demonstration Programs as well as Lead and Healthy Homes Technical Studies, and \$30 million for Healthy Homes Demonstration and Production Programs.

CDC FY17 funding includes \$17 million for CDC's Healthy Homes and Lead Poisoning Prevention program and \$29.5 million for its Asthma Control Program.

FORECAST FOR 2018

A forecast is difficult at this time. The Senate has provided \$160 million for HUD's Lead and Healthy Homes program, but the House has only provided \$130 million (the National Safe and Healthy Housing Coalition has requested \$230 million).

CDC FY18 funding for lead and healthy homes and asthma programs is unchanged in both Senate and House from FY17 at the time of this writing (the National Safe and Healthy Housing Coalition has requested \$50 million for the CDC lead program). Please see this link for updates <http://nchh.org/Policy/National-Policy/Federal-Appropriations.aspx>

TIPS FOR LOCAL SUCCESS

Many communities have improved the quality of their housing stock through development of better codes, such as the National Healthy Housing Standard, and proactive code enforcement programs, instead of a complaint-driven processes. 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. Many communities have also urged strong collaboration between departments of housing, health and environment; effective utilization of CDC surveillance data to guide HUD programs to families and areas of greatest need; enforcement of EPA requirements; and state Medicaid reimbursement for environmental health services in the homes of lead-exposed children

and people with asthma. For example, the State of Michigan recently succeeded in obtaining a Children Health Insurance Amendment to conduct lead paint and lead drinking water pipe mitigation totaling \$160 million.

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 FY18 to correct health and safety hazards and lead hazards in homes. Removing leaded drinking water service lines from the homes of children born in 2018 alone would protect more than 350,000 children and yield \$2.7 billion in future benefits, or about \$1.33 per dollar invested. Eradicating lead paint hazards from older homes of children from low income families would provide at least \$3.5 billion in future benefits, or approximately \$1.39 per dollar invested, and protect more than 311,000 children born in 2018 alone. For every \$1 spent on home-based asthma control, there is a return on investment of \$5.30 –\$14. Healthy homes interventions prevent injury, neurological and respiratory diseases, cancer, and even death from toxins such as carbon monoxide and radon. Advocates should use the Healthy Homes Fact Sheets for each state at: <http://www.nchh.org/policy/stateandlocalpolicy/statehealthyhousingprofiles.aspx>.

Advocates should also 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. This also requires full funding for allied HUD programs, such as the Community Development Block Grants, Public and Indian Housing, Section 8 Housing Choice Vouchers and others.

Fully fund CDC's Healthy Homes and Lead Poisoning Prevention Program so that all states can provide surveillance of children's blood lead levels, promote prevention, and respond to lead-poisoned children.

Fully fund lead and healthy homes activities at EPA.

FOR MORE INFORMATION

National Center for Healthy Housing, 410-992-0712, <http://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>

CDC's Healthy Homes and Lead Poisoning Prevention Program, <http://www.cdc.gov/nceh/lead/>