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AN UNWAVERING PATH FORWARD TO HOUSING JUSTICE

Regulations Division Office of General Counsel U.S. Department of Housing and Urban Development 451 7th Street SW, Room 4176 Washington, DC 20410-5000

Via regulations.gov

Re: FR-6486-N-01 Modifying HUD's Elevated Blood Lead Level Threshold for Children Under Age 6 Who are Living in Certain HUD- Assisted Target Housing Covered by the Lead Safe Housing Rule

The National Low Income Housing Coalition (NLIHC) is dedicated solely to achieving racially and socially equitable public policy that ensures people with the lowest incomes have quality homes that are accessible and affordable in communities of their choice. Our members include state and local housing coalitions, residents of public and assisted housing, nonprofit housing providers, homeless service providers, fair housing organizations, researchers, public housing agencies, private developers and property owners, local and state government agencies, faith-based organizations, and concerned citizens. While our members include the spectrum of housing interests, we do not represent any segment of the housing industry. Rather, we focus on policy and funding improvements for extremely low-income people who receive and those who need federal housing assistance.

NLIHC fully endorses HUD's proposal to lower the "elevated blood lead level" (EBLL) threshold requirements for HUD-assisted housing from 5 to 3.5 micrograms of lead per deciliter of blood ( $\mu$ g/dL) for a child under the age of six. As the preamble to the proposed rule notes, lowering the EBLL is consistent with the Centers for Disease Control and Prevention's (CDC's) 2021 "reference value" of blood lead reference value (BLRV) of 3.5 ( $\mu$ g/dL).

The National Low Income Housing Coalition is dedicated to achieving racially and socially equitable public policy that ensures people with the lowest incomes have quality homes that are accessible and affordable in communities of their choice. However, NLIHC is concerned that HUD did not lower the EBLL threshold soon after the CDC lowered its BLRV reference value in May 2021. The HUD Office of the Inspector General (OIG) criticized HUD for this delay in a February 28, 2023 report. The Government Accountability Office (GAO) wrote on December 16, 2020, that 138,239 children were at risk of lead hazard exposure at privately owned Multifamily properties assisted with Section Eight Project-Based Rental Assistance. An additional GAO report from May 2021 indicated that 239,000 children in private homes assisted with Housing Choice Vouchers were at risk.

Had HUD proposed adjusting its EBLL threshold sooner, the probability of the number of children under the age of six identified with elevated blood lead levels at 3.5  $\mu$ g/dL might have significantly increased, triggering care for those children as well as leading to lead mitigation or abatement in their homes, while also initiating inspections of other units occupied by children under the age of six elsewhere in the affected property.

Therefore, NLIHC urges HUD to make the new threshold effective immediately upon publication in the *Federal Register*, and urges HUD to propose and implement further changes to the regulations that automatically adopt future updates to the CDC's lead poisoning reference value.

Although not subject to the current proposed rule, NLIHC urges HUD to amend 24 CFR part 35 to require full risk assessments, not mere visual assessments, in all federally assisted housing. The current rule only requires ineffective visual assessments in the Housing Choice Voucher (HCV) program and in the Project-Based Section 8 (PBRA) program if a PBRA unit receives less than \$5,000 in assistance. Visual inspections do not adequately identify lead-based paint or lead hazards in the form of lead dust and lead soil.

Furthermore, continued reliance on visual assessments means lead hazard control will only occur *after* a child suffers permanent harm; according to the CDC there is no safe blood lead level in children and there is no cure for lead poisoning. Therefore, HUD must require meaningful prevention activities in order to end lead poisoning among children in *all* federally assisted programs including the HCV program and the PBRA program regardless of the amount of subsidy. To ensure that no households move into a unit with a lead hazard, it is essential that HUD amend part 35 for all HUD programs by replacing visual assessments with the more accurate and reliable risk assessments in all pre-1978 properties.

NLIHC also urges HUD to require lead hazard inspections in all federally assisted units even if a child under the age of six does not occupy a unit or is not expected to occupy a unit. Such a preventative measure would protect children visiting homes occupied by grandparents or other relatives as well as the homes of neighboring playmates or of neighbors who occasionally baby sit a child under the age of six.

Sincerely

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