DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

OFFICE OF HEALTHY HOMES AND LEAD HAZARD CONTROL

LEAD HAZARD CONTROL GRANT PROGRAM

PROGRAM PERFORMANCE

STRATEGIC GOAL/OBJECTIVE	ACTUAL 2002	ESTIMATE 2003	ESTIMATE 2004
Strategic Goal C: Strengthen communities	•		
Discretionary BA (Dollars in Thousands)	\$109,758	\$126,000	\$136,000
FTE			
Headquarters	28	54	54
Field	0	0	0
Subtotal	28	54	54
S&E Cost (Dollars in Thousands)			
Personal Services	\$2,715	\$5,384	\$5,529
Travel	90	74	78
Transportation of Things	0	0	0
Rent, Communications & Utilities	0	0	0
Printing	59	91	93
Other Services	25	20	26
Supplies	3	3	3
Subtotal	2,892	5,572	5,729
Strategic Objective C.4: Mitigate housing	g conditions that	threaten health.	
Indicator: As part of a ten-year effort to eradicate lead hazards, the Lead Hazard Control Grant Program will make 8,390 units lead safe in FY 2004.	8,040	7,600	8,390
Indicator: The number of children under the age of 6 who have elevated blood lead levels will be less than 260,000 by 2004, down from 890,000.	NA	NA	260,000
Indicator: Seven new Healthy Homes Initiative grants will be executed in 2004	35	43	7

NOTE: Through 2003, the third indicator above included the cumulative total of both grants and interagency agreements that have become operational since the program's inception. As of 2004, this indicator will track only grants executed in the fiscal year (not the cumulative total) and will exclude interagency agreements from the count.

EXPLANATION OF PERFORMANCE

Performance/Means and Strategies

The Office of Healthy Homes and Lead Hazard Control proposes \$136 million in program funding and \$5.729 million in S&E funding, for a total of \$141.729 to support Strategic Goal C: Strengthen Communities for fiscal year 2004.

The request for fiscal year 2004 includes \$106 million to be used exclusively for providing lead hazard control grants to State and local government and Indian Tribes, \$10 million for Operation LEAP, \$10 million for Healthy Homes and \$10 million for lead-related technical studies and technical assistance (a total of \$136 million), all in support of Strategic Objective C.4: Mitigate Housing Conditions that Threaten Health.

The Department is also proposing a new Lead Reduction Initiative that is funded in the HOME account. This initiative is a \$25 million competitive grant program focused on making homes lead safe for children who are at greatest risk for lead poisoning in privately owned low-income housing. This initiative will demonstrate innovative local approaches that are results oriented and cost effective and will serve as models for wider use of these methodologies. The program will include a careful evaluation to identify the most promising strategies, which will be used to further the performance of HUD's main lead-based paint hazard reduction program. The program will allow for wide flexible use of the funds at local discretion to protect children at greatest risk. Under this initiative, communities would be able to develop a program, such as a window-replacement program to address such specific local problems.

The Lead Hazard Control Grant Program contributes to the achievement of this strategic goal by creating or preserving private housing owned or occupied by low-income families that is not only affordable but lead-safe as well. By taking homes with significant lead hazards and turning them into safe places, the Lead Hazard Control Program has a substantial impact upon the neighborhoods in which it works. It supports the healthy and normal growth of children and helps to stabilize neighborhoods to make them more livable through the strategic investment of lead hazard control resources. Operation LEAP and the Technical Studies Program also contribute to this goal by leveraging additional funding, ensuring that federally assisted housing is lead-safe, and conducting research to reduce the cost and complexity of lead hazard identification and control. Unless a family is secure in the knowledge that the home they occupy is safe for their children, an important component of this strategic goal would not be realized. Data from HUD's National Survey of Lead in Housing shows that the program's impact extends far beyond the number of houses directly made lead-safe by the grant program. The Survey shows that the program leverages a large number of lead safe houses through public education, private funding and State and local government activity.

Performance reporting under the Lead Hazard Control Grant Program takes place through an online computer based system. Grantee reporting is on a quarterly basis and consists of extensive quantitative and qualitative information regarding progress, achievements, and barriers to performance. The reporting system is supplemented by telephone and written communication as well as on-site visits by HUD staff. The primary output measure of the program is the number of homes made lead-safe by the grantee.

One indicator of the HUD Annual Performance Plan is the number of housing units that are made lead-safe directly and indirectly with HUD grants. While the direct effect of the grant program is more easily measured, the indirect effect is much larger. Based on new data from the HUD National Survey, the lead hazard control grant program is responsible for removing lead-based paint from approximately 16 million units over the past decade. The cumulative number of units directly made lead-safe as of fiscal year 2002 was 44,244 and the target for fiscal year 2003 is 51,844 and 60,234 for 2004. In addition, the indirect impact of the grant program resulted in the number of houses with lead paint declining from 64 million in 1990 to 38 million in 2000. Of the 26 million units that no longer had lead paint, about 10 million underwent demolition or substantial rehabilitation, which suggests that 16 million units have undergone lead hazard control. HUD estimates that the Lead-Safe Housing Rule will make 1.4 million federally assisted housing units lead safe by 2004 (see the Economic Analysis for the regulation). In addition, HUD estimates that the number of units that will be made lead-safe in fiscal year 2004 through the HUD grant program, Operation LEAP leveraging, other state and local government actions, and other privately funded lead hazard control activities will be approximately 202,000 units (see Table 1). The number of units being made lead-safe through local government and private funding can be estimated most accurately through the HUD National Survey of Lead in Housing, which will be repeated in 2004.

Another indicator in the HUD Annual Performance Plan is the reduction in the number of children under the age of 6 who have elevated blood lead levels exceeding 10 micrograms per deciliter from 890,000 in 1991-94 (as estimated by the Centers for Disease Control and Prevention, CDC) to less than 260,000 by 2004. Data on the blood-lead levels of children aged 1-5 years are being collected by the CDC through its National Health and Nutrition Examination

Survey (NHANES); full results are scheduled for 2004, the same year as the HUD National Survey of Lead Hazards in Housing.

A national evaluation of the lead hazard control grant program, performed by the National Center for Lead Safe Housing and by the University of Cincinnati, constitutes the nation's largest study of residential lead hazard control. The study began in 1993 and a major report will be completed in 2003. Interim results were published in 2001 in Environmental Research, a peer-reviewed scientific journal. The interim results showed that the blood lead levels of children living in the units treated under the grant program showed a 26 percent decrease after 1 year and dust lead levels declined by 50-88 percent.

Technical Studies and Technical Assistance

The Lead Hazard Control Technical Studies and Technical Assistance Program contributes to the achievement of this strategic goal by providing the technical basis for improving the analytical technologies and the building maintenance and construction methods used in lead hazard control work. The Program supports education of trades people and professionals working with lead-based paint, and increasing the awareness of lead safety issues among the general public. The Program also supports development of lead safety policy guidance for HUD's Program Offices, and provides technical support in the implementation of the guidance. Collectively, these efforts increase the availability and lower the cost of resources used for lead hazard control work. As a result, the program helps increase the number of housing units made lead-safe.

The outcomes of the Lead Hazard Control Technical Studies Program have been evaluated in several ways. The Program conducted the national evaluation of the HUD Lead Hazard Control Grant Program. The national evaluation established the effectiveness of the grant program in reducing blood-lead levels of children in the treated homes, as well as substantial reduction in dust lead levels. Similarly, the National Lead Hazard Awareness Survey conducted by the Technical Studies Program demonstrated that the Department's implementation of its Lead Disclosure Rule has been effective in increasing the public's awareness of the role of lead-based paint hazards in causing elevated blood lead levels in children. Finally, the Technical Studies program conducts HUD's National Survey of Lead Hazards in Housing, which is the nation's best measure of the indirect creation of lead-safe housing through the grant program, leveraged private funding, State and local government activity, and public education.

Healthy Homes

The request for fiscal year 2004 for Healthy Homes is \$10 million to be used for competitively awarded grants and contracts and interagency agreements to develop and demonstrate cost-effective methods to reduce health and safety hazards in housing.

The Healthy Homes Program contributes to the achievement of this strategic goal by reducing multiple housing-related hazards that result in preventable childhood illnesses and injuries, such as lead poisoning and asthma. The combination of older housing units, low income levels and the large number of children living in substandard housing, many of whom are medically underserved, makes it important that Healthy Homes target communities with substandard housing stock improve housing to protect children's health. Preliminary findings show that the combination of physical and educational interventions result in significant reduction (as much as 50 percent) in emergency room visits and school absenteeism.

This program gives particular emphasis to the mitigation of asthma triggers, such as mold and allergens (from exposure to debris from dust mites, cockroaches and rodents). Grantees provide physical and educational interventions to participants enrolled in their projects. Project activities include inspecting residences and providing physical interventions such as smoke/carbon monoxide detectors, pillow and mattress covers, vector control (through integrated pest management with roach traps and gels), repairs to correct plumbing leaks, moisture incursion through building envelopes, lead hazards, proper ventilation of appliances such as stoves and furnaces, and dust control (through high efficiency filters and vacuums). To accomplish these tasks, Healthy Homes grantees train and hire low-income community members to perform assessments, interventions and outreach on an ongoing basis. Grantees are effective in reaching a greater audience through community-based educational efforts (health fairs, landlord training, etc.) and print/electronic media (brochures, fact sheets, web sites).

Performance Reporting and Program Evaluation

Performance reporting under the Healthy Homes programs is conducted through a review of periodic progress reports from grantees, on-site visits by HUD staff and publication of peer-reviewed articles in the scientific literature. Grantee reporting is required on a quarterly basis and requires extensive qualitative and quantitative information regarding progress, achievements and barriers to performance. Grant management records are reviewed quarterly to monitor progress in executing grants and agreements. Periodic site visits are also conducted to validate the reports and collect additional performance data.

Measures of the Healthy Homes Initiative will include identification of asthma triggers in housing and competitively awarding 10 additional grants or contracts or cooperative agreements. Future goals based on this ongoing research will seek to develop means of measuring successful interventions in the multiple areas targeted under Healthy Homes.

The primary output measure is the number of grants and agreements executed, but other measures are monitored as well, including the number of participants enrolled, number of homes inspected, number of hazards found and the number of hazards corrected. Education and outreach efforts are also tracked by reporting the number of trainees and contacts. As of July 2002, HUD has awarded 29 Healthy Homes grants or cooperative agreements in four categories: Mold and Moisture Control, Demonstration, Education, and Research. So far, more than 9,000 individuals have been contacted to be enrolled in hazard identification and correction programs and programmatic indicators show that more than one-third of the residences assessed have been found to contain hazards. In addition, more than 160,000 individuals have received training or education (in some cases including home visits by trained professionals) regarding asthma, lead poisoning and injury prevention, and more than 400 individuals have been trained to present healthy homes issues on either a one-on-one basis to families or to groups.

Some Healthy Homes research and educational projects are carried out through interagency agreements with Federal partners, which are monitored in a similar fashion as the grants. Periodic progress reports are monitored and site visits are conducted. For example, the USDA/HUD Cooperative State Research, Education and Extension Services Healthy Homes partnership has reached over 26,000 consumers in 42 States, and trained 321 trainers in Healthy Homes awareness issues

Resource Management Information

An increase in staff is not being requested in fiscal year 2004, however, a staffing level of 54 will need to be maintained to support monitoring of a larger number of lead hazard control and healthy homes grants and contract actions, as well as enforcement of the lead disclosure regulation and HUD's new lead safe housing regulation for federally assisted housing.