

OFFICE OF HEALTHY HOMES AND LEAD HAZARD CONTROL
LEAD HAZARD REDUCTION
2011 Summary Statement and Initiatives
(Dollars in Thousands)

LEAD-BASED PAINT HAZARD REDUCTION PROGRAM	Enacted/ Request	Carryover	Supplemental/ Rescission	Total Resources	Obligations	Outlays
2009 Appropriation	\$140,000	\$139,757	\$100,000 ^a	\$379,757 ^a	\$239,958 ^b	\$168,180
2010 Appropriation/Request	140,000 ^c	139,650 ^d	...	279,650	140,000	196,000
2011 Request	<u>140,000^c</u>	<u>139,650</u>	<u>...</u>	<u>279,650</u>	<u>139,000</u>	<u>183,000</u>
Program Improvements/Offsets .....	...	...	...	...	-1,000	-13,000

a/ Supplemental appropriations from the American Recovery and Reinvestment Act of 2009 (P.L. 111-5), of which \$500 thousand was transferred to Administration, Operations and Management, Personnel Compensation and Benefits, and the Working Capital Fund.

b/ Excludes \$112 thousand in expired obligations.

c/ Fiscal year 2010 enacted and fiscal year 2011 request each include up to \$1.4 million that may be transferred to the Transformation Initiative.

d/ Excludes \$1.11 million in expired funds and includes \$960 thousand in recaptures.

Summary Statement

The Department is requesting a total of \$140 million of fiscal year 2011 funding for the Healthy Homes and Lead Hazard Reduction Programs, level funding with the fiscal year 2010 request. This funding will provide investments in the health and safety of individuals and families. By targeting housing improvements at early intervention in communities most likely at risk, substantial returns may be realized to help prevent injuries and illnesses, reduce associated health care and social services costs, reduce absence rates for children in school and adults at work, and reduce stress, all helping improve quality of life.

In fiscal year 2011, the Department will continue the lead hazard control and healthy homes programs that provide scientifically validated support for the approaches the Department recommends to its grantees and, more broadly, to HUD housing programs and housing owners, managers and tenants. The total budget request for fiscal year 2011 is comprised of the following budget components:

- Lead Hazard Reduction Grant Program: \$96 million
- Healthy Homes: \$40 million including:
 - Coordinated Housing Hazard Intervention Plan Grant Program: \$3 million
 - Healthy Homes Capacity and Sustainability Program: \$12 million
 - Healthy Housing Implementation Program: \$20 million
 - Healthy Homes Contracts: \$5 million
- Lead Technical Studies and Support: \$4 million

Lead Hazard Reduction

HUD is committed to making homes safer and healthier for children. As part of this effort:

- HUD, along with other Federal partners, will eliminate lead poisoning in children nationwide as a major public health problem by 2015.
- HUD will reduce overall disparities in the risk of exposure to lead in children based on race, ethnicity, socio-economic status, and degree of

Considerable progress has been made in reducing the level of childhood lead poisoning, with an approximate 75 percent decline in the percentage of children with elevated blood leads since 1991, according to the ongoing NHANES survey conducted by the CDC (cdc.gov/nchs/nhanes/). The survey will indicate whether the Federal goal has been met when updated survey data for 2010 are published, which is expected to be no earlier than 2013, based on the need for laboratory analysis of blood lead samples, quality control reviews of the data, and statistical analysis of the data. In response to the expected results of this survey, HUD is establishing a new goal for lead safety that will be incorporated into HUD's new Strategic Plan 2011 – 2016.

High Priority Performance Goal: Energy and Green Retrofits

This program is part of an overall High Priority Performance Goal shared by HUD and the Department of Energy (DOE). DOE and HUD will work together to support the achievement of the goal of weatherizing one million homes per year by enabling the cost effective energy retrofits of a total of 1.1 million homes in fiscal year 2010 and fiscal year 2011. Of this number, HUD will complete cost effective energy retrofits of an estimated 126,000 HUD-assisted and public housing units. Apart from our joint energy retrofit goal with DOE, HUD will complete green and healthy retrofits of 33,000 housing units. Green and healthy homes retrofits incorporate smart design, technology, construction, and maintenance elements to improve the health of those who live inside and to reduce negative impacts on the environment.

The largest number of retrofits will be in the Public Housing inventory followed by the Multifamily inventory as well as significant contributions through HOME Investment Partnerships Program (HOME) and the Office of Healthy Homes and Lead Hazard Control (Healthy Homes). Approximately, one-third of the effort will be accomplished via Recovery Act funding. In addition, approximately 20 percent of the units will involve green housing methodologies.

Increasing energy efficiency, reducing greenhouse gas emissions, and reducing dependency on foreign oil are priorities of the Obama Administration. HUD has committed to creating energy efficient housing as part of a broader commitment to supporting the development of inclusive, sustainable communities. The residential sector is responsible for fully 20 percent of the nation's greenhouse gas emissions.

Much of HUD's own portfolio was built before the advent of energy codes, and therefore does not have the level of energy efficiency that has resulted from more recent energy codes. The outdated HUD housing stock therefore has both environmental and affordability impacts. HUD itself has significant outlays associated with energy costs-- more than \$5 billion each year-- both for public housing and for voucher holders.

Lead Hazard Reduction

American Recovery and Reinvestment Act (Recovery Act)

In fiscal year 2009, Congress appropriated \$100 million in the Recovery Act funds to the Office of Healthy Homes and Lead Hazard Control, of which \$500 thousand was transferred to Administration, Operations and Management, Personnel Compensation and Benefits, and the Working Capital Fund. The program funds were allocated to Lead Hazard Reduction Grants in the amount of \$77.949 million, to the Lead Hazard Reduction Demonstration program in the amount of \$2.617 million, and to the Healthy Homes program in the amount of \$18.934 million. All Recovery Funds appropriated to the Office of Healthy Homes and Lead Hazard Control were obligated in May 2009. As of December 31, 2009, \$7.708 million of these funds had been outlaid. These funds will continue to make low-income housing safe from Lead and other home-based hazards as well as create jobs at the organizations receiving these grant awards and their sub-grantees and contractors.

Initiatives

The four healthy homes initiatives proposed in fiscal year 2010 (Coordinated Housing Hazard Intervention Plan Grant Program; Healthy Homes Capacity and Sustainability Program; Healthy Homes Implementation Program; Promoting Green Principles in the Neighborhood Stabilization Program) will be continued in fiscal year 2011, therefore, no new initiatives are proposed in the fiscal year 2011 Budget.

Healthy Homes and Lead Hazard Control

Scientific research and studies on housing and health issues show that the health and economic burden of housing-related hazards is substantial. For 2007, the National Heart, Blood, and Lung Institute estimated the total cost to the U.S. economy from asthma at \$19.7 billion (\$14.7 billion in direct medical costs and \$5 billion in indirect costs, including lost work and school days). Approximately 21 percent of asthma cases in the U.S. are linked to dampness and mold, at an annual cost of approximately \$3.5 billion. The mitigation of moisture and mold is an important target for the program. In addition, unintentional injury is the leading cause of death and disability among children younger than 15 years of age, with homes the primary location of occurrence. Healthy Homes program efforts prevent and control these housing-related problems.

According to HUD's 2007 American Housing Survey, nearly 6 million households live with moderate or severe physical housing problems, including heating, plumbing, and electrical deficiencies (HUD: www.huduser.org/DATASETS/ahs/ahsdata07.html). A growing body of research links substandard housing conditions with illness and injury. The greatest risks arise from conditions such as moisture, mold, poor indoor air quality, lead paint, residential application of pesticides, the presence of allergens, vermin, dust and other conditions that contribute to asthma and hazardous conditions that increase the risk of injury. Low-income housing is more likely to have hazards. These households are more likely to lack resources for adopting preventive measures in the home, and deferred maintenance can lead to the development of residential health hazards. According to the U.S. Census Bureau, in 2008, 39.8 million people live in poverty (Census Bureau, 2008 Poverty: 2007 Highlights. www.census.gov/hhes/www/poverty/poverty07/pov07hi.html). During the current acute shortage of affordable housing, people are forced to live in marginal housing, or to choose between affordability and their health and safety (Joint Center for Housing Studies. 2005. *The State of the Nation's Housing – 2005*. Cambridge, MA: Harvard University).

More broadly, unsafe and unhealthy homes affect the health of millions of people of all income levels, geographic areas, and walks of life in the U.S. These unsafe and unhealthy homes affect the economy directly, through increased utilization of health care services, and indirectly through lost wages and increased school days missed. Housing improvements help prevent injuries and illnesses, reduce associated health care and social services costs, reduce absentee rates for children in school and adults at work, and reduce stress, all which help to improve the quality of life. For example:

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- Each dollar invested in lead paint hazard control results in a return of at least \$17, and as much as \$221, reflecting a net savings of \$181 billion to \$269 billion on a national investment of \$1.22 billion to \$11.0 billion (Gould, *Environmental Health Perspectives* 117:1162–1167 (2009)).
- Exposure to dampness and mold in homes is estimated to contribute to approximately 21 percent of current asthma cases in the United States, at an annual cost of \$3.5 billion. The health care and productivity costs amount to \$18.3 billion a year. The side effects include 10 million lost school days and 2 million emergency room visits every year (National Institutes of Health. 2007. *Morbidity and Mortality: 2007 Chart Book on Cardiovascular, Lung, and Blood Diseases*. <http://www.nhlbi.nih.gov/about/factbook-07/FactBookFinal.pdf>). Minor to moderate remediation of housing hazards attributed to asthma, such as reducing interior moisture and improving indoor air quality, results in a substantial return for money invested. Specifically, cost-benefit studies show a return of \$5.30 to \$14 for each dollar invested.
- Falls are the leading cause of non-fatal injuries for all children ages 0 to 19. Every day, approximately 8,000 children are treated in U.S. emergency rooms for fall-related injuries. This approaches 3 million children each year. In 2000, the total direct cost of all fall injuries for people 65 and older exceeded \$19 billion. The financial toll for older adult falls is expected to increase as the population ages, and may reach \$54.9 billion by 2020.
- Fire and burn injuries represent 1 percent of the incidence of injuries and 2 percent of the total costs of injuries, or \$1.3 billion each year. Fatal fire and burn injuries cost \$66 million, representing 6 percent of the total costs of all fatal injuries. According to the Home Safety Council, installing a smoke detector at an average cost of \$33 produces \$940 in benefits to the U.S. society (The State of Home Safety in America: The Facts about Unintentional Injuries in the Home, 2002 Edition.).

A review of scientific healthy housing intervention research conducted by the National Center for Healthy Housing in 2009 found overwhelming evidence that certain healthy homes interventions result in improvements in health or lead to changes in behaviors or other factors that result in better health (Housing Interventions and Health: A Review of the Evidence, January 2009). Also, a CDC task force recently reviewed the evidence for the effectiveness of housing-based interventions for asthma and recommended the use of home-based multi-component interventions with an environmental focus for children and adolescents with asthma based on evidence of effectiveness in improving overall quality of life and productivity, specifically: 1) improving asthma symptoms and 2) reducing the number of school days missed due to asthma (CDC Community Guide Branch, www.thecommunityguide.org/asthma/RRmulticomponent.html, 2008).

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OFFICE OF HEALTHY HOMES AND LEAD HAZARD CONTROL
LEAD HAZARD REDUCTION
Summary of Resources by Program
(Dollars in Thousands)

<u>Budget Activity</u>	<u>2009 Budget Authority</u>	<u>2008 Carryover Into 2009</u>	<u>2009 Total Resources</u>	<u>2009 Obligations</u>	<u>2010 Budget Authority/ Request</u>	<u>2009 Carryover Into 2010</u>	<u>2010 Total Resources</u>	<u>2011 Request</u>
Lead Hazard Control								
Grants	\$147,949	\$72,321	\$220,270	\$151,828	\$66,600	\$66,521	\$133,121	\$94,600
Operation LEAP .....	...	7,971	7,971	7,712	...	...	...	...
Technical Studies	4,750	6,944	11,694	6,743	4,000	7,461	11,461	4,000
Healthy Homes	36,434	8,433	44,867	26,834	20,000	17,554	37,554	40,000
Lead Hazard								
Demonstration Project	50,617	44,088	94,705	46,705	48,000	48,000	96,000	...
Communications and Outreach	250	...	250	134	...	114	114	...
Transformation Initiative .....	...	...	...	...	<u>1,400</u>	...	<u>1,400</u>	<u>1,400</u>
Total	240,000	139,757	379,757	239,956	140,000	139,650	279,650	140,000

NOTES

1. The fiscal year 2009 Total Resources includes \$960 thousand in recaptures and excludes \$1.11 million in expired funds.
2. The fiscal year 2009 Budget Authority and Total Resources includes \$100 million in supplemental appropriations from the American Recovery and Reinvestment Act of 2009 (P.L. 111-5), of which \$500 thousand was transferred to Administration, Operations and Management, Personnel Compensation and Benefits, and the Working Capital Fund (Lead Hazard Control Grants - \$77.949 million, Lead Hazard Demonstration - \$2.617 million, and Healthy Homes - \$18.934 million).
3. The fiscal year 2009 Obligations do not include \$12 thousand in expired funds.

<u>FTE</u>	<u>2009 Actual</u>	<u>2010 Estimate</u>	<u>2011 Estimate</u>
Headquarters	56	56	55
Field .....	...	...	...
Total	56	56	55

**OFFICE OF HEALTHY HOMES AND LEAD HAZARD CONTROL
LEAD HAZARD REDUCTION PROGRAM
Program Offsets
(Dollars in Thousands)**

Lead Hazard Control Grants	<u>Amount</u>
2009 Appropriation	\$147,949
2010 Appropriation/Request	66,600
2011 Request	<u>94,600</u>
Program Improvements/Offsets	+28,000

NOTE: The fiscal year 2009 appropriation includes \$78.449 million in supplemental funding from the American Recovery and Reinvestment Act (P.L. 111-5), of which \$500 thousand was transferred to Administration, Operations and Management, Personnel Compensation and Benefits, and the Working Capital Fund.

Proposed Actions

Since 2000, HUD and other Federal agencies have been working on the specific goal to eliminate childhood lead poisoning as a major public health problem. HUD's efforts have included programs of grants to communities for lead hazard control in low-income housing, research on improving and reducing the cost of methods for evaluating and controlling lead hazards in housing, and enforcing lead safety regulations which cover older housing. Continued focus on eliminating and preventing childhood lead poisoning is needed because:

- 1) from 1999–2002, an estimated 310,000 (1.6 percent) U.S. children had BLLs \geq 10 micrograms of lead per deciliter of blood ($\mu\text{g}/\text{dL}$), and 1.4 million had BLLs of 5–9 $\mu\text{g}/\text{dL}$ (almost 14 percent) (CDC, Blood lead levels in the United States, 1999–2002. Morbidity and Mortality Weekly Report 54:513–516). Small increments in blood lead, on the order of 1-2 $\mu\text{g}/\text{dL}$, increase a child's risk for intellectual deficits and behavior problems;
- 2) each dollar invested in lead paint hazard control results in a return of \$17–\$221 or a net savings of \$181–\$269 billion (Gould, Environmental Health Perspectives 117:1162–1167 (2009));
- 3) diligent lead hazard control efforts will be required to prevent a resurgence of this condition, because approximately 37 million homes still have lead-based paint, with 23 million having significant lead-based paint hazards that can result directly in increased children's blood lead levels and in some cases, childhood lead poisoning;
- 4) attainment of the original 2010 Federal goal to end lead hazard for children assumed a funding level for lead hazard control grant programs that has not been provided;
- 5) lead remains a pervasive contaminate in the environment, and although efforts to control lead hazards in house dust, paint and soil have been successful, they have not been universally implemented;
- 6) screening of blood lead levels in children across the country is low. Despite longstanding requirements for blood lead screening in the Medicaid program, only about 42 percent of children aged 1–5 enrolled in Medicaid were screened with a blood lead test. As a result, many children with elevated blood lead

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levels are not identified and, therefore, do not receive appropriate treatment or environmental intervention (CDC (2009), cdc.gov/mmwr/preview/mmwrhtml/rr5809a1.htm, based on data from CDC's National Health and Nutrition Examination Survey (NHANES) 1999-2004); and

- 7) housing stock not previously targeted for funding has aged and has show signs of deteriorated paint and other housing-related hazards (e.g. 1960-1977 in latest American Housing Survey) – making it increasingly difficult to target scarce resources.

Considerable progress has been made in reducing the level of childhood lead poisoning, with an approximate 75 percent decline in the percentage of children with elevated blood leads since 1991, according to the ongoing NHANES survey conducted by the CDC (cdc.gov/nchs/nhanes/). The survey will indicate whether the Federal goal has been met when updated survey data for 2010 are published, which is expected to be no earlier than 2013, based on the need for laboratory analysis of blood lead samples, quality control reviews of the data, and statistical analysis of the data. In response to the expected results of this survey, HUD is establishing a new goal for lead safety that will be incorporated into HUD's new Strategic Plan 2011 – 2016:

- Reduce overall risk and disparity in risk of exposure to lead in children based on race, ethnicity, socio-economic status, and degree of urbanization.

The goal includes not only the original objective of eliminating elevated blood lead levels in children as a public health problem, but expands the scope to include reducing the average blood lead levels in children and eliminating the disproportionate incidence of blood-lead levels in children based on race, ethnicity, socio-economic status, and degree of urbanization. As part of the program to reach this goal, the Department proposes \$94.6 million for Lead Hazard Reduction to award grants to State and local governments to identify and eliminate hazards from lead-based paint in housing in communities most likely at risk. The proposed Lead Hazard Reduction Grant program combines previous programs including the Lead Hazard Control Grant program and the Lead Hazard Reduction Demonstration Grant program. Since 1992, these programs have demonstrated replicable results and have been recognized as one of most successful programs in HUD at providing early intervention to prevent environmental conditions in the home from adversely affecting children (Nevin, Trends in preschool lead exposure, mental retardation, and scholastic achievement: Association or Causation? *Environmental Research* (2009), doi:10.1016/j.envres.2008.12.003). The programs have dramatically increased the number of lead-safe homes nationwide and contributed to reducing both the average blood lead levels and incidence of poisoned children. As of September 2010, the Lead Hazard Reduction programs have directly made over 110,000 housing units lead-safe. In addition, these programs have been instrumental in creating local jurisdiction and contractor capacity around the country to evaluate and eliminate hazards posed by lead-based paint. Lead Hazard Reduction funds are used to:

- perform lead hazard control in low-income, privately owned rental and owner-occupied housing;
- build program and local capacity for lead hazard control;
- target funding to housing with low-income families with children living in privately owned housing;
- provide funding for areas with the highest lead abatement needs, based on having: (1) the highest number of occupied pre-1940 units of rental housing; and (2) a disproportionately high number of documented cases of lead poisoned children;
- fulfill Section 3 of the Housing and Urban Development Act of 1968 by generating training, employment opportunities, and contracts for low-income residents and businesses in the targeted areas.

**OFFICE OF HEALTHY HOMES AND LEAD HAZARD CONTROL
LEAD HAZARD REDUCTION TECHNICAL STUDIES AND SUPPORT
Program Offsets
(Dollars in Thousands)**

Technical Studies	<u>Amount</u>
2009 Appropriation	\$4,750
2010 Appropriation/Request	4,000
2011 Request	<u>4,000</u>
Program Improvements/Offsets .....	...

Proposed Actions

The Department proposes \$4 million for Lead Technical Studies. The Department is proposing to consolidate technical assistance funds into one account under its Transformation Initiative. Therefore, no technical assistance funds are being requested under this line item. Further information regarding the Transformation Initiative is contained in a separate justification for that account.

Achieving the Federal goal of eliminating childhood lead poisoning as a major public health problem requires research, outreach, and technical support to ensure that HUD's grantees make the most efficient and innovative use of funding. Lead Technical Studies and Support contracts also promote and assist with the enforcement of HUD's Lead Disclosure Rule and monitoring of implementation of HUD's Lead Safe Housing Rule by HUD's Program Offices and recipients of their assistance.

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Lead Regulatory Support Activities. HUD will award contracts to:

- effectively identify owners of pre-1978 housing, particularly larger multifamily housing, with known lead-based paint hazards who are likely not to have disclosed this information during sale or rental, for Lead Disclosure Rule enforcement action;
- review evidence and perform monitoring of lead hazard control work performed under settlement agreements, as part of case development and management of settlement agreements;
- analyze data from HUD program offices on the number of assisted housing units made lead safe through implementation of HUD's Lead Safe Housing Rule, and provide technical support to these Program Offices' compliance monitoring efforts;
- track the number of units made lead-safe through Lead Disclosure Rule enforcement and Lead Safe Housing Rule compliance;
- maintain and update guidance, toolkits, outreach documents and other materials and resources supporting implementation of the Lead Safe Housing Rule by program offices, housing providers, and residential property owners and managers; and
- support HUD staff's enforcement activities being coordinated with HUD's Program Offices, the Centers for Disease Control and Prevention (CDC), the U.S. Environmental Protection Agency (EPA), the Department of Justice (DOJ), and State and local housing and health departments.

Lead Technical Support Activities. HUD will provide grants, cooperative agreements, and contracts to the activities listed below. For those contracts and grants that are technical assistance, HUD will submit a plan to be considered under the Transformation Initiative.

- conduct technical studies and demonstration projects to identify new innovative methods that reduce the cost and increase the effectiveness of lead hazard control activities;
- develop policy, regulatory and guidance materials for lead safety;
- provide technical support and public education (primarily in English and Spanish) on lead safety to state and local governments, the general public, the professional community, and trade groups;
- collaborate with EPA to operate a toll-free hotline and document distribution center for the general public; and.
- monitor and encourage implementation by the Internal Revenue Service and State housing finance agencies of lead hazard control requirements in older housing for which owners are receiving Low-Income Housing Tax Credits.

OFFICE OF HEALTHY HOMES AND LEAD HAZARD CONTROL
HEALTHY HOMES PROGRAM
Program Offsets
(Dollars in Thousands)

Healthy Homes	<u>Amount</u>
2009 Appropriation	\$36,434
2010 Appropriation/Request	20,000
2011 Request	<u>40,000</u>
Program Improvements/Offsets	+20,000

NOTES:

1. The fiscal year 2009 appropriation includes \$18.934 million in funding from the American Recovery and Reinvestment Act (P.L. 111-5).
2. The fiscal year 2009 appropriation also includes \$2.9 million in additional funds apportioned to the Healthy Homes program. The fiscal year 2009 Omnibus Appropriations Act provided for “not less than \$14.6 million” for the Healthy Homes Program. HUD allocated \$17.5 million to the Healthy Homes Program in its fiscal year 2009 Operating Plan approved by Congress on June 24, 2009.

Proposed Actions

In fiscal year 2011, the Department proposes a funding increase of \$20 million over the fiscal year 2010 enacted level of \$20 million for the Healthy Homes Program; the funding is targeted to support six specific main program areas, described below, that reflect the maturing of the Healthy Homes Program. It implements HUD’s recently released “Healthy Homes Strategic Plan” by continuing to fund three new critical programs – the Coordinated Housing Hazard Intervention Grant Program, the Healthy Homes Capacity and Sustainability Program, and the Healthy Housing Implementation Program. These new programs will:

- 1) fund local programs to correct housing-related hazards;
- 2) support and promote applied research;
- 3) initiate the development of standardized methods for the assessment and control of housing-related health hazards;
- 4) initiate mainstreaming of healthy housing principles into ongoing practices and programs;
- 5) initiate incorporating healthy housing principles into green construction and rehabilitation;
- 6) evaluate the effectiveness of interventions targeting mold/moisture problems;
- 7) initiate a national strategy for healthy homes outreach;
- 8) build capacity for evaluating and enforcing lead and healthy homes laws and codes; and
- 9) develop healthy homes model capacity and competency trainings for partners, practitioners, and the public.

The main program areas of the Healthy Homes Program are identified below. Their estimated funding levels are listed below; the budget proposal provides that funds within the Healthy Homes Program for which an insufficient amount of qualified (eligible) applications are submitted will be reallocated to other programs within the overall Healthy Homes Program, in order to maximize the prompt obligation of the funds and implementation of the program.

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- Coordinated Housing Hazard Intervention Plan Grant Program: \$3 million
- Healthy Homes Capacity and Sustainability Program: \$12 million
- Healthy Housing Implementation Program: \$20 million
- Healthy Homes Contracts: \$5 million

The Healthy Homes Program focuses on controlling key housing-related health hazards including asthma and allergy triggers, mold and moisture, pests and pesticides, injury hazards, and poor indoor air quality. Housing-related health costs total in the billions annually. However, evidence has clearly shown that intervention measures taken to address these hazards are effective at reducing the associated healthcare costs. As noted, these housing-related environmental interventions return benefits far in excess of the costs. The Healthy Homes Program includes four specific main program areas, including:

Coordinated Housing Hazard Intervention Grant Program (CHHI)

Continuing in fiscal year 2011, the Department requests funding to continue a production-oriented program to prevent and correct significant housing-related health and safety hazards in low-income housing. Funding for the Healthy Housing Implementation Program (HHIP) grant program will be used to prevent and correct housing-related health and safety hazards. Proven healthy homes interventions will be used to address structural defects and water infiltration, moisture problems, integrated pest management, fall and trip hazards, malfunctioning or improperly used fuel-burning appliances, poor indoor air quality, radon intrusion, fire prevention, smoke detection, and carbon monoxide poisoning prevention. This program is modeled after the successful Healthy Homes Demonstration Grant Program and is streamlined for efficient production of safe low-income housing using established healthy homes techniques.

Healthy Homes Capacity and Sustainability Program (HCSP)

Continuing in fiscal year 2011, funding for the HCSP will be used to develop capacity for addressing housing-related health hazards. The HCSP will fund research to develop standardized methods for the assessment and control of housing-related health hazards and other efforts including, mainstreaming healthy housing principles into on-going practices and programs, incorporating healthy housing principles into green construction and rehabilitation, evaluating the long-term cost effectiveness of a healthy housing approach, developing “best practices” guidance for healthy homes programs, developing a national strategy for outreach, and developing healthy homes model capacity and competency trainings for partners, practitioners, and the public.

The HCSP will use grants, cooperative agreements, contracts and interagency agreements to achieve particular program goals. One of the projects in this program will be a competitive grant program focused on areas with limited capacity for lead-based paint or healthy homes activities, including urban and suburban areas, but with particular attention to rural and Federally recognized Tribal areas, to promote the adoption of laws and codes consistent with healthy homes principles. Grantees would evaluate existing laws and codes, propose and further the adoption of new laws and codes as necessary, support enforcement of the existing or new laws and codes, and deliver education and outreach on healthy homes principles, with particular attention to laws and codes.

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Healthy Housing Implementation Program (HHIP)

Continuing in fiscal year 2011, funding for the HHIP grant program will be used to produce healthy homes by preventing and correcting housing-related health and safety hazards. Proven healthy homes interventions will be used to address structural defects and water infiltration, moisture problems, integrated pest management, fall and trip hazards, malfunctioning or improperly used fuel-burning appliances, poor indoor air quality, radon intrusion, fire prevention, smoke detection, and carbon monoxide poisoning prevention. This program is modeled after the successful Healthy Homes Demonstration Grant Program and is streamlined for efficient production of safe low-income housing using established healthy homes interventions.

Healthy Homes Contracts and Interagency Agreements

Contracts and Interagency Agreements will be used to develop tools for healthy homes programs, conduct research activities, provide programmatic support and assistance for healthy homes grantees, and to conduct evaluations of research and demonstration projects and program evaluation.

The Healthy Homes Program has been guided by a preliminary plan proposed by a multidisciplinary panel of scientific, engineering, medical and housing management experts convened by HUD. Initiated in fiscal year 1999, the mission of the Healthy Homes Program is to mitigate multiple key health and safety hazards in housing by providing research, technical and policy guidance, outreach, and capacity building for partners, practitioners, and the public, with a focus on protecting the health of children and other sensitive populations in low-income households. In 2009, HUD updated the preliminary plan, creating a new Healthy Homes Strategic Plan that reflects the knowledge developed by HUD and others in the past decade to provide an improved vision to increase the program's impact. This updated Strategic Plan will help make the Healthy Homes Program's vision a reality by focusing on four key goals identified to help guide the program's activities:

- 1) Building a National Framework: Foster partnerships for implementing a healthy homes agenda;
- 2) Creating Healthy Housing through Key Research: Support strategic, focused research on links between housing and health and cost effective methods to address hazards;
- 3) Mainstreaming the Healthy Homes Approach: Promote the incorporation of healthy homes principles into ongoing practices and programs; and
- 4) Enabling Communities to Create and Sustain Healthy Homes: Build sustainable local healthy homes programs.

The direction laid out in the new Strategic Plan is reinforced by the release in 2009 of the Surgeon General's Call to Action on Healthy Homes (www.surgeongeneral.gov/topics/healthyhomes/). The Call to Action is a science-based document to stimulate action nationwide to solve a major public health problem and describes steps all Americans can take to prevent disease, disability and injury that may result from health hazards in homes.

The Office of Healthy Homes and Lead Hazard Control has already made significant progress in implementing the Program's Strategic Plan, including:

- the creation of a Federal Healthy Homes Work Group (HHWG). The purpose of the HHWG is three-fold. First, to achieve consensus on a National Strategy to Promote Healthy Homes that delivers safe and healthy housing for all citizens through the collaborative efforts of Federal, non-Federal and private sector leaders. Second, to identify opportunities Federal agencies can take to eliminate barriers that impede collaboration and complicate assisting those in need with Federal funding. Third, to join with key non-Federal and private sector stakeholders to implement a vigorous healthy homes agenda at the community level. Current Federal agencies represented include HUD, Centers for Disease Control and Prevention, the Environmental

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Protection Agency, the Department of Energy, the Department of Agriculture, the National Institute of Environmental Health Sciences, and the National Institute of Standards and Technology;

- facilitating the writing of a joint Office of Public and Indian Housing-Office of Healthy Homes and Lead Hazard Control Notice that encourages PHAs to create smoke-free housing developments;
- planning for the second national healthy homes conference in 2011;
- supporting research on ventilation and indoor air quality and on the environmental and health benefits of green construction practices;
- developing Integrated Pest Management training for public housing authorities;
- initiating the development of a guidance manual for planning and implementing healthy homes programs; and
- enhancing the ability of lead hazard control programs to address broader healthy homes issues.

In fiscal year 2011, the Healthy Homes Program will:

- fund grants and cooperative agreements to assess and control housing-related health hazards that pose risks to residents, particularly children in low-income families and for research to improve assessment and control methods;
- reduce health and safety hazards in 5,000 homes;
- lead the Federal effort to coordinate efforts by National, State, Tribal and local partners to ensure that best healthy homes practices are identified, shared and translated into action;
- initiate research to identify the most cost-effective mold/moisture-focused interventions to improve respiratory health;
- work with CDC and HUD's Office of Affordable Housing Preservation to initiate research on the potential benefits of green housing rehab methods on indoor environmental quality and resident health.
- expand the effort to mainstream healthy housing principles into existing housing rehabilitation programs, on-going building practices and other HUD programs;
- expand efforts to develop, evaluate, and incorporate healthy housing principles into green construction and rehabilitation programs;
- develop a national strategy for education on housing-related health hazards;
- enable State and local programs to adopt a comprehensive healthy housing approach as they work toward a transition from a categorical lead-based paint approach to a comprehensive healthy housing approach; and
- develop, deliver and evaluate training in healthy homes approaches, including integrated pest management, to build capacity and competency among partners, practitioners, and the public.

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**OFFICE OF HEALTHY HOMES AND LEAD HAZARD CONTROL
LEAD HAZARD REDUCTION DEMONSTRATION PROGRAM
Program Offsets
(Dollars in Thousands)**

Lead Hazard Demonstration Project	<u>Amount</u>
2009 Appropriation	\$50,617
2010 Appropriation/Request	48,000
2011 Request	<u>---</u>
Program Improvements/offsets	-48,000

NOTE: The fiscal year 2009 appropriation includes \$2.617 million in funding from the American Recovery and Reinvestment Act (P.L. 111-5).

Proposed Actions

Funding is requested in fiscal year 2011 for the Lead Hazard Reduction Grant program that covers the efforts of both the Lead Hazard Control Grant program and the Lead Hazard Reduction Demonstration Grant program reported above.

Lead Hazard Reduction

**OFFICE OF HEALTHY HOMES AND LEAD HAZARD CONTROL
COMMUNICATIONS AND OUTREACH PROGRAM
Program Offsets
(Dollars in Thousands)**

Communications and Outreach	<u>Amount</u>
2009 Appropriation	\$250
2010 Appropriation/Request .....	...
2011 Request	<u>...</u>
Program Improvements/Offsets .....	...

Proposed Actions

No funding is requested for the communications and outreach in fiscal year 2011. Much larger public communication and outreach efforts are conducted as a regular part of the Lead Hazard Reduction and Healthy Homes programs. A separate line item for this purpose is unnecessary.

Lead Hazard Reduction

**LEAD HAZARD CONTROL
LEAD-BASED PAINT HAZARD REDUCTION PROGRAM
Program Offsets
(Dollars in Thousands)**

Transformation Initiative	<u>Amount</u>
2009 Appropriation .....	...
2010 Appropriation/Request	\$1,400
2011 Request	<u>1,400</u>
Program Improvements/Offsets .....	...

Proposed Actions

The Transformation Initiative allows the Secretary the necessary flexibility to undertake an integrated and balanced effort to improve program performance and test innovative ideas. One percent of the funds appropriated for the Lead Hazard Control account may be transferred to the Transformation Initiative account to undertake research, demonstrations, technical assistance, and technology improvements.

Lead Hazard Reduction

OFFICE OF HEALTHY HOMES AND LEAD HAZARD CONTROL LEAD HAZARD REDUCTION

Justification of Proposed Changes in Appropriations Language

The fiscal year 2011 President's Budget includes proposed changes in the appropriations language listed and explained below. New language is italicized and underlined, and language proposed for deletion is bracketed.

For the Lead Hazard Reduction Program, as Authorized by section 1011 of the Residential Lead-Based Paint Hazard Reduction Act of 1992, \$140,000,000, to remain available until September 30, [2011] 2012, of which not less than [\$20,000,000] ~~\$40,000,000~~ shall be for the Healthy Homes Initiative, pursuant to sections 501 and 502 of the Housing and Urban Development Act of 1970 that shall include research, studies, testing, and demonstration efforts, including education and outreach concerning lead-based paint poisoning and other housing-related diseases and hazards: *Provided*, That for purposes of environmental review, pursuant to the National Environmental Policy Act of 1969 (42 U.S.C. 4321 et seq.) and other provisions of the law that further the purposes of such Act, a grant under the Healthy Homes Initiative, Operation Lead Elimination Action Plan (LEAP), or the Lead Technical Studies program under this heading or under prior appropriations Acts for such purposes under this heading, shall be considered to be funds for a special project for purposes of section 305(c) of the Multifamily Housing Property Disposition Reform Act of 1994: [*Provided further*, That of the total amount made available under this heading, \$48,000,000 shall be made available on a competitive basis for areas with the highest lead paint abatement needs: *Provided further*, That each recipient of funds provided under the second proviso shall make a matching contribution in an amount not less than 25 percent: *Provided further*, That the Secretary may waive the matching requirement cited in the preceding proviso on a case by case basis if the Secretary determines that such a waiver is necessary to advance the purposes of this program: *Provided further*, That each applicant shall submit a detailed plan and strategy that demonstrates adequate capacity that is acceptable to the Secretary to carry out the proposed use of funds pursuant to a notice of funding availability:] *Provided further*, That amounts made available under this heading in this or prior appropriations Acts, and that still remain available, may be used for any purpose under this heading notwithstanding the purpose for which such amounts were appropriated if a program competition is undersubscribed and there are other program competitions under this heading that are oversubscribed. (Department of Housing and Urban Development Appropriations Act, 2010.)

Explanation of Changes

For fiscal year 2011, HUD requests \$140 million of which at least \$40 million is for the Healthy Homes program, \$4 million is for Technical Studies, and up to \$1.4 million may be transferred to the Transformation Initiative.

HUD's fiscal year 2011 request of \$94.6 million for Lead Hazard Control Grants includes both the Lead Hazard Control Grant program and the Lead Hazard Reduction Demonstration Grant program.

Lead Hazard Reduction

OFFICE OF HEALTHY HOMES AND LEAD HAZARD CONTROL
LEAD HAZARD REDUCTION
Crosswalk of 2009 Availability
(Dollars in Thousands)

<u>Budget Activity</u>	<u>2009 Enacted</u>	<u>Supplemental/ Rescission</u>	<u>Approved Reprogrammings</u>	<u>Transfers</u>	<u>Carryover</u>	<u>Total 2009 Resources</u>
Lead Hazard Control Grants	\$69,500	\$78,449	...	...	\$72,321	\$220,270
Operation LEAP .....	...	...	...	...	7,971	7,971
Technical Studies	4,750	...	...	...	6,944	11,694
Healthy Homes	17,500	18,934	...	...	8,433	44,867
Lead Hazard Demonstration Project ...	48,000	2,617	...	...	44,088	94,705
Communications and Outreach	250	...	...	...	...	250
Transformation Initiative .....	...	...	...	...	...	...
Total	140,000	100,000	...	...	139,757	379,757

NOTES:

1. Supplemental Appropriations provided by the American Recovery and Reinvestment Act of 2009 (P.L. 111-5), of which \$500 thousand was transferred to Administration, Operations and Management, Personnel Compensation and Benefits, and the Working Capital Fund.
2. Fiscal year 2009 appropriation provided "not less than" \$14.6 million for Healthy Homes. HUD proposed allocating \$17.5 million to the Healthy Homes Program in its 2009 Operating Plan approved by Congress on June 24, 2009.

Lead Hazard Reduction

OFFICE OF HEALTHY HOMES AND LEAD HAZARD CONTROL
LEAD HAZARD REDUCTION
Crosswalk of 2010 Changes
(Dollars in Thousands)

<u>Budget Activity</u>	<u>2010 President's Budget Request</u>	<u>Congressional Appropriations Action on 2010 Request</u>	<u>2010 Supplemental/ Rescission</u>	<u>Reprogrammings</u>	<u>Carryover</u>	<u>Total 2010 Resources</u>
Lead Hazard Control Grants	\$116,000	\$66,600	...	...	\$66,521	\$133,121
Operation LEAP .....	...	...	...	...	...	...
Technical Studies	4,000	4,000	...	...	7,461	11,461
Healthy Homes	20,000	20,000	...	...	17,554	37,554
Lead Hazard Demonstration Project ...	...	48,000	...	...	48,000	96,000
Communications and Outreach .....	...	...	...	...	114	114
Transformation Initiative .....	...	<u>1,400</u>	...	...	...	<u>1,400</u>
Total	140,000	140,000	...	...	139,650	279,650