

GAO

United States General Accounting Office

Report to the Chairman, Subcommittee
on Toxic Substances, Research and
Development, Committee on
Environment and Public Works, U.S.
Senate

September 1993

LEAD-BASED PAINT POISONING

Children in Public Housing Are Not Adequately Protected



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**Resources, Community, and
Economic Development Division**

B-252772

September 17, 1993

The Honorable Harry Reid
Chairman, Subcommittee on Toxic
Substances, Research and Development
Committee on Environment and Public Works
United States Senate

Dear Mr. Chairman:

This report responds to your request that we review whether the Department of Housing and Urban Development (HUD) has complied with provisions of the Lead-Based Paint Poisoning Prevention Act, as amended, concerning public housing. Specifically, we are reporting on whether HUD and public housing authorities (PHA) sufficiently protected children with elevated levels of lead in their blood who live in public housing from further exposure to lead-based paint. We also address whether HUD complied with lead-based paint legislation and ensured that PHAs complied with regulatory requirements. Our report contains several recommendations designed to better protect children who reside in public housing from lead-based paint hazards. It also asks the Congress to consider establishing a deadline for HUD and PHAs to complete lead-based paint abatement in public housing.

As arranged with your office, unless you publicly announce its contents earlier, we plan no further distribution of this report until 30 days after the date of this letter. At that time, we will send copies to the appropriate congressional committees and subcommittees and to the Secretary of HUD. We will make copies available to others on request.

This work was performed under the direction of Judy A. England-Joseph, Director, Housing and Community Development Issues, who may be reached at (202) 512-7631 if you or your staff have any questions. Major contributors to this report are listed in appendix I.

Sincerely yours,

J. Dexter Peach
Assistant Comptroller General

Executive Summary

Purpose

Lead poisoning is one of the most common health problems for our nation's children today. Affecting every system in the body, lead can have marked effects on intelligence and behavior, and health experts believe it may have irreversible consequences. Lead poisoning is identified by tests to detect elevated levels of lead in the blood. Lead-based paint, banned from use in residential housing since 1978, is the most widespread source of exposure to lead for children in the United States. About 400,000 children live in federally assisted public housing, and those living in pre-1978 housing may be at risk. Approximately 60 percent of all public housing units were built before 1978 and may be occupied by families with children.

The Chairman, Subcommittee on Toxic Substances, Research and Development, Senate Committee on Environment and Public Works, asked GAO to determine whether the Department of Housing and Urban Development (HUD) is complying with the public housing provisions of the Lead-Based Paint Poisoning Prevention Act, as amended. Specifically, this report addresses whether (1) HUD and public housing authorities (PHA) have sufficiently protected children with elevated blood lead levels who live in public housing from further exposure to lead-based paint and (2) HUD has complied with lead-based paint legislation and ensured that PHAs complied with HUD's testing, abatement, and notification requirements. GAO reviewed six PHAs that administer 18 percent of the public housing units built before 1978.

Background

Federal efforts to reduce the hazards of lead-based paint poisoning began in 1971 with the enactment of the Lead-Based Paint Poisoning Prevention Act. As amended in 1973, the act required the Secretary of HUD to establish and implement procedures to eliminate these hazards, as far as practicable, from public housing. Amendments enacted in 1988 require HUD to conduct a demonstration program on abating lead-based paint in public housing, estimate costs, and prepare a comprehensive abatement plan. Additionally, the Secretary must require that PHAs test a random sample of housing units built before 1978 for lead-based paint by December 1994.

HUD has issued regulations and guidance on addressing lead-based paint hazards to 3,132 PHAs, which contract with HUD to provide safe, decent, and sanitary housing to low-income households. Specific regulations describe emergency procedures (emergency regulations) to protect children diagnosed with elevated blood lead levels from further exposure to lead-based paint. Other regulations require PHAs to test a random sample of

pre-1978 units under provisions of the amendments, abate any lead-based paint found, notify all tenants of potential hazards, and provide test results to residents whose homes contain lead-based paint.

Results in Brief

Children diagnosed with elevated blood lead levels who live in public housing have not been adequately protected from further lead poisoning. The six PHAS GAO reviewed often did not comply with HUD's regulations for testing these children's homes or relied on testing procedures that may not have fully disclosed the presence of lead-based paint. In only 1 of the 50 cases GAO reviewed did PHAS comply with emergency abatement or relocation regulations for children with elevated blood lead levels. Thus, many children were exposed to lead-based paint for more than a year after PHAS were notified of their diagnosis and of the presence of lead-based paint in their homes. HUD did not oversee PHAS' compliance with the emergency regulations. This lack of oversight, combined with PHAS' noncompliance, leaves these children at risk and may result in lawsuits with settlements that are costly to the federal government. Furthermore, HUD's regulations do not currently require PHAS to notify other tenants that lead-based paint has been found or test other units in the same building in which a diagnosed child lives.

HUD has not complied with all of the 1988 legislative requirements aimed at abating lead-based paint hazards from public housing and has not ensured that PHAS comply with its testing, abatement, and notification requirements. HUD has yet to complete the legislatively required demonstration program that is to identify the extent of and costs to abate lead-based paint in public housing and form the basis for its comprehensive abatement plan. Nor has HUD revised its brochure warning tenants about lead-based paint hazards, as mandated by the Congress over 5 years ago. Although HUD has required PHAS to complete testing for lead-based paint by December 1994, there is no deadline for completing abatement. HUD has also not adequately overseen PHAS' activities in response to its requirements. Only one of the six HUD field offices GAO reviewed ensured that PHAS were certifying completion of testing and abatement, as required. HUD has also not ensured that PHAS notify tenants when lead-based paint is present in their units.

Principal Findings

HUD and PHAs Have Not Adequately Protected Children With Elevated Blood Lead Levels

Children with elevated blood lead levels who live in public housing have not been adequately protected from further exposure to lead. Two of the six PHAs GAO reviewed generally did not comply with HUD's emergency regulation that these children's homes be tested for lead-based paint within 5 days after the PHAs were notified of the diagnosis. The other PHAs complied with the requirement because local health agencies tested the children's homes before notifying PHAs of the diagnosis. However, the local testing procedures used did not comply with HUD's requirement that all painted surfaces be tested for lead-based paint. Thus, PHAs lacked the information needed to ensure they fully abate the lead-based paint in the children's homes.

When lead-based paint is found in these children's homes, HUD's regulations require PHAs to abate it or to relocate the families within 14 days. PHAs complied in only 1 of the 50 cases GAO reviewed. Furthermore, at the time of GAO's review, the six PHAs had taken no abatement or relocation action in 28 of the 50 cases. In another 21 cases, PHAs had taken actions but not within 14 days, as required.

HUD's current regulations do not require PHAs to test other units in the same building or warn other tenants when lead-based paint is found in a diagnosed child's home. Five of the six PHAs reviewed did not notify other tenants that lead-based paint had been found in their building. Regulations also do not prevent units formerly occupied by children with elevated blood lead levels and known to contain lead-based paint from being rented to other families with children.

Until January 1993, HUD had no procedures to ensure that PHAs complied with its emergency regulations. PHAs were not required to report cases of elevated blood lead levels, so HUD was unaware that PHAs were not in compliance. Because HUD supplies most of PHAs' funding, the federal government could share in costs resulting from lawsuits over lead poisoning.

HUD and PHAs Have Not Complied With All Lead-Based Paint Requirements

Congressional concern over the progress HUD had made in eliminating lead-based paint hazards prompted the 1988 legislation requiring that HUD complete the demonstration and research program to identify the extent of the lead-based paint problem, determine cost-effective abatement

measures, and form the basis for the comprehensive abatement plan. However, HUD has not complied with this requirement. Since 1973, HUD's studies have not accurately estimated the number of public housing units containing lead-based paint, the amount of paint in these units, or the cost of abatement. Nor has HUD complied with a 1988 requirement that it update its brochure warning tenants of potential hazards associated with lead-based paint. The current brochure advises tenants to follow outdated and possibly harmful procedures, such as removing paint themselves.

In response to the 1988 amendments, HUD issued regulations requiring PHAS to complete testing for lead-based paint in public housing by December 1994. Four of the six PHAS GAO reviewed had started testing, and five plan to meet the deadline. Four of the six PHAS had accomplished some abatement, ranging from 1 to 36 percent of their pre-1978 units. However, there is no legislative deadline for completing abatement.

In general, HUD has not ensured that PHAS comply with its requirements on testing, abatement, and notification. For example, HUD's procedures require PHAS to certify that testing and abatement completed in conjunction with modernization projects was performed according to federal, state, or local requirements. However, only one of the six HUD offices GAO reviewed ensured that PHAS completed the required certifications. In addition, HUD field offices did not ensure that PHAS notified tenants when lead-based paint was found in their homes. None of the six PHAS reviewed were notifying tenants when lead-based paint was found.

Recommendations

GAO is making recommendations to the Secretary of HUD to provide greater protection for children with elevated blood lead levels. These recommendations include requiring HUD to ensure that PHAS comply with its current emergency regulations. GAO is also recommending that HUD's regulations be amended to (1) prohibit PHAS from assigning households with children to homes previously occupied by children with elevated blood levels until the lead-based paint has been abated, (2) require PHAS to test other units in a building where a child with an elevated blood lead level lives, and (3) notify other tenants when lead-based paint is found in a diagnosed child's home.

GAO is also making recommendations to the Secretary to improve HUD's compliance with lead-based paint legislation and ensure that PHAS comply

with HUD's requirements. GAO is recommending, among other things, that HUD expedite the completion of its comprehensive abatement plan.

Matter for Congressional Consideration

In 1995, after PHAS have completed testing their units for lead-paint hazards and HUD has published its comprehensive and workable plan, the Congress may wish to consider establishing a deadline for HUD and PHAS to abate these hazards if it finds that PHAS are making insufficient progress. Such a deadline could be established after consultation with HUD and PHA officials and experts in lead-based paint abatement.

Agency Comments

GAO requested written comments from the Department of Housing and Urban Development, but none were provided. However, GAO discussed its findings with HUD officials at the conclusion of its work. The Director, Office of Construction, Rehabilitation, and Management, and the Director of Occupancy, Office of Public and Indian Housing, disagreed that PHAS should be prohibited from assigning households with children to homes previously occupied by children with elevated blood lead levels because doing so would create unnecessary vacancies. GAO believes that the health risk of exposing children to hazards that may have caused the poisoning of a previous tenant, combined with the potential financial costs to the federal government, is too great to allow these units to be rented to households with children. The Director of HUD's Office of Lead-Based Paint Abatement and Poisoning Prevention disagreed with the need for establishing a deadline for abating lead-based paint hazards in public housing. However, GAO continues to believe that, if the Congress finds that PHAS are making insufficient progress, a deadline would raise the priority PHAS give to modernizing buildings that need abatement.

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Abbreviations

CDC	Center for Disease Control
EBL	elevated blood lead level
HUD	Department of Housing and Urban Development
PHA	public housing authority

Introduction

Lead poisoning is one of the most common childhood health problems in the United States today. Lead is a poison that affects virtually every system in the body, and health experts believe that the consequences of lead poisoning may be irreversible. According to the Centers for Disease Control (CDC), sources of childhood lead poisoning include paint, water, soil, dust, and food. However, lead-based paint is the most widespread and dangerous source of lead exposure for children in the United States. Children may be poisoned by lead when they eat lead-based paint chips, chew on painted surfaces, or inhale or ingest dust from lead-based paint during play. Eliminating or abating lead-based paint from homes is recognized as an effective method for protecting children from lead poisoning.

Lead-based paint was used widely until the 1950s and to a lesser extent into the 1970s. The greatest concentrations of lead in paint occur in housing built before 1940. Although the paint industry adopted a voluntary standard limiting the use of lead in interior paints in 1955, the Consumer Product Safety Commission did not ban the sale of lead-based paint to consumers until 1978.

About 400,000 children live in federally assisted public housing, and those living in pre-1978 housing may be at risk of lead poisoning.¹ Approximately 60 percent of all public housing units were built before 1978 and may be occupied by families with children. Various laws have directed the Department of Housing and Urban Development (HUD) to eliminate lead-based paint hazards in public housing. HUD, in turn, has promulgated lead-based paint regulations for public housing authorities (PHA). HUD contracts with these PHAs to provide decent, safe, and sanitary housing for low-income families, providing 3,132 public housing authorities with federal subsidies. In turn, PHAs are required to comply with HUD's regulations. PHAs manage about 1.3 million units, which provide housing for almost 2.9 million residents.

Children Are Most at Risk From Lead Poisoning

Children and fetuses with developing brains and nervous systems are particularly at risk from lead poisoning. According to the CDC, very severe lead exposure in children, resulting in elevated blood lead levels (EBL) over 80 micrograms per deciliter of blood, can cause symptoms such as coma and convulsions, and even death. However, lead levels as low as 10 micrograms per deciliter, while not having results this severe, are

¹GAO calculated the number of children living in public housing on the basis of data from the *Characteristics of HUD-Assisted Renters and Their Units in 1989*, Department of Housing and Urban Development, Mar. 1992.

associated with decreased intelligence, impaired nervous system development, behavioral problems, decreased growth, and reduced hearing ability. Pregnant women with EBLs between 10 and 15 micrograms per deciliter may give birth prematurely and have babies with reduced birth weight. Exposure to lead-based paint can also cause miscarriages, and lead can be passed through the mother's bloodstream to unborn babies.

In 1991, the CDC specified actions for health agencies to take to protect children with various elevated blood lead levels. For children with over 15 micrograms but less than 20 micrograms of lead per deciliter of blood, the CDC recommends that health agencies educate families about lead poisoning and retest the children. For children with over 20 micrograms or repeated test results of over 15 micrograms of lead per deciliter, the CDC recommends but does not require that health agencies inspect the children's homes for lead-based paint.

Emergency Regulations Apply to Children in Public Housing With Elevated Blood Lead Levels

HUD has established emergency procedures in its regulations (emergency regulations) for PHAs to follow for children diagnosed with elevated blood lead levels (EBL children). EBL children living in public housing are generally identified by local health agencies in their screening programs. Once the PHA is notified that an EBL child is living in public housing, the PHA is required to follow HUD's emergency regulations to protect the child from further exposure to lead-based paint. The regulations specify that the PHA test all painted surfaces in the child's home within 5 days after being notified of the child's diagnosis. Furthermore, all lead-based paint must be abated² from surfaces within 14 days after testing. The regulations also require that the PHA relocate children and their families to lead-free dwellings if abatement cannot be performed within the required time.

Federal Laws Require HUD to Eliminate Lead-Based Paint Hazards in Public Housing

Federal efforts to eliminate lead-based paint hazards began in 1971 with the enactment of the Lead-Based Paint Poisoning Prevention Act (P.L. 91-695). Initially, the Department of Health, Education, and Welfare (now the Department of Health and Human Services) was designated as the primary agency to carry out the act's requirements. HUD was required to conduct a demonstration and research program to determine the nature and extent of lead-based paint poisoning nationwide and the most effective methods of removing lead-based paint from residential housing.

²Abatement can involve removing the lead-based paint, covering it with permanent barriers, or replacing components such as windows, doors, or trim where lead-based paint is found.

Subsequently, the 1973 amendments to the act required HUD to establish procedures to eliminate, as far as practicable, lead-based paint hazards in federally insured and assisted housing, including public housing constructed before 1950. HUD was also required to establish procedures for notifying public housing tenants of the hazards of lead-based paint, the symptoms and treatment of poisoning from lead-based paint, and the techniques available for eliminating the hazards. Accordingly, HUD issued regulations for PHAS to identify and abate lead-based paint hazards and notify tenants of potential lead-based paint poisoning hazards.

Major changes were made in the Lead-Based Paint Poisoning Prevention Act in 1988. The Housing and Community Development Act of 1987 (P.L. 100-242, enacted Feb. 5, 1988), required HUD to eliminate lead-based paint hazards in housing constructed before 1978. Furthermore, while HUD had previously defined as hazardous any chipped, cracked, or peeling paint (referred to as defective paint), the act expanded the definition to include intact painted surfaces. The act required testing of all interior and exterior painted surfaces in public housing and notification of tenants when test results showed the presence of lead-based paint. HUD was also required to develop an informational brochure, in consultation with the National Institute of Building Sciences, to notify tenants about the potential hazards of lead-based paint.

The Stuart B. McKinney Homeless Assistance Amendments Act of 1988 (P.L. 100-628) required HUD to conduct a lead-based paint abatement demonstration and research program for public housing. HUD was to use the information from the demonstration program to prepare a comprehensive and workable plan to eliminate lead-based paint hazards from public housing. HUD was required to complete the plan by December 1989. In addition, the act mandated that the Secretary of HUD require that a random sample of all public housing units constructed before 1978 be tested for lead-based paint before December 1994.³

Objectives, Scope, and Methodology

The Chairman, Subcommittee on Toxic Substances, Research and Development, Senate Committee on Environment and Public Works, requested that we determine whether HUD has complied with provisions of the Lead-Based Paint Poisoning Prevention Act, as amended (42 U.S.C. 4822). This report focuses on HUD's compliance with the public housing provisions of the act, HUD's requirements governing EBL cases identified in

³The Residential Lead-Based Paint Hazard Reduction Act of 1992 (P.L. 102-550) relaxed testing and abatement standards for HUD-assisted programs, but excluded public housing.

public housing, and PHAS' actions in these cases. In an earlier report to the Chairman, we evaluated HUD's compliance with the act's requirements on the sales of federally owned properties.⁴ As agreed with the Chairman's office, our specific objectives in this report were to determine whether

- HUD and PHAS have adequately protected children diagnosed with elevated blood lead levels who live in public housing from further exposure to lead-based paint and
- HUD has complied with lead-based paint legislation and ensured that PHAS complied with its testing, abatement, and notification regulations.

To address these objectives, we reviewed legislation, supporting documentation, and lead-based paint regulations issued by HUD and its Office of Public and Indian Housing. We interviewed HUD officials in Washington, D.C., and in six HUD regional offices—Boston, Chicago, Fort Worth, New York, Philadelphia, and San Francisco. We also interviewed HUD officials at the New Orleans and Richmond, Virginia, field offices about lead-based paint policies and procedures. We reviewed activities related to lead-based paint at six PHAS—Boston, Chicago, New Orleans, New York, Richmond, and San Francisco. These housing authorities are responsible for over 18 percent of all public housing units built before 1978, and children may reside in these units. Except Richmond, these PHAS were selected for review because they

- administered over 1,000 housing units,
- administered units built before 1955,
- were located in areas known to have either a high incidence of EBL children or pending lawsuits involving EBL children,
- were located in areas with publicly funded screening programs for blood lead levels that could be used to identify EBL children living in public housing,
- were located near a HUD regional or field office,
- had received modernization funds in at least one year since fiscal year 1988 for testing or abatement of lead-based paint, and
- were recommended by experts in childhood lead poisoning prevention.

In addition, on the basis of our request, HUD officials selected the Richmond, Virginia, public housing authority as representative of a PHA that they considered well-run and active in lead-based paint testing and abatement.

⁴Lead-Based Paint Poisoning: Children Not Fully Protected When Federal Agencies Sell Homes to Public (GAO/RCED-93-38, Apr. 5, 1993).

To satisfy the first objective, we contacted local health departments in each of the six cities where the PHAS were located and identified 145 EBL children living in public housing. We subsequently selected 50 cases involving EBL children on the basis of test results confirming that the children's dwellings contained lead-based paint. In all 50 cases, the PHAS had been notified that the children's blood lead levels were elevated during the period January 1989 through July 1992. We determined PHAS' compliance with HUD's emergency regulations by reviewing health department records and PHAS' tenant files and maintenance records, and interviewing PHA officials to document actions taken. We assessed the adequacy of HUD's regulations and oversight of PHAS' responses when notified of EBL children by reviewing HUD's regulations and procedures. We also interviewed local health department officials and obtained documentation on local and state lead-based paint ordinances, blood lead screening, and lead-based paint inspection procedures.

To respond to the second objective, we reviewed legislation on the actions HUD was to take and the required times for taking these actions, if any. We documented HUD's progress by interviewing HUD and PHA officials and reviewing agency, PHA, and other documents. We also obtained documentation on HUD's monitoring requirements. At the six PHAS visited, we reviewed the lead-based paint and general monitoring activities HUD performed. We selected and reviewed a random sample of tenants' files from two housing developments at five of the six PHAS to determine whether tenants were notified, as required by HUD's regulations, of potential lead-based paint hazards and test results. For one PHA, we did not review tenants' files for notification of potential lead-based paint hazards because the PHA did not maintain copies of the notification form in the files. We also interviewed PHA and HUD officials and obtained documentation to determine the extent of PHAS' testing and abatement efforts.

We conducted our review from January 1992 through May 1993 in accordance with generally accepted government auditing standards. We requested written comments from the Department of Housing and Urban Development on a draft of this report, but none were provided. We obtained the agency's views during an exit conference and subsequent interviews and have discussed them in chapters 2 and 3.

Children With Elevated Blood Lead Levels Are Not Adequately Protected From Lead-Based Paint Hazards

Children with elevated blood lead levels living in public housing are not adequately protected from further lead poisoning. The six PHAs we reviewed often did not comply with HUD's emergency regulations for timely testing for lead in units where EBL children were living or relied on testing procedures that may not have fully identified lead-based paint hazards. In only one of the 50 cases we reviewed did PHAs comply with HUD's regulations to abate lead-based paint from the children's homes or relocate these children to lead-free housing within 14 days. Many EBL children remained exposed to lead-based paint for more than a year after the PHA had been notified of their diagnosis.

HUD's regulations do not provide for protecting other children living in the same building as an EBL child from known lead-based paint hazards. HUD's regulations do not require testing other units in the EBL child's building or warning other residents when testing indicates the presence of lead-based paint. In addition, until January 1993, HUD provided no oversight to ensure that PHAs were complying with regulations to protect EBL children. At the time of our review, HUD had no overall information on the number of EBL cases in public housing. HUD's lack of oversight, combined with PHAs' noncompliance, leaves children living in public housing at risk of lead poisoning and may also foster lawsuits resulting in costly settlements. Because HUD is the principal funding source for PHAs, the federal government may contribute to any such settlements not covered by insurance.

PHAs Did Not Comply With EBL Testing Requirements

PHAs we reviewed generally did not comply with HUD's testing requirements for lead-based paint when notified of an EBL child. PHAs that performed their own testing did not always do so within the prescribed time. PHAs that relied on local health agencies' testing did not ensure that the tests complied with HUD's more stringent requirements. As a result, these PHAs were not fully abating lead-based paint in EBL children's homes.

PHAs Did Not Always Promptly Test EBL Children's Homes

HUD's emergency regulations require that PHAs test an EBL child's home for lead-based paint within 5 days after being notified that the child has an elevated blood lead level. Two of the six PHAs we reviewed—New York and San Francisco—performed their own tests but generally did not test within 5 days of notification, as required. The New York housing authority did not meet the testing time requirement in 8 of 10 EBL cases we reviewed. Although in most cases the New York housing authority tested the children's homes, testing took from 13 days to almost 2 years after the

authority was notified that a child had an elevated blood lead level. The San Francisco housing authority did not meet the 5-day requirement for 3 of 7 EBL cases we reviewed, but it did perform the tests from 6 days to 14 days after being notified of the diagnosis.

PHAs Relied on Local Testing That Did Not Meet HUD's Requirements

Although PHAs are permitted to do their own testing, HUD encourages them to use local resources, such as local health agencies, when available, to perform the testing. PHAs that relied on local testing resources complied with the 5-day requirement because local health agencies did not notify PHAs of children with elevated blood lead levels until after they had tested the homes for lead-based paint. However, PHAs that rely on local health agencies' testing must comply with the most stringent lead-based paint testing and abatement criteria, whether these are HUD's, the state's, or the locality's.

HUD and state and local governments have different standards for the amount of lead-based paint allowed in residential housing and the extent of testing and abatement required. HUD's standard for lead-based paint is 1.0 milligrams of lead per square centimeter; for PHAs we reviewed, the states' standards ranged from 0.7 to 1.2 milligrams per square centimeter. Similarly, when testing public housing units, HUD's regulations require testing of all painted surfaces; however, for PHAs we reviewed, state and local governments' testing and abatement requirements varied. For example, some state and local governments' requirements were less stringent than HUD's; these state and local governments required testing and abatement only of chipped or peeling painted surfaces.

The four PHAs we reviewed in Boston, Chicago, New Orleans, and Richmond relied on testing by local health agencies. However, officials at these PHAs were not aware that local procedures were less stringent than HUD's. For example, although HUD requires the testing of all intact and defective paint surfaces for lead-based paint, the local testing procedures and practices relied on by the New Orleans housing authority required testing only of chipped and peeling painted surfaces. Therefore, intact surfaces were not tested for lead-based paint. When the housing authority performed abatement in response to the health agency's findings, some lead-based paint may have remained.

The Chicago Housing Authority also relied on less restrictive local testing procedures. According to a Chicago health agency official, the agency only reported test results when the tested surfaces had peeling paint or holes.

In one case, a wall tested in an EBL child's home had a lead content of 2.6 milligrams per square centimeter, over two and one-half times the HUD standard. However, because the paint was intact, the health agency did not report to the housing authority that the wall contained lead-based paint. As a result, the housing authority, unaware of the lead-based paint on the wall, could not fully abate the lead-based paint in the home.

PHAs Did Not Meet Abatement or Relocation Requirements for EBL Children

In the majority of cases we reviewed in which tests found lead-based paint in an EBL child's home, PHAs did not take action to abate the lead-based paint or relocate the child and its family to lead-free housing. HUD's emergency regulations require that within 14 days after lead-based paint is found in an EBL child's home, either the lead-based paint should be abated or the family should be relocated to lead-free housing. However, at the time of our review, no actions—abatement or relocation—had been taken in 28 of the 50 EBL cases at the six PHAs we reviewed. No action was taken for periods ranging from 2 weeks to almost 2-1/2 years after PHAs were notified of the presence of lead-based paint.

For 21 of the 50 cases we reviewed, actions were taken, but not within 14 days as required. For these cases, the time taken to abate the paint or relocate families ranged from 4 weeks to over 2 years after PHAs were notified that lead-based paint had been found during testing. Only one EBL case was handled according to HUD's regulations. The San Francisco PHA relocated an EBL child's family to lead-free housing within the required time.

PHA officials provided a variety of reasons for not meeting the abatement deadlines. For example, a Boston PHA official stated that it is impossible to meet the 14-day abatement deadline because awarding a contract for abatement can take over 2 months. Chicago PHA officials attributed noncompliance to their lack of oversight of housing development managers, who were responsible for abatement and relocation. However, these officials have established new procedures for EBL cases and expect that these changes will improve compliance. Officials at the six PHAs we reviewed indicated that funding was available to perform abatement in EBL children's homes.

PHAs Seldom Used Relocation to Comply With HUD Requirements

PHAs seldom used relocation when lead-based paint could not be abated in an EBL child's home within 14 days. PHAs relocated families with EBL children to lead-free housing in only 6 of the 50 cases we reviewed. PHA

officials gave various reasons for not relocating EBL children's families. For example, San Francisco PHA officials stated that due to low vacancy rates and long waiting lists for public housing, there were no lead-free units available to temporarily house EBL children's families. In contrast, Chicago PHA officials stated that although they had vacant units, these are generally not habitable. The PHA would have to remodel and abate lead-based paint in vacant units before the families could be relocated.

Officials from the Boston, Chicago, and San Francisco PHAs said that they plan to keep some lead-free units available to temporarily house EBL children's families. In addition, Richmond PHA officials said they have temporarily housed EBL children's families in local hotels while the lead-based paint in their homes was being abated. However, this approach was not used in the cases we reviewed.

Regulatory Requirements for EBL Children Are Narrowly Focused

HUD's current emergency regulations are narrowly focused to protect EBL children from further exposure to lead-based paint, but do not require that other tenants living in the same building be warned of potential hazards. HUD's regulations do not require PHAs to test other apartments in a building or notify other building residents when testing discloses lead-based paint in an EBL child's home. As a result, in five of the six PHAs we reviewed, tenants with children were not alerted about the existence of lead-based paint hazards in their building. The Boston Housing Authority notified other tenants because state law requires that notices be posted at all building entrances when lead-based paint is found. In addition, Massachusetts law requires that tenants be notified of when abatement will begin.

HUD's regulations also do not prohibit PHAs from renting public housing units that are known to contain lead-based paint to families with children. For example, the Chicago Housing Authority placed a family with two children under seven years of age into a home where lead-based paint had been found but not abated. A family with an EBL child had previously occupied the apartment.

According to a HUD official, homes formerly occupied by families with EBL children and known to contain lead-based paint may be re-rented to other families with children because it is not certain that the homes were the source of the EBL children's lead poisoning. The official said HUD has recommended procedures for PHAs to follow to minimize the risks to children living in homes where lead-based paint has been found but not

abated, such as repairing and repainting cracked and peeling paint. Furthermore, the official said that prohibiting PHAS from allowing families to move into these unabated homes would create unnecessary vacancies.

HUD Provided No Oversight of PHAs' Compliance With Emergency Regulations

Until January 1993, HUD had no procedures or systems in place to ensure that PHAS complied with its regulations describing emergency procedures (emergency regulations) for children with elevated blood lead levels. HUD did not require that PHAS provide its field offices with information on EBL cases. Furthermore, HUD officials did not know the overall number of EBL cases or the magnitude of the EBL problem in public housing. HUD field and headquarters officials we spoke with were unaware that PHAS were not complying with requirements concerning EBL children.¹ As a result, PHAS were not cited for noncompliance and EBL children continued to be exposed to lead-based paint hazards in their homes.

In January 1993, PHAS were required to report to HUD's field offices the extent to which they had policies and procedures in effect to respond when notified of an EBL child living in public housing. PHAS were also required to report, on a one-time basis, the number of EBL children living in public housing from June 1986 through June 1992 and to report these numbers annually thereafter. HUD field offices are to use these reports to verify compliance during on-site reviews. However, there is no provision for field offices to review PHAS' disposition of individual EBL cases.

PHAS' noncompliance and HUD's lack of oversight could be costly to the federal government because EBL cases sometimes result in lawsuits. Since the majority of PHAS' funding comes from HUD,² the federal government may ultimately share in the costs of these lawsuits and any resulting settlements that are not covered by insurance. Some settlements have been extensive, and the federal government's future costs may be significant.

For example, in 1991 the New Orleans housing authority settled over 60 lawsuits arising from lead poisoning that cost the PHA over \$1 million in claims and attorneys' fees. The PHA recently requested and received an additional \$340,000 from HUD to pay these claims. A New Orleans housing authority official said that because of the number of settlements, the PHA no longer has commercial liability insurance and is now self-insured. As of

¹For the PHAs we visited, local health agencies monitored compliance with state and local lead-based paint laws but not with HUD's regulations.

²This funding includes federal operating subsidies and funds for modernization.

August 1992, the New Orleans PHA had over 20 pending lead poisoning lawsuits.

HUD's future costs from other lawsuits involving EBL children may also be significant. Officials in one HUD regional office we reviewed reported a lawsuit against a PHA in its region seeking at least \$100,000 in damages for lead poisoning of minors. However, potential damages could be significantly higher because other EBL children may be added as parties to this lawsuit. In addition, HUD officials in another regional office estimated that the potential liability costs from a class action lawsuit against a PHA in its jurisdiction (not one of the six we reviewed) could reach \$30 million. The federal government's potential costs could thus be significant.

Conclusions

HUD and PHAS could improve their protection of children with elevated blood lead levels who live in public housing. HUD's lack of oversight of PHAS has fostered an environment of noncompliance with every aspect of HUD's emergency regulations for EBL children: testing, abatement, and relocation. For example, PHAS that relied on local health agencies for testing did not ensure that the tests for lead-based paint met HUD's requirements, which can be more stringent than those of the states or localities. Resolving this problem and others related to HUD's regulations depends on consistent monitoring of PHAS' compliance. Although HUD has taken action to ensure that PHAS have procedures in place to respond when notified of an EBL child, this will not ensure that PHAS follow these procedures. HUD's field offices need to actively monitor PHAS' compliance with emergency regulations for individual EBL cases.

Furthermore, HUD's current regulations do not protect all children living in public housing from lead-based paint hazards. Regulations could be modified to ensure that other tenants with children are protected by amending notification, testing, and abatement procedures to reduce the chances of exposing children to known hazards. For example, children may be unnecessarily exposed to risk if lead-based paint found in units previously occupied by EBL children is not abated before the units are re-rented.

HUD's lack of oversight and PHAS' noncompliance with emergency regulations not only place children living in public housing in jeopardy but may also result in more lawsuits against PHAS. Because PHAS' funds come largely from HUD, the potential costs to the federal government and ultimately to the taxpayers from these lawsuits could be significant.

Recommendations

To protect children with elevated blood lead levels living in public housing from further lead poisoning, we recommend that the Secretary of HUD revise the regulations to require that PHAS promptly report EBL cases to HUD. In addition we recommend that the Secretary take action to ensure that PHAS comply with existing EBL regulations. Specifically, the Secretary should require that (1) PHAS that rely on local health agencies' lead-based paint tests determine if the tests meet HUD's requirements and, if not, ensure that these local health agencies either test according to HUD's procedures or notify PHAS immediately when an EBL child is identified, so that PHAS can promptly test the child's dwelling and (2) HUD field offices monitor and ensure PHAS' compliance with existing regulations for each reported EBL case.

Furthermore, to better protect all children living in public housing from lead-based paint hazards, we recommend that the Secretary of HUD revise the regulations to ensure that PHAS (1) notify other tenants living in an EBL child's building that a dwelling in their building contains lead-based paint, (2) test all other dwellings in an EBL child's building if the child's dwelling is found to contain lead-based paint, and (3) do not assign households with children to homes previously occupied by families with EBL children until any lead-based paint found has been abated.

Agency Comments

HUD officials from the Office of Lead-Based Paint Abatement and Poisoning Prevention and the Office of Public and Indian Housing agreed that PHAS should be aware of local health agencies' procedures for testing for lead-based paint. In a letter written subsequent to our review, HUD officials advised the CDC that PHAS will receive additional guidance to improve coordination between local health and housing agencies.

Officials from the Office of Public and Indian Housing disagreed with our position that PHAS should be prohibited from assigning households with children to homes that were previously occupied by families with EBL children until any lead-based paint found has been abated. They were concerned with the level of vacancies that could occur. Specifically, the Director of Occupancy said that a restriction on renting these units could create unnecessary vacancies. In addition, he said that HUD has management procedures (such as repairing and repainting cracked and peeling paint) for PHAS to use to minimize the risks associated with lead-based paint in homes where children are present. We believe the risk of exposing children to hazards that may have caused or contributed to the poisoning of a previous tenant, combined with the financial risk to

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PHAS of potential lead poisoning lawsuits, is too great to allow these units to be rented to households with children. Also, there are alternatives to keeping unabated units vacant. For example, HUD could allow PHAS to rent these homes to households without children.

HUD and PHAs Have Not Complied With All Lead-Based Paint Requirements

HUD has made limited progress toward eliminating lead-based paint hazards from public housing. HUD has not determined the extent of lead-based paint or the cost of abating it in public housing even though it has been responsible for eliminating such hazards for more than 20 years. Specifically, HUD has yet to complete a legislatively mandated demonstration and research program to identify the nature and extent of lead-based paint hazards that was due by December 1989. Furthermore, HUD has placed public housing tenants in jeopardy because it has not provided them with updated information on lead-based paint hazards as required by law more than 5 years ago.

PHAs have begun testing housing units for lead-based paint to meet the required 1994 testing completion date, but at the six PHAs we reviewed, relatively little abatement has occurred. Furthermore, tenants have not been notified of the presence of lead-based paint in their homes, as required by HUD's regulations. We also found that HUD did not adequately oversee the six PHAs' compliance with its lead-based paint testing, abatement, and notification requirements. As a result, HUD was not aware of PHAs' noncompliance.

HUD's Progress in Accomplishing Legislative Requirements Has Been Limited

Since 1973, HUD has been responsible for eliminating lead-based paint hazards from public housing. The 1988 amendments to the Lead-Based Paint Poisoning Prevention Act defined hazard to include intact painted surfaces, as well as the nonintact paint (defective paint) that had been previously specified as a hazard by HUD's regulations. These amendments also set out specific requirements for HUD to determine the extent of lead-based paint hazards and costs of abatement. However, HUD has not completed the demonstration program or the comprehensive plan for testing and abatement the act called for to meet these requirements. HUD's previous studies on the extent to which lead-based paint is present in public housing are either inaccurate or outdated. Furthermore, HUD has not met another legislative requirement that it issue a revised brochure for PHAs to use in warning tenants of potential lead-based paint hazards.

HUD Has Not Determined the Extent of Lead-Based Paint in Public Housing or the Costs of Abatement

HUD has had responsibility for eliminating lead-based paint hazards in public housing since 1973. In 1980 we reported that HUD's research efforts had focused on developing abatement techniques, but the extent of lead-based paint problems in HUD-assisted housing, including public

housing, was not well known.¹ Congressional concern about the need to eliminate lead-based paint hazards prompted legislation that, in 1988, established specific requirements for HUD's lead-based paint abatement program.

HUD has yet to comply with 1988 legislative requirements that it determine the extent of lead-based paint hazards in public housing and the costs of abatement. HUD has not complied with provisions of the McKinney Amendments (P.L. 100-628) requiring that it complete a lead-based paint demonstration and research program for public housing. This program was to identify the extent of the lead-based paint problem in public housing, determine cost-effective inspection and abatement methods, and provide estimated abatement costs. The demonstration was also to provide the basis for a required comprehensive and workable plan for abating lead-based paint in public housing. HUD was required to complete the demonstration program and issue the plan by December 1989.

As of March 1993, neither the demonstration program nor the plan had been accomplished. According to HUD officials, several factors caused the demonstration program to be delayed. PHA officials were reluctant to participate in the program because HUD expected participating PHAs to use funds already approved for modernization to pay for the demonstration. In addition, HUD officials said it was difficult to combine the demonstration program with the participating PHAs' regular operations.² Also, PHAs initially had difficulty obtaining liability insurance to cover themselves and their contractors during abatement. As a result, completion of the plan was delayed because HUD did not have the data it needed from the demonstration program.

Previous HUD surveys on the extent of lead-based paint in public housing provided information of limited usefulness. A 1986 survey was based on a limited sample, not appropriate for projection to the universe of public housing. In addition, this survey and a subsequent survey conducted in 1990 lack the information needed to analyze lead hazards in housing. The surveys provided little information on the number and dimensions of the surfaces containing lead-based paint within the housing units. A HUD official said that a more recent survey estimated that 90 percent of pre-1980 housing units contained lead-based paint. However, the official

¹HUD Not Fulfilling Responsibility to Eliminate Lead-Based Paint Hazard in Federal Housing (GAO/CEID-81-31, Dec. 16, 1980).

²PHAs in three cities—Albany, New York; Cambridge, Massachusetts; and Omaha, Nebraska—participated in the program.

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said that this estimate was based on a small sample with a large margin of error. Nevertheless, this survey will be used for the required comprehensive plan.

HUD's estimate of the costs of abating lead-based paint in public housing is outdated because the information on how much paint must be abated is not based on current standards. At the time of our review, HUD's most current cost estimate for abating lead-based paint in public housing nationwide was \$446 million.³ This estimate was based on abating only defective (nonintact) paint and surfaces that children can chew rather than both defective and intact paint, as currently required by law. As a result, the 1986 estimate of abatement costs does not reflect the additional costs resulting from the stricter 1988 requirements. These requirements were retained by the Residential Lead-Based Paint Hazard Reduction Act of 1992 (P.L. 102-550).

While there is uncertainty about the extent of lead-based paint in public housing and the total cost of testing and abatement, modernization funds have been made available to PHAs specifically for these activities in the past several years. For example, for fiscal year 1989, HUD provided approximately \$1.6 billion for modernization of public and Indian housing. Of this amount, \$37 million was approved for testing for and abatement of lead-based paint. For fiscal year 1990, these amounts were approximately \$2 billion and \$46.5 million and for 1991, \$2.5 billion and \$102.2 million, respectively.

HUD's Compliance With
Other Legislative
Requirements Has Been
Mixed

HUD has complied with some legislative requirements concerning regulations, guidelines, and funding. HUD established regulations to implement the Lead-Based Paint Poisoning Prevention Act and updated these regulations in response to the 1988 legislation. Subsequently, the 1989 HUD Appropriations Act (P.L. 100-404, enacted August 19, 1988) required HUD to develop comprehensive testing and abatement guidelines for PHAs. These guidelines were to cover lead-based paint testing procedures, abatement techniques, and clean-up methods. HUD complied with the act's requirements only after the Congress mandated that it publish the guidelines by April 1, 1990. HUD recommends but does not require that PHAs follow the guidelines. In June 1992, HUD complied with the requirements of the 1992 HUD Appropriations Act (P.L. 102-139) by making funds available for PHAs to assess the risks of lead-based paint in

³The Cost of Lead-Based Paint Abatement in Public Housing, U.S. Department of Housing and Urban Development, Office of Policy Development and Research (Washington, D.C.: July 1986).

their public housing developments. Also, HUD issued procedures for PHAs to follow for these assessments and for managing the hazards pending permanent abatement. HUD does not require that PHAs conduct risk assessments; however, it strongly encourages them to do so.

As of April 1993, after 5 years, HUD had not complied with the 1987 Housing and Community Development Act (P.L. 100-242, enacted Feb. 1988) requirement that it update the brochure PHAs use to warn tenants of the potential hazards of lead-based paint. HUD officials said that delays occurred because they wanted a single brochure that could be used by various HUD housing programs rather than an individual brochure for each program, such as public housing. As a result of these delays, PHAs were continuing to provide tenants with a brochure developed in 1987. However, this brochure advises tenants to follow outdated and possibly harmful procedures. For example, it instructs tenants to remove loose pieces of paint from walls, woodwork, window wells, and ceilings. These procedures could generate lead-based paint dust, thereby increasing the hazard to children. Furthermore, the brochure does not inform tenants of the risks lead-based paint poses to women of childbearing age and pregnant women. In April 1993, HUD officials said that although the new brochure had been developed, it had yet to be printed because distribution lists must be prepared.⁴

PHAs Have Made Limited Progress in Meeting Lead-Based Paint Requirements

The six PHAs we reviewed have made limited progress in complying with HUD's testing, abatement, and notification regulations for lead-based paint. Three of the six PHAs have begun testing for lead-based paint to meet the legislatively established December 1994 testing deadline but have abated the paint in only a small number of units. Furthermore, there is no deadline for completing abatement. None of the six PHAs notified tenants when test results revealed lead-based paint in their homes. However, most of them provided tenants with the outdated brochure warning them of the potential hazards of lead-based paint.

Most PHAs May Meet Testing Deadline, but Completion Date for Abatement Is Uncertain

Following provisions in the 1988 amendments to the Lead-Based Paint Poisoning Prevention Act, HUD issued regulations requiring PHAs to complete lead-based paint testing by December 1994. Officials at five of the six PHAs we reviewed plan to meet this testing deadline. However, the Boston PHA does not plan to meet the 1994 deadline because state law

⁴The Residential Lead-Based Paint Hazard Reduction Act of 1992 requires the Environmental Protection Agency to develop a new, more informative pamphlet in consultation with HUD and the Department of Health and Human Services by October 28, 1994.

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requires abatement within 120 days after testing discloses lead-based paint. Boston PHA officials said they did not have the resources to comply with the state law. Therefore, PHA officials suspended efforts to contract for the testing after completing less than 3 percent of their pre-1978 units.

Three of the six PHAs that we reviewed had started testing for lead-based paint to meet the 1994 requirement. HUD requires PHAs to report quarterly on their testing progress. At the time of our review, the Richmond PHA had tested nearly all of its units and the San Francisco PHA had tested about 25 percent of its units. Chicago PHA officials reported testing about 8 percent.

At the time of our review, the New York PHA had not started testing to comply with the 1994 deadline. However, New York PHA officials were preparing requests for proposals to hire contractors for lead-based paint testing. Because the New Orleans PHA had tested its units before the 1988 legislative amendments were in effect, it tested only defective paint and not intact painted surfaces for lead-based paint, as required by the 1988 amendments. The New Orleans PHA requested that HUD accept these test results to fulfill the 1994 testing completion requirement.

While HUD's regulations require that lead-based paint testing be completed by December 1994, there is no deadline for completing abatement. HUD's regulations require PHAs to abate lead-based paint when testing discloses lead and to abate lead-based paint in conjunction with modernization projects. But there is no time requirement for completing this abatement. Although HUD officials said they advise PHAs to consider the incidence of EBL children and the presence of lead-based paint when scheduling modernization projects, they recommend that PHAs select modernization projects on the basis of the overall physical condition of buildings. According to HUD officials, PHAs' primary mission is to provide decent, safe, and sanitary housing for low-income households. Although lead-based paint abatement is given high consideration, they said PHAs have flexibility in deciding when to perform abatement.

Four of the PHAs we reviewed had abated lead-based paint in some units. The Richmond, Boston, San Francisco, and Chicago PHAs abated lead-based paint in 36 percent, 17 percent, 3 percent, and 1 percent of their units, respectively. In these PHAs, abatement was undertaken in conjunction with modernization programs. Since the New Orleans PHA has not tested in accordance with the 1988 amendments and the New York PHA has not begun testing, neither one has begun abatement. Only one PHA we

reviewed could estimate when abatement would be completed: Richmond officials said they expect abatement of lead-based paint to be completed within the next 2 years.

PHAs Did Not Always Comply With Lead-Based Paint Notification Requirements

None of the PHAs we reviewed notified tenants when lead-based paint was found in their homes as required by HUD's regulations. Some PHA officials explained that they were not aware of HUD's requirement. Other PHA officials said they did not want to cause tenants undue alarm by providing test results.

In addition to notifying tenants of the presence of lead-based paint, PHAs are required to notify public housing tenants of the potential hazards. Specifically, HUD requires PHAs to provide tenants with a HUD-approved brochure warning tenants of potential hazards of lead-based paint and advising them of PHAs' responsibilities for eliminating those hazards. HUD requires that PHAs retain signed copies of the brochure to document that tenants have received it.

Two of the six PHAs, Richmond and New York, did not fully comply with HUD's requirement to notify tenants of the potential hazards of lead-based paint. At the Richmond PHA, only 45 percent of the tenants at one housing development were notified because the manager was not aware that all tenants were to receive the brochure. Richmond PHA officials said they would correct the problem at this development by providing brochures to the tenants as their leases are renewed. At another Richmond development, 100 percent of the tenants received the brochure.

In contrast to Richmond, in New York tenants were notified about potential lead-based paint hazards through a mass mailing, according to PHA officials there. However, the PHA did not have signed copies indicating that tenants had received the brochures. Furthermore, this PHA developed its own notice, which minimized the PHA's responsibility for eliminating lead-based paint. After our review, officials from HUD's New York region agreed that the New York PHA's notice was inadequate. Subsequently, the regional officials cautioned the PHA that use of any notice other than HUD's brochure was unacceptable.

PHA and HUD officials said the brochure was important to tenants because it made them aware of potential lead-based paint hazards in their homes. A HUD official said most prospective public housing tenants cannot afford to wait for a lead-free dwelling, and the officials did not know of any case in

which a prospective tenant decided not to live in public housing after being advised of the potential hazards of lead-based paint.

HUD's Oversight of PHAs' Compliance With Lead-Based Paint Requirements Is Inadequate

HUD's oversight of PHAs' compliance with lead-based paint testing, abatement, and notification requirements is inadequate. HUD generally provided no oversight of PHAs' lead-based paint testing or abatement activities. Nor did HUD ensure that the PHAs notified tenants of test results when lead-based paint was found in their homes.

HUD Provided Limited Oversight of PHAs' Testing and Abatement

HUD prescribed, but did not follow, procedures to ensure that PHAs complied with lead-based paint testing or abatement regulations. HUD's procedures require that PHAs, on completion of testing or abatement in conjunction with modernization projects, certify in writing that the work was performed in accordance with federal, state, or local requirements and submit the certifications to HUD's field offices. However, only one of the HUD field offices we reviewed, Richmond, had received the certifications from its PHAs.

Although officials from the other HUD field offices acknowledged that they did not receive PHAs' certifications, some of them stated that they reviewed and approved specifications contained in modernization contracts. When applicable, these contracts contained specifications for testing and abating lead-based paint. They said their review and approval of these specifications provided some assurance that testing and abatement were performed during modernization in accordance with applicable requirements. However, since March 1992 HUD no longer requires PHAs that manage more than 500 units to submit modernization contracts for approval. HUD's Comprehensive Grant Program eliminated the requirement for such approvals to allow PHAs greater flexibility in carrying out their modernization projects.⁵

⁵The Comprehensive Grant Program (CGP), which allocates modernization funds, was established by HUD in 1992 for PHAs that own or operate 500 or more public housing units. Beginning in fiscal year 1993, the statutory threshold for participation in the CGP was reduced from 500 or more units to 250 or more units.

HUD's Oversight of PHAs' Compliance With Notification Requirements Was Inconsistent

None of the six HUD field offices provided oversight to ensure that the PHAs we reviewed notified tenants of test results when lead-based paint was found in their homes. However, HUD's procedures do not require field offices to provide such oversight. As a result, the field offices were not aware that PHAs were not complying with this notification requirement.

Five of the six HUD field offices we visited conducted audits of tenants' files to ensure compliance with HUD's regulations. These audits included reviewing tenants' files to ensure that tenants received a copy of HUD's brochure warning them of potential lead-based paint hazards. However, because of a lack of staff, HUD field offices may discontinue these audits. Therefore, there may be no mechanism to determine PHAs' compliance with HUD's requirement to notify tenants of the potential hazards of lead-based paint.

Conclusions

Twenty years have passed since HUD was mandated to eliminate lead-based paint hazards from public housing. HUD has yet to determine the extent of lead-based paint in public housing or the cost of abating it. HUD will not have comprehensive information on the extent of the problem until after PHAs have completed the legislatively required testing in December 1994. Although the six PHAs we reviewed have made progress toward meeting this testing deadline, only limited progress has been made in abating lead-based paint. Furthermore, without an abatement deadline, it is uncertain when the goal of eliminating lead-based paint from public housing will be accomplished.

Almost 5 years have passed since legislation was enacted requiring HUD to conduct a research and demonstration program and issue a comprehensive and workable plan for the abatement of lead-based paint in public housing. However, HUD has yet to comply with these requirements. The factors HUD has cited for the delay in completing the legislatively required demonstration program and the comprehensive and workable plan are understandable. But this plan needs to be completed if HUD is to move towards lead-based paint abatement in public housing. Five years have also passed since HUD was required to revise the tenant notification brochure. This delay is excessive, particularly since the brochure PHAs are using omits information on severe health risks for certain populations and suggests potentially harmful procedures for removing lead-based paint.

Inadequate oversight by HUD of the six PHAs' testing, abatement, and notification activities reduces its ability to ensure that PHAs are fully

abating lead-based paint from public housing in accordance with applicable requirements. Also, because modernization contracts need not always be submitted for approval, HUD can no longer ensure that PHAs are completing lead-based paint testing and abatement during modernization. Thus, PHAs may waste funds if abatement must subsequently be performed. Inadequate oversight also prevents HUD from ensuring that PHAs notify tenants when lead-based paint is found in their homes. Without such notification, tenants may not take precautions to minimize their children's exposure to lead-based paint.

Recommendations

To accomplish the goal of eliminating lead-based paint from public housing and to protect public housing tenants from the hazards of lead-based paint, we recommend that the Secretary of HUD (1) expedite efforts to issue the comprehensive and workable plan to abate lead-based paint hazards in public housing and the revised tenant notification brochure, (2) direct field offices to collect testing and abatement certifications from PHAs as required, (3) reinstate the requirement that HUD field offices approve major modernization projects to ensure that PHAs address lead-based paint hazards during modernization, (4) develop procedures to ensure that PHAs notify tenants of lead-based paint test results, and (5) establish a new mechanism for monitoring PHAs' compliance with the requirement to notify tenants of potential lead-based paint hazards with a brochure, if audits of tenants' files are discontinued.

Matter for Congressional Consideration

In 1995, after PHAs have completed testing their units for lead-based paint hazards and HUD has published its comprehensive and workable plan, the Congress may wish to consider establishing a deadline for abating these hazards if it finds that PHAs are making insufficient progress. Such a deadline could be established in consultation with HUD and PHA officials and experts in lead-based paint abatement.

Agency Comments

The Director of the Office of Lead-Based Paint Abatement and Poisoning Prevention disagreed that a deadline needs to be established for abatement in public housing. He said that PHAs' primary mission is to provide decent, safe, and sanitary housing for low-income households. He said that although HUD gives lead-based paint abatement high consideration, HUD has determined that decisions about which buildings should be modernized are better left under local control.

Chapter 3
HUD and PHAs Have Not Complied With All
Lead-Based Paint Requirements

We believe that the Congress should consider establishing a deadline for lead-based paint abatement in public housing if PHAs are not making sufficient progress because abating lead-based paint hazards from public housing would help PHAs achieve their goal of providing safe housing to low-income households. If Congress adopted a deadline for abating lead-paint hazards, we believe that scheduling of modernization projects would remain under local control. However, a deadline would raise the priority given to modernizing buildings that need abatement.

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Lead-Based Paint Poisoning: Children Not Fully Protected When Federal Agencies Sell Homes to Public (GAO/RCED-93-38, Apr. 5, 1993).

Toxic Substances: Federal Programs Do Not Fully Address Some Lead Exposure Issues (GAO/RCED-92-186, May 15, 1992).

Housing and Community Development Products, 1990-91 (GAO/RCED-92-111, Mar. 1992).

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