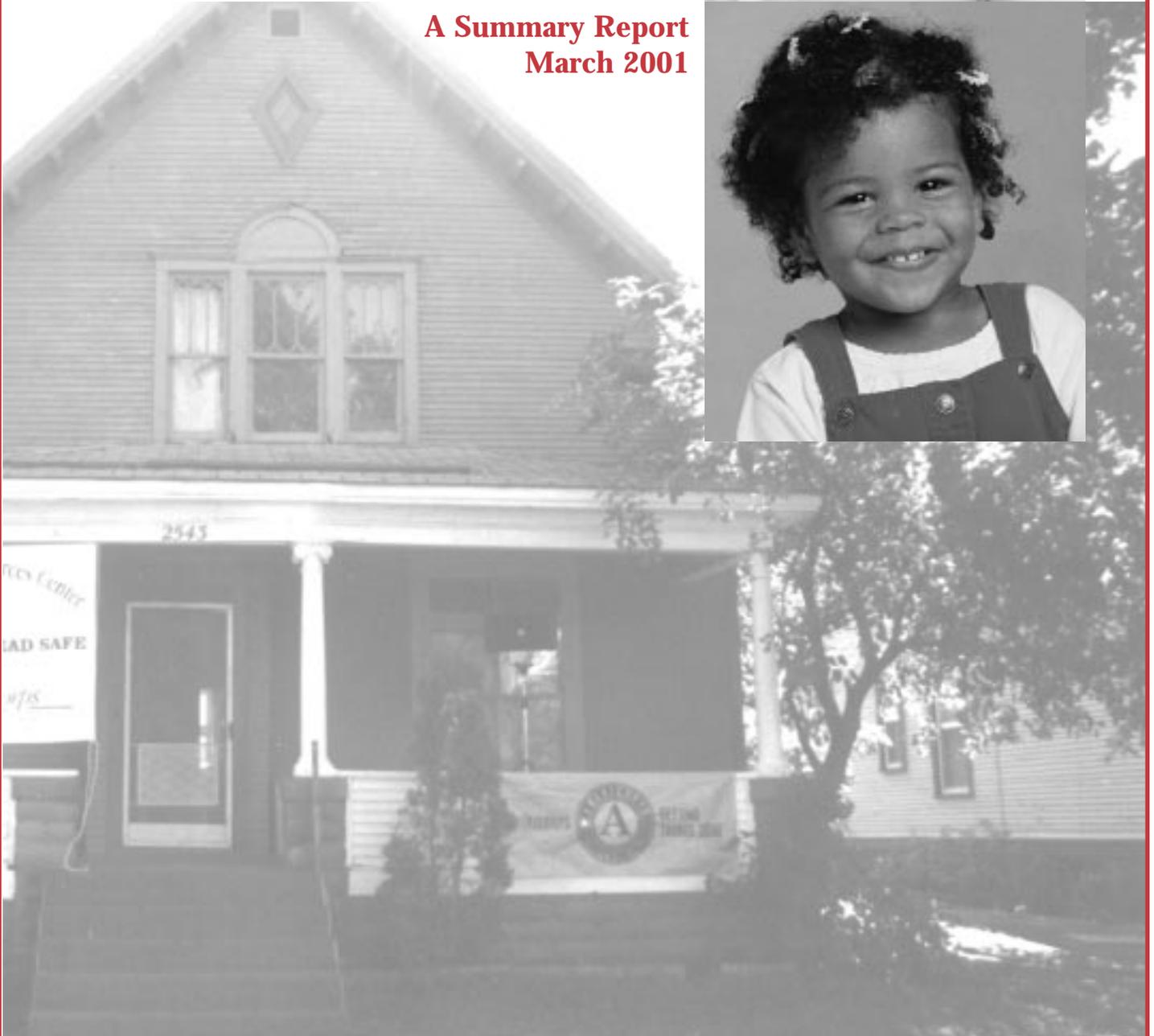


THE MINNEAPOLIS LEAD HAZARD REDUCTION NETWORK:

A Summary Report
March 2001





THE LEAD HAZARD REDUCTION NETWORK

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CHILDHOOD LEAD POISONING IS ENTIRELY PREVENTABLE.

However, each year nearly 1,500 Minneapolis children are found to have blood lead levels elevated enough to disrupt their behavior and impair their ability to learn.

Minneapolis aims to eliminate lead hazards in the city by the year 2010. Over the past two decades, major progress on lead poisoning has been made through a combination of prevention and intervention programs, suggesting that a total elimination of lead hazards is indeed achievable.

THE FACTS

1) The Centers for Disease Control has named lead poisoning the number one environmental health threat for children.

2) Ninety percent (90%) of the 177,000 housing units in Minneapolis are likely to contain some level of lead-based paint. Due to their deteriorated condition, approximately 40,000 of these units pose immediate risk to children and women in their childbearing years.

3) Lead poisoning crosses all geographic and socio-economic boundaries, but inner city neighborhoods with the highest incidence of poverty and deteriorating housing stock have the highest incidence of lead poisoning.

4) Years of comprehensive soil testing show that all soil in Minneapolis exceeds Minnesota standards for safe levels of lead. This is due primarily to leaded gasoline emissions and deteriorated exterior lead-based paint.

5) Research shows that lead poisoning in children can result in lowered IQ, decreased hand-eye coordination, shortened attention span, aggressive behavior and



learning disabilities. However, testing is vital because children often do not show symptoms in the early stages.

6) Of the approximately 10,000 children tested for lead each year in Minneapolis, 300 are diagnosed with high lead levels in their blood, another 1,200 with elevated lead levels sufficient for concern, as defined by the Centers for Disease Control. However, the Minnesota Department of Health estimates that only 25% of Minneapolis children are tested for lead poisoning, despite the fact that leading health and physician organizations recommend testing for all children in the city.

7) The monetary benefits of eliminating lead hazards are great: avoided medical care, avoided special education, increased lifetime earnings due to increased cognition, and improved health all lead to significant savings.

LEAD HAZARD REDUCTION NETWORK

In fall 1999, an array of agencies, organizations and individuals committed to ending childhood lead poisoning in Minneapolis began a process to develop a

comprehensive lead plan for the City. Although lead hazards affect many Minneapolis residents and have been a major focus for numerous government and community-based organizations, at that time there was a lack of agreement on many aspects of lead reduction and childhood lead poisoning prevention.

Lynn Bolnick, an independent, community-based researcher, was hired by the City of Minneapolis to facilitate the development of the comprehensive lead plan. Her job was to ensure that all organizations and individuals working with children's health, affordable housing and related issues were equally represented in the process. Bolnick convened a group of 180 individuals representing 61 agencies and organizations, which became known as the "Lead Reduction Network." This Network set about creating an inclusive plan that represented a realistic approach to

achieving the goal of lead safety by 2010. Over the course of a year, the Lead Hazard Reduction Network developed such a plan through a three-phase process. This Summary Report provides a brief background on the process, players and key recommendations for a comprehensive lead plan, as gleaned from Bolnick's research with the Network. This report also provides a brief look at how the Network's Steering Committee has responded and will respond to Bolnick's findings and recommendations.

PHASE I: SURVEY

In early 2000, surveys were sent to those working with children most at risk for lead poisoning, particularly those working in the areas of affordable housing, environmental concerns, and child care. They were asked what they were doing to reduce exposure to lead hazards, what they felt was and was not being done in this area, and what should be done to prevent lead

poisoning. A separate survey was sent to licensed contractors and owners of rental property. The results provided guidance into the issues requiring further discussion.

PHASE II: INDIVIDUAL INTERVIEWS

A series of in-depth interviews were conducted with a sampling of individuals from the Lead Hazard Reduction Network, including governmental agencies, community organizations, recipients of services, contractors and property owners. The interviews provided the basis for a preliminary report intended to "put everyone on the same page" and to form the foundation for a series of dialogues aimed at developing the comprehensive plan.

PHASE III: DIALOGUES

A series of four dialogues was conducted, with each identifying and further refining the elements of a comprehensive lead plan on which there was community agreement. The resulting plan: identifies realistic approaches to achieving lead safety by 2010; discusses appropriate roles for the City of Minneapolis as well as the various partners in government and the community; assigns responsibilities for each objective; begins a calendar for activity.



KEY RECOMMENDATIONS LEAD REDUCTION NETWORK

ADOPTION OF A PREVENTION MODEL

The plan envisions a new policy approach focused on prevention. While reactive measures will always command immediate attention, the plan aims to reach at-risk families prior to the occurrence of lead poisoning.

EFFECTIVENESS THROUGH COORDINATION AND COOPERATION

The continuation and expansion of the Lead Hazard Reduction Network is vital to the overall goal. There are many entities working on children's health and affordable housing; however, a lack of coordination between these entities diffuses their effectiveness in addressing childhood lead poisoning. The City of Minneapolis should play a convening and clearinghouse role for the Network but not direct the work of the Network.

POLICY & RESOURCES

Securing adequate funding for lead hazard reduction is essential. Because funding falls far short of that necessary to reach the overall goal and no one entity is likely to fill the funding gaps, key players (City of Minneapolis, MCDA, NRP,

MPHA, Hennepin County, State of Minnesota, federal government, foundations, private industry, and property owners) must assume a financial obligation to this effort.

City departments and agencies should actively promote and adequately fund lead hazard reduction efforts.

LEAD SAFE HOUSING: PROACTIVE & REACTIVE

The Network must enhance dissemination of information to families about the least intrusive, most cost-effective options for ridding housing of lead hazards. Particular effort must be made to reach those for whom language, culture and disabilities create additional barriers to lead safety.

Rental property owners must become part of the Network, and incentives must be offered to help them improve lead safety for renters. The Network must in turn support efforts on behalf of tenants to remediate hazards.

ADHERENCE TO MEDICAL SCREENING LAWS & GUIDELINES/IMPROVED SURVEILLANCE

Medical providers, health plans and parents must work much more cooperatively to adhere to



medical screening guidelines and Medicaid regulations. Government officials must take action to raise screening rates so that 100% of children at risk are tested. Currently, screening rates fall far short of Medicaid requirements and state guidelines.

A RESPONSE TO THE RECOMMENDATIONS

The Lead Hazard Reduction Network Steering Committee and the City of Minneapolis currently are responding to the recommendations in the following ways:

City of Minneapolis officials from the Department of Health and Family Support, Environmental Services, MCDA and MPHA have formed the “Long-Term Lead Funding Working Group” to identify sources of funding for the City of Minneapolis’ lead reduction efforts and to explore long-term funding options for City entities working in the lead arena.

The city of Minneapolis has secured a \$3 million, two-year HUD grant to address the new federal lead regulations in housing. The funds are being used to increase the number of risk assessors and certified contractors and construction workers who are working to eliminate lead in federally-assisted housing. The City will also use the grant to continue interventions with children with elevated lead levels and prevention in in-home child care settings.

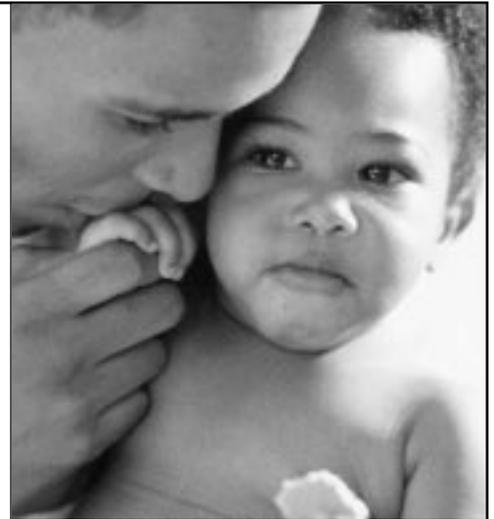
In December 2000, the City of Minneapolis submitted a

Transition Implementation Plan to the Department of Housing and Urban Development (HUD) in order to continue its active reduction of lead-based paint health hazards in its housing stock and to comply with federal regulations. In preparation for compliance, the City discovered a lack of compliance capacity in several areas of the local housing development trades. The plan provided an assessment of current needs and estimated additional capacity required, offered strategies for increasing compliance capacity, and prioritized how assisted housing could be treated with existing capacity.

WHAT REMAINS TO BE DONE

The City extended the contract of Lynn Bolnick to support the work of the Lead Hazard Reduction Network. The Network must develop detailed action steps for its ten-year plan to eliminate lead hazards, including strategies for moving to a prevention model and securing funding and resources to implement those strategies.

The City and Hennepin County must more clearly define their roles and responsibilities related to lead



reduction in Minneapolis.

Regular communication vehicles, such as set meetings, a newsletter and website, must be developed to facilitate the work of the Network.

The Network needs to expand to include neighborhood/resident organizations throughout the City.

The Network needs to meet with representatives of communities for which language, culture and disabilities create barriers to lead safety. In doing so, the Network must identify and develop strategies to reach those communities.

The Long-Term Lead Funding Working Group needs to develop a plan to sustain the City of Minneapolis’ operations related to lead reduction, and to report regularly to and gather feedback from the Lead Hazard Reduction Network.

PARTICIPANT LIST

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