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Report to the Chairman, Subcommittee on Health and the Environment, Committee on Energy and Commerce, House of Representatives

September 1993

TOXIC SUBSTANCES

The Extent of Lead Hazards in Child Care Facilities and Schools Is Unknown

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Resources, Community, and
Economic Development Division

B-253525

September 14, 1993

The Honorable Henry A. Waxman
Chairman, Subcommittee on Health
and the Environment
Committee on Energy and Commerce
House of Representatives

Dear Mr. Chairman:

Millions of children in the United States have enough lead in their blood to cause long-term negative effects on intelligence and behavior, according to the Centers for Disease Control (CDC). Although most efforts to address lead hazards have focused on housing, concern over the potential presence of these hazards in child care facilities and schools is growing because of the large amount of time children spend in these environments.

You requested that we review federal, state, and local activities aimed at addressing lead hazards in child care facilities and schools. (In this report, the term "lead hazards" refers to lead in paint, soil, and/or drinking water at levels that may pose health risks.) Specifically, this report discusses (1) federal, state, and local programs and activities to inspect for and address lead hazards in the nation's child care facilities and schools and (2) existing information on the extent and treatment of lead hazards in these facilities and schools. As agreed with your office, we reviewed the programs and activities of the three federal agencies that are primarily responsible for addressing lead hazards—CDC (within the Department of Health and Human Services), the Environmental Protection Agency (EPA), and the Department of Housing and Urban Development (HUD)—and contacted child care licensing agencies in 16 states, education agencies in 10 states, and 57 school districts within those 10 states.

Results in Brief

Federal agencies conduct numerous activities to address lead hazards in general, but only a few federal programs specifically address lead hazards in child care facilities and schools. EPA provides guidance to child care facilities and schools for testing drinking water for lead hazards, and the agency is funding efforts in three EPA regions to identify lead hazards in some schools. HUD administers a grant program in which local housing authorities may use grant funds to test child care facilities within public and Indian housing projects. CDC administers a grant program in which state and local recipients may use grant funds to (1) test children at child

care facilities to determine the level of lead in their blood and (2) test a facility itself for lead hazards if it is a suspected source of elevated levels of lead in a child's blood. All these federal programs, however, are only available to the relatively small number of child care facilities or schools that qualify under the specific conditions established by each program. Furthermore, HUD and CDC do not track their grant funds to determine the extent to which the funds are used to test child care facilities.

Individual state and local agencies differ considerably in the extent to which they inspect for and remove lead hazards in child care facilities and schools. Although some of the 16 states and 57 school districts we contacted have no programs or requirements that focus on lead hazards in child care facilities and schools, others have programs that actively address such hazards. These programs, however, vary widely. For example, while none of the 16 state child care agencies we surveyed routinely inspect all child care facilities in their states for lead hazards in drinking water, paint, and soil, 9 of these agencies conduct limited inspections in some facilities. Similarly, although 50 of the 57 school districts we contacted had inspected at least some schools for lead hazards in drinking water, the districts had devoted little effort toward inspecting schools for lead hazards in paint and soil, which are considered by EPA to be the two primary sources of high levels of lead in children's blood. Furthermore, data we obtained from school districts indicate that the districts vary considerably in the percentage of the schools that (1) are inspected for lead hazards and (2) are found to contain lead hazards.

Sufficient information is not available for assessing the full extent of lead hazards in the nation's child care facilities and schools and for assessing how adequately these hazards are being addressed. Neither the federal agencies nor the state child care agencies we contacted in 16 states were able to provide data on the results of lead inspections and on the subsequent remedial actions taken in child care facilities. None of the federal agencies and only 2 of the 10 state educational agencies we contacted could provide such information on schools. However, 47 of the 57 school districts we contacted did provide at least some data on lead inspections and remediation efforts in their schools.

Background

Lead is a dangerous and pervasive poison that adversely affects virtually every system in the body. Because lead is harmful to the developing brain and nervous system, exposure to lead is especially dangerous to fetuses and young children. Lead in a young child's system hinders neurological

development and can measurably lower intelligence levels. According to CDC, lead poisoning is the most common and most devastating environmental disease affecting young children.

Lead poisoning occurs through exposure to lead in air, dust, soil, water, food, and products such as paint. Because young children frequently place their fingers and objects in their mouths, they can ingest lead by swallowing paint chips or contaminated dust or soil. Paint, soil, and drinking water are the three primary media through which children are poisoned by lead. Of these three media, EPA considers paint to be the most important source of lead poisoning in children and soil to be the second most important source. EPA has established recommended exposure limits for lead in drinking water. In 1977, the amount of lead allowable in paint was restricted to 0.06 percent of the weight of the paint. However, standards that define specific conditions under which lead-based paint and lead-contaminated soil pose health hazards have not yet been established. EPA is currently developing them.

Generally, a child's chances of being poisoned by lead increase with the amount of time spent in an environment containing lead. Older buildings are more likely to contain multiple layers of paint that have higher concentrations of lead than buildings built more recently. Because many children spend significant amounts of time in child care facilities and schools, concern is growing over the possible presence of lead hazards in these environments.

In 1988, the most recent year for which detailed data are available, about 235,000 state-regulated child care facilities had an enrollment capacity of almost 4.5 million children. An unknown but potentially significant number of children attend the numerous child care facilities outside of the state regulatory system. In addition, an estimated 45.4 million children were enrolled in over 110,000 schools in 1988.

Federal Activities Addressing Lead Hazards in Child Care Facilities and Schools Are Limited

A number of federal agencies address general lead hazard issues. While these federal programs and activities do not specifically address lead hazards in child care facilities and schools, they can increase understanding of the lead problem and facilitate efforts to identify and eliminate lead hazards in general, thereby indirectly aiding efforts to address lead hazards in these facilities. Nevertheless, only a few federal programs and activities focus specifically on lead hazards in child care facilities and schools. Such activities—programs administered by EPA, CDC,

and HUD—are limited in scope and apply only to a small number of child care facilities and schools.

General Federal Activities Addressing Lead Issues

In 1989, the Congress directed EPA and HUD to execute a memorandum of understanding to coordinate federal efforts to eliminate childhood lead poisoning. As a result, an interagency task force on lead-based paint was created as a mechanism for coordinating and exchanging information among the 18 federal agency members. Among the task force's first activities was coordinating, among task force members, a review of the lead strategies of CDC, EPA, and HUD. The strategies describe a coordinated set of programs and activities to reduce childhood lead poisoning and environmental lead levels. Although CDC, EPA, and HUD issued separate strategy documents, the individual documents form a single plan, with each agency responsible for portions of the plan according to the agency's mandate, expertise, and capabilities.

In a May 1992 report,[1] we discussed EPA's, CDC's, and HUD's activities to address lead issues and, in particular, lead poisoning in children. In that report, we identified both federal efforts to address lead hazards and a number of lead exposure issues that federal agencies had not been fully addressing. As we reported then, federal activities that address the general problems of lead exposure and lead poisoning are extensive. These activities include (1) enforcing environmental regulations to prevent further lead pollution; (2) conducting research on such lead-related issues as laboratory analytical methods, exposure assessment, and the effectiveness of abatement methods in reducing lead hazards; and (3) providing over $250 million in financial assistance to identify and facilitate the removal of existing lead hazards, particularly in housing. EPA has the most extensive activities, and the agency coordinates them across program lines and uses its regulatory authorities to reduce lead in air, water, soil, and other media. Among other activities, EPA is developing accreditation and certification regulations for lead abatement and is conducting a variety of public education efforts related to lead hazards. HUD focuses on eliminating lead-based paint hazards in housing by awarding grants to state and local governments and housing authorities. CDC focuses on identifying and treating children with high levels of lead in their blood by providing grants to state and local health agencies for the testing of children's blood for lead.

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

The federal agencies that conduct these activities share the information generated from their efforts with federal, state, and local agencies, as well as private organizations and the general public, through vehicles such as the Inter-agency Lead-Based Paint Task Force, cooperative agreements with state organizations, and various public awareness enhancement activities.

Federal Efforts Directed at Lead Hazards in Child Care Facilities and Schools

In addition to their programs and activities mentioned above, EPA, HUD, and CDC also conduct programs that specifically address lead hazards in child care facilities and schools. As directed by the Lead Contamination Control Act of 1988,[2] EPA has prepared and made available to child care facilities and schools (1) a list of manufacturers and models of watercoolers that contain lead and (2) guidance for testing drinking water for lead. In addition, EPA has provided state and local agencies with educational and training assistance to help them implement the act. The act encouraged local authorities to test drinking water for lead hazards at child care facilities and schools and authorized EPA to provide financial assistance for such testing.

However, EPA was not given any authority to enforce the act's provisions, and the act did not require states and local authorities to test drinking water for lead, although they were encouraged to do so. Moreover, funds were not appropriated for EPA to assist with testing. Consequently, according to EPA's Inspector General and to a survey by the Natural Resources Defense Council (an environmental advocacy organization), states and local governments had conducted only limited testing for lead hazards in drinking water at child care facilities and schools. For example, the Natural Resources Defense Council's 1990 survey of 50 states and 3 territories indicates that child care facilities in only 17 states had been tested for lead in drinking water. While 47 states in the survey reported that some of their schools had tested drinking water for lead, 16 of those states reported that such testing was done in less than 25 percent of their schools.

Under EPA's enforcement program, a number of EPA regions are inspecting schools for a variety of environmental hazards, including lead. The efforts concerning lead hazards are being coordinated with EPA's overall lead strategy. To measure lead levels, EPA has tested drinking water in 25 schools in its Region 2, and the agency plans to conduct a survey concerning lead and other hazardous materials contained in paint in

[2]The Lead Contamination Control Act of 1988 (P.L. 100-572) amended the Safe Drinking Water Act.

school buildings in that region. In addition, EPA's Regions 3 and 10 have provided funds to the states of Maryland and Washington to investigate lead hazards in schools. The purpose of these activities is to improve health screening techniques by performing an assessment of current screening methods and by gathering information on student and faculty exposure to lead and other toxic elements in classroom settings.

HUD is the principal federal agency responsible for addressing lead-based paint hazards in housing. HUD administers several programs that provide grant funds to state and local agencies for renovating public and Indian housing. HUD's funds can be used to (1) identify and eliminate lead-based paint hazards and (2) provide shelter for families during paint abatement activities. However, these funds can also be used for numerous other general facility renovation activities not related to lead-based paint hazards.

Under some HUD programs, grant funds may be used to inspect for and remove lead hazards in child care facilities within public or Indian housing projects. However, local housing authorities do not report in detail how the grant funds are used. In addition, HUD has not developed a system to track either (1) how much of its funds are being used for testing child care facilities for lead hazards or (2) what the results of such tests are when they are conducted.

Similarly, CDC administers a program that provides grants to state and local agencies for testing the levels of lead in the blood of children and for providing treatment for those children found to have elevated levels of lead in their blood. When a child tested under the program is found to have an elevated level of lead in the blood, CDC's grant funds may be used to test the child care facility attended by the child to determine if the facility is the source of the lead contamination. These funds, however, are not authorized to be used for the abatement of any lead hazards found. CDC does not know the extent to which its grant funds are being used to test child care facilities for lead—or the results of such tests—because grant recipients are not required to report such information.

State and Local Activities and Requirements Vary for Child Care Facilities and Schools

The state child care and education agencies and the school districts we contacted indicated that the extent to which states and local governments address lead hazards in child care facilities and schools varies widely. State social or human service agencies are generally responsible for licensing and regulating child care facilities in each state. These agencies inspect the facilities—or obtain information from other agencies that perform the inspections—to ensure compliance with licensing requirements, including any requirements relating to lead hazards. Not all child care facilities are regulated, however, and this leaves a potentially large number of child care providers exempt from state regulations and inspections. For example, one state official told us that a survey indicated that about 97 percent of the child care facilities in that state are not regulated.

Generally, local rather than state agencies regulate school facilities. Local education agencies in the approximately 42,000 school districts and private schools in the United States are responsible for inspecting and maintaining their own school facilities, including inspecting for lead hazards if required under state or local law.

Lead Hazard Programs for Child Care Facilities Differ Among States

We contacted child care licensing officials in 16 states to determine their requirements and activities for addressing lead hazards in child care facilities. Although these officials indicated that child care licensing agencies in 9 of the 16 states specifically require facilities regulated by the state to be free of lead hazards, none of the state agencies we contacted routinely inspect all of the regulated child care facilities in their states for lead hazards in paint, drinking water, and soil. Agencies in nine states inspect some of their facilities for lead hazards only under certain circumstances—for example, in response to a specific complaint or a reason to suspect that a hazard exists. Of these nine states, two regularly inspect some facilities for lead paint, six inspect for lead paint under certain conditions, and one inspects only for deteriorating paint, occasionally testing for its lead content. In addition, eight of the nine states inspect some facilities for lead in drinking water, and one state inspects some facilities for lead-contaminated soil.

Enforcement actions vary among the states in our survey that inspect child care facilities for lead hazards. Although only six of the nine state agencies we contacted that inspect for lead hazards provided us information on enforcement practices, these six agencies told us that they require facility operators to remove—at the operators' own expense—any hazards found.

Failing to comply may ultimately result in facility closure. Furthermore, one state official told us that because of budgetary constraints, the inspecting agency does not always follow up on lead hazard citations to verify that the problem has been corrected. In two states, we found that in cases in which citations were pursued, the follow-up action sometimes took up to a year or more to complete.

Lead Inspections and Testing Are Limited in School Districts

The 57 school districts we surveyed in 10 states had a total enrollment of 3.4 million children in over 4,200 schools. These 57 districts included the 7 largest in the United States. Officials in 50 of the 57 school districts told us that as of early 1993, their districts had inspected some of their schools for one or more types of lead hazards, even though, according to state education officials, none of the 10 states in which these districts are located had a requirement or inspection program to ensure that schools are free of lead hazards. Fifty of the 57 districts had inspected some schools for lead hazards in drinking water at least once, but only nine districts had tested for lead-based paint, and only three had tested for lead hazards in soil around school facilities. Officials in two large districts told us that they discontinued testing for lead hazards in schools because of budget constraints.

Education agencies in 3 of the 50 school districts that had tested some schools for lead hazards were unable to provide data on the number of schools tested or on the results of such tests. Data obtained from the remaining 47 districts show that 2,272 schools, or about 81 percent of all the school facilities in those districts, had been tested for lead hazards, primarily in drinking water. (See app. I for detailed data on school districts' lead hazard inspections.) Of those tested, 350 schools, or about 15 percent, had drinking water containing levels of lead considered unacceptable by EPA. Although a number of schools were found to contain lead-based paint, only one school was identified as containing a paint "hazard." A school district official told us that it is difficult to classify lead-based paint in a school as a hazard because EPA has not yet developed specific standards that define the conditions under which lead-based paint poses a health risk. Therefore, a determination of whether lead-based paint in a particular school poses a hazard is a judgmental decision. Officials told us that when inspections revealed lead hazards in a school, actions were taken to eliminate the risk of subsequent contamination, such as the isolation or removal of the source of the hazard.

The above data represent the average rate of inspection and hazard identification for the 47 school districts combined. However, the individual rates vary widely among districts. For example, while 1 district we contacted inspected only 16 percent of all of its schools for lead hazards in drinking water, 33 districts inspected all of their schools for such hazards. Similarly, although 29 school districts found no lead hazards in drinking water, 2 districts found such hazards in all of the schools they inspected.

Information on Lead Hazards in Child Care Facilities and Schools Is Limited

None of the federal agencies we contacted—EPA, HUD, CDC, and the Departments of Health and Human Services and Education—had collected or compiled information on the extent to which (1) child care facilities and schools contain lead hazards or (2) states and local jurisdictions address such hazards. None of the child care agencies in the 16 states we contacted had compiled data on the results of lead inspections at child care facilities, such as the number of facilities tested, the number of facilities containing lead hazards, the type of lead hazards found, and the number of facilities where lead abatement activities were conducted. State education agencies compiled such data on schools in only 2 of the 10 states we contacted. In contrast, 47 of the 57 school districts we contacted were able to provide at least some data on lead inspections in schools, such as the number of facilities tested, the number of facilities containing lead hazards, and the type of lead hazards found (see app. I). The available information indicates that while most of the districts we contacted have inspected some of their schools for lead hazards in drinking water, they have performed few inspections to identify lead hazards in paint and soil.

Because no information is available on lead hazards in child care facilities and only incomplete data are available on such hazards in schools, it is difficult to assess the extent of the hazards in these facilities and the actions needed to address these hazards. Such data are needed for locating and ultimately eliminating existing lead hazards in child care facilities and schools.

To encourage the inspection of child care facilities and schools for lead hazards, the Lead Exposure Reduction Act of 1992 (H.R. 5730) was introduced in the 102nd Congress in July 1992. The act would require local authorities to test all child care facilities and kindergartens to determine the presence of lead hazards in paint, drinking water, and soil, and to visually inspect elementary schools for potential lead hazards, such as deteriorating paint surfaces. In addition, the act would require the inspecting authorities to prepare reports on the results of these tests and

inspections. Although many other provisions of this bill were incorporated into the Residential Lead-Based Paint Reduction Act passed at the end of the 102nd Congress, the provisions relating to child care facilities and schools were not included in the act. The sponsors of H.R. 5730 plan to introduce a bill with similar provisions relating to child care facility and school inspections during the current session of the Congress.

To further encourage inspections for lead hazards in child care facilities and schools, the Lead Exposure Reduction Act of 1993 (S. 729) was introduced in the Senate in April 1993. The act would require, among other things, states to selectively inspect day-care facilities and elementary schools built before 1980 for lead hazards and report on their findings and proposed remedial actions. In conducting the inspections, the states would be required to give priority to day-care facilities and elementary schools in those areas thought to contain the most severe hazards. Factors that would be used in determining priority areas for inspection include the medical evidence on lead poisoning of children, age of the children, and age and condition of housing and school buildings in an area. Under the bill, the states would be required to perform inspections only to the extent that EPA makes grants for this purpose to the states. Regarding the proposed inspection of day-care centers and elementary schools, the Chief of the Program Development Branch, Chemical Management Division in EPA's Office of Pollution Prevention and Toxics, told us that EPA would make identifying lead hazards in day-care facilities a higher priority than identifying these hazards in schools because children in the age group attending such facilities—generally, below the age of 6 or 7 years—are most susceptible to lead poisoning.

Conclusions

The combined efforts of federal, state, and local activities that address lead hazards in child care facilities and schools are limited in scope and do not provide a comprehensive approach for defining and alleviating the problem. In addition, some state and local agencies are taking little or no action to identify certain lead hazards in these facilities. Although most state agencies we contacted have not compiled data on lead testing in schools, local school districts were generally able to provide this information. These data indicate that school districts generally test drinking water for lead hazards. However, only a few of the districts we contacted test schools for lead hazards in paint and soil—considered by EPA to be the two principal sources of lead poisoning in children. Furthermore, while some of the state agencies inspect some child care facilities for lead hazards, they have no information available on either the

extent of their testing or the presence and severity of the lead hazards identified.

Because testing is limited for some types of lead hazards in the child care facilities and schools that are in the states and school districts we contacted and because the reporting of results when testing is performed is also limited, little information is available to assess what the extent of lead contamination in these facilities is and whether it is being adequately addressed. Various legislation proposed in the Congress has acknowledged the need for more information on the presence of lead hazards in child care facilities and schools by requiring that state or local agencies test such facilities for these hazards—either in total or on a priority basis—and prepare reports on their findings. Such information would be useful in locating and eliminating existing lead hazards in these facilities and, given competing environmental concerns and limited resources, in determining the extent of the lead problem in child care facilities and schools and formulating appropriate federal, state, and local responses to the problem.

Agency Comments

We discussed the information in this report with the Deputy Director of EPA's Office of Pollution Prevention and Toxics, the Director of HUD's Office of Lead-Based Paint Abatement and Poisoning Prevention, and the Chief of the Lead Poisoning Prevention Branch in CDC's National Center for Environmental Health. These officials generally agreed with the facts presented, and their views have been incorporated in the report where appropriate. As requested, we did not obtain written comments on a draft of this report.

Our work was conducted between August 1992 and July 1993 in accordance with generally accepted government auditing standards. Appendix II contains detailed information on the scope and methodology of our review.

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 Administrator, Environmental Protection Agency, and the Secretaries of Housing and Urban Development and Health and Human Services. We will make copies available to others on request.

Please contact me at (202) 512-6112 if you or your staff have any questions about this report. Major contributors to this report are listed in appendix III.

Sincerely yours,

Richard L. Hembra
Director, Environmental
Protection Issues

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Abbreviations

CDC	Centers for Disease Control
EPA	Environmental Protection Agency
GAO	General Accounting Office
HUD	Department of Housing and Urban Development

Survey Data on School Districts' Lead Hazard Inspections

State/district	Number of children enrolled	Total number of schools	Lead inspections			Number of schools tested	Percent of schools tested	Number of schools with hazards	Percent of schools tested with hazards
			Water	Paint	Soil				
California									
District 1	610,149	648	X	X	X	380	59	243	64
District 2	15,390	18	X			18	100	4	22
Florida									
District 1	300,000	307	X	X		252	82	21	8
District 2	20,000	42	X			42	100	0	0
Illinois									
District 1	412,000	561	X	X	X	561	100	0	0
District 2	11,500	16	X			16	100	0	0
District 3	5,000	12	X			12	100	0	0
District 4	3,800	9				[a]	[a]	[a]	[a]
District 5	3,400	2	X			2	100	0	0
District 6	2,500	2	X			2	100	0	0
District 7	1,600	6				[a]	[a]	[a]	[a]
District 8	970	3	X			3	100	1	33
District 9	700	2	X			2	100	0	0
District 10	600	2	X			2	100	0	0
Michigan									
District 1	182,000	256	X	X		[b]	[b]	[b]	[b]
District 2	10,500	21	X			17	81	10	59
New Jersey									
District 1	14,000	25	X	X		25	100	3	12
District 2	9,000	17	X			5	29	0	0
District 3	6,200	14	X	X		4	29	0	0
District 4	3,400	10	X			10	100	0	0
District 5	2,600	7	X			7	100	0	0
District 6	2,400	6	X			6	100	0	0
District 7	2,400	6	X			6	100	0	0
District 8	2,000	7	X			7	100	0	0
District 9	950	3	X			1	33	0	0
New York									
District 1	973,870	986	X	X	X	[b]	[b]	[b]	[b]
District 2	9,239	15	X			15	100	3	20
District 3	8,800	19	X			3	16	0	0
District 4	5,600	8	X			8	100	1	13
District 5	4,250	7	X			7	100	0	0

(continued)

State/district	Number of children enrolled	Total number of schools	Lead inspections			Number of schools tested	Percent of schools tested	Number of schools with hazards	Percent of schools tested with hazards
			Water	Paint	Soil				
District 6	3,800	7	X			7	100	0	0
District 7	2,300	6	X			6	100	6	100
District 8	2,300	4	X			4	100	3	75
District 9	1,600	4	X			4	100	4	100
District 10	1,400	2	X			2	100	0	0
North Carolina									
District 1	78,000	111	X			111	100	0	0
District 2	23,500	41	X			[b]	[b]	[b]	[b]
Ohio									
District 1	70,000	138	X			55	40	22	40
District 2	64,000	141	X			90	64	3	3
District 3	10,500	18				[a]	[a]	[a]	[a]
District 4	8,100	16				[a]	[a]	[a]	[a]
District 5	8,000	12	X			12	100	7	58
District 6	7,600	12	X			12	100	0	0
District 7	1,859	3				[a]	[a]	[a]	[a]
District 8	1,450	4	X			3	75	0	0
District 9	1,100	3	X			3	100	0	0
Pennsylvania									
District 1	205,000	258	X	X		258	100	15	6
District 2	40,500	89				[a]	[a]	[a]	[a]
District 3	11,500	16	X			16	100	0	0
District 4	6,400	12	X			4	33	0	0
District 5	6,300	11				[a]	[a]	[a]	[a]
District 6	3,440	7	X			7	100	0	0
District 7	2,500	8	X			2	25	1	50
District 8	2,300	4	X	X		2	50	1	50
District 9	1,850	4	X			1	25	0	0
Texas									
District 1	195,000	245	X			245	100	3	1
District 2	8,000	15	X			15	100	0	0
Total for 57 districts	**3,393,117**	**4,228**	**50**	**9**	**3**	**2,272**	**54**	**351**	**15**
Total for 47 districts inspecting/with data	**2,141,088**	**2,793**	**47**	**7**	**2**	**2,272**	**81**	**351**	**15**

(Table notes on next page)

[a]No testing conducted.

[b]Could not provide data on testing.

Objectives, Scope and Methodology

Our objectives were to examine (1) federal, state, and local programs and activities to inspect for and address lead hazards in the nation's child care facilities and schools, and (2) existing information on the extent and treatment of lead hazards in these facilities.

To determine the nature and extent of federal programs designed to inspect for and address lead hazards in child care facilities and schools, we reviewed the activities of the three agencies primarily responsible for addressing lead issues—the Centers for Disease Control (CDC), the Environmental Protection Agency (EPA), and the Department of Housing and Urban Development (HUD). To identify CDC's, EPA's, and HUD's programs that address lead hazards in child care facilities and schools, we reviewed numerous internal agency documents that explain the nature and status of individual elements of each agency's overall lead programs. In addition, we interviewed officials within each agency that are responsible for administering and overseeing various aspects of these programs.

In order to identify available information for assessing the extent of the lead hazards in child care facilities and schools, we contacted the principal federal agencies responsible for environmental, health, child service, and education issues—EPA, CDC, HUD, and the Departments of Health and Human Services and Education. In addition, we contacted a number of private child care-related organizations, including the Children's Defense Fund, the Child Care Action Campaign, and the Alliance to End Childhood Lead Poisoning. We also contacted child care licensing officials in 16 states and education officials in 10 states, as well as officials in 57 school districts. We asked officials within each of these organizations to provide us any data they had available on lead inspections of child care and school facilities, or to refer us to other potential sources of such information.

We contacted state child care licensing officials in 16 states to identify their efforts to address lead hazards in child care facilities. These included the 10 most populous states: California, Florida, Illinois, Michigan, New Jersey, New York, North Carolina, Ohio, Pennsylvania, and Texas. Furthermore, to expand the sample and achieve greater regional diversity, we contacted child care licensing officials in six additional states: Indiana, Kentucky, Minnesota, Missouri, Virginia, and Wisconsin. In each state, we asked the state official primarily responsible for licensing and/or regulating child care facilities a series of questions relating to the state's requirements and activities to ensure that these facilities are free of lead hazards.

To identify the extent to which schools are inspected for lead hazards and to determine the availability of information on the results of schools' lead tests, we contacted state education officials in the 10 most populous states and local officials in 57 school districts in those 10 states. Because school districts rather than state agencies are responsible for school inspection activities, we limited our contacts at the state level to ten states—rather than the 16 included in our review of child care activities—in order to focus on a larger number of school districts. The local school officials represented nine districts in each of New Jersey, Ohio, and Pennsylvania; 10 districts in both Illinois and New York; and two districts in each of California, Florida, Michigan, North Carolina, and Texas. We asked each state education and school district official questions about requirements concerning lead hazards and activities designed to ensure that their school facilities do not contain these hazards.

In selecting states and school districts for our review, we did not use a statistical sampling method; rather, they were selected judgementally. We selected states based primarily on population size. In addition, we selected school districts for our review based on diversity of size and degree of urbanization. Furthermore, we did not use a standardized data collection technique to obtain information from the states and school districts or project our findings to the universe of states and school districts. Our work was performed in accordance with generally accepted government auditing standards from August 1992 to July 1993.

Major Contributors to This Report

Resources, Community, and Economic Development Division, Washington, D.C.	Peter F. Guerrero, Associate Director Edward A. Kratzer, Assistant Director Vincent P. Price, Evaluator-in-Charge Frank J. Gross, Senior Evaluator
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