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Testimony Before the Committee on Transportation & the Environment  
Council of the District of Columbia  
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Public Hearing:

*B23-0407, the "Lead Hazard Prevention and Elimination Amendment Act of 2019"*

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## Introduction

Good morning Chairperson Cheh, Councilmember Allen, Councilmember Evans, Councilmember McDuffie and Councilmember Todd. My name is Buck Logan. I am an attorney at Children's Law Center and have lived in the District for thirty years. I am testifying today on behalf of Children's Law Center, which fights so every DC child can grow up with a loving family, good health and a quality education. With nearly 100 staff and hundreds of pro bono lawyers, Children's Law Center reaches one out of every nine children in DC's poorest neighborhoods – more than 5,000 children and families each year.<sup>1</sup>

Children's Law Center strongly supports B23-407, the *Lead Hazard Prevention and Elimination Amendment Act of 2019*. The bill would provide important new protections against lead-based hazards in rental housing in the District and help prevent devastating harm to children from lead poisoning. Children's Law Center has first-hand experience with this issue through its Healthy Together program, a medical-legal partnership that allows a child's pediatrician to refer families to us for legal representation to secure healthy, code-compliant rental housing.<sup>2</sup> Through that program, Children's Law Center represents hundreds of families every year in getting their landlords to repair housing code violations, including lead-based paint hazards, that threaten the health of the children living in the home.

**No Amount of Lead Is Safe for a Child:  
Our Goal Should Be Zero Tolerance for Lead Hazards**

Exposure to lead can cause serious health risks for all members of a home.<sup>3</sup> But children are especially vulnerable because, prior to age 6, their brains and nervous systems are still forming and susceptible to damage. Pregnant women are also at special risk, because the lead they absorb crosses the placenta and enters the fetus, increasing the risk of miscarriage or harm to their babies.<sup>4</sup>

No amount of lead is safe for a child.<sup>5</sup> Even low doses can cause serious harm.<sup>6</sup>

The common health effects of lead exposure on children include:

- Brain damage resulting in IQ loss, learning disabilities, hyperactivity, inability to concentrate, and/or behavior problems;
- Stunted growth; and
- Hearing problems.<sup>7</sup>

The consequences of lead poisoning can be tragic. For one family we worked with, lead paint in the family's apartment caused severe lead poisoning to their very young child. Only after the child started showing symptoms of lead poisoning was a proper inspection performed, which found lead dust and paint chips throughout the home. The child needed an extended hospital stay to receive intensive medical treatment for what turned out to be one of the worst cases of lead poisoning in the District in decades. Because of the lead poisoning, the child became withdrawn, not responding to her name or interacting with her family, and began showing delays in

her development. The family faces the fear that their child may suffer the effects of lead poisoning for the rest of her life.<sup>8</sup>

People of color are disproportionately exposed to lead hazards. A national survey found that the average blood lead levels of African-American children were well above those of non-Hispanic white and Mexican-American children.<sup>9</sup> Other studies have shown that race and ethnicity are associated with elevated blood lead levels in children regardless of family income.<sup>10</sup> According to one report, “[t]hese findings reflect the disparate risk that minority communities face from older housing with lead paint hazards, a condition that has its origins in unfair lending practices and social policies, such as redlining ... and racial covenants, which prohibited people of color from moving into white neighborhoods. These practices contributed to the isolation of impoverished communities and people of color in areas with poorer-quality housing, infrastructure, and air.”<sup>11</sup>

The serious dangers of lead-based paint hazards, and their disproportionate impact on people of color, require an aggressive public health response. Our goal should be “zero tolerance for lead hazards.”<sup>12</sup> That’s the recommendation of the Centers for Disease Control (CDC) Advisory Committee on Childhood Lead Poisoning Prevention, a committee composed of doctors, public health professionals, scientists and other experts.

## **Lead Hazards Continue to Plague DC Housing and Harm Children**

Thanks to the Council's leadership in the past, the District has made progress in reducing lead hazards. Yet much remains to be done, as these hazards, particularly lead-based paint, continue to present a grave risk to the District's children. According to the Department of Energy & Environment (DOEE), the "scope of the threat [of lead hazards in DC] is daunting. ... Almost 90% of the District's housing stock was built before the use of lead-based paint was restricted, in 1978. This means that most of the homes where District residents live are at risk of containing some lead-based paint."<sup>13</sup> There have been reports during the past few years that lead-based paint hazards continue to endanger a large number of children in DC rental housing.<sup>14</sup>

The continued prevalence of lead-based paint hazards in DC housing means that, while progress has been made, large numbers of children continue to be poisoned by lead in significant numbers in the District. In 2017 alone, 128 DC children under age 6 received confirmed elevated blood lead levels (EBLLs) equal to or greater than 5 µg/dL, the CDC's current blood lead reference level.<sup>15</sup> This number is troubling in itself – as stated, our goal should be *zero* tolerance for lead hazards – but it actually understates the magnitude of the problem. Only 35 percent of DC children under age 6 were tested in 2017. If all children had been tested that year, it is likely that well over 300 young children would have been shown to have EBLLs equal to or above 5 µg/dL.<sup>16</sup> And even that number underestimates the problem because it does not capture children who have

suffered lower doses of lead poisoning (*i.e.*, below 5 µg/dL) even though such lower doses have been found to harm children.<sup>17</sup> One non-profit research firm has estimated that more than 1550 children DC children born in 2019 are predicted to have blood lead levels above 2 µg/dL.<sup>18</sup> That's 16% of all births in the District facing a future of potentially serious health consequences.

### **The Societal Costs of Childhood Lead Poisoning Are Enormous**

The proposed bill would impose some additional costs on landlords and government agencies, such as the costs of providing additional inspections and clearance reports.<sup>19</sup> But these costs pale in comparison to the alarming costs that children, family, and society suffer when a child is harmed by lead poisoning. One study estimates that the lifetime economic burden of childhood lead exposure in DC could be as high as \$402 million – and that's just for the 2019 birth cohort of children.<sup>20</sup> These costs include reduced lifetime productivity and increased spending on health care, special education and social assistance.

As the Council observed in 2008, the “social and monetary benefits of aggressive, primary preventative measures speak for themselves when compared to treating children who have been exposed to lead and the subsequent social, behavioral and education problems they face.”<sup>21</sup>

## **Babies Shouldn't Be Used as Lead Detectors: We Need More Robust Primary Prevention**

One of the Council's objectives in passing its 2008 lead law was to "move the District away from using our children as lead detectors and more towards an aggressive, primary prevention policy."<sup>22</sup> We are, however, falling short in achieving this objective. Under current practices, too many lead inspections are reactive, prompted by tenant complaints or blood tests showing elevated blood level for individual children. Children are still playing the role of "lead detectors."

Primary prevention – especially in the form of proactive inspections and remediation – is the key to fighting lead hazards. Primary prevention addresses lead hazards *before* a child suffers lead poisoning. We can't wait until a child has been irreversibly harmed to respond to a lead-based paint hazard in an apartment.

That's why the CDC's Advisory Committee on Childhood Lead Poisoning Prevention has issued a "renewed call for primary prevention," stating that "screening children for elevated BLLs [blood lead levels] and dealing with their housing only when their BLL is already elevated should no longer be acceptable practice."<sup>23</sup> DOEE is similarly "dedicated to the goal of 'primary prevention' and is focused on identifying lead-based paint hazards without using children as the proverbial 'canary in the coal mine.'"<sup>24</sup> Primary prevention requires proactive lead inspections by landlords or government inspectors *before* a child tests for an elevated BLL or a tenant files a complaint. Solely relying on a tenant-driven complaint process is not effective.<sup>25</sup>

The proposed bill will plug significant gaps in the primary prevention approach intended under current law. Under current law, landlords generally are required to conduct a proactive inspection (and provide a lead clearance report) only when a pregnant woman or a family with a child under age 6 first moves into or becomes a frequent visitor to a unit; there generally is no ongoing obligation to conduct proactive inspections thereafter.<sup>26</sup> Current law consequently does not mandate a more robust proactive inspection regime that would catch lead hazards that arise after a tenant moves in, which can often happen as time goes by (*e.g.*, small water intrusion can over time dislodge lead paint and lead dust from a window frame and windowsill). By limiting the initial, “pre-occupancy” inspection to situations where the new tenant includes a pregnant woman or child under 6, current law also creates uncertainty; for example, a landlord may not be aware the new occupant is pregnant or includes a young child and thus not conduct the required initial inspection.

The proposed bill would close these gaps by increasing the scope and frequency of mandatory lead inspections, thus greatly enhancing primary prevention of lead-based paint hazards.<sup>27</sup> Under the bill, at the time the initial lease is signed, the landlord would be required to provide all prospective tenants (not just when the tenant or regular visitor is a pregnant woman or has a child under 6) with a recent lead clearance report or certain other documentation. During the lease term, the landlord generally would be required to provide a recent clearance report each time a landlord seeks to



obtain or renew its business license (every 2-4 years) or if a tenant complains of a potential lead hazard; if the landlord cannot provide the required clearance report, DOEE would conduct a lead clearance examination and provide the clearance report.<sup>28</sup>

We recommend that the bill require the Department of Consumer and Regulatory Affairs (DCRA) (or any successor agency) to have licensed lead inspectors on its staff. This will help ensure that both DCRA and DOEE (which currently has licensed lead inspectors) can both provide lead clearance examinations and reports when necessary.<sup>29</sup>

### **We Need Better Enforcement**

There's disconcerting evidence that some landlords and contractors aren't complying with DC's lead laws. Although current law requires landlords to maintain their rental housing "free of lead-based paint hazards," there have been reports in recent years that a significant number of landlords aren't doing so.<sup>30</sup> Even when lead hazards are identified, some landlords are taking much too long to remediate the hazard, exposing children to prolonged risk. In 2018, the Office of the DC Auditor conducted a case study examining housing code enforcement at Dahlgreen Courts, a private apartment complex in Ward 5. DOEE had found numerous lead-based paint hazards at the property and issued a Notice of Infraction against the owner requiring it to address the lead problems. Yet it took years before the owner issued lead clearance reports. Even more problematic, DCRA issued the owner an occupancy permit *seven*

*years before* the owner provided the required lead clearance reports. As the DC Auditor found, “Dahlgreen Courts should have gotten the lead clearance reports at the conclusion of the [renovation] project, before units were to be occupied.”<sup>31</sup>

In July 2019, DC’s Office of the Attorney General (OAG) filed a court case against a building owner for endangering the health and safety of DC residents by exposing them to toxic lead-based paint. OAG’s lawsuit came after an unsuccessful, *three-year* effort by DOEE to compel the owner to abate the lead hazards at the rental property.<sup>32</sup>

Too many landlords are failing to comply with even simple, routine requirements. In 2015, DOEE visited a number of rental properties to examine tenant files to see if they contained, as required by DC law, documentation showing that a tenant had received the lead disclosure form for the property as well as a notice describing the tenant’s rights under DC’s lead laws.<sup>33</sup> DOEE examined 233 tenant files. Of those files, 204 (87 percent) were missing the proper documentation for the tenant rights form, and 168 (72 percent) lacked documentation of the disclosure form.<sup>34</sup>

The proposed bill would establish additional “carrots and sticks” to promote compliance:

- The D.C. government would be required to deny business licenses to landlords who violate lead laws;
- Tenants could take their landlord to court to force compliance and recover damages and attorneys’ fees;<sup>35</sup>
- Tenants would be entitled to 2 months’ rent abatement if they are victims of landlord retaliation; and

- A fund would be established to defray abatement costs for landlords who demonstrate financial hardship in certain circumstances.

Improved compliance will move us closer to the goal of “zero tolerance” for lead hazards.

### **The Bill Would Make Necessary Technical Changes to Existing Law**

The proposed bill would make a number of important technical changes to existing law. One such change would add “lead dust” to the definitions of “lead-free (property/unit)” and “lead-safe (property/unit).” This will help ensure that clearance examinations require a “swipe test” and not just a visual inspection. Rental units have passed visual tests for lead dust only later to be found to contain lead dust by a subsequent inspection using a swipe test – with the subsequent swipe test occurring *after* a child in the unit had already suffered lead poisoning.<sup>36</sup>

We also support updating the definition of “elevated blood lead level” to mean the CDC’s current reference level of “equal to or greater than 5 measured in micrograms of lead per deciliter of blood.” The CDC reviews this reference level every four years and the law should make clear any more stringent reference level adopted by CDC (or the Mayor by rule) in the future should automatically go into effect.<sup>37</sup>

## Conclusion

Children’s Law Center strongly supports B23-407, the *Lead Hazard Prevention and Elimination Amendment Act of 2019*. It will make the District a leader in protecting children against lead hazards.

Thank you for the opportunity to testify before you today.

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<sup>1</sup> Judges, pediatricians and families turn to Children’s Law Center to advocate for children who are abused or neglected, who aren’t learning in school, or who have health problems that can’t be solved by medicine alone. In addition to advocating for individual families and children, we advocate for city-wide solutions that benefit all children. See <https://www.childrenslawcenter.org/>.

<sup>2</sup> Pediatricians, nurses and social workers from Children’s National Health System, Mary’s Center and Unity Health Care refer families to Children’s Law Center for help with cases involving housing conditions, special education, and access to health care.

<sup>3</sup> Lead can cause adults to suffer hypertension, anemia, and a reduced sperm count. See Department of Energy & Environment (DOEE) website, <https://doee.dc.gov/node/9032>.

<sup>4</sup> See DOEE website, <https://doee.dc.gov/node/9032>.

<sup>5</sup> “It is important to remember there is no known safe level of lead in a human body.” *Id.* See also Agency for Toxic Substance & Disease Registry, <https://www.atsdr.cdc.gov/csem/csem.asp?csem=34&po=8> (“No blood lead threshold for adverse health effects has been identified in children, and no BLL above zero is free of all risk.”).

<sup>6</sup> Even low doses of lead (between 3 and 5 µg/dL) “can lead to neurologic damage, including impaired memory and executive function, which is the ability to plan, remember instructions, and juggle multiple tasks. Such levels can lead to decreased IQ and academic performance and can also cause behavioral problems, such as impulsivity, hyperactivity, and attention disorders. Some studies suggest that lead exposure may also cause conduct disorders, depression, anxiety, and withdrawn behavior ....” Health Impact Project, “10 Policies to Prevent and Respond to Childhood Lead Exposure: An Assessment of the Risks Communities Face and Key Federal, State, and Local Solutions” 8 (Aug. 2017) (Health Impact Project Report), available at [https://altarum.org/sites/default/files/uploaded-publication-files/HIP\\_Childhood\\_Lead\\_Poisoning\\_report.pdf](https://altarum.org/sites/default/files/uploaded-publication-files/HIP_Childhood_Lead_Poisoning_report.pdf).

<sup>7</sup> See DOEE website, <https://doee.dc.gov/node/9032>.

<sup>8</sup> Terrence McCoy, “Washington’s Worst Case of Lead Poisoning in Decades Happened in a Home Sanctioned by Housing Officials,” Washington Post (Jan. 30, 2017), available at [https://www.washingtonpost.com/local/social-issues/washingtons-worst-case-of-lead-poisoning-in-decades-happened-in-a-home-sanctioned-by-housing-officials/2017/01/30/f7a09aa6-dcde-11e6-acdf-14da832ae861\\_story.html](https://www.washingtonpost.com/local/social-issues/washingtons-worst-case-of-lead-poisoning-in-decades-happened-in-a-home-sanctioned-by-housing-officials/2017/01/30/f7a09aa6-dcde-11e6-acdf-14da832ae861_story.html).

<sup>9</sup> Health Impact Project Report at 9.

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<sup>10</sup> *Id.*

<sup>11</sup> *Id.*

<sup>12</sup> Advisory Committee on Childhood Lead Poisoning Prevention of the Centers for Disease Control and Prevention, “Low Level Lead Exposure Harms Children: A Renewed Call for Primary Prevention,” at 34 (Jan. 4, 2012), available at: [https://www.cdc.gov/nceh/lead/ACCLPP/Final\\_Document\\_030712.pdf](https://www.cdc.gov/nceh/lead/ACCLPP/Final_Document_030712.pdf) .

<sup>13</sup> DOEE, Strategic Plan for Addressing Lead in the District of Columbia 2011-2014, at 2 (2011), available at [https://doee.dc.gov/sites/default/files/dc/sites/ddoe/publication/attachments/DDOE\\_Strategic\\_Plan\\_for\\_Lead-Safe\\_and\\_Healthy\\_Homes.pdf](https://doee.dc.gov/sites/default/files/dc/sites/ddoe/publication/attachments/DDOE_Strategic_Plan_for_Lead-Safe_and_Healthy_Homes.pdf) .

<sup>14</sup> See Morgan Baskin, “Nearly One-Third of the City’s Public Housing Stock Is at Risk of Becoming Uninhabitable,” Washington City Paper (Dec. 20, 2018), available at <https://www.washingtoncitypaper.com/news/housing-complex/article/21038117/nearly-onethird-of-the-citys-public-housing-stock-is-at-risk-of-becoming-uninhabitable>. Terrence McCoy, “Numerous Children Have Been Poisoned by Lead in Homes Approved by DC Housing Inspectors,” Washington Post (Aug. 15, 2008), available at [https://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=1&cad=rja&uact=8&ved=2ahUKEwj1s5KR04DkAhWwY98KHSoGCloQFjAAegQIABAB&url=https%3A%2F%2Fwww.washingtonpost.com%2Flocal%2Fsocial-issues%2Fmany-children-have-been-poisoned-by-lead-in-homes-approved-by-dc-housing-inspectors%2F2018%2F08%2F14%2F5633a144-9b24-11e8-8d5e-c6c594024954\\_story.html&usg=AOvVaw08sZ18mydKZ2I4BEmViW4T](https://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=1&cad=rja&uact=8&ved=2ahUKEwj1s5KR04DkAhWwY98KHSoGCloQFjAAegQIABAB&url=https%3A%2F%2Fwww.washingtonpost.com%2Flocal%2Fsocial-issues%2Fmany-children-have-been-poisoned-by-lead-in-homes-approved-by-dc-housing-inspectors%2F2018%2F08%2F14%2F5633a144-9b24-11e8-8d5e-c6c594024954_story.html&usg=AOvVaw08sZ18mydKZ2I4BEmViW4T) .

<sup>15</sup> See <https://www.cdc.gov/nceh/lead/data/national.htm> . The CDC’s most recent EBLL data for the District is for 2017.

<sup>16</sup> According to the CDC data, 0.7% of the total number DC children under age 6 who received lead screenings in 2017 had a BLL equal to or above 5 µg/dL. Applying this same percentage to the total number of children under age 6 in DC in 2017 yields an estimate of 350 children with BLLs equal to or above 5 µg/dL in DC in 2017.

<sup>17</sup> See *supra*, notes 5-6.

<sup>18</sup> This estimate is based on DC-specific risk factors and current lead exposure data. Altarum, a nonprofit research and consulting organization, calculated the estimate. Support for its research was provided by the Robert Wood Johnson Foundation. <http://valueofleadprevention.org/calculations.php?state=District%20Of%20Columbia> .

<sup>19</sup> DOEE has stated that the cost to property owners in obtaining a clearance report “can vary based on several factors such as overall square footage, complexity of the property, and complexity of the eventual remediation activity. The cost of a clearance examination can range from about \$200 per unit to \$350 per unit. Each dust sample incrementally increases the cost of testing. If a unit fails the clearance examination subsequent examinations can add further costs. Additional clearance examinations can also cost \$200-\$350 per unit.” *Id.*, Attachment at 7.

<sup>20</sup> Altarum calculated this estimate. It is based on an estimate of 1577 children in the cohort of children born in 2019 having an elevated blood lead level of 2 µg/dL or greater. See <http://valueofleadprevention.org/calculations.php?state=District%20Of%20Columbia> .

<sup>21</sup> Council of the District of Columbia, Committee on Public Works and the Environment, Committee Report on B17-0936, at 2-3 (Nov. 21, 2008), available at <http://lims.dccouncil.us/Download/19361/B17-0936-CommitteeReport1.pdf> .

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<sup>22</sup> Council of the District of Columbia, Committee on Public Works and the Environment, Committee Report on B17-0936, at 2-3 (Nov. 21, 2008), available at <http://lims.dccouncil.us/Download/19361/B17-0936-CommitteeReport1.pdf> .

<sup>23</sup> CDC Advisory Committee on Childhood Lead Poisoning Prevention, “Low Level Exposure Harms Children: A Renewed Call for Primary Prevention,” at ix, 15-16 (Jan. 4, 2012), available at [https://www.cdc.gov/nceh/lead/acclpp/final\\_document\\_030712.pdf](https://www.cdc.gov/nceh/lead/acclpp/final_document_030712.pdf) .

<sup>24</sup> DOEE, 2011-14 Strategic Plan for Lead-Safe and Healthy Homes, at 8 (2011), available at [https://doee.dc.gov/sites/default/files/dc/sites/ddoe/publication/attachments/DDOE\\_Strategic\\_Plan\\_for\\_Lead-Safe\\_and\\_Healthy\\_Homes.pdf](https://doee.dc.gov/sites/default/files/dc/sites/ddoe/publication/attachments/DDOE_Strategic_Plan_for_Lead-Safe_and_Healthy_Homes.pdf) .

<sup>25</sup> See ChangeLab Solutions, A Guide to Proactive Rental Inspection Programs (2014), available at [https://www.changelabsolutions.org/sites/default/files/Proactive-Rental-Inspection-Programs\\_Guide\\_FINAL\\_20140204.pdf](https://www.changelabsolutions.org/sites/default/files/Proactive-Rental-Inspection-Programs_Guide_FINAL_20140204.pdf) . Tenants often are not aware of their legal rights to safe housing and housing inspections and are not trained to identify potential lead hazards. Even when they are aware of their rights, tenants often fear eviction or landlord retaliation if they report lead hazards. As the director of the Department of Consumer and Regulatory Affairs (DCRA) stated in 2009, “[i]t’s quite clear that a complaint-based system is no longer sufficient if we want to maintain safe housing conditions for all residents, especially our most vulnerable – the poor, the elderly, the non-English speakers.” She further stated: “For the vast majority of properties named in the slumlord lawsuits [brought by the Office of the Attorney General], DCRA had not received any recent complaints from residents of those buildings. And for the worst of the properties, we never received a single complaint.” Testimony of Linda Argo, DCRA Director, DC Council Public Roundtable on the Department of Consumer and Regulatory Affairs Proactive Housing Inspections Program, at 2 (Dec. 16, 2009), available at [https://dcra.dc.gov/sites/default/files/dc/sites/dcra/publication/attachments/DCRA%2520Proactive%2520Housing%2520Inspections%2520Program%2520%252012\\_16\\_09.pdf](https://dcra.dc.gov/sites/default/files/dc/sites/dcra/publication/attachments/DCRA%2520Proactive%2520Housing%2520Inspections%2520Program%2520%252012_16_09.pdf) .

<sup>26</sup> Under current law, if a new tenant (or regular visitor) is a pregnant woman or has a child under 6, or if an existing tenant notifies the landlord that a pregnant woman or child under 6 has moved into (or now regularly visits) the unit, the landlord must provide a lead clearance report issued within the previous 12 months or other documentation showing the absence of lead-based paint hazards. DC Code § 8-231.04(b).

<sup>27</sup> Some public interest advocates recommend that District government inspectors conduct all lead inspections in DC rental housing, with landlords paying a fee to cover the costs of the inspections. There are significant advantages to such an approach. It would promote more consistent and reliable inspections and also facilitate public health data collection concerning lead-paint hazards in DC housing.

<sup>28</sup> A clearance report would not be required when (1) the unit has previously been found to be lead-free; or (2) within the prior 6 years, the landlord has provided a least 4 clearance reports at least 12 months apart for the unit.

<sup>29</sup> Enforcement of the new lead law would be hampered if DCRA lacked the required expertise to conduct the necessary inspections. This is what has happened with the District’s mold law. DCRA still lacks qualified mold inspectors five years after enactment of that law. To correct this problem, the Council is considering a bill (B23-0132) that would require DCRA housing inspectors to be certified to conduct mold assessments and remediation.

<sup>30</sup> See *supra*, note 14.

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<sup>31</sup> Office of the District of Columbia Auditor, “Housing Code Enforcement: A Case Study of Dahlgreen Courts” (Sept. 24, 2018), available at <http://dcauditor.org/report/housing-code-enforcement-a-case-study-of-dahlgreen-courts/> .

<sup>32</sup> See <https://oag.dc.gov/release/ag-racine-sues-ward-7-landlord-exposing-tenants> .

<sup>33</sup> See DC Code § 8-231.04(a) & (e).

<sup>34</sup> Letter from Mayor Bowser to Chairman Mendelson, attachment at 5 (Oct. 7, 2015), available at <http://lims.dccouncil.us/Download/34664/RC21-0037-Introduction.pdf> .

<sup>35</sup> A tenant private right of action is essential in seeking to enforce the District’s lead laws. The Council provided a similar tenant private right of action in its 2014 mold law. DC Code § 8-241.05. That provision has been critical in enforcing the protections against mold in DC housing, especially given DCRA’s failure in recent years to reliably enforce the District’s housing code. See Testimony of Anne Cunningham, Children’s Law Center, at DCRA Budget Hearing (March 27, 2019), available at <https://www.childrenslawcenter.org/testimony/budget-testimony-dcra> .

<sup>36</sup> See *supra*, note 14.

<sup>37</sup> See <https://www.cdc.gov/nceh/lead/prevention/blood-lead-levels.htm> .