Community-Driven Findings & Recommendations

To Address Lead Exposure and Advance Environmental Health Equity in Santa Ana and Orange County

A Public Health Equity Action Plan (PHEAP)

ABOUT THIS PHEAP

Developed through collaboration between academic researchers, community organizations, and community residents , we hope to translate research findings and local priorities into actionable strategies focused on preventing lead exposure and protecting children's health and development .

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Acronyms and Definitions

Acronyms/Definitions

- Bioremediation: an environmental cleanup technique that uses biological systems such as microorganisms like bacteria and fungi, to break down or neutralize hazardous pollutants in soil and groundwater
- BLL: Blood Lead Levels
- CBPR: Community Based Participatory Research
- GREEN-MPA: Getting Residents Engaged in Empowering Neighborhoods – Madison Park Neighborhood Association
- I-CLEAN: Inequities in Childhood Life-Course Lead Exposure and Academic and Neurodevelopmental Outcomes
- Lead: A naturally occurring heavy metal used in products, which is toxic to human health and requires caution (e.g., old paint, pipes)
- OCEJ: Orange County Environmental Justice
- PHEAP: Public Health Equity Action Plan
- Plo-No!: Community-academic partnership initiative addressing soil lead contamination within Santa Ana
- UCI: University of California, Irvine

Acknowledgements

This report reflects the collective effort, insight, and leadership of community partners and collaborators who shaped the project from design through implementation and interpretation. The work is grounded in their experiences, knowledge, and sustained engagement. We extend deep appreciation to **I-CLEAN families, GREEN-MPNA promotoras, OCEJ, and the ¡Plo-NO! Initiative** for their partnership, guidance, and commitment. Their contributions informed project priorities, strengthened community relevance, and ensured that the findings reflect lived realities and local expertise. We also recognize the University of California, Irvine student team from the **VoiCES Lab**, whose dedication, thoughtful analysis, and collaborative spirit supported the development of this report. Their contributions played an important role in synthesizing findings and advancing this work. We are also grateful for all participants who shared their insights as part of the I-CLEAN study and the PHEAP process and who continue to hold a vision for stronger, more responsive support for their communities. Each of these contributions made this project possible and strengthened its impact.

Project Background

The **Inequities in Childhood Life-Course Lead Exposure and Academic and Neurobehavioral Outcomes (I-CLEAN) Study** is a research partnership between public health researchers at the University of California, Irvine, Orange County Environmental Justice (OCEJ), and Getting Residents Engaged in Empowering Neighborhoods - Madison Park Neighborhood Association (GREEN-MPNA), focused on understanding environmental lead exposure and its impacts on children's health in Santa Ana and across Orange County. Using a community-based participatory research (CBPR) approach, the study centers community voices and priorities throughout the research process.

The project examines how low-level lead exposure may affect children's academic and neurobehavioral outcomes, particularly in predominantly Latino and low-income communities that have historically experienced environmental injustices. To better understand patterns of exposure and potential health impacts, the study collects and analyzes biological samples, including blood, naturally shed baby teeth, and saliva.

In addition to generating research findings, the I-CLEAN Study aims to support community-driven action and advance environmental health equity. Findings are shared with residents, community partners, and local initiatives and institutions to help inform policies, strengthen prevention and intervention efforts, and support broader systems change.

> A key outcome of this work is the development of the Public Health Equity Action Plan (PHEAP), which builds on study findings and community input to support sustainable, community-led strategies to reduce lead exposure and address environmental health inequities.

PHEAP Purpose & Partners

PHEAP Purpose

The Public Health Equity Action Plan (PHEAP) is a community-informed roadmap for reducing lead exposure and advancing environmental health equity in Orange County. Developed through collaboration between researchers, community organizations, and residents, the PHEAP translates research findings and local priorities into actionable strategies focused on preventing lead exposure and addressing its impacts on children's health and development.

This report highlights community-identified priorities and outlines concrete actions that can be taken by residents, organizations, institutions, and decision-makers. It is intended to serve as a tool for aligning efforts, guiding investments, and informing policies that address the root causes of environmental health inequities.

By centering the experiences, knowledge, and leadership of communities most impacted by lead exposure, the PHEAP aims to expand equitable access to prevention, testing, resources, and care while supporting sustainable, community-driven solutions.

Align Efforts
A tool for aligning efforts, guiding investments, and informing policies that address root causes of environmental health inequities.

Expand Access
Expand equitable access to prevention, testing, resources, and care while supporting sustainable, community-driven solutions.

PHEAP Partners and Community Involvement

The PHEAP is led by a core planning group working in collaboration with the I-CLEAN Steering Committee, which includes representatives from UCI, GREEN MPNA, and OCEJ. In addition to this leadership structure, the development of the PHEAP is informed by ongoing community engagement.

Key contributors include:

- Promotoras / community health workers
- Local families participating in I-CLEAN and other lead-related initiatives Members of the ¡Plo-NO! Initiative
- Individuals working closely with youth
- These contributors provide lived experience, local knowledge, and practice-based insight to ensure the PHEAP reflects community priorities and is grounded in real-wolrd needs and contexts.

PHEAP Process

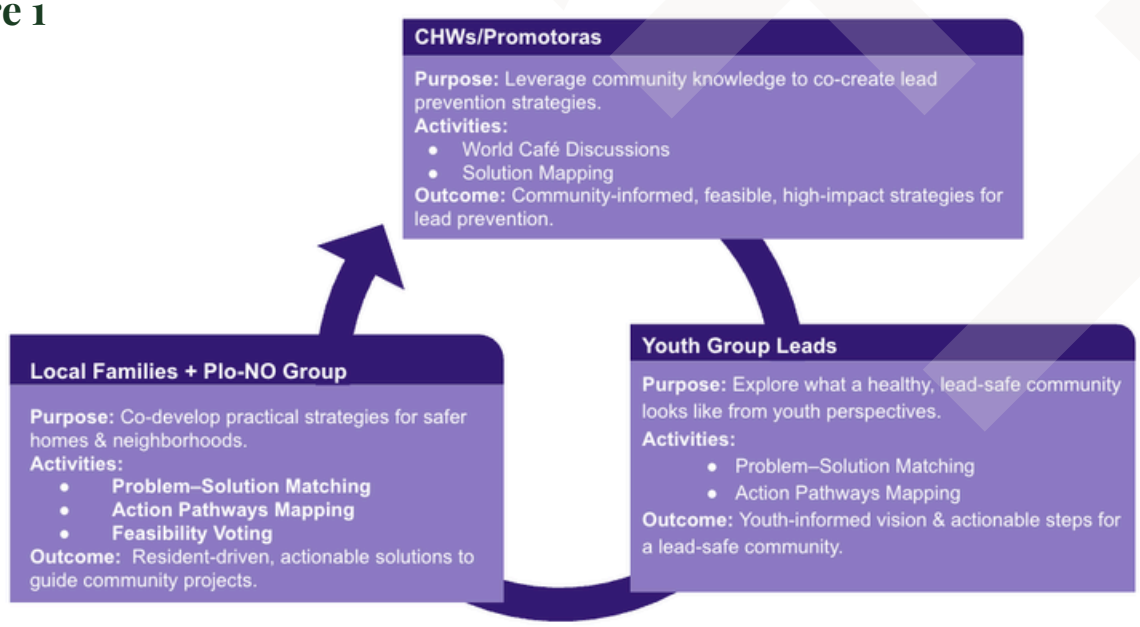
The development of the PHEAP has followed a collaborative and iterative process. The core planning group began by reviewing existing lead-related initiative reports and environmental justice plans, including prior PHEAPs, to identify key lessons learned, common strategies, and documented outcomes. These findings helped refine priorities and inform recommendations that are locally relevant, actionable, and grounded in existing efforts. The planning group then engaged the I-CLEAN Steering Committee to share the proposed approach and gather feedback on draft agendas and engagement materials for the PHEAP process.

To support meaningful participation and iterative refinement of insights, we held multiple community conversations and designed these conversations to build upon themes and recommendations from earlier community conversations. We held community conversations with promotoras/community health workers, local families involved in lead initiatives and studies, members of the ¡Plo-NO! Initiative, and individuals working with youth. Each session was designed with prompts and questions tailored to the specific experiences and expertise of each group, beginning with a brief overview of the I-CLEAN project and lead exposure concerns in Santa Ana, followed by a facilitated discussion focused on community-identified barriers, priorities, and strategies for addressing lead exposure.

Each engagement built upon insights from previous sessions, allowing themes and recommendations to evolve over time through an iterative, feedback-driven process (Figure 1).

> **While the original design was planned for in-person sessions using a Popular Education approach to encourage open dialogue and shared learning, the format was adapted to virtual engagement in response to community concerns related to current events and safety considerations. This adaptation allowed the process to continue while maintaining accessibility and participation across groups.**

Figure 1



SECTION 02

Understanding Lead Exposure in Context

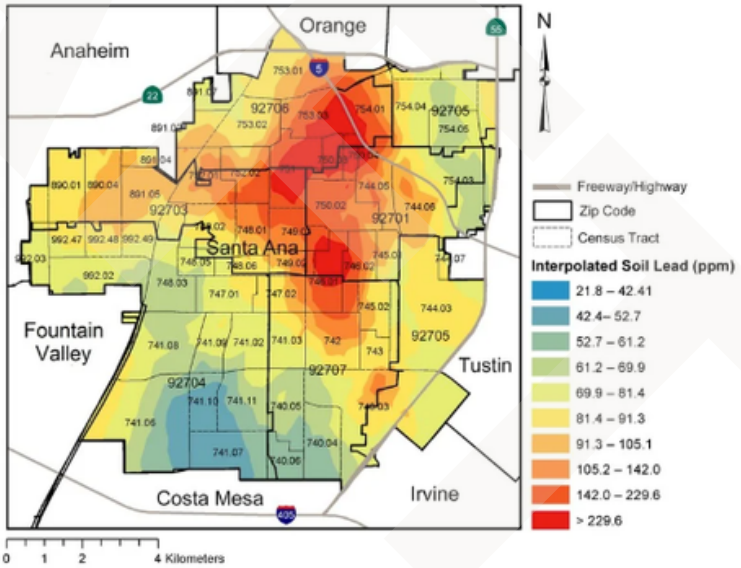
Lead is a naturally occurring heavy metal that can be harmful to human health, especially when people are exposed over time. Lead cannot be seen or smelled, and it may be present in dust, soil, water, paint, or other environmental sources without people realizing it. Health experts, including the Centers for Disease Control and Prevention (CDC), agree that there is no known safe level of lead exposure. The CDC currently identifies blood lead levels above **3.5 µg/dL** (micrograms per deciliter) as higher than expected in children and recommends follow-up actions to reduce further exposure.

No Safe Level of Lead Exposure

Lead can enter the body through inhalation or ingestion, such as breathing in contaminated dust or accidentally swallowing lead particles from soil, dust, food, water, or contaminated surfaces. Young children are especially vulnerable because of their frequent hand-to-mouth behaviors and because their developing bodies absorb lead more easily than adults.

Why is it a particular issue in Santa Ana?

In Santa Ana, the risk of lead exposure is influenced by a combination of historical, environmental, and housing-related factors. Lead may be present in older homes through deteriorating lead-based paint, as well as in household dust and surrounding soil. Some neighborhoods may also experience increased exposure risks due to proximity to major roadways, industrial activities, and legacy contamination from past environmental practices. Because lead does not break down or disappear over time, contamination can remain in the environment for decades if not properly addressed. As a result, children and families may continue to be exposed through everyday contact with contaminated soil, dust, and aging housing materials. These conditions highlight the importance of continued prevention efforts, environmental monitoring, testing, community education, and investments in healthy housing and neighborhood environments to help reduce exposure and protect long-term community health.



Source: Rubio, J. M., Masri, S., Torres, I. R., Sun, Y., Villegas, K., Flores, P., Logue, M. D., Reyes, A., LeBrón, A. M. W., & Wu, J. (2022). Use of historical mapping to understand sources of soil-lead contamination: Case study of Santa Ana, CA. Environmental Research, 212(Pt D), 113478. https://doi.org/10.1016/j.envres.2022.113478

SECTION 03

PHEAP Findings & Community Recommendations

Strategic Priorities

Community members identified a shared set of priorities and recommendations through the PHEAP process to address lead exposure in Santa Ana and Orange County. These findings reflect lived experience, community knowledge, and collaborative input from residents, organizations, and partners working to advance environmental health equity. Across all discussions, participants emphasized prevention, access to care, environmental remediation, education, accountability, and trust-building as central components of an effective response to lead exposure.

Cross-Cutting Themes

Across all topics, community members consistently emphasized:

- The importance of equity in prevention and response efforts
- The need for transparent communication and accessible data regarding lead contamination, lead exposure, and lead testing
- The value of coordinated action across systems and agencies
- The importance of culturally responsive education and outreach
- The need to reduce stigma associated with lead exposure and testing
- The importance of long-term, sustained community engagement and trust-building

Summary of Key Priorities

- Soil remediation and land restoration
- Safer housing and environmental exposure prevention
- Expanded access to lead testing, screening, and treatment
- Culturally relevant education and outreach
- Youth engagement and school-based programming
- Transparent sharing of environmental and research data
- Stronger policy, enforcement, and accountability
- Community-led prevention and local leadership development
- Equitable, stigma-reducing approaches centered on impacted communities

KEY RECOMMENDATION 01

Environmental Prevention & Soil Remediation

In community conversations, residents and practitionerspractioners recognizedidentified soil contamination and legacy environmental conditions, such as leaded gasoline and older homes, as key drivers of lead exposure in Santa Ana and Orange County, CA. Participants emphasized the need for both immediate protective actions and long-term environmental remediation to reduce exposure risks and restore affected areas.

INDIVIDUAL / HOUSEHOLD LEVEL

- Participate in community-led soil improvement activities when available
- Use safe gardening practices (e.g., raised beds, clean soil, mulch, protective landscaping)
- Practice basic hygiene after soil contact (e.g., handwashing, cleaning tools, removing shoes before entering the home)
- Use available information on local areas at greater risk of lead exposures to reduce direct contact with contaminated soil (e.g., refer to the map of soil lead levels in Santa Ana and other available resources about neighborhoods or communities with potential lead exposures)

COMMUNITY / ORGANIZATIONAL LEVEL

- Expand community-led soil remediation and bioremediation initiatives (e.g., planting projects, seedball workshops, vegetation-based approaches) to grow plants that have potential to absorb lead from the oil
- Support neighborhood-based outreach to share information on soil safety and environmental risks
- Engage residents in identifying local contamination concerns and co-developing solutions

INSTITUTIONAL LEVEL

- Strengthen mapping and public reporting of areas with elevated soil lead levels
- Translate technical findings into accessible, community-facing materials
- Provide technical guidance for safe soil management and remediation strategies
- Coordinate with community organizations to support local implementation efforts

POLICY / STRUCTURAL LEVEL

- Require public agencies to map, update, and publicly share soil lead contamination data in accessible formats
- Allocate dedicated funding for remediation in high-risk and historically impacted neighborhoods
- Establish requirements for soil testing and remediation in construction, redevelopment, and known contamination zones
- Enforce accountability for timely assessment and cleanup of identified hazards
- Require responsible parties (e.g., developers, companies) to contribute to remediation costs when contamination is linked to their activities
- Strengthen enforcement of environmental regulations related to industrial, transportation, and legacy sources
- Improve coordination across city, county, and state agencies
- Support appropriate use of remediation approaches (e.g., soil amendments such as phosphorus or zeolites, phytoremediation using plants and fungi)

KEY RECOMMENDATION 02

Exposure Prevention & Behavior Change

Throughout community conversations with residents and practitioners, participants identified prevention of lead exposure as an urgent priority requiring coordinated action across households, communities, institutions, and policy systems.

INDIVIDUAL / HOUSEHOLD LEVEL

- Learn about lead exposure pathways through accessible guidance, including community health workers (CHWs) or promotoras
- Practice exposure reduction behaviors (handwashing after outdoor activity, removing shoes before entering the home, cleaning indoor dust using wet/damp materials)
- Follow guidance to reduce contact with soil in areas at risk of lead contamination (e.g., cover contaminated soil)

COMMUNITY / ORGANIZATIONAL LEVEL

- Conduct education sessions in trusted spaces (schools, churches, community centers)
- Use door-to-door and peer outreach models to connect families with resources
- Partner with schools, clinics, and community organizations to distribute prevention materials
- Engage youth in designing and leading awareness campaigns
- Collaborate with local professionals to support home and yard interventions (e.g., mulch, grass, soil barriers)
- Create structured opportunities for youth leadership in prevention efforts

INSTITUTIONAL LEVEL

- Expand access to free or low-cost lead testing for all families, including children of all ages and adults
- Strengthen routine pediatric screening, especially in high-risk areas and increase the age required for testing
- Enforce housing and environmental health codes in homes, schools, and public buildings
- Require mitigation or remediation when hazards are identified (e.g., soil covering, paint stabilization)
- Increase capacity for inspections and mobile testing units
- Require disclosure of environmental health risks during housing transactions and rentals

POLICY / STRUCTURAL LEVEL

- Require lead-safe certification or mitigation prior to property sale or transfer
- Strengthen rental housing inspection requirements, especially for older buildings
- Enforce disclosure of lead and environmental health risks in housing agreements
- Require compliance with lead-safe standards in construction and redevelopment
- Expand publicly funded testing and remediation programs for children and families
- Strengthen enforcement mechanisms for non-compliance (landlords, developers, contractors)
- Establish dedicated funding streams for lead mitigation, including exploration of historical responsibility pathways

KEY RECOMMENDATION 02

Exposure Prevention & Behavior Change (cont.)

POLICY / STRUCTURAL LEVEL

- Integrate lead education into school-based programs and youth engagement initiatives using sustained, interactive approaches
- Integrate health education efforts regarding lead exposures and health impacts with professional development opportunities for youth that may help them build their resumes and support their career development

KEY RECOMMENDATION 03

Understanding Exposure Sources and Effects

Participants emphasized storytelling and lived experience – particularly youth voices – as a powerful strategy to increase awareness and understanding of lead exposure.

INDIVIDUAL / HOUSEHOLD LEVEL

- Engage youth voices and youth's personal aspirations in outreach to families in an effort to raise awareness about the importance of preventing lead exposures and strategies that individuals and households can adopt
- Encourage youth to share information about lead exposure and health effects with parents and caregivers, recognizing the strong trust many families place in youth communication

COMMUNITY / ORGANIZATIONAL LEVEL

- Address gaps in routine lead testing through educational materials (e.g., brochures, workshops) that support early identification
- Conduct targeted outreach in high-risk communities focused on common sources of lead exposure
- Integrate CHW-led education into existing programs (e.g., WIC), combining prevention education with nutrition counseling to support reduced lead absorption and build trust
- Identify and support trusted community "champions" to reinforce messaging and connect residents to resources
- Increase visibility at school events (e.g., back-to-school nights) to share information on risks and available programs

INSTITUTIONAL LEVEL

- Use interactive mapping tools to communicate neighborhood-level lead risk
- Require public access to environmental health reports, including site assessments and school/daycare inspections
- Ensure outreach materials are regularly updated, culturally relevant, and responsive to community needs
- Formalize partnerships (e.g., MOUs with school districts) to integrate lead education into science and history curricula

POLICY / STRUCTURAL LEVEL

- Strengthen enforcement of lead-safe home sale requirements, including pre-sale testing and compliance with local ordinances
- Require periodic inspections for lead-based hazards (including paint and plumbing systems)
- Mandate timely mitigation and abatement when hazards are identified, with clear enforcement and accountability mechanisms

KEY RECOMMENDATION 04

Treating Those Exposed

Participants identified timely and effective support for individuals exposed to lead as essential to reducing long-term health impacts, particularly for children and other commuinty members who may be most vulnerable to the health effects of lead exposures.

INDIVIDUAL / HOUSEHOLD LEVEL

- Access medical evaluation, testing, and follow-up care as recommended by healthcare providers
- Utilize available supportive and complementary wellness practices that may help reduce stress and support well-being (as desired by families), such as eating foods that may help minimize the body's absorption of lead and other wellness practices
- Use available public resources and benefits related to lead exposure support

COMMUNITY / ORGANIZATIONAL LEVEL

- Integrate county and state lead treatment and follow-up programs into existing services (e.g., WIC, maternal and child health programs) to improve access and continuity of care
- Provide logistical and material support (e.g., transportation, stipends, time-off assistance) to help families attend appointments and complete treatment
- Disseminate information about public benefits, testing, and treatment options in accessible formats
- Train school counselors, nurses, and community-based staff to support families navigating lead exposure response
- Develop community-based health navigators or liaisons to support families in accessing medical and social services and navigating care systems

INSTITUTIONAL LEVEL

- Recognizing that individuals, household, and communities are often exposed to multiple environmental hazards, establish a more comprehensive Environmental Exposure Registry to track blood lead levels and other environmental toxins (e.g., asbestos, mold) to support clinicians, public health practitioners, and residents in follow-up and treatment coordination
- Use Environmental Exposure Registry data to connect individuals with clinical monitoring, treatment, and supportive services
- Strengthen coordination with public health and environmental agencies (e.g., EPA, state environmental health departments) to guide response efforts
- Provide families with clear guidance and talking points to support self-advocacy in medical settings
- Ensure culturally responsive care navigation systems are in place to reduce barriers to follow-up care

POLICY / STRUCTURAL LEVEL

- Increase coordination across healthcare, public health, and environmental agencies to ensure long-term monitoring and treatment access
- Allocate sustained funding for case management, care navigation, and follow-up support services for exposed populations
- Build infrastructure to support long-term tracking of environmental exposure outcomes and health impacts
- Expand community-based workforce capacity for exposure response, navigation, and care coordination

KEY RECOMMENDATION 05

Equitable Treatment / Reducing Stigma

Community members identified stigma reduction and equitable treatment as essential to improving access to care and encouraging families to seek support.

INDIVIDUAL / HOUSEHOLD LEVEL

- Support families in understanding what to expect during medical visits related to lead exposure, including testing and follow-up care
- Provide clear, accessible information so caregivers can ask informed questions and advocate for their child's health needs
- Reduce fear and stigma around testing by normalizing lead screening as part of routine child well check visits

COMMUNITY / ORGANIZATIONAL LEVEL

- Strengthen communication between healthcare providers and patients to ensure families are consistently informed about lead exposure risks and test results
- Host community forums, open houses, and similar events to share updates on lead exposure, testing, and available resources
- Engage universities and community organizations in efforts to reduce environmental lead exposure and improve public understanding of its impacts
- Increase culturally responsive outreach to reduce stigma and build trust in testing and prevention services
- Ensure schools, clinics, and community organizations actively connect families to available resources and testing programs

INSTITUTIONAL LEVEL

- Strengthen access to healthcare services for low-income and underserved communities
- Normalize routine pediatric lead screening (e.g., standardized or annual testing) to reduce stigma and support early detection
- Ensure healthcare systems provide clear communication of test results and follow-up steps in accessible language
- Improve institutional accountability for equitable access to testing, diagnosis, and care coordination

POLICY / STRUCTURAL LEVEL

- Promote outreach and communication strategies that reduce stigma around lead exposure and testing
- Require healthcare systems and public health agencies to proactively inform families about testing availability and environmental health risks
- Ensure transparency in environmental health data and research findings, with clear public communication from institutions and agencies
- Support policies that institutionalize equitable access to testing, prevention, and follow-up care across all communities

KEY RECOMMENDATION 06

Building Trust with Communities

Community members identified trust-building as essential to effective lead exposure prevention and response, particularly given historical inequities and inconsistent communication.

INDIVIDUAL / HOUSEHOLD LEVEL

- Encourage community members to engage with trusted organizations and participate in education, prevention, and monitoring efforts
- Support access to clear and reliable information from trusted sources to guide health and environmental decisions

COMMUNITY / ORGANIZATIONAL LEVEL

- Conduct outreach and education in partnership with trusted community organizations
- Strengthen relationship-building through consistent engagement and follow-up with residents
- Ensure communication is clear, unified, and supportive rather than punitive or surveillance-oriented
- Train and support trusted community members to lead education and outreach efforts, building long-term community capacity
- Foster sustained engagement between researchers and residents through ongoing collaboration rather than one-time contact

INSTITUTIONAL LEVEL

- Promote transparency by sharing environmental testing results, remediation plans, and risk information in accessible, public-facing formats
- Reduce participation burden in research studies by minimizing unnecessary surveys, forms, and data collection requirements
- Ensure universities and research institutions actively support community action, not only data collection and reporting
- Develop tailored dissemination materials (e.g., one-page summaries) for different audiences, including residents, schools, and policymakers
- Strengthen collaboration with trusted community-based organizations to improve communication, access, and credibility

POLICY / STRUCTURAL LEVEL

- Require ongoing community engagement and transparency in environmental health decision-making processes
- Institutionalize long-term trust-building efforts rather than relying on one-time outreach or engagement activities
- Support sustained partnerships between public agencies, researchers, and community organizations to guide environmental health action

Short-Term: Immediate Protection and Access

The following implementation pathways translate community-identified priorities into actionable steps. These pathways are designed to support coordinated action across community organizations, public institutions, and policy systems while centering community leadership and environmental health equity. Effective implementation requires sustained collaboration, shared accountability, and alignment across sectors.

SHORT-TERM: IMMEDIATE PROTECTION AND ACCESS

COMMUNITY AND ORGANIZATIONAL LEVEL

- Expand community education and outreach on lead exposure prevention
- Strengthen connections to testing, prevention resources, and follow-up support through trusted organizations
- Support youth engagement in outreach and awareness efforts
- Increase community health worker (CHW) support for navigation and referrals

INSTITUTIONAL LEVEL

- Expand access to free or low-cost lead testing in communities at higher risk of lead exposure
- Improve communication of test results and follow-up care
- Increase school- and clinic-based screening efforts
- Make environmental health information (e.g., risk maps, inspection reports) publicly accessible

POLICY / STRUCTURAL LEVEL

- Strengthen enforcement of existing lead-safe housing and environmental regulations
- Require timely disclosure of environmental health risks in housing contexts
- Expand funding for testing, outreach, and early intervention

Medium-Term: System Strengthening

MEDIUM-TERM: SYSTEM STRENGHTENING

COMMUNITY AND ORGANIZATIONAL LEVEL

- Build sustained, school- and community-based education programs
- Formalize youth leadership roles in environmental health efforts
- Strengthen long-term partnerships between residents, organizations, and researchers

INSTITUTIONAL LEVEL

- Develop coordinated systems for environmental exposure tracking
- Standardize routine pediatric lead screening for communities at greater risk of lead exposure
- Improve coordination across housing, health, environmental, and education systems Expand
- workforce capacity for outreach, inspection, and care navigation

POLICY / STRUCTURAL LEVEL

- Require lead-safe certification or mitigation for housing transactions
- Strengthen enforcement mechanisms across housing and environmental regulations
- Increase dedicated funding for lead prevention and remediation
- Improve public transparency of environmental health data

Long-Term: Structural Change

LONG-TERM STRUCTURAL CHANGE

COMMUNITY AND ORGANIZATIONAL LEVEL

- Institutionalize community leadership in environmental health decision-making
- Sustain youth pathways into environmental health and public service roles

INSTITUTIONAL LEVEL

- Fully integrate environmental health equity into public systems (health, housing, education)
- Maintain long-term infrastructure for exposure tracking and response
- Embed environmental health education into school curricula

POLICY / STRUCTURAL LEVEL

- Address legacy contamination through large-scale remediation investment
- Align housing, environmental, and public health systems to prevent future lead exposures and related inequities
- Establish long-term accountability for pollution sources and environmental harms

Implementation Timeline at a Glance

SHORT-TERM
Immediate protection, expanded testing, and outreach in high-risk communities.

MEDIUM-TERM
Coordinated systems, standardized screening, and formalized youth leadership.

LONG-TERM
Structural equity embedded across housing, health, education, and policy systems.

A Shared Vision for Healthier Communities

The PHEAP findings reflect a shared community vision for addressing lead exposure through coordinated action across environmental prevention, health systems, education, and policy. Community members consistently emphasized the need for equitable, transparent, and culturally responsive approaches that prioritize prevention, expand access to care, and address structural sources of exposure.

Sustained progress requires:
Collaboration across community organizations, public institutions, and policymakers, with **community leadership at the center** of decision-making and implementation.

SECTION 06

Useful Resources: An Ongoing List

ORANGE COUNTY CHILDHOOD LEAD POISONING PREVENTION PROGRAM

Learn about resources through our local public health department to understand and address lead exposures.
Website: www.ochealthinfo.com/lead
Phone: (714) 567-6220

AZURE DEVELOPMENT – LEAD ABATEMENT PROGRAM

Funds to remodel your home/apartment to remove lead in the paint.
Website: azuredevelopmentco.com
Email: sandra@azuredevelopmentco.com
Phone: (323) 477-1160

SOUTH COAST AIR QUALITY MANAGEMENT DISTRICT

Report your observations of concerning odors, smoke, dust, or other air contaminants.
Email: webinquiry@aqmd.gov
Phone: (909) 396-2000

SANTA ANA WATER HOTLINE

Report concerns about the quality of your water.
Phone: (714) 647-3500

Additional Resources

This list is ongoing. Additional community resources, partner organizations, and referral contacts will be added as the PHEAP is finalized.