

**Testimony Supporting
H.B. 7133: An Act Concerning Blood Lead Level Requirements**

Karen Siegel, M.P.H.
Public Health Committee
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Senator Abrams, Representative Steinberg, Senator Somers, Representative Petit and esteemed members of the Public Health Committee,

I am testifying today on behalf of Connecticut Voices for Children, a research-based child advocacy organization working to ensure that all Connecticut children have an equitable opportunity to achieve their full potential.

H.B. 7133 would bring Connecticut in line with surrounding states such as *Maine, New Hampshire, Massachusetts, Vermont, and Rhode Island, which require environmental inspections for the source of lead poisoning at lower blood lead levels than Connecticut.* By intervening as soon as lead poisoning is confirmed, the state can ensure that parents who lack the resources to address the exposure are able to do so before additional poisoning occurs or other children are exposed. The results of lead poisoning in youth are permanent and can include learning disabilities, behavioral problems, and even death.¹

Connecticut's children continue to face high exposure to lead. Lead paint was outlawed in 1978, but about 71% of homes in Connecticut were built before 1980 and most homes built prior to 1960 contain at least some lead paint.² *In 2016, 2,000 children under age 6 (2.7% of children tested) had blood lead levels greater than 5 µg/dl*—the level at which the U.S. Centers for Disease Control and Prevention (CDC) considers a child to have lead poisoning.³ Studies show that the impact of even baseline or lower levels of lead poisoning lead to negative educational outcomes. For example, a study of over 40,000 children with blood lead levels of greater than 5 µg/dl found this group were 30% more likely to fail third grade reading and math tests than children without lead poisoning.⁴

Lead poisoning affects some populations more than others. Black children were twice as likely to experience lead poisoning as White children and Hispanic children were 1.5 times as likely to experience lead poisoning as non-Hispanic children in Connecticut in 2016.⁵ *These disparities are just one legacy of housing discrimination, redlining, and other forms of structural racism* that segregated the state's children and families of color in urban areas with more multi-family and older housing units.

Connecticut adheres to the CDC threshold for lead poisoning (5 µg/dl) in its surveillance reports and uses lead poisoning as an automatic trigger for early intervention.⁶ Unfortunately, that trigger does not occur until a child has tested as having more than five times (25 µg/dl) the baseline threshold for lead poisoning or has tested twice in three months as having between three to four times (15-20 µg/dl) that level. Similarly, an environmental investigation of the cause of poisoning is only required when a child is poisoned at five times the threshold for lead poisoning. This means that poisoned children may continue to be exposed to lead even after a blood test shows they have lead poisoning when families are unable to identify or address the source of the poisoning.

No family should be in the position of knowing their child has lead poisoning and being unable to stop the exposure and seek early intervention to mitigate its impact. H.B.7133 will ensure that families have access to the support they need to raise their children in a safe home and mitigate the impact of exposure to lead.

Thank you for the opportunity to testify in support of H.B.7133. I can be reached with any questions at ksiegel@ctvoices.org or at 203-498-4240, ext. 120.

¹ Centers for Disease Control and Prevention. Childhood Lead Poisoning. Retrieved from: <https://ephtracking.cdc.gov/showLeadPoisoningEnv>

² Connecticut State Department of Public Health. “About Lead.” Retrieved from: <https://portal.ct.gov/DPH/Environmental-Health/Lead-Poisoning-Prevention-and-Control/About-Lead>

³ Connecticut State Department of Public Health. “Childhood Lead Poisoning Prevention and Control: 2016 Annual Disease Surveillance Report.” Retrieved from: https://portal.ct.gov/-/media/Departments-and-Agencies/DPH/dph/environmental_health/lead/Surveillance_reports/CY-2016-Annual-Lead-Surveillance-Report_Final-6-11-2018-maps-updated-11-27.pdf?la=en

⁴ Centers for Disease Control and Prevention. (2015) “Educational Interventions for Children Affected by Lead.” Retrieved from: https://www.cdc.gov/nceh/lead/publications/Educational_Interventions_Children_Affected_by_Lead.pdf

⁵ Connecticut State Department of Public Health. “Childhood Lead Poisoning Prevention and Control: 2016 Annual Disease Surveillance Report.” Retrieved from: https://portal.ct.gov/-/media/Departments-and-Agencies/DPH/dph/environmental_health/lead/Surveillance_reports/CY-2016-Annual-Lead-Surveillance-Report_Final-6-11-2018-maps-updated-11-27.pdf?la=en

⁶ Ibid.