00-03

STATEMENT OF POLICY

CHILD LEAD POISONING ELIMINATION

Policy

The National Association of County and City Health Officials (NACCHO) supports the following:

- Continued federal, state, and local funding and implementation of cost-effective, community specific preventive measures to prevent and mitigate the multiple safety and health hazards that potentially cause lead exposure in the home and in other settings, such as schools, day care centers, recreational facilities and workplaces that may result in disease and illness in children.
- Local health department development and expansion of community oriented collaborative coalitions targeting efforts at children and their families who remain at risk for lead exposures and poisoning.
- Aggressive efforts by localities to identify lead poisoned children, as well as services for these children and their families.
- CDC’s new reference level of 5 µg/dL to identify children with blood lead levels that are much higher than most children’s levels.
- Efforts by local health departments to work toward the Healthy People 2020 goal of reducing childhood lead poisoning.¹

Justification

The Centers for Disease Control and Prevention estimates that about half a million U.S. children one to five years of age have high levels of lead in their blood (above 5µg/dL equals “the reference level at which CDC recommends public health actions to be initiated”).² In addition, the burden of lead poisoning falls disproportionately on low income families and families of color, with African American children more than two times more likely to experience lead poisoning than white children.³

The United States Department of Housing and Urban Development estimates more than 38 million US homes and apartments are burdened by lead based paint, with 24 million of them containing substantial lead hazards.⁴ Children can also be exposed to lead through soil, yard, and, playgrounds, which occurs naturally or can be contaminated from flaking or peeling exterior lead-based paint from homes and buildings or the past use of leaded gasoline in vehicles and industries.⁵ The management of a lead-poisoned child is a complex process, requiring an interdisciplinary, comprehensive response, which includes appropriate medical care and follow up services. It is critical that health departments are provided the funding necessary to work towards the Healthy People 2020 goals of eliminating elevated blood lead levels in children by providing primary prevention including education, case management and environmental interventions for families at risk as well as coordinate the mitigation of
hazards and treatment of children with healthcare providers.

References

Record of Action:
Proposed by Environmental Health Committee
Adopted by NACCHO Board of Directors
March 3, 2000
Updated February 2005
Updated July 2007
Updated January 2013