Testimony before the Public Health Committee in Support of Raised Bill No. 7133 AN ACT CONCERNING BLOOD LEAD LEVEL REQUIREMENTS.

February 25, 2019

Good morning Senator Abrams, Representative Steinberg, Senator Lesser, Representative Young, ranking and other members of the Public Health Committee. Thank you for the opportunity to testify in support of Raised Bill No. 7133 An Act Concerning Blood Lead Level Requirements.

My name is Kayla Goldfarb and I am a Policy Analyst for the Connecticut Association for Human Services (CAHS), as well as Director of Outreach for the Connecticut Early Childhood Alliance. CAHS is a statewide nonprofit agency that works to reduce poverty and promote equity and economic success for children and families through both policy and program initiatives, and the Alliance is a statewide membership organization committed to ensuring that all children in Connecticut are healthy, safe and ready for lifelong success.

In plain language, this bill would ensure that any child testing positive for lead poisoning, not just extremely high levels of blood lead, would receive the full array of treatment, remediation, and prevention strategies and resources already outlined by the current statues.

No level of blood lead is acceptable. The most recent Department of Public Health Annual Lead Surveillance Report (2015 data) tells us there were 2,156 children who were lead poisoned. Of these children, 58% had blood lead levels less than or equal to 5 ug/dL, representing a sizeable share of the lead poisoned population who would not receive the full array of treatment, abatement, and prevention resources outlined in the current statutes. Even at low levels, exposure to lead can cause irreversible damage in young children, including reduced growth, impaired cognitive abilities, impaired hearing, delayed puberty, and an increased risk of behavioral problems. Infants, toddlers, and preschool-aged children are the most susceptible to the toxic effects of lead because they absorb lead more readily than older children and adults and because their central nervous systems are still developing.

Because it is almost impossible to completely remove lead from the human body, and it is not easy to treat the associated health risks, experts note that the reduction and prevention of lead exposure is critically important. Additionally, because chronic exposure to low level concentrations of lead has been associated with cognitive behavioral disturbances in children, lowering the blood lead levels associated with the measures mentioned above is a wise step toward reducing the likelihood that children with lower lead poisoning levels do not suffer the cumulative effects of chronic exposure.

Lead laws like those already outlined by the Connecticut general statutes have been shown to effectively reduce the number of young children exposed to residential lead hazards and reduce the

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subsequent cases of lead poisoning in the properties identified with lead hazards. Furthermore, this legislation would align Connecticut’s blood lead level for reporting and action with the recommendations set forth by the Centers for Disease Control and Prevention lead poisoning interventions.

Lowering the level of blood lead at which these laws kick in will only serve to make Connecticut’s response to child lead exposure even more effective. Correspondingly, both the Connecticut Association for Human Services and the Connecticut Early Childhood Alliance urge the Committee to support Raised Bill No. 7133 to ensure that any child testing positive for lead poisoning, not just the extreme cases, receives the resources and information needed to mitigate and prevent future harm.

Thank you for your time and the opportunity to submit testimony in favor of strengthening Connecticut’s lead laws.

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