

KENNETH S. FINK, M.D., M.G.A., M.P.H. DIRECTOR OF HEALTH KA LUNA HO'OKELE

> WRITTEN TESTIMONY ONLY

STATE OF HAWAII DEPARTMENT OF HEALTH KA 'OIHANA OLAKINO P. O. Box 3378 Honolulu, HI 96801-3378 doh.testimony@doh.hawaii.gov

#### Testimony in SUPPORT of S.B. 2682 SD1 RELATING TO LEAD POISONING.

## SENATOR DONOVAN M. DELA CRUZ, CHAIR SENATE COMMITTEE ON WAYS AND MEANS

SENATOR KARL RHOADS, CHAIR SENATE COMMITTEE ON JUDICIARY

Hearing Date: 2/22/2024

Room Number: CR 211

1 **Fiscal Implications:** There are no fiscal implications for the Department of Health.

2 **Department Testimony:** The Department of Health (DOH) strongly supports S.B. 2682 SD1.

There is no known safe level of lead. Even a small amount of lead in a child's blood can inhibit their ability to learn, pay attention, and succeed in school. Hawaii data from 2018-2023 shows that each year an average of 316 (2.0%) of all tested children under the age of six (6) years had lead in their blood above the CDC Reference Level of 3.5 mcg/dl. However, the true prevalence of lead poisoning in Hawaii is not known since only 29.3% of children under the age of three (3) were tested in 2023.

9 The are many types of lead sources in Hawaii like old paint, soil, dust, old toys, jewelry,

10 antiques, souvenirs, fishing tackle, keys, dishes, food, spices, water, jobs, and hobbies. The wide

11 variety of possible lead sources make risk-based screening challenging. The questionnaires need

12 to be long and time-consuming to be comprehensive enough to avoid leaving a lead-exposed

13 child untested. Geographic targeting is even more difficult in Hawaii due to limited data from

14 low testing rates and a lack of historical data. Children with lead in their blood above the CDC

reference level who are not tested miss the opportunity for identification and removal of the lead

source and educational interventions to lessen the effects of lead. In addition, other children can
be exposed to that lead source if it is not identified and removed.

3 The Hawaii Childhood Lead Poisoning Prevention Program (HI-CLPPP) was restarted in 2017

4 with a CDC cooperative agreement after a 14-year lapse in funding. HI-CLPPP is currently

5 funded through 2026 and is committed to helping the community prevent children from being

6 exposed to lead, identifying children already exposed to lead so the source can be removed, and

7 linking families with recommended services.

8 The current HI-CLPPP risk-based system uses a screening questionnaire for families that combine risk-based questions with high-risk zip codes. A recent study by the University of 9 Hawaii Center on the Family (UH COF) funded by HI-CLPPP showed that 43% of children in 10 Hawaii with lead in their blood above the CDC reference level do not live in high-risk zip codes. 11 After attempting to validate risk systems informed by best practices from across the United 12 States, UH COF recommended HI-CLPPP consider universal testing at ages 1 and 2. HI-CLPPP 13 has the capacity to implement and adopt the recommendations in this bill for lead testing and 14 reporting. 15

16 Thank you for the opportunity to testify.



### **DISABILITY AND COMMUNICATION ACCESS BOARD**

1010 Richards Street, Room 118 • Honolulu, Hawaii 96813 Ph. (808) 586-8121 (V) • TTY (808) 586-8162 • Fax (808) 586-8129

February 22, 2024

# TESTIMONY TO THE SENATE COMMITTEES ON WAYS AND MEANS, AND JUDICARY

Senate Bill 2682 SD1 - Relating to Lead Poisoning

The Disability and Communication Access Board (DCAB) supports Senate Bill 2682 SD1 – Relating to Lead Poisoning.

This bill requires physicians to perform or order test for lead poisoning in minor patients at certain intervals, and if the physician performs the test, the results to be included in the minor patient's record of immunization. Requires the Department of Health to adopt recommendations. Provides certain exemptions for the mandatory lead poisoning testing of minors.

Identifying elevated levels of lead in minors allows the source of the lead to be removed and for treatment to begin to minimize the effects.

Thank you for considering our position.

Respectfully submitted,

KIRBY L. SHAW Executive Director

#### <u>SB-2682-SD-1</u> Submitted on: 2/21/2024 8:15:48 AM Testimony for JDC on 2/22/2024 9:46:00 AM

| Submitt | ed By | Organization   | <b>Testifier Position</b> | Testify                   |
|---------|-------|--|---------------------------|---------------------------|
| Maya M  | axym  | Testifying for American<br>Academy of Pediatrics,<br>Hawai'i Chapter | Support                   | Written Testimony<br>Only |

Comments:

Aloha Senators Rhoads and Fukunaga, Committee Members:

The Hawai'i Chapter of the American Academy of Pediatrics strongly supports SB 2682, which is designed to increase lead testing rates for our keiki. There is no known safe level of lead. Even a small amount of lead in a child's blood can hurt their ability to learn, pay attention, and do well in school. Despite this, less than 1/3 of children between ages 1-3 in Hawaii are appropriately tested for lead, and we have no true data on how many of our keiki are harmed by lead in a given year.

Because lead exposure in Hawai'i can come from so many different sources (and not just, as is commonly thought, paint chips from older houses), universal rather than risk based screening would be beneficial to all Hawai'i's children. In addition, this would align with national AAP guidelines for universal lead testing.

We do also support the recent amendments offered by the DOH, including specifically the wording change from "rules" to "recommendations" in Paragraph 325 / 321. Universal screening has the potential to save a significant number of children from irreversible neurologic damage and the accompanying hardship for their families.

Thank you for your consideration,

Maya Maxym, MD, PhD, FAAP on behalf of the American Academy of Pediatrics, Hawai'i Chapter



Hawai'i Children's Action Network Speaks! is a nonpartisan 501c4 nonprofit committed to advocating for children and their families. Our core issues are safety, health, and education.

Senate Committee on Judiciary Senate Committee on Ways and Means Re: SB2682 SD1 in strong support Hawai'i State Capitol, Conference Room 211 February 22, 2024; 9:46 am

Aloha Chair Rhoads, Vice Chair Gabbard, Chair Dela Cruz, Vice Chair Moriwaki, and Committee Members,

On behalf of Hawai'i Children's Action Network (HCAN) Speaks!, mahalo for the opportunity to testify in **STRONG SUPPORT of Senate Bill 2682 SD1** relating to Lead Poisoning. SB2682 SD1 requires physicians to perform or order tests for lead poisoning in minor patients at specific intervals. If the physician performs the test, the results are to be included in the minor patient's record of immunization.

There is no known safe level of lead. Even a tiny amount of lead in a child's blood can hurt their ability to learn, pay attention, and do well in school. Hawai'i data from 2018-2023 shows that an average of 316 (2.0%) of all tested children under six (6) years had lead in their blood above the Centers for Disease Control Reference Level of 3.5 mcg/dl each year. Still, the true prevalence of lead poisoning in Hawai'i is not known since only 29.3% of children under the age of three (3) were tested in 2023.

The effects of lead last a lifetime. Lead is linked to developmental delays, difficulty with muscle coordination, memory issues, and trouble learning, as well as continuous headaches and depression. There are also immediate problems, like headaches and seizures, that lead can cause. Hawai'i should renew its effort to identify lead poisoning in children to keep our kids healthy and safe. By adopting a standardized lead screening, we can be better informed on the health of our children and ensure that kids and families receive the services they need.

Until we know the extent of the problem, we will never be able to fully serve our families impacted by elevated lead levels. Our communities and families should be safe, healthy, and lead-free; to do so, we need the policies in this bill. Therefore, we respectfully request the committee pass SB 2682 SD1.

Me ka ha'aha'a,

Mai Hall, M.Ed. Children's Health Coordinator

### SB-2682-SD-1

Submitted on: 2/20/2024 4:54:18 PM Testimony for JDC on 2/22/2024 9:46:00 AM

| Submitted By | Organization | <b>Testifier Position</b> | Testify                   |
|--------------|--------------|---------------------------|---------------------------|
| Camden Lam   | Individual   | Support                   | Written Testimony<br>Only |

Comments:

I support SB2682.

I support this bill to keep children safe from lead poisoning. New testing recommendations will assist in more quickly identifying children who are exposed to lead sources and prevent children from being exposed to lead.

#### SB-2682-SD-1

Submitted on: 2/20/2024 9:29:59 PM Testimony for JDC on 2/22/2024 9:46:00 AM

| Submitted By | Organization | <b>Testifier Position</b> | Testify                   |
|--------------|--------------|---------------------------|---------------------------|
| Derek Priddy | Individual   | Support                   | Written Testimony<br>Only |

Comments:

All children regardless of zip code deserve to have the chance to use their gifts, talents, and intellect to share with the world. Lead steals away the dreams of parents and children alike and has wide impacts across the state and the nation. Over half of the population in the United States alive today was exposed to lead as a child at levels that would be considered dangerous today. As of 2015, it was estimated that lead is responsible for eliminating 824,097,690 IQ points from the US population. Imagine if lead were never released into the environment. How many more dreams would have come true? How many more people would have secured better jobs or a scholarship to college or graduate school? How much more money would the government have available to put toward more productive uses?

Unfortunately, we can't change the past, but we can change the future. This bill makes it easy for health care providers to understand that any child can be exposed to lead (and should be tested). This bill makes it easy for families to know that protecting their keiki from lead can help them have a better future. This bill makes it easy for children to grow up to their full potential.

We aren't always able to find ways to give children a better future at no cost to the state. This bill is a notable exception, and it is my sincere hope that it will have your full support. Thank you for your time and consideration.

#### <u>SB-2682-SD-1</u> Submitted and 2/20/2024

Submitted on: 2/20/2024 10:19:47 PM Testimony for JDC on 2/22/2024 9:46:00 AM

| Submitted By    | Organization | <b>Testifier Position</b> | Testify                   |
|-----------------|--------------|---------------------------|---------------------------|
| Jesse Hutchison | Individual   | Support                   | Written Testimony<br>Only |

Comments:

As a parent of a young child, I am particularly concerned about lead poisoning. Childhood lead exposure can cause a variety of health problems including mental health issues (e.g., ADHD) and learning problems. Lead exposure is particularly problematic because there are often no symptoms early on, so poisoning can go undetected until children are older and even more damage to their brains and bodies has been done. Some parents and pediatricians in Hawaii seem to think that lead poisoning is not a major concern here, but the reality is that hundreds of children in the state are poisoned by lead each year. Additional lead testing would help detect more children at risk, enabling important interventions to reduce their lead exposure and ameliorate problems they are experiencing caused by lead.

#### SB-2682-SD-1

Submitted on: 2/21/2024 3:38:17 PM Testimony for JDC on 2/22/2024 9:46:00 AM

| Submitted By  | Organization | <b>Testifier Position</b> | Testify                   |
|---------------|--------------|---------------------------|---------------------------|
| Sarah Osofsky | Individual   | Support                   | Written Testimony<br>Only |

Comments:

I strongly support SB 2682. As a mother of 2 kids, social work student at UH Manoa, and a person who works within the social services community I believe lead monitoring of children is essential. Research has shown how dangerous and damaging lead exposure which is why monitoring exposure through lead testing is essential. Following the Medicare reguirements for testing seems obevious and easily done at children's annual well visits. Instead of having to deal with the long term issues caused by childhood lead exposure, it would be much simpler and cheaper to monitor and thus prevent childhood lead exposure. For this reason I strongly support SB 2682.