JOSH GREEN, M.D.
GOVERNOR OF HAWAI'I
KE KIA'ĀINA O KA MOKU'ĀINA 'O HAWAI'I



STATE OF HAWAII DEPARTMENT OF HEALTH KA 'OIHANA OLAKINO

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Testimony in SUPPORT of S.B. 2682 S.D. 1 RELATING TO LEAD POISONING.

REP. DELLA AU BELATTI, CHAIR REP. JENNA TAKENOUCHI, VICE CHAIR HOUSE COMMITTEE ON HEALTH & HOMELESSNESS

Hearing Date: 03/13/2024 Room Number: CR 329

- 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 S.D. 1.
- 3 There is no known safe level of lead. Even a small amount of lead in a child's blood can inhibit
- 4 their ability to learn, pay attention, and succeed in school. Hawaii data from 2018-2023 shows
- 5 that each year an average of 316 (2.0%) of all tested children under the age of six (6) years had
- 6 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)
- 8 were tested in 2023.
- 9 There are many types of lead sources in Hawaii like old paint, soil, dust, old toys,
- 10 jewelry, antiques, souvenirs, fishing tackle, keys, dishes, food, spices, water, jobs, and hobbies.
- 11 The wide variety of possible lead sources make risk-based screening challenging. The
- 12 questionnaires need to be long and time-consuming to be comprehensive enough to avoid
- leaving a lead-exposed child untested. Geographic targeting is even more difficult in Hawaii due
- to limited data from 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.
- The Hawaii Childhood Lead Poisoning Prevention Program (HI-CLPPP) was restarted in
- 19 2017 with a CDC cooperative agreement after a 14-year lapse in funding. HI-CLPPP is currently

- 1 funded through 2026 and is committed to helping the community prevent children from being
- 2 exposed to lead, identifying children already exposed to lead so the source can be removed, and
- 3 linking families with recommended services.
- The current HI-CLPPP risk-based system uses a screening questionnaire for families that
- 5 combine risk-based questions with high-risk zip codes. A recent study by the University of
- 6 Hawaii Center on the Family (UH COF) funded by HI-CLPPP showed that 43% of children in
- 7 Hawaii with lead in their blood above the CDC reference level do not live in high-risk zip codes.
- 8 After attempting to validate risk systems informed by best practices from across the United
- 9 States, UH COF recommended HI-CLPPP consider universal testing at ages 1 and 2. HI-CLPPP
- 10 has the capacity to implement and adopt the recommendations in this bill for lead testing and
- 11 reporting.
- Thank you for the opportunity to testify.
- 13 **Offered Amendments:** None.

SB-2682-SD-1

Submitted on: 3/11/2024 12:17:32 PM

Testimony for HLT on 3/13/2024 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Brooke Hallett	Hawaii Chapter of American Academy of Pediatrics (AAP)	Support	Written Testimony Only

Comments:

Aloha Senators and 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.

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,

K. Brooke Hallett, FAAP on behalf of the American Academy of Pediatrics, Hawai'i Chapter

Assistant Clinical Professor, Pediatrics

SB-2682-SD-1

Submitted on: 3/11/2024 5:24:53 PM

Testimony for HLT on 3/13/2024 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Tanya Smith-Johnson	Healthy Mothers Healthy Babies Coalition of Hawaii	Support	Written Testimony Only

Comments:



March 11,2024

Dear Health Committee,

Healthy Mother Healthy Babies Coalition of Hawaii is in STRONG support of SB2682 SD1. This bill will enable lead testing to be done on all children under the same guidelines regardless of whether they are Medicaid or non-Medicaid recepients. The coordination of this tesing will increase testing compliance and provide improved data to ensure that the keiki of Hawaii are safe, healthy and cared for. We ask that you pass SB2682 SD.

Sincerely,

Healthy Mothers Healthy Babies Coalition of Hawaii

SB-2682-SD-1

Submitted on: 3/11/2024 10:07:24 AM

Testimony for HLT on 3/13/2024 9:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Michael EKM Olderr	Individual	Support	Written Testimony Only

Comments:

I support this bill because the threat of lead poisoning is an ongoing problem. From the pipes in our water and the paint in our houses, it's everywhere, and it's expensive to replace and even more costly to treat. That's why we should always make sure that our Keiki are being treated if found ingesting lead, because it's almost a death sentence for anyone but especially those so young. Please support this bill

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.

House Committee on Health and Homelessness Re: SB2682 SD1 in support Hawai'i State Capitol, Conference Room 329 March 13, 2024; 9:00 am

Aloha Chair Belatti, Vice Chair Takenouchi, and Committee Members,

On behalf of Hawai'i Children's Action Network (HCAN) Speaks!, mahalo for the opportunity to testify in **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