California Impact of Cuts to CDC’s Healthy Homes and Lead Poisoning Prevention Program

Each year, hundreds of children in California are newly diagnosed with lead poisoning. California’s Childhood Lead Poisoning Prevention Branch (CLPPB) and its partnering local agencies follow up on these cases, inspect the homes, and order units with lead hazards to be repaired. In 2007, 3,764 California children under age 21 were identified with elevated blood lead levels and 3,245 of these children were under the age of 6. Approximately 40,000 California children were identified as having blood lead levels above 5µg/dl, a level that is increasingly associated with health and developmental problems. There still is plenty of work to be done.

In 2012, California’s lead program is receiving $594,000 from the Centers for Disease Control and Prevention (CDC) Healthy Homes and Lead Poisoning Prevention Program (FY2011 funding). That funding is scheduled to end in August 2012, at which time California will determine what funding exists to continue the program and staff.

California has maintained a surveillance system since 2003 to capture and aggregate the results of blood tests for lead. The surveillance data enables the state of California and CLPPB to identify high-risk areas for lead poisoning and track patterns over time. The data is also used in program planning and other federal grant applications including for HUD, CDC, and EPA. CDC funding enables California’s program to respond to emerging lead threats. For example, in some cases, multiple children in the same family may have elevated blood lead levels. The program’s environmental health professional conducts an environmental inspection to identify a lead hazard in the home or child care facility. In California from 2006 to 2010, 18,288 properties tested positive for some kind of lead hazard, representing 45.3% of the 40,389 total properties that were inspected for lead hazards.

The CDC-funded CLPPP helps ensure medical provider compliance with Medicaid and other requirements for lead screening services for eligible children. Testing is the only way to discover if a child has been poisoned. The program also helps both the state and local lead hazard control programs funded by the Department of Housing and Urban Development to identify the highest-risk families whose homes most need abatement and to target resources to communities with concentrations of lead-poisoning cases.

If funding is not restored for the program at CDC in FY2013, California will suffer from a reduction in vital services. Without the surveillance data provided through the CDC program, there will be no way to treat the existing threat or track a possible resurgence in blood lead levels. The impact of the elimination of CDC’s Healthy Homes and Lead Poisoning Prevention Program is significant, and California’s children stand to lose significantly. Cuts in funding will severely curtail the successful program California has worked for over 10 years to build. Now is not the time to dismantle CDC’s Healthy Homes and Lead Poisoning Prevention Program.