

Georgia Impact of Cuts to CDC's Healthy Homes and Lead Poisoning Prevention Program

The Georgia Lead Poisoning Prevention Program (GCLPPP) has had a surveillance system in place to identify children who are lead poisoned since 1992. In 2009, 120,000 children under the age of six were tested for lead and almost 1,000 were identified as being lead poisoned. GCLPPP and its partnering local agencies follow up on these cases, inspect the homes, and order units with lead hazards to be repaired. Approximately 60 cases are followed or managed each year and close to 40 Lead Hazard abatement orders were issued statewide.

In 2012, Georgia's lead program is receiving \$593,092 from the Centers for Disease Control and Prevention (CDC) Healthy Homes and Lead Poisoning Prevention Program (FY2011 funding). That allows the state to fund 7 Regional Lead Coordinators throughout the state who work with GCLPPP to perform environmental risk assessments of identified lead poisoned children. That funding is scheduled to end in August 2012, at which time Georgia will determine what funding exists to continue the program and staff.

The purpose of the State's surveillance system, which has been in place since 1992, is to capture and to aggregate the results of blood tests for lead. The system has obtained screening records for over 640,000 tests. The surveillance data enables GCLPPP 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 Georgia'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 addition, the program also creates opportunities for outreach in the forms of community health education and outreach, education to private and public health workers with CME and CNE continuing education credits.

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, Georgia 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. Without funding, Lead Program Staff will be reduced and capacity will be reduced. The impact of the elimination of CDC's Healthy Homes and Lead Poisoning Prevention Program is significant, and Georgia's children stand to lose significantly. Cuts in funding will severely curtail the successful program Georgia has worked for 10 years to build. Now is not the time to dismantle CDC's Healthy Homes and Lead Poisoning Prevention Program.