

Foreword

We find ourselves at a crossroads. On the one hand, blood lead levels in the U.S. population continue to decline, offering the hope that lead poisoning can be eliminated in the not too distant future. On the other hand, children, who are most vulnerable to the harmful effects of lead, continue to be exposed to this toxicant at an unacceptable rate. Some 890,000 U.S. children have lead levels high enough to cause adverse effects on their ability to learn, mainly because of exposure to deteriorating lead-based paint in their homes. To better protect our children, we must step up our efforts to identify those with elevated blood lead levels so that they can receive the care they need.

At present, too many children with elevated lead levels are not being identified. More effective screening is necessary and must be focused where children are most likely to benefit. The policy outlined in this document has two main purposes: to increase screening and follow-up care of children who most need these services, and to help communities pursue the most appropriate approach to the prevention of childhood lead poisoning. In some places, the level of risk for lead exposure may not justify the screening of all children. In many other places, more screening than is currently being done will be necessary.

The process described in the pages that follow will succeed or fail to the extent that it is embraced by state and local health departments, Medicaid agencies, health-care providers,

and other community members. Chapter 3 contains our recommendations for developing screening that is responsive to community situations and needs. We believe that the community should be involved in planning and carrying out screening, and we have tried to outline a process that is easy to follow, even though it involves complex decisions. The Centers for Disease Control and Prevention (CDC) will continue to support state and local public health agencies as they lead the development of statewide screening plans, and our agency stands ready to guide and encourage communities in all facets of lead poisoning prevention. In its effort to combat lead poisoning among children, CDC works with other Federal agencies, especially the Department of Housing and Urban Development (HUD) and the Environmental Protection Agency (EPA), through a combination of regulation, guidance, technical assistance, and funding support.

I want to thank the members of the CDC Advisory Committee, our consultants, and all who have contributed their time and talents to this guidance. I believe that the approach described in these pages will move the nation closer to its goal of eliminating childhood lead poisoning. Certainly, the children of this nation deserve no less.

Richard J. Jackson, M.D., M.P.H.
Director
National Center for Environmental Health