

**Wisconsin Public Health Council**  
**Policy Resolution on Childhood Lead Poisoning Treatment and Prevention**  
**Adopted October 12, 2007**

**Whereas**, more than 40,000 Wisconsin children since 1996 have been identified with lead poisoning. This identification level equals 10mcg/dL or greater of lead in blood. The vast majority of scientific research shows that children identified as lead poisoned suffer losses in intelligence. A study of 8,627 North Carolina children found that those exposed to lead in their pre-school years had lower third grade math and reading test scores. Lead paint in older homes is the primary lead exposure source for infants and children. Compared with other states, Wisconsin ranks 6<sup>th</sup> in the number of lead-poisoned children.

**Whereas**, lead poisoning in Wisconsin can be eradicated by rehabilitating our old housing. Many of these homes, with a small investment, will provide safe affordable housing for the next century. At the current rate of reducing lead paint hazards in old housing, tens of thousands of Wisconsin children will become lead poisoned.

**Whereas**, because low income and minority families are limited in their housing choices, and sometimes are forced by many factors to live in hazardous housing, their children are at increased risk for lead poisoning. Lead poisoning contributes to other socio-economic factors that produce other unacceptable health disparities for Wisconsin's low income and minority children. It negatively impacts our state's educational and correctional system costs.

**Whereas**, our current policy of public health investigation and intervention at a blood lead level of 20 mcg/dL or a persistent level of 15 mcg/dL is unacceptable. This is because we know that damage occurs at blood lead levels below 10 mcg/dL. In 2006, Wisconsin provided \$1 million to local public health agencies to respond to and to prevent lead poisoning. If we lower the investigation and intervention blood lead level to a blood lead level of 10 mcg/dL, and budget an additional \$1 million to investigate the increased caseload, we can save children.

**Whereas**, incentives to property owners are needed to effectively control lead hazards. Lowering the blood lead level at which property owners are required to control lead hazards in housing will create demands for additional financing for property owners to make the investments needed to rehabilitate old housing. Creating an annual fund of \$10 million for lead hazard control measures, i.e., housing rehabilitation loans and grants, would address this need.

**The Wisconsin Public Health Council recommends that the Governor:**

1. Lower the public health investigation and intervention level to 10 mcg/dL from the current 20 mcg/dL or persistent levels of 15/mcg/dL, and fund the additional public health work load by budgeting an additional \$1 million for the program.
2. Enact legislation creating an annual fund of \$10 million for lead hazard control measures. In addition, we support the creation of a window replacement loan fund and a housing trust fund with a dedicated proportion of funds for lead hazard control as measures that would rehabilitate old housing. This would allow us to dramatically accelerate our efforts to prevent lead poisoning
3. Enact legislation to allow local governments to establish fees/taxes specifically for the establishment of housing trust funds at the local level. These new fees/taxes must be exempt from any levy caps imposed by the state.
4. Require partners to develop and coordinate housing action plans that make lead hazard control a priority. Encourage lenders to make loans more attractive to property owners to correct lead paint hazards. Targeted loan programs should focus on housing built before 1950, which is where lead hazards are greatest.
5. Enact legislation that would require that paint on property built before 1978 be in intact condition before property is rented or sold.