February 3, 2016

The Honorable Jason Chaffetz
Chairman
Committee on Oversight &
Government Reform

The Honorable Elijah Cummings
Ranking Member
Committee on Oversight &
Government Reform

U.S. House of Representatives
2157 Rayburn House Office Building
Washington, DC 20515

Dear Chairman Chaffetz and Ranking Member Cummings:

On behalf of the American Academy of Pediatrics (AAP), a non-profit professional organization of 64,000 primary care pediatricians, pediatric medical subspecialists, and pediatric surgical specialists dedicated to the health, safety and well-being of infants, children, adolescents, and young adults, I write to you regarding the tragedy in Flint, Michigan and the exposure of its citizens to lead, a potent neurotoxin, through their drinking water. In particular, I wish to highlight the detrimental and lifelong health effects of childhood lead exposure. As you consider federal policy solutions to this crisis, the AAP urges you to emphasize both short-term and long-term efforts to mitigate those health effects to support children and families who have been exposed to lead.

There is no safe level of lead exposure for children. Lead damage can be permanent and irreversible. Lasting decreases in cognition have been documented in children with blood levels as low as 5 micrograms per deciliter of lead in blood.\(^\text{1}\) Elevated blood lead levels (EBLL) are defined as lead levels above the Centers for Disease Control and Prevention (CDC) reference level of 5 micrograms per deciliter.\(^\text{2}\) According to census data, an estimated 8,000 – 9,000 children under the age of 6 have been potentially exposed to lead via the Flint drinking water. Research conducted by Mona Hanna-Attisha, MD, FAAP and Allison Champney Schnepp at Hurley Medical Center found that after Flint changed its water source, the incidence of EBLLs increased from 2.4% to 4.9%, and that neighborhoods with the highest water lead levels experienced a 6.6% increase.\(^\text{3}\)

Although lead is a risk factor for developmental and behavioral problems, its impact varies significantly by individual and may be affected by the psychosocial environment and educational experiences of the developing child. As you know, the city of Flint has long been an impoverished community beset by a host of economic and infrastructure hardships. This adversity, coupled with widespread lead exposure, means that Flint’s children will require significant help in coping with the impact of lead on their physical and behavioral health and development, their schooling, and much more.
The AAP therefore urges policymakers to keep their focus, and the provision of funding, on helping the children of Flint in both the short-term and the long-term. Our non-exhaustive list of recommendations for immediate and longer-term interventions for this community is as follows.

**Short-Term**

- Despite a policy change within the local Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) to allow access to bottled, ready-to-feed formula through WIC, we are concerned that families may still be feeding infants powdered formula mixed with Flint water because ready-to-feed formula may be too heavy to transport. We urge immediate assistance with the transport of these heavy formula bottles directly to the homes of affected families with infants. Additionally, given that WIC is uniquely positioned as a public health nutrition program with food packages designed to meet nutritional deficiencies in the diets of young children and pregnant and breastfeeding women as well as provide nutrition education and health care referrals, we support the extension of WIC to children in Flint to age 10.
- The regular consumption of healthy, low-fat foods high in iron, calcium, and vitamin C can help children fight lead poisoning. However, grocery stores and fresh produce can be difficult to find in Flint, making it difficult for families to have continued access to healthy foods. The inability of schools and other child-serving sites to procure, store, and serve nutrient-dense foods such as fruits and vegetables presents a barrier to improving the nutritional quality of meals served to children. We urge immediate and sustained resources, training, and technical assistance aimed at schools, child care and Head Start providers, after school programs, and summer feeding programs to ensure that they are able to obtain and provide sufficient quantities of healthy foods. The Supplemental Nutrition Assistance Program (SNAP) plays a vitally important role in the lives of the children and families in Flint and, as such, attention should be paid to ensuring all opportunities to promote access to healthy foods and food preparation are maximized.

**Long-Term**

- The Head Start and Early Head Start programs can provide critical, early interventions for Flint’s children. Children enrolled in Head Start programs have well-documented challenges to their social, emotional, developmental and physical health, and the Head Start programs are designed to give these children a good start to life. Current statistics, however, show that only approximately 1,000 of Flint’s approximately 8,000 children under 6 are served by Head Start. We urge you to adequately fund Head Start and Early Head Start programs to ensure universal access for all of Flint’s families with pregnant mothers or young children, regardless of income eligibility, given the widespread poverty and lead exposure in the city.
- Other evidence-based early childhood programs, such as Reach Out and Read and quality universal pre-kindergarten, should also be available for Flint children. These programs can serve as cost-effective, high-quality interventions to improve outcomes for these children while they are still young.
- Children with elevated lead levels are more likely to have behavior problems, attention deficit and reading disabilities, and fail to graduate from high school, in addition to experiencing a host of other impairments to their developing cardiovascular, immune and endocrine systems. Special education will be needed to help Flint’s children as they progress in their schooling. We urge you to provide funding for the provision of special education resources to this community for the entirety of the school careers of Flint’s children, as well as training for staff to support an understanding within these programs of the manifestations of childhood lead exposure and how best to work with this population of children.

Given the nature of this crisis and the challenges that face this community, the children of Flint will need our help not just today, but for years to come. We urge you to prioritize the provision of both immediate and long-term resources to help Flint’s children get the best possible start in life, despite this public health tragedy.

Sincerely,

Benard P. Dreyer, MD, FAAP
President

BPD/ag

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ii [http://www.cdc.gov/nceh/lead/acclpp/blood_lead_levels.htm](http://www.cdc.gov/nceh/lead/acclpp/blood_lead_levels.htm).


v Reach Out and Read prepares young children to succeed in school by partnering with doctors to prescribe books and encourage families to read together. Families served by Reach Out and Read read together more often, and their children enter kindergarten with larger vocabularies and stronger language skills, better prepared to achieve their potential.