

Report to the New York City Council on Progress in Preventing Elevated Blood Lead Levels in New York City

Submitted by New York City Department of Health & Mental Hygiene September 2024

About This Report

Local Law 1 of 2004 requires the New York City Department of Health and Mental Hygiene (DOHMH) to annually report to the New York City Council on the City's progress toward reducing elevated blood lead levels among children and increasing blood lead testing in New York City. This report is submitted in compliance with this requirement.

Data in the report are presented in six sections:

- Section I presents data on New York City children under 6 years of age with blood lead levels at or above 3.5 micrograms per deciliter (mcg/dL). Young children are at greatest risk for elevated blood lead levels.
- Section II presents data on elevated blood lead levels for children under 18 years of age including by type of housing (public or private), and by borough.
- Section III presents data on pregnant women with elevated blood lead levels. New York State law requires health care providers to assess all pregnant New Yorkers for risk of lead exposure at their first prenatal visit.
- Section IV presents data on blood lead testing for children turning 3 years of age in 2023. New York State law requires health care providers to test all children at or around ages 1 and 2.
- Section V presents data on safe work practices, including the number of addresses inspected and violations issued. Building owners must use safe work practices and trained workers to fix lead paint hazards when doing abatement and general repair work that disturbs lead-based paint.
- Section VI presents data on implementation of education and outreach and outlines strategies for continued progress in the prevention of lead exposure among children and communities at high risk.

The COVID-19 public health emergency has led to significant changes in health care utilization – including a drop in blood lead testing among children. Because of these changes, as well as a decline in the population caused by out-migration during pandemic, 2020-2023 surveillance data should be interpreted with caution.

Section I: Elevated Blood Lead Levels Among Children Under 6 Years Old

Lead exposure in childhood can lead to serious, long-term consequences, including learning difficulties and behavioral problems. Young children are especially at risk because they explore their environment by placing non-food items in their mouths, potentially exposing them to lead in dust and paint. Leadbased paint hazards remain the most commonly identified exposure source for New York City children with elevated blood lead levels.

Number of New York City children with elevated blood lead levels are reaching historic lows. Since 2005, there has been a 93% decline in the number of children under 6 years of age with blood lead levels of 3.5 mcg/dL or greater.

Children under age 6 with blood lead levels of 3.5 mcg/dL or greater

In 2023, 5,078 New York City children under 6 years of age were identified with a blood lead level of 3.5 mcg/dL or greater. This number is virtually unchanged from 2022, when there were 5,114 children with blood lead levels of 3.5 mcg/dL or greater and represents a 93% decline since 2005 when there were 68,681 children with blood lead levels of 3.5 mcg/dL or greater.

In 2023, the rate of children under 6 with elevated blood lead levels was 21.7 per 1,000 children tested, almost identical to the 2022 rate, of 21.8 per 1,000 children tested. The COVID-19 public health emergency has led to significant changes in health care utilization – including a drop in blood lead testing among children. Because of these changes, as well as a decline in the population caused by outmigration during pandemic, surveillance data trends since 2020 should be interpreted with caution.

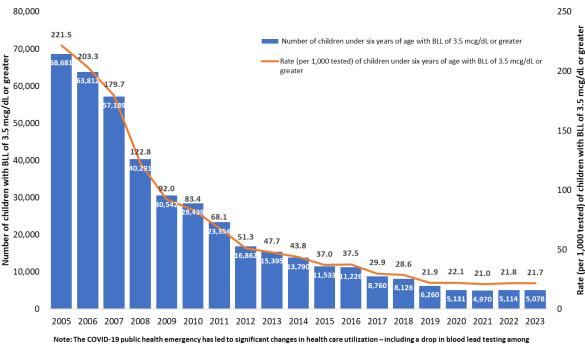


Figure 1. The number and rate (per 1,000 tested) of New York City children under 6 years of age with a blood lead level (BLL) of 3.5 mcg/dL or greater

children. For this reason, 2020 -2023 surveillance data should be interpreted with caution.

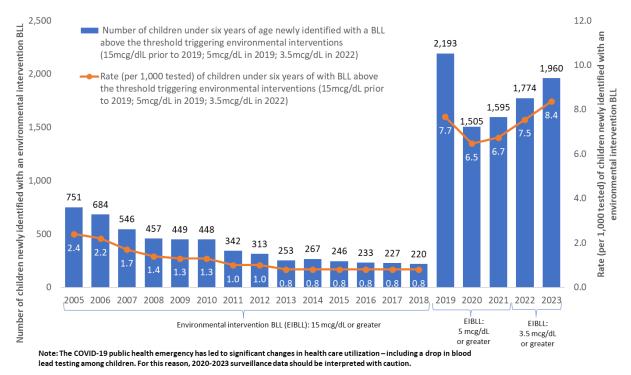
The data above represent unique children per year. Included are all children tested in a calendar year with an elevated blood lead level, regardless of whether the test was confirmed or not, and regardless of whether they had an elevated test in previous years. Adding across years will result in duplicate counts of individual children over time. Between January 2005 and December 2023 there were 324,058 children under the age of 6 who had a blood lead level of 3.5 mcg/dL or greater.

Children under age 6 with blood lead levels at or above the environmental intervention threshold

Prior to June 2019, Local Law 1 of 2004 required DOHMH to conduct environmental investigations for New York City children with an elevated blood lead level of 15 mcg/dL or greater. Since July 2018, DOHMH has been conducting environmental investigations for all children with an elevated blood lead level at or above 5 mcg/dL, and starting in March 2022, DOHMH has been providing these services to all children with a confirmed blood lead level of 3.5 mcg/dL or greater.

In 2023, 1,960 children¹ younger than 6 years of age were newly identified with an environmental intervention blood lead level of 3.5 mcg/dL or greater. This represents a 10% increase in the number of children receiving environmental intervention services compared to 2022² when there were 1,774 children. This increase is largely due to the change in the blood lead levels triggering environmental interventions.

Figure 2. The number and rate of New York City children under 6 years of age newly identified with a blood lead level (BLL) at or above the environmental intervention threshold



¹ This number includes only children with a confirmed elevated blood lead level, who had an elevated test for the first time in a given calendar year. Figure 1, in contrast, shows all children tested in a calendar year with an elevated blood lead level, regardless of whether the test was confirmed or not, and regardless of whether they had an elevated test in previous years. ² The increase in cases identified in 2023 can be attributed to the differences in the length of implementation of the new threshold for environmental interventions. The lower blood lead level (BLL) threshold of 3.5 mcg/dL, implemented in March 2022, was enforced for the full calendar year 2023. This change increased the number of children eligible for intervention services in 2023 compared to 2022 when the threshold was 5 mcg/dL for the first two months, accounting for the observed increase in cases in 2023.

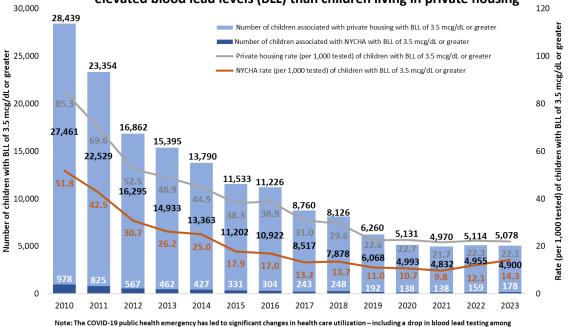
The burden of lead exposure is highest among children of color and children living in high-poverty neighborhoods

While the number of children with blood lead levels of 3.5 mcg/dL or greater has decreased over time across racial and ethnic groups and neighborhoods, the burden of lead exposure remains high for children of color and children living in moderate to high-poverty neighborhoods.

- In 2023, 87% of children under 6 years of age with blood lead levels of 3.5 mcg/dL or greater were from moderate (48%) to high poverty neighborhoods (39%) (defined as zip codes with 10% to 20% and 20% or more of the population living below poverty level, respectively).
- The rate of children under 6 years of age with blood lead levels of 3.5 mcg/dL or greater in moderate poverty neighborhoods was 22.2 per 1,000 children tested, and in high poverty neighborhoods 24.2 per 1,000 children tested, 45% and 58% greater, respectively, than the rate of 15.3 per 1,000 children tested in the wealthiest neighborhoods.
- In 2023, Asian, Black, and Latino children represented 85% of children under age 6 newly identified with blood lead levels of 3.5 mcg/dL or greater.

Children living in public housing had a lower risk for lead exposure than children Citywide

Children living in homes maintained by the New York City Housing Authority (NYCHA) have, on average, a lower risk of lead exposure than those living in private housing. This difference in risk of exposure is likely because housing stock throughout the City is older than housing maintained by NYCHA.





Note: The COVID-19 public health emergency has led to significant changes in health care utilization – including a drop in blood lead testing among children. For this reason, 2020-2023 surveillance data should be interpreted with caution. The data above represent unique children per year. Included are all children tested in a calendar year with an elevated blood lead level, regardless of whether the test was confirmed or not, and regardless of whether they had an elevated test in previous years. Adding across years will result in duplicate counts of individual children over time. Between January 2010 and December 2023 there were more than 131,000 children under the age of 6 who had a blood lead level of 3.5 mcg/dL or greater; about 4,400 (3%) of these children were associated with NYCHA.

- In 2023, of more than 12,000 children under 6 years of age living in NYCHA housing who were tested for lead, 178 had blood lead levels at or above 3.5 mcg/dL. This represents an 82% decline since 2010, when there were 978 children living in NYCHA housing with elevated blood lead levels at or above 3.5 mcg/dL. Although this is a 12% increase compared to 2022, when there were 159 children, these data should be interpreted with caution due to changes in health care utilization, out-migration, declining birth rates, reduced testing during the COVID-19 emergency, and changes in the reference BLL.
- In 2023, the rate of children less than 6 years old living in NYCHA housing with blood lead levels at or above 3.5 mcg/dL was 14.3 per 1,000 children tested. This is about 35% lower than both the citywide rate of 21.7 per 1,000 children tested and the rate for children living in private housing, which was 22.1 per 1,000 children tested.

Section II: Elevated Blood Lead Levels Among Children Under 18 Years Old

Blood lead levels among children under age 18 follow a similar pattern as blood lead levels for younger children. In 2023, the rate of children under age 18 living in NYCHA housing with blood lead levels at or above 3.5 mcg/dL was 12.9 per 1,000 children tested, more than 40% lower than the Citywide rate and the rate among children living in private housing (21.3 per 1,000 children tested and 22.0 per 1,000 children tested, respectively).

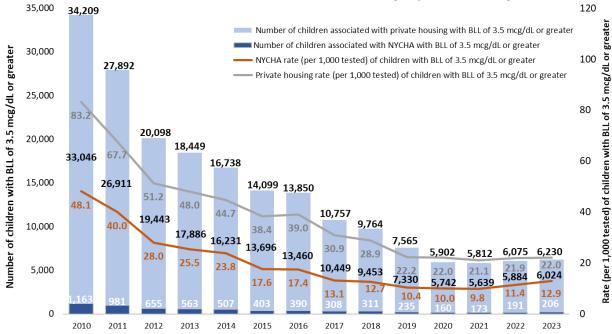


Figure 4. Children under age 18 living in NYCHA housing have consistently lower rates of elevated blood lead levels (BLL) than children living in private housing

Note: The COVID-19 public health emergency has led to significant changes in health care utilization – including a drop in blood lead testing among children. For this reason, 2020-2023 surveillance data should be interpreted with caution. The data above represent unique children per year. Included are all children tested in a calendar year with an elevated blood lead level,

regardless of whether the test was confirmed or not, and regardless of whether they had an elevated test in previous years. Adding across years will result in duplicate counts of individual children over time. Between January 2010 and December 2023 there more than 150,000 children under the age of 18 who had a blood lead level of 3.5 mcg/dL or greater; about 5,300 (3%) of these children were associated with NYCHA.

Section III: Pregnant People with Elevated Blood Lead Levels

Lead exposure can harm both the fetus and pregnant person, increasing the risk of miscarriage, causing birth defects, and leading to learning and behavior problems in children. New York State law requires medical providers to assess pregnant people for lead exposure at their first visit. Prior to 2019, DOHMH provided risk assessments to all pregnant people with blood lead levels of 10 mcg/dL or greater. Since April 2019, DOHMH provides risk assessments to all pregnant people with a blood lead level of 5 mcg/dL or greater.

- In 2023, 424 individuals who could become pregnant were identified with elevated blood lead levels (5 mcg/dL or greater), including 295 confirmed pregnancies.
- Among those with available birth country data, 84% were foreign-born, representing 25 different countries. Of these cases, 80% were from just four countries: 53% from Mexico, 13% from Guatemala, 10% from Ecuador, and 4% from Bangladesh.

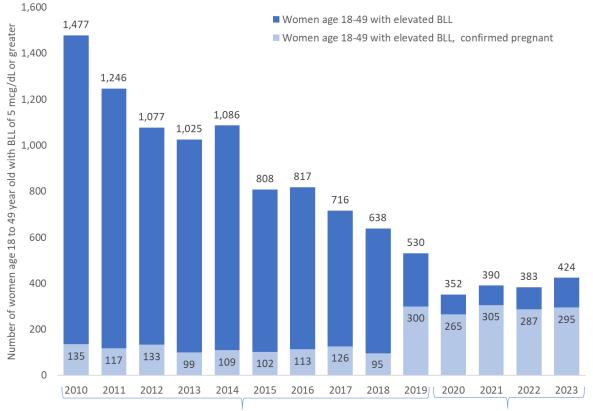


Figure 5. Number of people who could become pregnant identified with blood lead levels (BLL) of 5 mcg/dL or greater, total and confirmed pregnant, New York City 2010-2023

Pregnancies confirmed for people with BLL of 10 mcg/dL or greater

Since April 2019, pregnancies confirmed for people with BLL of 5 mcg/dL or greater

Note: The COVID-19 public health emergency has led to significant changes in health care utilization. For this reason, 2020-2023 surveillance data should be interpreted with caution.

Section IV: Blood Lead Testing for Children Ages 3 Years and Younger

Early identification of lead-exposed children is critical to prevent further exposures. Since most children with elevated blood lead levels have no symptoms, blood lead testing is the only way to identify them. In New York State, health care providers are required by law to test all children at or around age 1 and age 2, and to assess and test those at risk of lead poisoning starting at age 6 months up to age 6.

Most New York City children were tested for lead poisoning at least once before age 3

- In 2023, an estimated 79% of New York City children turning 3 years old were tested for lead poisoning at least once. However, only 50% were tested at both age 1 and age 2, as required by New York State law.
- Although most NYC children are tested for lead before age 3, the COVID-19 public health emergency has significantly impacted health care utilization, leading to a drop in blood lead testing. In 2023, there was an 18% decline in the number of children tested for lead compared to 2019.

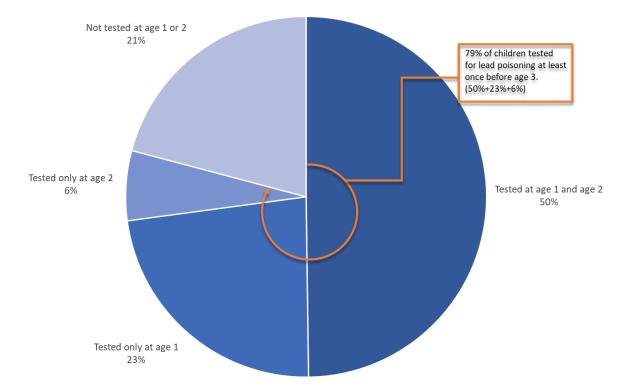


Figure 6. Most New York City children are tested for lead poisoning at least once before age 3

Note: The COVID-19 public health emergency has led to significant changes in health care utilization – including a drop in blood lead testing among children. For this reason, 2023 surveillance data should be interpreted with caution.

Source: New York City Department of Health and Mental Hygiene Childhood Blood Lead Registry and Office of Vital Statistics.

Section V: Safe Work Practices

New York City's housing stock is old and many have older layers of lead-based paint in dwelling units or common areas, especially in buildings built prior to 1960. For this reason, to prevent potential lead exposure, building owners are required to take active measures to ensure that deteriorated surfaces are remediated and abated, and must use safe practices for any construction, abatement, or repair activities that disturb painted surfaces.

DOHMH checks that property owners are using safe work practices when complying with a Health Commissioner's Order to abate a lead paint hazard. In 2023, DOHMH monitored 1,060 buildings for compliance with a Health Commissioner's Order to abate, conducted 2,267 inspections in these buildings, and issued 6 Orders or notices of violations in 6 of the proactively monitored buildings. DOHMH also responds to 311 calls about unsafe work practices. In 2023, in response to 311 calls, DOHMH conducted 1,194 inspections in 539 buildings and found unsafe work practices in 207 of these buildings and issued 300 Orders or notices of violation.

Section VI: Education, Outreach and Strategies for Continued Progress

New York City has made great progress in reducing elevated blood levels in children. Between 2005 and 2023, there was a 93% decline in the number of children younger than 6 years of age with a blood lead level of 3.5 mcg/dL or greater. This success is the result of a proactive and comprehensive approach to preventing lead exposure in childhood. Nevertheless, living in older, poorly maintained housing where lead-based paint exists continues to be the most commonly identified risk factor for lead exposure among New York City children.

Education and outreach focused on childhood lead poisoning prevention

DOHMH conducts education and outreach throughout New York City. In 2023:

- DOHMH distributed more than 125,000 copies of printed educational materials on prevention of lead poisoning among children, pregnant persons, workers in high-risk occupations such as construction, as well as materials on lead contamination in consumer products. These materials were printed in 12 languages: English, Spanish, Bengali, Urdu, Hindi, Chinese, Arabic, Russian, Punjabi, French, Yiddish, and Haitian Creole.
- More than 16,000 New Yorkers participated in over 480 education and outreach events that
 raised awareness about need for timely testing of children for lead poisoning, home health
 hazards such as peeling paint, and health risks of exposure to lead-contaminated consumer
 products. These events were organized in collaboration with community- and faith-based
 organizations, government organizations, schools, hospitals, clinics, day cares, and libraries.

Strategies for Continued Progress

DOHMH implements targeted interventions for communities most at risk. Prevention strategies include:

- Eliminating or reducing lead-based paint hazards and other sources of lead in homes and communities through investigation, enforcement, education, and technical assistance.
- Promoting blood lead testing for children, pregnant people, and newborns through outreach to families, health care providers, and Medicaid Managed Care organizations.
- Increasing awareness about risk factors for lead exposure by targeting culturally appropriate advertising campaigns to communities at risk.
- Providing care coordination services to children with an elevated blood lead level, as well as pregnant people with an elevated blood lead level and their newborns.
- Building partnerships with community, social service, and faith-based organizations; home visiting programs; weatherization groups; neighborhood housing groups; medical providers; and agencies concerned with child and environmental health.
- Addressing other home-based health issues during prevention efforts, such as reducing home asthma triggers and safety hazards.

This report and more information about childhood lead levels are available through the NYC DOHMH website at: <i>nyc.gov/lead

Additional data on childhood lead exposure are also available through the NYC DOHMH Environment and Health Data Portal at <u>nyc.gov/health/tracking</u>.