



NATIONAL HEAD START ASSOCIATION

Erik Helm
Standards and Risk Management Division
Office of Ground Water and Drinking Water
U.S. Environmental Protection Agency
1200 Pennsylvania Ave. NW
Mail Code 4607M
Washington, DC 20460

RE: National Primary drinking Water Regulations: Lead and Copper Rule Revisions - Docket ID No. EPA-HQ-OW-2017-0300

Dear Erik Helm,

Thank you for the opportunity to submit comments regarding the *National Primary Drinking Water Regulations: Proposed Lead and Copper Rule Revisions*. The National Head Start Association (NHSA) recognizes that prevention and early intervention in cases of lead exposure is critical to ensuring long, healthy lives for our nation's children. Optimizing child health requires addressing needs comprehensively through active stakeholder engagement that reaches beyond health care to include early childhood providers.

As the voice for more than one million children, 250,000 staff, and more than 1,600 Head Start grantees in the United States, NHSA is committed to the belief that every child, regardless of circumstances at birth, has the ability to succeed in life. For more than 50 years, Head Start has provided early learning opportunities for our country's most vulnerable children and comprehensive supports to families that address long-term economic stability and better health prospects, ultimately mitigating the devastating impacts that poverty can have on the future success of young children.

We applaud the Environmental Protection Agency's (EPA) actions to better serve our most vulnerable children and families by requiring that all community water systems (CWSs) conduct targeted sampling and public education at schools and child care facilities. We believe that this proposal, if finalized, will take the burden off of individual programs and serve as a key step in reducing risk of lead exposure for the most vulnerable children in the country. A recent report by the EPA, "Biomonitoring: Lead – Report Contents," shared that children living below the poverty line, regardless of racial background, had significantly higher concentrations of lead in their blood than children at or above the poverty line.¹ The current proposal would increase opportunities to intervene to reduce the outsized risk that so many children currently face.

As is reflected in the Head Start Program Performance Standards (HSPPS) and in programs' daily practice, Head Start is committed to the idea that children must be healthy to learn and that health services, especially early in life, are essential to supporting children's readiness for success in school and beyond. Head Start programs provide much-needed support to children and families who may otherwise be marginalized by lack of access to critical services. Since 1965,

¹ Environmental Protection Agency, "Biomonitoring: Lead – Report Contents". America's Children and the Environment, Third Edition. August 2019.

Head Start has continuously reinforced the importance of health for more than 33 million children and their families by integrating health care access, immunizations, screenings, and developmental supports into its programming. Similarly, in late 2019, the Office of Head Start signed a Memorandum of Understanding with the EPA “to facilitate actions that reduce children’s exposure to lead from drinking water at schools and child care facilities.”² This continued, deep-rooted commitment makes Head Start an important part of the pursuit to reduce childhood lead exposure.

Head Start programs across the country work consistently to prevent, identify, and mitigate the effects of exposure to lead. All children enrolled in Head Start are tested for lead exposure. In 2019-2020, 2,734 children of Head Start children received medical treatment for high lead levels. At the local level, Head Start addresses specific needs related to lead through screening, parent education, and when necessary, crises relief. All Head Start programs ensure each enrolled child is up-to-date on Medicaid’s Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) well child and dental periodicity schedule and the immunization recommendation schedule from the Centers for Disease Control and Prevention (CDC). Programs identify and track individual health concerns, including referrals and services, and provide ongoing care. For children who require extensive follow-up care, programs facilitate diagnostic testing and treatment. All children enrolled in Head Start are tested for lead exposure. In 2016, Head Start was included among the key federal programs in work to prevent childhood lead exposure.³ While Head Start programs leverage screenings, home visits, and parent education in their work to reduce lead risks, the proposed required testing would be a great step forward primary prevention, especially considering the aging state of the facilities of so many early childhood programs. This would greatly complement the work that is already happening in Head Start programs across the country and mitigate risks for innumerable children and families.

We are pleased that the EPA is committed to reducing childhood exposure to lead. As these efforts continue, please keep Head Start in mind as a committed partner with shared goals. Thank you again for the opportunity to share our comments. We look forward to following the progress of this work and the implementation of proposed changes. If you have any questions, please contact yvinci@nhsa.org.

Sincerely,



Executive Director

² Environmental Protection Agency, “Memorandum Of Understanding Partners On Reducing Lead Levels In Drinking Water In Schools And Child Care Facilities”. December 12, 2019.

³ President’s Task Force on Environmental Health Risks and Safety Risks to Children, “Key Federal Programs to Reduce Childhood Lead Exposures and Eliminate Associated Health Impacts”. November 2016.