



Testimony before the PA Senate Institutional Sustainability & Innovation Committee

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Good morning and thank you for the opportunity to present today. I am Executive Director of Women for a Healthy Environment, a nonprofit operating across the commonwealth with its headquarters in Pittsburgh. Our nonprofit uses a scientific approach to achieve equitable lives free of environmental hazards through advocacy and community-based programs. We operate three main programs, Healthy Homes, Healthy Schools and Healthy Early Learning, all with the goal of creating healthy spaces where children live, learn and thrive.

As a community-based organization, we address environmental exposures that impact public health. I am here to focus on one of our programs – Healthy Schools. Since the organization's beginning, we have provided education, technical assistance and coalition-building focused on primary prevention strategies. This is modeled after the Centers for Disease Control and Prevention's Whole School, Whole Community approach, meaning integration between education leaders and health sectors to improve each child's cognitive, physical, social, and emotional development.

The physical environment is one of those core areas - A healthy and safe physical school environment promotes learning by ensuring the health and safety of students and staff. This area of focus also transcends across the EPA's Creating a Healthy School Environment program. EPA also notes that the health of the school environment, including in, around and outside the school building, can affect the wellbeing and lifelong health of students and educators. Studies show that a healthy school environment will reduce absenteeism, improve test scores, enhance student and staff productivity, and improve the health of students and staff.¹

Today we are here to discuss lead in drinking water in schools. Pittsburgh had its own crisis with lead in the drinking water in 2016, exceeding Flint Michigan's levels of lead. At that time, Women for a Healthy Environment mobilized, distributing thousands of water filters across the city and hosting hundreds of educational workshops. Our goals were simple – provide accurate, scientifically-based information to the community; distribute water filters proven to substantially reduce the lead contaminant in drinking water (up to 99%); and demand prompt attention and action.

We formed a countywide lead coalition and also launched the 1000 Hours a Year program in 2017. Children spend well over 1000 hours a year in the classroom, hence the program name. The two main environmental hazards focused on in the program are lead and radon – two known, but preventable environmental hazards. Our goal for that program was simple – to incorporate a primary prevention strategy into our work by removing the environmental exposure to the school occupants. It seems perhaps rudimentary, but indeed it works. We can address the harm; we can create healthier environments. Since 2017, we have worked in over 170 school buildings to address lead in drinking water.

In our 2025 State of Environmental Health in Pennsylvania Schools report, of the 166 school districts we queried, 118 or 71%, indicated that they had performed lead in water testing. One hundred and seventeen school districts reported that their most recent testing dates ranged from September 2016 to August 2023. However, it is critical that I share an important finding - among schools that tested, we also found a greater proportion of schools with lead in drinking water and a fewer percentage of schools that mitigated. That has been consistent with this report and the last two we issued. Oftentimes schools do not indicate, or choose not to, mitigate. In fact, only 11% of school districts responded that they addressed the presence of lead in drinking water. A filter-first approach would change that by requiring schools to filter the drinking water, with the benefit of removing lead and many other contaminants.

Previously, when we hired a certified laboratory to assist in the collection and testing of the drinking water, very rarely was there a “no detection” of lead result. And testing on its own has many limitations. Testing one day, at one particular time, can yield one result and the next day a completely different result. Testing can be very unreliable.

For the years we have been doing this work, we can look at a water fountain now, and by merely looking at the model, determine if it has lead components. Several years ago, we moved strictly to installation of drinking water filter stations, thereby eliminating the unnecessary cost of testing. This is an economically achievable approach and significant way to protect public health. Based on our work, these stations range from \$1,500-2,100 each, a small price for a significant health benefit.

Further, often something that people are unaware of or discuss is premise plumbing in older school buildings. Under the EPA Safe Drinking Water Act even today there is an allowable lead content in plumbing - 0.25% lead by weight, calculated as a weighted average across all wetted surfaces of a pipe, pipe fitting, plumbing fitting, or fixture and 0.2% lead for solder and flux.²

This demonstrates that when we test for lead, we indeed find it present. We can spend thousands of dollars testing each component of the water fountain, the bubbler attached to the fountain, the classroom sink, the preparation sink in the cafeteria, the nurse's sink., etc. We can sample the water, we can use an XRF detector in and around those plumbing areas and what will we find...lead.

Let us be mindful that there is no safe level of lead. As you will hear multiple times, lead is a neurotoxin and exposure can impact every system of the body. Children exposed can have damage to the brain and nervous system, hearing and speech impairments, and learning and behavior problems.³ Lead exposure certainly may impact a child's academic performance, now and into the future. Further, women of childbearing age may have children with low birth weight, pre-term birth or even miscarriage.

This is also an occupational health and safety issue. Just think about the thousands of employees in the school buildings, many spending decades of their educational career in the same building.

The EPA previously referenced an action level for lead in drinking water in schools under their Three T's (Training, Testing, and Taking Action) guidance. They abandoned that notion years ago, not wanting to give people the false notion that anything over 15 parts per billion of lead was deemed safe for human consumption. In 2016, and reaffirmed in 2021, the American Academy of Pediatrics released a policy paper recommending that state and local governments should take steps to ensure that water fountains in schools do not exceed water lead concentrations of 1 ppb.⁴

We have long called for an amendment to the PA Public School Code – that established the Safe Schools Drinking Water Fund. Our work over the last decade has demonstrated that schools have essentially an “easy out” should they choose not to test for lead in drinking water, and there was no enforcement mechanism in place to mitigate for lead in drinking water contamination. Although well intentioned, this bill has not adequately protected students and school personnel from lead in drinking water. This bill, SB 759, is significant in that a filter first approach ensures that drinking water is filtered for lead at the tap thereby not relying on testing the water and assuming mitigation will follow. Similar laws have already been enacted in other states such as Michigan. And this is economically achievable for the school districts.

In closing, there are critical components to the bill that must remain to protect public health including requiring that schools utilize filters that are NSF certified, a third-party certification system, meaning the efficacy of the filter has been tested. The use of the

NSF certification marks demonstrates that the applicable product or operation meets the stringent standard requirements, including plumbing components.⁵ Further, the requirement for establishing a filter maintenance and oversight schedule for all certified point-of-use filters installed. Too often we have heard that a filter is in use, but a maintenance schedule has not been adhered to, in essence making the use of the filter obsolete and of no benefit to public health. In some cases, this has led to other types of contamination to drinking water that could have been easily avoided, such as bacterial growth, chemical release, mold and algae, and sediment and scale buildup.

In closing, I urge you to pass SB759. The health and wellness, and academic performance of our children depend on it. Together, we can create healthier school communities. Thank you for your time.

1 [Evidence from Scientific Literature about Improved Academic Performance | US EPA](#)

2 [Use of Lead Free Pipes, Fittings, Fixtures, Solder, and Flux for Drinking Water | US EPA](#)

3 [Lead Exposure Symptoms and Complications | Childhood Lead Poisoning Prevention | CDC](#)

4 [Prevention of Childhood Lead Toxicity | Pediatrics | American Academy of Pediatrics](#)

5 [The NSF Mark | NSF](#)