



CHURCH WORLD SERVICE
IMMIGRATION AND REFUGEE PROGRAM

Stop lead poisoning in refugee children

Many refugee children suffer iron deficiency anemia and malnutrition, making them magnets for lead ***after they are relocated to the United States***, according to the Atlanta-based Centers for Disease Control and Prevention (CDC).

The tragic lead poisoning death of Sunday Abek, a two-year-old Sudanese girl, shortly after she resettled in New Hampshire in 2000 and the subsequent discovery of a pattern of elevated blood lead levels (BLLs) among other refugee children in that state in mid-2004 have led to a nationwide alert.

Although the problem came to light among African refugee children in New Hampshire, the CDC emphasizes that it is not limited to any one population or to any one region of the United States. Communicating this clearly – and rebutting lingering false impressions that the problem is limited to African children, which it is not – is critically important.

Sunday Abek's death in 2000 was the first reported death of any child from lead poisoning in the United States since 1990. New Hampshire public health officials promptly instituted mandatory lead testing for all refugee children resettling in the state.

Now official national guidelines on refugee health have caught up, in the first update of those guidelines since 1991.

In recommendations released May 10, 2005, the CDC urges nutritional evaluations and appropriate nutritional and vitamin supplements for ALL refugee children upon arrival in the United States, along with blood lead level (BLL) testing of those ages six months to 16 years.

Repeat BLL testing for ALL refugee children ages six months to six years, and for older children as warranted, is urged three to six months after they are placed in permanent residences, regardless of initial test results. See the CDC's May 10, 2005, "Recommendations for Lead Poisoning Prevention in Newly Arrived Refugee Children" for details.

The CDC's Lead Poisoning Prevention Branch also is developing a "toolkit" on lead for caseworkers and others who help support refugees resettling in the United States.

The Rev. Sandra A. Mullins, Director of Refugee Resettlement and Immigration Services of Atlanta, a joint Church World Service-Episcopal Migration Ministries affiliate, is giving

leadership in bringing the counsel of Atlanta's six resettlement agencies to the CDC at the CDC's request as it publishes the guidelines and develops the "toolkit."

All who are concerned about refugees, including national refugee resettlement agencies and their affiliates, are essential partners with the U.S. Office of Refugee Resettlement and State Refugee, Refugee Health and Lead Coordinators in disseminating the new guidelines and "toolkit." ***Prompt, strategic dissemination of the new guidelines will help save refugee children's health and lives.***

Attached:

"CDC Recommendations for Lead Poisoning Prevention in Newly Arrived Refugee Children," May 10, 2005.

Additional Resources:

From the Centers for Disease Control and Prevention:

www.cdc.gov/lead/factsheets/refugeechildrenfactsheet.htm Includes links to additional factsheets, guidelines and recommendations, questions and answers.

From the Environmental Protection Agency:

www.epa.gov/region02/faq/lead_p.htm Lead poisoning FAQ

**This backgrounder was prepared by the Church World Service Immigration and Refugee Program. Web site: www.churchworldservice.org/immigration
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5/12/05