



DEPARTMENT OF HEALTH & HUMAN SERVICES

ADMINISTRATION FOR CHILDREN AND FAMILIES
370 L'Enfant Promenade, S.W.
Washington, D.C. 20447

ORR State Letter

05-01

Date: February 5, 2005

TO: STATE REFUGEE COORDINATORS
STATE REFUGEE HEALTH COORDINATORS
STATE SCHOOL IMPACT GRANTEES
NATIONAL VOLAGS
MAAs

FROM: Nguyen Van Hanh, Ph.D.
Director
Office of Refugee Resettlement

SUBJECT: Testing Refugee Children for Lead

The purpose of this letter is to share with you a recent finding from the federal Centers for Disease Control and Prevention (CDC) that indicates refugee children under age six may have elevated lead levels. The recent discovery relates to a large number of refugee children who have been living in housing built before 1978.

According to the CDC, high blood lead levels in refugee children may relate to the nutritional state of the refugee child. Children who are malnourished and/or suffering from anemia are at a particularly high risk of developing elevated lead levels, regardless of whether or not they have been placed in high-hazard housing.

Lead poisoning can affect nearly every system in the body. Because lead poisoning often occurs with no obvious symptoms, it frequently goes unrecognized. Lead poisoning can cause learning disabilities, behavioral problems, and, at very high levels, seizures, coma, and even death.

CDC plans to issue their updated guidance in March. In the mean time, we need your help to get the message to parents, your friends, your neighbors and your community partner agencies that all untested refugee children under six years of age should be tested for lead in order to establish a blood level-baseline and follow-up treatment, if necessary. Lead testing is available through your local public health clinic, physician, or hospital.

Please help get out the word about lead testing for refugee children. Thank you for your continued support of the refugee program.