

**Committee on Energy and Commerce**

**Opening Statement as Prepared for Delivery  
of**

**Subcommittee on Oversight and Investigations Chair Diana DeGette**

***Hearing on “Putting Kids First: Addressing COVID-19’s Impacts on Children”***

**September 22, 2021**

Today, the Subcommittee continues to focus on its top priority: aggressively exploring how to bring the COVID-19 pandemic to an end.

To date, we have conducted extensive oversight and numerous hearings on critical issues related to controlling the virus—from on-the-ground experiences of state leaders, to vaccine development, distribution, and uptake.

Curbing COVID-19 has been, and will remain, this Subcommittee’s top priority until we bring this pandemic to an end.

Today’s topic is central to the concerns of families across the country: how the pandemic affects our children and how to ensure their health and wellbeing.

As millions of students start the new school year, parents are facing agonizing decisions about in-person learning and childcare.

Families across the country are balancing the risks and challenges of keeping their children safe while striving to support their overall developmental and educational growth.

Experts agree that the best place for children is in the classroom—but only if steps are taken to make schools a safe place.

The goal we all share across this dais is keeping kids safe—a goal that has been threatened throughout the COVID-19 pandemic.

While children have been spared the same rates of severe symptoms or death as adults from the virus, we know they are far from unscathed.

Nearly 500 children have died due to COVID-19 in the United States and another 5,000 children continue to suffer from a rare but serious inflammatory condition known as MIS-C.

And, although research is ongoing, we do not yet know the long-term impacts of COVID-19 infection on children and adolescents.

But we do know that—just as it is among adults—Black and Hispanic youth face disproportionate impacts of COVID-19.

We also know that vaccines remain the most effective tool to fight the virus. A vaccine is currently available for adolescents 12 and older, yet fewer than 42 percent of these younger teens are fully vaccinated.

For kids under 12, we are all anxious for FDA to authorize a safe and effective COVID-19 vaccine. That approval cannot come soon enough. Fortunately, there is recent cause to be optimistic. The trial results for five- to 11-year old children released by Pfizer earlier this week appear to indicate its vaccine is safe and effective for children.

Pfizer will reportedly submit and request Emergency Use Authorization for the use of its vaccine in this age-group in just a couple weeks, with its request for children under five to follow in November.

We will be counting the days, but it is important to underscore that FDA's process to assess the safety of the vaccine for our children is essential to building the trust of American families.

In the meantime, ensuring that those who are eligible get vaccinated is a vital step toward protecting children. Yet, while 65 percent of adults 18 and older are fully vaccinated across the country, that rate is still too low and dips even lower in many communities.

While we wait for vaccines for younger children, there are other concrete actions we can take to help reduce the risk of COVID-19 to kids.

For example, just as using car seats and seat belts are easy ways to help protect our children while in a car, we know that simple acts, such as wearing masks and maintaining physical distance while indoors, can minimize risk to children. We need to encourage those practices as much as possible.

However, contracting the virus isn't the only way our children's lives have been altered by this pandemic.

Risks of exposure to COVID-19 last year led many parents to forgo their child's visit to the doctor, leading to nearly 12 million fewer routine immunizations.

At the same time, other respiratory infections have surged or waned at atypical times, placing additional uncertainty and capacity challenges on children's hospitals.

The pandemic has also had severe consequences on the mental health and wellbeing of America's youth. Even prior to the pandemic, adolescents in the United States experienced an epidemic of poor mental health—with increasing rates of stress, anxiety, depression, and suicidal thoughts and attempts.

As America's youth continue to face compounding stress from the pandemic, we must talk openly about children's mental health and the care they need—not just care when they are in crisis, but services to maintain their mental health.

September 22, 2021

Page 3

While Congress has taken numerous steps to address some of COVID-19's impacts and the resulting needs of children, today's witnesses can share their expertise and provide answers on what more Congress and the American people can do to help ease the challenges children continue to confront.

To that end, I am pleased that as we focus on young people today, a young person is here to share her perspective.

We all want what is best for our children: We all want to keep our kids healthy and safe.

United by that common purpose, we must continue to work together to reduce the risks our children face and do everything within our power to protect their health and wellbeing.

We all want an end to COVID-19 in our classrooms and in our communities. As Chair of this Subcommittee, I will continue to make ending the pandemic my top priority.