



United States Senate
Washington D.C. 20510

March 10, 2023

VIA ELECTRONIC TRANSMISSION

The Honorable Gene L. Dodaro
Comptroller General
U.S. Government Accountability Office
441 G Street, N.W.
Washington, D.C. 20548

Dear Comptroller General Dodaro:

We are writing today to request that the U.S. Government Accountability Office (GAO) conduct a program evaluation of natural disaster response policies related to the safety of new mothers and young children. The COVID-19 pandemic exposed many vulnerabilities in our supply chain in nearly every industry and none was more dire than products aimed to support essential health to our most vulnerable populations.

When a natural disaster strikes, parents are too often left scrambling to figure out how to keep their kids safe, fed, and healthy until their lives return to normal. Pregnant women and new parents with infants face even greater challenges. Natural disasters increase the risk of miscarriage and low birth weight, and pregnant women are more likely to suffer physical and mental health problems.¹ Pregnant women who survive a hurricane are also at increased risk of extremely preterm delivery, and the effects of disasters on children can be long-lasting.² In fact, a recent study found that children who were exposed to Hurricane Sandy while in utero had increased risks for depression, anxiety, and other mental health disorders.³ In 2019, U.S. Federal Emergency Management Agency (FEMA) identified pregnant women and families with young children as vulnerable populations and specified steps they can take to address their unique needs after a disaster.⁴ These needs can include everything from accessing obstetric and neonatal care, to finding diapers, feeding supplies, and preventing injuries.

Recent shortages of infant formula, over-the-counter children's pain and fever reducing medicine, and other critical products raise questions about the nation's preparedness to support families after disasters.

¹ Lafarga Previdi, Irene, Michael Welton, Jazmin Díaz Rivera, Deborah J. Watkins, Zulmarie Díaz, Héctor R. Torres, Chrystal Galán et al, "The impact of natural disasters on maternal health: Hurricanes Irma and María in Puerto Rico," *Children* 9, no. 7 (2022): 940, <https://doi.org/10.3390/children9070940>.

² Hochard, Jacob, Yuanhao Li, and Nino Abashidze, "Associations of hurricane exposure and forecasting with impaired birth outcomes," *Nature Communications* 13, no. 1 (2022): 6746, <https://doi.org/10.1038/s41467-022-33865-x>.

³ Nomura, Yoko, Jeffrey H. Newcorn, Christine Ginalis, Catherine Heitz, Jeenia Zaki, Farzana Khan, Mardia Nasrin, Kathryn Sie, Donato Delingenis, and Yasmin L. Hurd, "Prenatal exposure to a natural disaster and early development of psychiatric disorders during the preschool years: stress in pregnancy study," *Journal of child psychology and psychiatry* (2022), <https://doi.org/10.1111/jcpp.13698>.

⁴ U.S. Federal Emergency Management Agency, Fact Sheet: Not all Disaster Preparedness Plans Are the Same, May 17, 2019, <https://www.fema.gov/press-release/20210318/fact-sheet-not-all-disaster-preparedness-plans-are-same>.

Congress has taken swift action to apply lessons learned from this pandemic for future pandemic preparedness and related disasters that threaten public health. We ask GAO to look into this matter and answer the following questions:

1. What existing policies guidance, and programs does FEMA have specifically to support infants, children, and pregnant and postpartum women in preparing for and responding to disasters?
2. What challenges do infants, children, and pregnant and postpartum women face in accessing disaster assistance from FEMA, if any?
3. How does FEMA coordinate with the U.S. Department of Health and Human Services and its relevant sub-operating agencies on best practices for infants, children, and pregnant and postpartum women when preparing for disasters and post-disaster situations?
4. What is known about the experience of children and pregnant and post-partum women during and after recent disasters?
5. How many unintentional pediatric injuries have occurred in post-disaster evacuee shelters?
6. How does FEMA ensure these populations have enough appropriately-sized diapers in post-disaster settings?
7. How does FEMA ensure there is enough formula on-hand to deploy in a post-disaster setting?
8. How does FEMA ensure there is enough clean water on hand to ensure formula-fed infants can remain fed?
9. How does FEMA help breastfeeding mothers in post-disaster settings?
10. What planning and other actions has FEMA taken to address these individuals' needs?

Thank you for time. We look forward to your reply.

Sincerely,



Jon Ossoff
U.S. Senator



Roger Marshall, M.D.
U.S. Senator