



COUNCIL OF THE DISTRICT OF COLUMBIA
THE JOHN A. WILSON BUILDING
1350 PENNSYLVANIA AVENUE, NW
WASHINGTON, D.C. 20004

CHRISTINA HENDERSON
Councilmember, At-Large
Chairperson, Committee on Health

Committee Member
Hospital and Health Equity
Judiciary and Public Safety
Transportation and the Environment

Statement of Introduction on the Sense of the Council on the Opioid and Fentanyl Epidemic Resolution of 2023
September 18, 2023

Today, along with Chariman Phil Mendelson and Councilmembers Charles Allen, Anita Bonds, Matthew Frumin, Janeese Lewis George, Vincent C. Gray, Kenyan R. McDuffie, Brianne K. Nadeau, Zachary Parker, Brooke Pinto, Robert C. White, Jr., and Trayon White, Sr., I am introducing the “Sense of the Council on the Opioid and Fentanyl Epidemic Resolution of 2023.”

This Sense of the Council urges the Mayor to declare the opioid and fentanyl crisis in the District a public health emergency, recognizing the gravity of the situation and committing sufficient resources to safeguarding the well-being of District residents. The opioid and fentanyl crisis has inflicted profound harm on communities within the District and across our nation, and it is widely recognized as a public health emergency. The crisis is characterized by staggering mortality rates, strain on the healthcare system, transmission of infectious diseases through needle sharing, adverse effects on families and communities, economic burdens, treatment barriers, and the largely preventable nature of opioid addiction. The U.S. Department of Health and Human Services has already declared a nationwide public health emergency in response to this crisis.¹

According to the U.S. Centers for Disease Control and Prevention (CDC), the District currently ranks first in all drug overdoses and second in opioid overdose deaths per capita.² Between 2018 and 2022, opioid-related fatal overdoses in the District have more than doubled, from 213 to 461 lives lost. Alarming, 96% of opioid-related fatal overdoses in 2022 were linked to fentanyl or its analogs.³ Fentanyl, an incredibly potent synthetic opioid, is estimated to be 50-100 times more powerful than morphine, making even minuscule amounts potentially lethal. Fentanyl analogs, structurally like fentanyl but with slight chemical modifications, are equally hazardous or unpredictable.⁴

¹ “Renewal of Determination that a Public Health Emergency Exists Nationwide as a Result of the Continued Consequences of the Opioid Crisis,” US Department of Health and Human Services, July 7, 2023, <https://aspr.hhs.gov/legal/PHE/Pages/Opioid-7July2023.aspx>

² US Centers for Disease Control and Prevention, Fatal Overdose Data, State Unintentional Drug Overdose Reporting System (SUDORS) <https://www.cdc.gov/drugoverdose/fatal/dashboard/index.html>

³ “Opioid-related Fatal Overdoses: January 2017 to May 31, 2023,” DC Office of the Chief Medical Examiner <https://ocme.dc.gov/publication/epidemiology-and-surveillance-reports>

⁴ “Fentanyl,” US Centers for Disease Control and Prevention, <https://www.cdc.gov/opioids/basics/fentanyl.html>



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The District's Office of the Chief Medical Examiner (OCME) and the Opioid Fatality Review Board conducted a study based on 228 cases of individuals who succumbed to opioid overdoses in 2019. Their findings reveal that 75% of the deceased were male, 84% were Black, and the majority fell within the 50-69 age group. Most were at home at the time of their fatal overdose, with more than half residing in Wards 5 (22%) and 8 (31%).⁵

In the District, when a public health emergency is declared, it initiates a comprehensive response plan. This includes the mobilization of vital resources, such as funds, medical supplies, personnel, and equipment, possibly with the support of federal agencies. The declaration also fosters improved coordination among government agencies, healthcare providers, emergency responders, and community organizations to ensure a cohesive and organized response to the crisis. It empowers the District to implement necessary policy changes, and heightens public awareness about the severity of the situation.

In addition, legal protections for healthcare providers may be established to allow them to practice outside their usual scope, while enhanced communication improves information sharing among District residents and relevant stakeholders. Data collection and analysis are critical for informed decision-making, and the District may set up temporary healthcare facilities if necessary. The declaration can also facilitate research and development efforts and provide access to federal assistance, including funding and expertise. Public health emergency declarations are typically subject to periodic reviews, with the goal of responding effectively, mitigating the crisis's impact, and protecting public health and safety.⁶

I look forward to working with my colleagues to move this Sense of the Council forward and urging the Mayor to dedicate sufficient focus and resources towards addressing this crisis.

⁵ "Opioid Fatality Review Board, 2021 Annual Report," DC Office of the Chief Medical Examiner, <https://ocme.dc.gov/publication/opioid-fatality-review-board-2021-annual-report>

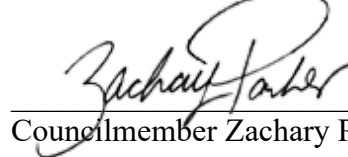
⁶ D.C. Code § 7-2304.01

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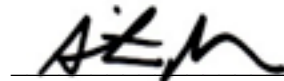
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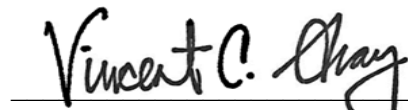
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14 Councilmember Anita Bonds

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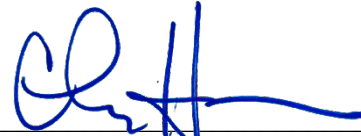
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18 Councilmember Brooke Pinto

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22 Councilmember Kenyan R. McDuffie

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26 Councilmember Vincent C. Gray



Councilmember Christina Henderson



Councilmember Brianne K. Nadeau



Councilmember Matthew Frumin



Councilmember Janeese Lewis George



Councilmember Robert C. White, Jr.



Councilmember Trayon White, Sr.

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29 A PROPOSED RESOLUTION

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33 IN THE COUNCIL OF THE DISTRICT OF COLUMBIA
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37 To declare the sense of the Council that the District is experiencing an opioid and fentanyl crisis
38 and that the Mayor should declare a public health emergency.
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40 RESOLVED, BY THE COUNCIL OF THE DISTRICT OF COLUMBIA, That this
41 resolution may be cited as the "Sense of the Council on the Opioid and Fentanyl Epidemic
42 Resolution of 2023".

43 Sec. 2. The Council finds that:

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45 (1) The District is experiencing an alarming and escalating crisis associated with
46 use of opioids and fentanyl, which poses a substantial threat to the well-being and safety of its
47 residents. The opioid crisis is considered an epidemic by the US Centers for Disease Control and
48 Prevention (“CDC”) because it has reached an alarming level of severity and is having a
49 significant impact on public health. The crisis is characterized by a sharp increase in the misuse
50 and addiction to opioid drugs, such as prescription painkillers and heroin. Urgent and strategic
51 action is imperative to address this public health emergency.

52 (2) A public health emergency is a situation that presents a significant and
53 immediate danger to a population's health and well-being. The opioid crisis is considered a
54 public health emergency due to factors such as high mortality rates, widespread impact, strain on
55 healthcare systems, spread of infectious diseases through needle sharing, harm to families and
56 communities, economic costs, treatment barriers, and the preventable nature of opioid addiction.
57 The United States Department of Health and Human Services has declared that a public health
58 emergency exists nationwide because of the opioid crisis.

59 (3) Data from the District's Office of the Chief Medical Examiner (“OCME”)
60 reveals a distressing pattern of opioid-related deaths, with a substantial percentage involving the
61 potent and lethal substance, fentanyl. OCME has investigated a total of 2269 deaths due to the use of
62 opioids from January 1, 2017 through May 31, 2023. Over the past 5 years, the District has seen a steady
63 increase in the number of opioid-related fatal overdoses.

64 (4) In 2018, there were 213 opioid-related fatal overdoses in the District. In 2021,
65 the District witnessed 430 tragic fatalities resulting from opioid overdoses, with a staggering
66 95% of these cases involving fentanyl or a fentanyl analog. In the subsequent year, 2022, the

67 District recorded 461 fatal opioid overdose incidents, with 96% linked to fentanyl or a fentanyl
68 analog. As of May 2023, the District had already experienced 192 fatal opioid-related overdoses,
69 indicating that rates are continuing to increase. In comparison, just nine years ago, in 2014, the
70 District had only 83 opioid-related fatal overdoses.

71 (5) The devastating consequences of this crisis include an increasing number of
72 fatalities, overdoses, as well as long-lasting social and economic implications for the District.
73 According to the CDC, in 2017, the most recent year for which CDC data is available, the
74 combined cost of opioid use disorder and fatal opioid overdoses in the District exceeded \$3
75 billion. These costs encompass various sectors, including healthcare, the criminal justice system,
76 social services, public health and prevention programs, child welfare and foster care,
77 productivity losses, and expenses associated with overdose reversal medications.

78 (6) Certain populations bear a disproportionately heavy burden of this public
79 health emergency due to social determinants of health, health disparities, entrenched historical
80 and systemic racism, as well as federal and local drug policy.

81 (7) OCME reported that between 2017 and 2023, 85% of those who died from
82 opioid overdoses in the District were Black residents.

83 (8) A significant number of Black men between the ages of 50-69, who were
84 previously chronic heroin users, are tragically succumbing to fatal overdoses primarily caused by
85 the prevalence of fentanyl, as heroin has become increasingly scarce.

86 (9) The OCME reported that from 2017 to May 2023, opioid overdoses, including
87 fatal overdoses, were most prevalent in Wards 5, 7, and 8.

88 (10) The alarming increase in opioid use among our youth population has raised
89 significant concerns, with the risk of fatal and non-fatal overdoses increasing over the past 5-6

90 years. According to the OCME, there have been 26 confirmed fatalities attributed to opioids for
91 individuals aged 19 and under since 2017. Furthermore, since 2019, the DC Fire and Emergency
92 Medical Services Department has responded to 101 cases of both fatal and non-fatal opioid
93 overdoses involving individuals aged 1 to 19 years old.

94 (11) By declaring a public health emergency, the District can better harness vital
95 resources, enact emergency measures, legislation and policy changes, and foster heightened
96 collaboration among a diverse range of stakeholders to confront this crisis with utmost urgency.

97 (12) A public health emergency declaration will raise public awareness about the
98 severity of the crisis, fostering a sense of urgency and encouraging community engagement. This
99 will empower individuals to seek help, access vital resources, and contribute to the collective
100 effort of combating the opioid and fentanyl epidemic.

101 (13) A public health emergency declaration will empower District leaders to
102 streamline communication and coordination among healthcare providers, community
103 organizations, law enforcement agencies, and other pertinent entities, thus ensuring a more
104 coordinated and efficient response.

105 Sec. 3. It is the sense of the Council that the Mayor should declare the opioid and
106 fentanyl crisis in the District of Columbia a public health emergency, recognizing the gravity of
107 the situation and committing sufficient resources to safeguarding the well-being of our residents.

108 Sec. 4. The Council shall transmit a copy of this resolution, upon its adoption, to the
109 Mayor, Director of the Department of Behavioral Health, Director of DC Health, Chief of the
110 Metropolitan Police Department, the Chief Medical Examiner, and the Chief of the Fire and
111 Emergency Medical Services Department.

112 Sec. 5. This resolution shall take effect immediately.