WHITE PAPER · DANE COUNTY, WISCONSIN

Recommendations for a County-Level Opioid Crisis Ordinance

A synthesis of white papers on the opioid crisis

Prepared for the Dane County Board of Supervisors, Health and Human Needs Committee, Opioid Settlement Subcommittee
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Overview

Counties will receive a portion of over $50 billion in opioid settlement funds over the next 18 years (Center for Popular Democracy, n.d.; Partnership to End Addiction, n.d.). These funds offer a historic opportunity to address the opioid crisis and its underlying drivers, moving beyond punitive approaches toward evidence-based, equitable, and community-focused solutions. The following summary distills key recommendations for county officials to craft ordinances that maximize the impact of opioid settlement funds and ensure accountability, transparency, and health equity in their use.

Under current Wisconsin law there exist provisions for local government to declare a state of emergency. However, the language used makes it inappropriate for addressing the opioid crisis.

> **WIS. STAT. § 323.11 · DECLARATION BY LOCAL GOVERNMENT**
>
> The governing body of any local unit of government may declare, by ordinance or resolution, an emergency existing within the local unit of government whenever conditions arise by reason of a riot or civil commotion, a disaster, or an imminent threat of a disaster, that impairs transportation, food or fuel supplies, medical care, fire, health or police protection, or other critical systems of the local unit of government. The period of the emergency shall be limited by the ordinance or resolution to the time during which the emergency conditions exist or are likely to exist.
>
> History: 2009 a. 42 s. 233; Stats. 2009 s. 323.11.

Because the mission of the Dane County Board of Supervisors is “to effectively represent the people of Dane County, providing services that secure the blessings of freedom, ensure domestic tranquility, promote the general welfare, and perfect the forms of government” (Dane County Board of Supervisors, n.d.), it is imperative that the board establish a new ordinance outlining the protocol and procedures necessary to address the opioid crisis. Without an existing body of

legislation specifically geared towards responding to the opioid crisis and the current legislation being an inappropriate application of local governance, the ability of the Dane County Board to serve the people of Dane County in this regard is limited. Establishing a new ordinance will only help secure and promote the general welfare of our constituents.

Guiding Principles for Settlement Fund Allocation

1

Prioritize Public Health and Harm Reduction

Funds must be directed toward proven, evidence-based public health interventions, including harm reduction, rather than punitive or carceral approaches.

2

Address Structural Inequities

Recognize and target the disproportionate impact of the opioid crisis on Black, Brown, and low-income communities, with a data-driven approach to resource allocation.

3

Transparency and Inclusion

Ensure decision-making processes are transparent and include people directly impacted by opioid use, especially those currently using drugs, in all levels of planning and oversight.

Recommended Uses of Settlement Funds

A. Expand Access to Evidence-Based Treatment and Harm Reduction

1. **Medication for Addiction Treatment (MAT)**
   Guarantee access to all FDA-approved MAT options (e.g., methadone, buprenorphine, naltrexone) in both community and correctional settings, with a focus on voluntary and non-coercive models.
2. **Naloxone and Overdose Reversal**
   Establish bulk purchasing and widespread community-based distribution of naloxone, prioritizing those at highest risk and their social networks.
3. **Harm Reduction Services**
   Fund syringe service programs, safer smoking supplies, drug checking technology (e.g., fentanyl test strips), and overdose prevention centers.
4. **Peer Support and Outreach**
   Invest in peer-led outreach, emergency room engagement, and wraparound support services to connect individuals with care and reduce barriers to treatment.

B. Address Social Determinants and Collateral Harms

1. **Housing First**
   Prioritize supportive and low-barrier housing for people who use drugs and those with drug-related convictions, without sobriety requirements.
2. **Employment and Legal Aid**
   Support second-chance employment, recovery-to-work programs, and free legal aid to address barriers from past convictions and discrimination.

3. **Family Support**
   Fund community-based organizations and birth workers to keep families together, support kinship care, and reduce unnecessary child removals.

C. Support Community-Based Organizations

1. **Accessible Funding**
   Simplify application processes and provide upfront funding to small, frontline organizations, remove reimbursement barriers and prioritize general operational support.

2. **Participatory Funding Models**
   Consider participatory budgeting or advisory councils led by directly impacted community members, especially BIPOC-led groups.

Inappropriate Uses of Settlement Funds

1. **Law Enforcement and Incarceration**
   Do not allocate funds to law enforcement personnel, equipment, jail/prison renovations, or overtime. Avoid supporting punitive or criminalization strategies, which have proven ineffective and harmful.

2. **Family Separation and Child Welfare**
   Do not use funds to support child welfare interventions that remove children due to parental drug use, given the trauma and disproportionate impact on marginalized families.

3. **Abstinence-Only Programs**
   Avoid funding abstinence-only treatment or prevention programs, including ineffective school-based campaigns (e.g., DARE), which lack evidence of efficacy and may increase harm.

4. **General Budget Supplantation**
   Settlement funds must not replace existing funding for programs or be diverted to unrelated general budget needs.

Accountability and Community Engagement

1. **Public Reporting**
   Establish public dashboards or regular reporting mechanisms to track fund distribution, spending, and outcomes.

2. **Inclusive Governance**
   Create advisory bodies or participatory processes that include a diversity of voices from people with lived experience, not just those in long-term recovery.

3. **Continuous Evaluation**
   Fund pilot programs and rigorous evaluations to innovate and adapt strategies based on community needs and emerging evidence.

Examples of Effective and Ineffective Spending

EFFECTIVE	INEFFECTIVE
Overdose prevention centers (e.g., Rhode Island)	Direct funding to law enforcement or jail operations (e.g., Louisiana, Sullivan County, NY, Kentucky)
Statewide drug checking and naloxone distribution (e.g., North Carolina, Massachusetts)	General budget relief or debt repayment (e.g., Greene County, TN)
Housing and employment support (e.g., Philadelphia, Mecklenburg County, NC)	Abstinence-only or non-evidence-based school programs (e.g., Solon, OH)
Legal aid and family support (e.g., Kentucky, Michigan)	Expensive branded naloxone purchases over generics (e.g., Wisconsin)
Participatory grantmaking (e.g., Philadelphia)	

Note on sources. The examples above are drawn from the Center for Popular Democracy's roadmap (n.d.), which labels them "good" or "problematic" spending. The Center for Popular Democracy is a progressive advocacy organization, and the roadmap is co-signed by more than 100 harm reduction, recovery, civil rights and community groups. Its classifications reflect that coalition's priorities. They are not outcome evaluations.

Policy Recommendations for County Ordinance

Mandate that all opioid settlement funds are earmarked for evidence-based public health, harm reduction, and social support interventions with explicit prohibitions on law enforcement and punitive uses. Require transparent, participatory decision-making with meaningful input from directly impacted populations. Establish public reporting and evaluation mechanisms to ensure accountability and continuous improvement. Prioritize funding for housing, employment, harm reduction, and legal aid services that address the root causes and collateral harms of the opioid crisis.

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This summary is intended for dissemination among county-level elected officials to guide the development of ordinances that ensure opioid settlement funds are used effectively, equitably, and in accordance with best practices and community needs.