



Legislation Text

File #: Res 0469-2004, **Version:** *

Res. No. 469

Resolution calling upon Congress to adopt the Remember 9/11 Health Act (H.R. 4059), which would provide long-term health monitoring, treatment, research and service coordination by the federal government for those who suffer adverse health effects as a direct result of the terrorist attacks in New York City on September 11, 2001.

By Council Members Gerson, Gennaro, Quinn, Addabbo, Baez, Boyland, Clarke, Gentile, Jennings, Liu, McMahon, Nelson, Palma, Recchia, Sanders, Sears and Weprin

Whereas, According to the Environmental Protection Agency, the collapse and incineration of the World Trade Center on September 11, 2001, produced ash and dust containing lead, chromium, and nickel compounds, particulate matter, polychlorinated biphenyls (PCBs), dioxin, volatile organic compounds, and asbestos, which are known toxins; and

Whereas, The 2003 Milbank Memorial Fund report entitled “September 11 and the Shifting Priorities of Public and Population Health in New York,” (“the Milbank Report”) indicated that the variety and interactions of chemical materials released in the burning and collapse of the World Trade Center buildings, including materials such as plasticizers, fire retardants, two hundred and ten floors of carpets, wall boards, and computers, thirty thousand gallons of PCB-containing transformer fluid, one hundred and eighty thousand gallons of jet fuel, and hundreds of thousands of mercury-containing fluorescent bulbs, added a “level of uncertainty that the scientific apparatus for measuring lead and asbestos could not even begin to evaluate”; and

Whereas, The Milbank Report also noted that the thousands of tons of pulverized asbestos, heavy metals, other toxins, and particulate matter left an estimated two million cubic meters of dust covering sixteen acres; and

Whereas, The Milbank Report further pointed out that at the time of September 11th, approximately

twenty thousand people lived within this acreage, and an even greater number of individuals worked and attended school in this area; and

Whereas, The Milbank Report also noted that on September 11th and during the days, weeks and months immediately following that day, thousands of rescue workers, including police, firefighters, emergency medical technicians and volunteers responded to the aftermath of the terrorist attacks, and thousands of undocumented day laborers were employed to clean the surrounding buildings; and

Whereas, The Mount Sinai Selikoff Center for Occupational and Environmental Medicine has reported that residents and workers who were in the vicinity of the World Trade Center on September 11th and in the months that followed suffered and continue to suffer significant medical problems as a result of the compromised air quality and toxins at the attack site, including but not limited to respiratory, nasal, sinus, gastrointestinal, and psychological symptoms, and worsening of prior conditions; and

Whereas, According to an October 27, 2003 article in New York Magazine, a substantial percentage of workers who responded to the World Trade Center disaster in the weeks and months following September 11th have no health insurance, lost their health insurance as a consequence of the attack, or have insufficient health insurance to cover the medical conditions that they acquired as a result of their efforts at Ground Zero; and

Whereas, The Remember 9/11 Health Act (H.R. 4059) would authorize the Centers for Disease Control and Prevention to award grants to carry out baseline and follow-up screening, clinical examinations, and long-term health monitoring and analysis to eligible individuals who responded to the terrorist attacks, including police officers, firefighters, emergency medical technicians, transit workers, participating members of urban search and rescue teams, Federal and State employees, persons who assisted in the recovery of human remains, persons who assisted in the criminal investigation, and workers who assisting in the cleanup or restoration of critical infrastructure in and around New York City, as well as eligible persons whose places of residence are in the declared disaster area, persons who were employed in or attended school, child care, or adult day care in a building located in the declared disaster area any time during the period of September 11, 2001 through August

21, 2002, and any other person whom the Secretary of Health and Human Services deems appropriate; and

Whereas, The Remember 9/11 Health Act would further authorize the National Institute of Health to conduct diagnostic research on adverse health conditions that are determined to be associated with exposure to the sites of the terrorist attack and for which there has been diagnostic uncertainty, as well as research on treating adverse health conditions for which there has been treatment uncertainty; and

Whereas, The Remember 9/11 Health Act would also call upon the Secretary of Health and Human Services to convene the 9/11 Health Emergency Coordinating Council to examine and form recommendations on the adequacy and coordination of the response to the health impacts of September 11th; and

Whereas, A long-term monitoring and treatment program to evaluate and manage the health consequences of the terrorist attacks of September 11, 2001 on rescue, recovery and cleanup workers and residents, students and employees of the World Trade Center area is essential; now, therefore, be it

Resolved, That the Council of the City of New York calls upon Congress to adopt the Remember 9/11 Health Act (H.R. 4059), which would provide long-term health monitoring, treatment, research and service coordination by the federal government for those who suffer adverse health effects as a direct result of the terrorist attacks in New York City on September 11, 2001.

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