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THE WHITE HOUSE WASHINGTON

CABINET AFFAIRS STAFFING MEMORANDUM

ALL CABINET MEMBERS	Action	FYI	CEA	Action	FYI
Vice President State Treasury Defense Justice Interior) 000000		CEQ OSTP))00000
Agriculture Commerce Labor HHS HUD Transportation Energy Education Chief of Staff OMB UN USTR		 	Carlucci Cribb Bauer Dawson (For WH Staffing)	00000000	00000000000000000000000000000000000000
CIA EPA GSA NASA OPM SBA VA			Executive Secretary for: DPC EPC	000000	

RETURN TO:

Nancy J. Risque
Cabinet Secretary
456-2823
(Ground Floor, West Wing)

☐ Associate Director
Office of Cabinet Affairs
456–2800
(Room 235, OEOB)

MINUTES

DOMESTIC POLICY COUNCIL

May 4, 1987 2:00 p.m. Cabinet Room

Participants: The President, Messrs. Meese, Shultz, Baker, Weinberger, Bowen, Pierce, Miller, Brown, Martin, Ms. Risque, Messrs. Bauer, Cribb, Duberstein, Carlucci, Dawson, Donatelli, Fitzwater, Griscom, Crippen, Ms. Maseng, Messrs. Stephens, Sprinkel, Graham, Greenleaf, Sweet, Ms. Horner, Messrs. Tarr, Baroody, Willkie, Galebach, Mason, Noble.

Acquired Immune Deficiency Syndrome

The President asked Attorney General Meese to review the current status of actions on AIDS. Secretary Bowen provided statistics relating to the AIDS virus and its prevalence in the United States and worldwide. He explained actions being taken to test for the HIV virus and the ELISA test procedure being used to detect the presence of HIV in the blood. He noted that a vaccine for the HIV virus has not been discovered, but that seven treatment agents are being tested. Dr. Bowen said the AIDS education plan would be targeted toward the general public, schools, high risk groups, and health care workers. An estimated budget for the plan would be \$80 million for FY 1987 and \$103 million for FY 1988. He referenced an "AIDS clearinghouse system and noted that CDC blood test data for 1987, filed on May 1, is being evaluated. Dr. Bowen also discussed recommendations for testing including Public Health Service priorities and the conclusions of the CDC conference on AIDS testing held in Atlanta. He said that both counseling and testing should be considered. He then introduced Drs. James Mason and Gary Noble.

Secretary Shultz asked whether estimates of the number of AIDS cases are lower than we are being told. Dr. Bowen said the World Health Organization estimates that in 1990-91 approximately 50-100 million individuals will have been infected with the HIV virus. Dr. Graham said the numbers are not very accurate and may change as knowledge increases. He said the incidence of HIV infection could drop if individuals' behavior can be changed. Mr. Bauer discussed AIDS topics being considered by the Health Policy Working Group. He said that research money for the purpose of finding a cure and/or vaccine for the HIV virus is consistent with Administration policy. On the subject of testing, Mr. Bauer said there is a split in the medical community as to whether testing should be voluntary or mandatory, and over who should be tested.

He said the Working Group has considered the issue of voluntary vs. mandatory testing of prisoners, and that the Defense Department is doing a good job in their testing of military personnel. He said the Working Group is now looking into the testing of immigrants and aliens, what the body of the law states about communicable diseases, and whether AIDS should be added to the list. Mr. Shultz said the State Department is preparing for the required testing of all prospective overseas State Department employees.

The President asked about testing in colleges. Mr. Meese said that we test for gonorrhea and syphilis and suggested it would make sense to include AIDS. Mr. Stephens asked whether individuals who have tested positive for HIV are quarantined or removed from the work force. Secretary Weinberger said that 865,000 military personnel have been tested to date, and if they are HIV positive they are not permitted in the service. He stated that Defense had problems at the beginning of their testing program, with lack of testing equipment as one of the reasons.

Mr. Weinberger said the President could issue a mandate seeking cooperation with existing agencies such as the CDC, and since Defense has tested 1.6 million active duty personnel, we should take advantage of the military's experience. Dr. Bowen discussed the problem of false positives and false negatives. He said it generally takes anywhere from two weeks to three months before the AIDS antibodies show up and that this creates a problem. Miller asked about the cost of each test. Mr. Weinberger said it cost the Defense Department less than \$2.00 per individual being tested. Dr. Mason discussed the cost of counseling both before and after ascertaining that an individual has tested positive for the HIV virus, and said that the total cost would be about \$100 per case. Mr. Weinberger said that 1.5 per 1000 individuals have tested positive for AIDS in the DOD program. Dr. Mason said that the ELISA Test needs a confirmatory test to screen out false positives. Mr. Miller asked if individuals who tested positive would be retested. Dr. Mason said they would be given the Western Blot test.

The President asked about individuals who have tested positive for HIV, and whether there is an incubation period. Dr. Bowen said that the experience to date indicates that at least 30% of those individuals who have AIDS die, and that the death rate may ultimately be as high as 100%. Mr. Weinberger asked about the hope of finding a vaccine. Dr. Bowen said AZT (Retrovir) only treats symptoms, but it is very toxic and destroys blood cells and organs. Mr. Bauer said he will report back to the Council after further discussion by the Health Policy Working Group.

Mr. Bauer also discussed the formation of an AIDS Advisory Commission. Mr. Shultz asked why it takes a commission to deal with this problem. Mr. Bauer said that Congress is pushing us,

thus we must take the lead. The President agreed that we must lead this effort, and if we establish a Commission, we should define its mission clearly. Mr. Bauer indicated that it could review the current research, act as a sounding board, and produce a major report with recommendations for further actions that might be taken to control the disease. Mr. Meese said that a life of one year should be placed on the Commission and that questions should be drawn up by the Health Policy Working Group for consideration by the Commission members.

Mr. Weinberger said we must respond politically to the AIDS question. Dr. Bowen said that a political response is needed. He felt a Commission should address the issue of testing of Federal employees for the HIV virus. Mr. Cribb said the President should appoint his own commission and that it would be unwise to delay the study. The President stated that there would be a Presidential commission since we can do it better than the Congress. He also said we must find more effective ways to disseminate information to the American public about how AIDS is spread, and that the Commission should take up the issue of what areas should be considered for compulsory testing, such as airline pilots.

Mr. Bauer raised the question of a nationwide mailing, an idea advanced by the Public Health Service. Some suggested we should first do a market test. Mr. Cribb asked about the contents of a mailer. Dr. Bowen said he is undecided. Discussion ensued about the mailers distributed in England. The President said the Commission should determine whether or not a mailer would be a good idea. Dr. Bowen said timing is an important factor. Meese thought that a mailing is a good idea. The President said we should postpone a mailing until the commission has an opportunity to review the matter. Mr. Miller questioned whether consideration of a mailing by the commission might take a long time. Dr. Mason, said the media campaign they had in mind would include a national mailing as a centerpiece. He said a great deal of free publicity would be gained by the mailing. He also felt we should declare October as AIDS prevention month. Mr. Cribb said he felt we should withhold a decision on a mailing until a later time.

The President approved establishment of a Commission on AIDS and referred the issue of a national mailing to the DPC for further study.

DOMESTIC POLICY COUNCIL

MINUTES

May 12, 1987 2:00 p.m. Roosevelt Room

Participants: Messrs. Meese, Hodel, Pierce, Miller, Taft, Myers, Brown, Newman, Martin, Barnes, Ms. Risque, Messrs. Bledsoe, Cribb, Bauer, Ms. King, Messrs. Becton, Willkie, Moore, Greenleaf, Galebach, Franke, McLoughlin, Foohey.

Emergency Management

Attorney General Meese reviewed previous Council discussions of this topic, stating that the key concern is coordination in the event of a major non-national security emergency. Mr. Bledsoe described the efforts by the Federal Emergency Management Agency (FEMA) and the Working Group on Management and Administration to develop a generic emergency response model based on the Council's guidance. This project is linked to the National Security Council's emergency preparedness activities. Mr. Meese said the response model is not fixed, and Council members should feel free to recommend changes as it evolves.

Mr. Franke described the Working Group's review of emergency management plans, and discussed previous Administration emergency responses, such as occurred following the Chernobyl incident. He said the current response system is adequate, but the Working Group feels that a process is needed for enhancing the system. He described a proposed concept involving "on-scene" officials, a national coordinator, and cognizant federal agencies; senior level coordination of policy-making; assignment of functional responsibilities and support activities such as public affairs and congressional liaison; and interactions with state and local government officials.

Mr. Miller said he recommends approval of the concept, but would like some of the details to be further addressed by the Working Group, such as how the system would be triggered, and what authority would apply for ordering the use of resources. Mr. Meese pointed out that the proposed system would not include a separate structure, but would follow the current Cabinet system. He felt it should be coordinated by the Cabinet Office in the White House, with each department having a planning or command and control link to the Cabinet Office. Mr. Moore said CEA endorsed the concept and would want to be added to the list of agencies involved in managing economic emergencies.

Mr. Taft felt the proposed system should be able to handle emergencies involving long-term recovery periods. Mr. Brown asked about differences in levels of organizational assignments. It was pointed out that some agencies are legislatively assigned emergency responsibilities, thus are shown in place of the department in which they reside. Mr. Meese said the generic plan should set forth several basic principles, and should permit agencies to tailor their support to the situation. Mr. Barnes cautioned that this not be merely a paper plan, nor should it be too restrictive.

Mr. Meese said the consensus of the Council appeared to be in support of the basic concept. He asked the Working Group to draw up a plan in a draft directive indicating general principles and missions for the departments. A national coordinating officer and field coordination officials should be referenced in the principles, and existing plans should remain in effect as much as possible. The list of lead agencies should be circulated to departments and agencies, and contact persons should be designated in each department. He asked that the new plan be circulated for comment.

MINUTES

DOMESTIC POLICY COUNCIL

May 20, 1987 2:00 p.m. Roosevelt Room

Participants: Messrs. Meese, Hodel, Herrington, Thomas, Taft, Newman, Wright, Woods, Cribb, Bauer, Ms. King, Messrs. Brashear, Harlow, Sprinkel, Graham, Green, Gray, Sweet, Ms. Schafer, Messrs. Fletcher, Wallis, Dorsey, Habicht, Calio, Benedick, Watson, Galebach.

Stratospheric Ozone

The Attorney General opened the meeting by introducing Mr. Benedick who gave an overview of the events leading to the current round of international negotiations to cut back on the production of compounds that appear to reduce the stratospheric ozone layer. Mr. Benedick pointed out that the negotiations on stratospheric ozone began in 1982 under the Vienna Convention, and that procedures were established to develop a protocol for a worldwide reduction of cloroflorocarbons (CFCs) and other compounds that deplete the ozone layer. That protocol should be presented to the Senate for ratification sometime during the Fall of 1987. He also mentioned the hole in the ozone layer over Antarctica discovered by the British in 1985 as giving impetus to the negotiations, and said the Environmental Protection Agency is required under court order to determine ways in which the domestic production of CFC's can be regulated. During the Spring of 1987, the U.S. negotiating team has met several times with representatives of member countries and are now ready to complete the draft protocol in preparation for a meeting in September 1987 when participating countries would sign it.

Mr. Meese asked Mr. Watson to outline scientific knowledge about the ozone depletion problem. Mr. Watson described the problem, including the weaknesses and disagreements in the current scientific models being used. Messrs. Graham, Fletcher, Thomas, and Secretary Hodel discussed the nature of the science on ozone depletion and whether it was caused by a natural phenomena or man made chemicals. No conclusions were reached. Mr. Benedick discussed the areas in which Council guidance was being sought to develop a U.S. position on the protocol. They included chemical coverage, stringency and timing, a control formula and trade provisions, and participation. Mr. Benedick said that the delegation is attempting to reach the broadest possible involvement of as many nations as possible, pointing out that the European Communities, Japan and Russia, have resisted controls but are now coming closer to the U.S. position.

Mr. Hodel said that there may be other ways to control CFC's and suggested that the Germans be asked to ban aerosol products as the U.S. has done. He also suggested that we look closely at how countries vote on sanctions if other nations do not comply with the protocol agreement. Mr. Thomas stated that the issue of weighted voting is still to be negotiated. Mr. Hodel stated that compliance with the protocol should be monitored and not left to an "honor system." Mr. Graham stated that the science was very uncertain, and that the effect of ultraviolet light on humans is controllable. He said that scientists should continue to measure the true depletion of ozone before agreeing to a required reduction of ozone depleting chemicals.

Mr. Hodel stated that if the objective of an international agreement is to reduce ozone, there are several ways to reach that objective. He suggested that we seek the broadest possible participation, including the U.S./E.C./Japan/USSR and other CFC producing nations. Others could cut back aerosols as we have done, then follow with a freeze if necessary. If our objective is to protect the health of the people, then the Working Group should look at ways to protect public health rather than controlling ozone depleting chemicals. Mr. Wallis stated that when science and technology conflicts with politics, we have problems. He agreed we are facing pressure from lobby groups and from Congress to control the chemicals that deplete the ozone layer, and said we should end up with the position being taken by the negotiating team. He felt we should support weighted voting based on CFC production. Mr. Thomas explained that the EPA is mandated by the Clean Air Act to issue domestic regulations to control ozone depleting chemicals, thus we may be forced to take unilateral action if we do not get participation in an international protocol. Mr. Sprinkel said the costs and benefits of a protocol should be investigated. Mr. Taft expressed concern about the inclusion of Halons in the protocol because of extensive Defense Department use. Mr. Meese summarized the issues that should be addressed by the Working Group and brought to the Council at another meeting, including the science of ozone depletion, a cost/benefit analysis, how halons should be treated, and what court and legislative actions are pending.

MINUTES

DOMESTIC POLICY COUNCIL

May 27, 1987 2:00 p.m. Roosevelt Room

Participants: Messrs. Hodel, Bowen, Herrington, Bennett, Miller, Thomas, Whitehead, Taft, Burns, Whitfield, Covitz, Cribb, Bauer, Ms. Risque, Messrs. Culvahouse, Dawson, Donatelli, Fitzwater, Griscom, Hobbs, Sprinkel, Green, Graham, Greenleaf, Sweet, Ms. Horner, Messrs. Koop, Gould, Mason, Windom, Galebach.

AIDS Testing

Secretary Hodel opened the meeting by handing out an issue paper and asking that it be returned to him at the close of the meeting. Mr. Bauer outlined the five issues related to AIDS testing to be discussed by the Council. Secretary Bowen commented briefly on the Sentinel Hospital Study funded by HHS where anonymous HIV testing is currently being done, stating that the Sentinel Study, while helpful, could not determine the incidence of the HIV in America. Mr. Bauer stated that there had been unanimous support in the Working Group for a separate epidemiological study. Mr. Graham said we need to look to the future and do the modeling necessary to make sure our projections on the spread of the HIV are accurate. Mr. Miller said he assumed the cost of the study would be taken out of existing funds. There was no disagreement by the Council members and the recommendation to do a study to determine the incidence of HIV in America was approved without dissent.

The second issue was whether to do HIV testing for immigrants and aliens. Mr. Whitehead expressed State Department concerns that it is not so much the foreign policy aspects of testing as the practical aspects, such as cost and the thought that only a small number of people will be intercepted. He pointed out the complications in doing a blood test in a foreign country since facilities are not often suited to doing HIV tests. Mr. Bauer pointed out that it wouldn't take many immigrant AIDS cases in which the Federal government picks up the cost, to pay for a large number of HIV tests. Mr. Bauer said the Justice Department favors testing of immigrants and aliens for HIV and that he believed that the practical problems could be worked out.

Secretary Herrington said that we already test for tuberculosis and venereal diseases, and adding HIV would be appropriate. Mr. Bauer reiterated support for adding HIV to the list of dangerous diseases because of the cost of health care for immigrants to

this country who have HIV. Mr. Whitehead questioned whether the money for testing immigrants and aliens would be well spent. He had no problem with identifying clinical AIDS on the list of contagious diseases but continued to oppose the listing of HIV. Secretary Bennett said he believed it was inconsistent to test domestically and not abroad. He stated support for the listing of HIV.

The third issue pertained to the testing of Federal prisoners. Mr. Bauer indicated that the Working Group supported that initiative, and Mr. Burns affirmed that the Justice Department favors this policy, despite the many unknowns. There was no opposition to this proposal.

Issue four was whether testing for the HIV should be considered in other Federal program areas. Mr. Bennett recommended that V.A. hospitals do routine testing for HIV, especially if private hospitals do. There was no opposition to this proposal.

The fifth issue was whether the President should encourage States to do increased routine testing for HIV. Mr. Bennett said he strongly recommended routine testing, but was opposed to mandatory testing. Mr. Bowen said we should avoid mandatory and required testing and that individuals should have the right of refusal to take the test. He expressed concern that requiring testing might "drive people underground." Mr. Cribb and Mr. Bennett supported routine testing. Mr. Bennett suggested dropping the terms "voluntary" and "mandatory" and replacing them with the term "routine."

Dr. Koop raised the problem of false positive and false negative results. Mr. Bauer stated that DOD has found that testing involves more than a screening test, and a series of tests can result in 100% accuracy in determining positivity for HIV. Dr. Mason pointed out that DOD standards are not always used by other laboratories, that there is a 1-3 week wait to get results, and that we cannot duplicate the military experience.

Mr. Burns said we face a national epidemic, and reported that Colorado and Minnesota are now testing individuals in penal institutions. He felt that States should do testing in their own way. Mr. Bowen supported mandatory testing in State prisons. Mr. Hodel agreed. He said that CDC guidelines should not oppose mandatory testing if the States make that decision. Mr. Taft said that on the issue of false positives, DOD does not have the problems expressed by Mr. Koop and Mr. Mason. Mr. Mason stated that quality control in the States is not as good as it is in DOD, and because of false positives people may not seek help from STD and certified drug clinics. He said we should encourage more testing, but that it should not be mandatory.

Mr. Hodel said the consensus of the Council seems to be that we encourage and offer more routine testing for HIV, with the right of an individual to refuse. Mr. Bennett suggested that we should think about the Federal resources needed to care for infected individuals. Mr. Hodel said that the hint of Federal funding should be avoided. Mr. Bennett still recommended that consideration be given to funding because Congress will force us to act anyway. Mr. Herrington said that the President should take the leadership on this issue and not just be a follower. Mr. Hodel asked that the issue papers be returned to him in order for Council members' comments to be included in the paper for the next meeting with the President.