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WHORM Subject File Code: WE003
(Family Planning – Abortion)
Case File Number(s): 176683-179281
Box: 5

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WITHDRAWAL SHEET

Ronald Reagan Library

Collection Name WHITE HOUSE OFFICE OF RECORDS MANAGEMENT
(WHORM): SUBJECT FILE

Withdrawer
KDB 11/30/2009

File Folder WE003 FAMILY PLANNING - ABORTION (176683-179281)

FOIA

F08-0052/01

Box Number

WILLIAMS, DANIEL

16

DOC NO	Doc Type	Document Description	No of Pages	Doc Date	Restrictions
1	CASE FILE	RE COUPLE SEEKING FUNDS FOR IN VITRO FERTILIZATION 178192	6	11/3/1983	B6
2	CASE FILE	RE CORRESPONDENCE WITH COUPLE EXPECTING A DOWN'S SYNDROME CHILD (PAR F25-058 7/11/25) 178946	1	12/8/1983	B6
3.	LETTER	178946 (PAR F25-058 7/11/25)	1	11/8/1983	B6
4.	LETTER	KOOP 178946 (PAR F25-058 7/11/25)	1	10/24/83	B6
5.	REFERRAL	WHITE HOUSE TO HHS (PAR F25-058 7/11/25)	1	10/14/83	B6
6.	LETTER	TO PRESIDENT REAGAN (PAR PAGE 3 ONLY F25-058 7/11/25)	1	9/16/1983	B6

Freedom of Information Act - [5 U.S.C. 552(b)]

- B-1 National security classified information [(b)(1) of the FOIA]
- B-2 Release would disclose internal personnel rules and practices of an agency [(b)(2) of the FOIA]
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- B-8 Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
- B-9 Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

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PRESIDENTIAL PERSONNEL OFFICE

WE003Document Due By: _____ Date: 4.5.84SUBJECT: Draft statement for Population Conference

	Action	FYI	Remarks
1. HERRINGTON	_____	_____	<u>Please be advised that</u> <u>The draft attached has been</u> <u>forwarded to NSC for</u> <u>appropriate interagency</u> <u>review. This review process</u> <u>should be handled strictly</u> <u>through channels so please</u> <u>do not provide a copy of</u> <u>this document to anyone.</u>
2. DUNLOP	_____	_____	
3. ARMSTRONG	_____	_____	
4. BORCHARD	_____	_____	
5. BULLOCK	_____	_____	
6. HICKS	_____	_____	
7. MacKICHAN	_____	_____	
8. McQUOWN	_____	_____	
9. MEADOWS	_____	_____	
10. MOORE	_____	_____	
11. NEWMAN	_____	_____	
12. SALGADO	_____	_____	
13. THARP	_____	_____	
14. TUTTLE	_____	_____	
15. URBAN	_____	_____	
16. WOOD	_____	_____	
17. _____	_____	_____	
18. _____	_____	_____	

ACTION CODES:

A - Appropriate Action
B - Briefing Paper
C - Comment/Recommendation

D - Draft Response
F - Furnish Fact Sheet
I - Interview

R - Direct Reply w/Copy
S - Status Report
X - Interim Reply

ORIGINATOR:

☒ Dunlop☐ Herrington

Draft Statement

For many years, the United States has supported, and helped to finance, programs of family planning, particularly in the less developed countries. This Administration has continued that support but has placed it in a very different policy context from that of the past. The experience of the last two decades not only makes possible but requires a sharper focus for our population policy. It requires a more refined approach to problems which appear today in quite a different light than they did twenty years ago.

First and most important, population growth is, of itself, a neutral phenomenon. It is not necessarily good or ill. It becomes an asset or a problem only in conjunction with other factors, such as economic policy, social constraints, need for manpower, and so forth.

The relationship between population growth and economic development is not a negative one. More people do not mean less growth; that is absurd on its face. Indeed, both in the American experience and in the economic history of most advanced nations, population growth has been an essential element in economic progress.

In some situations, however, a society's meager resources or economic dislocations -- whether imposed by destructive government policies or created by natural disasters -- may make it difficult to sustain a population increase. Such situations must be considered as temporary aberrations, requiring only temporary intervention by government. They can be prolonged, of course, and made permanent by the wrong kind of intervention, the kind that erodes family rights and

responsibilities, individual and group economic initiative, and the developmental energies of free people everywhere.

That is one lesson of the past twenty years.

Before the advent of governmental population programs, several factors had combined to create an unprecedented surge in population over most of the world. Among the industrial nations, the baby boom that followed the Second World War resulted in a dramatic, but temporary, population "tilt" toward youth. The disproportionate number of infants, children, teenagers, and eventually young adults did strain the social infrastructure of schools, health facilities, law enforcement and so forth. It also sustained strong economic growth and was probably critical in boosting the American standard of living to new heights, despite occasionally counterproductive government policies.

Among the less developed nations, a coincidental population increase was caused by entirely different factors, directly related to the humanitarian efforts of the United States and other western countries. A tremendous expansion of health services -- from simple inoculations to sophisticated surgery -- saved millions of lives every year. Emergency relief, facilitated by modern transport, helped millions to survive flood, famine, and drought. The sharing of technology, the teaching of agriculture and engineering, the spread of western ideals in the treatment of women and children all helped to drastically reduce the mortality rates, especially infant mortality, and to lengthen the life span.

The result, to no one's surprise, was more people, everywhere. This was not a failure but a success. It demonstrated not poor planning or bad policy but human progress in a new era of international assistance, technological advance, and human compassion.

The population boom was a challenge; it need not have been a crisis. Seen in its broader context, it required a measured, modulated response. It provoked an overreaction by some, largely because it coincided with two negative factors which, together, hindered families and nations in adapting to their changing circumstances.

The first of these factors was governmental control of economies, a pathology which spread throughout the developing world with sufficient virulence to keep much of it from developing further. As economic decision-making was concentrated in the hands of planners and public officials, the ability of average men and women to work towards a better future was impaired, and sometimes crippled. Agriculture was devastated by government price fixing that wiped out rewards for labor. Job creation in infant industries was hampered by confiscatory taxes. Personal industry and thrift were penalized, while dependency upon the state was encouraged. Political considerations made it difficult for the economy to adjust to changes in supply and demand or to disruptions in world trade and finance. Under such circumstances, population growth changed from an asset to a peril. In a stifled economy, it threatened to blow off the lid of governmental control.

The worst consequence of economic statism was that it disrupted the natural mechanism for slowing population growth in problem areas. The world's more affluent nations have reached a population equilibrium without compulsion and, in most cases, even before it was government policy to achieve it. The controlling factor in these cases has been the adjustment, by individual families, of reproductive behavior to economic opportunity and aspiration. Economic freedom has led to economically rational behavior. As opportunities and the standard of living rise, the birth rate falls.

That historic pattern would already be well under way in many nations where population growth is today a problem, if short-sighted policies had not disrupted economic incentives, rewards, and advancement. In this regard, localized crises of population growth are evidence of too much government control and planning, rather than too little.

The second factor that turned the population boom into a crisis was confined to the western world. It was an outbreak of an anti-intellectualism, which attacked science, technology, and the very concept of material progress. Joined to a commendable concern for the environment, it was more a reflection of anxiety about the unsettled times and the uncertain future and disregard of human experience and scientific sophistication. It was not unlike other waves of cultural primitivism that have, over the centuries, swept through western civilization during times of social stress and scientific exploration.

The combination of these two factors -- counterproductive economic policies in poor and struggling nations and a pseudo-scientific pessimism among the more advanced -- provoked the demographic hysteria of the 1960's and 1970's. Doomsday scenarios took the place of realistic forecasts, and too many governments pursued population control rather than sound economic policies.

It was the easy way out, and it did not work. It focused on a symptom and neglected the underlying ailments. For the last three years, this Administration has sought to reverse that approach. We recognize that, in some cases, immediate population pressures may make advisable short-term efforts to meliorate them. But this cannot be a substitute for the economic reforms that put a society on the road toward growth and, as an aftereffect, toward slower population increase as well.

Nor can population control substitute for the rapid and responsible development of natural resources. In responding to certain Members of Congress concerning the previous Administration's Global 2000 report, this Administration in 1981 repudiated its call "for more governmental supervision and control. Historically, that has tended to restrict the availability of resources and to hamper the development of technology, rather than to assist it. Recognizing the seriousness of environmental and economic problems, and their relationship to social and political pressures, especially in the developing nations, the Administration places a priority upon

technological advance and economic expansion, which hold out the hope of prosperity and stability for a rapidly changing world. That hope can be realized, of course, only to the extent that government's response to problems, whether economic or ecological, respects and enhances individual freedom, which makes true progress possible and worthwhile."

Those principles underlie this country's approach to the United Nation's Conference on Population to be held in Mexico City in August. In accord with those principles, we reject compulsion or coercion in family planning programs, whether it is exercised against families within a society or against nations within the family of man. The United Nations Declaration of the Rights of the Child (1959) calls for legal protection for children before birth as well as after birth; and the United States accordingly does not consider abortion an acceptable element of family planning programs and will not contribute to those of which it is a part. Efforts to lower population growth in cases in which it is deemed advisable to do so must, moreover, respect the religious beliefs and culture of each society. Population control is not a panacea. It will not solve problems of unemployment. Jobs are not lost because there are too many people in a given area. Jobs are created by the conjunction of human wants and investment capital. Population growth fuels the former; sound economic policies and international assistance can provide the latter. Indeed, population density may make the latter more feasible by concentrating the need for both human services and technology. But as long as oppressive economic policies penalize those who work, save, and invest, joblessness will persist.

Population control cannot solve problems of unauthorized migration across national boundaries. People do not leave their homes, and often their families, to seek more space. They do so in search of opportunity and freedom. Reducing their numbers gives them neither.

Population control cannot avert natural disasters, including famines provoked by cyclical drought. Fortunately, world food supplies have been adequate to relieve those circumstances in recent years. Problems of transportation remain; but there are far deeper problems as well, in those governmental policies which restrict the rewards of agricultural pursuits, encourage the abandonment of farmland, and concentrate people in urban areas.

It is time to concentrate upon those root problems which frequently exacerbate population pressures. By focusing upon real remedies for underdeveloped economies, the United Nations Conference on Population can reduce demographic issues to their proper place. It is an important place, but not a controlling one. It requires our continuing attention within the broader context of economic growth and of the economic freedom that is its prerequisite. Most of all, questions of population growth require the approach outlined by President Reagan in 1981, in remarks before the World Affairs Council of Philadelphia:

"Trust the people, trust their intelligence and trust their faith, because putting people first is the secret of economic success everywhere in the world."

That is the agenda of the United States for the U.N. Population Conference this year, just as it remains the continuing goal of our family planning assistance to other nations.

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FOIA

F08-0052/01
WILLIAMS,
DANIEL

Box Number

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<i>DOC Document Type</i>	<i>No of</i>	<i>Doc Date</i>	<i>Restric-</i>
<i>NO Document Description</i>	<i>pages</i>		<i>tions</i>

1	CASE FILE	6	11/3/1983	B6
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ID # 178946
WE003

WHITE HOUSE
CORRESPONDENCE TRACKING WORKSHEET

- ☐ O - OUTGOING
☐ H - INTERNAL
☐ I - INCOMING

Date Correspondence
Received (YY/MM/DD)

83,09,21

FOIA (b)(6)

Name of Correspondent: Mr. & Mrs.

☐ MI Mail Report

User Codes: (A) _____ (B) _____ (C) _____

Subject: Refers to Baby Doe Ruling. Testing
proved no Down's Syndrome but
did indicate chromosome problem
Does not want to abort but does not know
how they can bear medical expenses
if they do not

ROUTE TO:

ACTION

DISPOSITION

Ref/Agency (Staff Name)	Action Code	Tracking Date YY/MM/DD	Type of Response	Code	Completion Date YY/MM/DD
<u>Co Hogg</u>	<u>CS</u> ORIGINATOR	<u>83,10,12</u>			<u>C 83,12,08</u>
<u>HHS: attn: Surg. Gen. Koop</u>	<u>CS</u> Referral Note:	<u>83,10,14</u>			<u>A 83,10,24</u>
	Referral Note:				
		<u>1 1</u>			<u>1 1</u>
	Referral Note:				
		<u>1 1</u>			<u>1 1</u>
	Referral Note:				
		<u>1 1</u>			<u>1 1</u>
	Referral Note:				

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A - Appropriate Action
C - Comment/Recommendation
D - Draft Response
F - Furnish Fact Sheet
to be used as Enclosure

I - Info Copy Only/No Action Necessary
R - Direct Reply w/Copy
S - For Signature
X - Interim Reply

DISPOSITION CODES:

A - Answered
B - Non-Special Referral
C - Completed
S - Suspended

FOR OUTGOING CORRESPONDENCE:

Type of Response = Initials of Signer
Code = "A"
Completion Date = Date of Outgoing

Comments: CS This file is to be brought to the personal
attention of Mr. Koop as directed in memo
from AVH.

Keep this worksheet attached to the original incoming letter.

Send all routing updates to Central Reference (Room 75, OEOB).

Always return completed correspondence record to Central Files.

Refer questions about the correspondence tracking system to Central Reference, ext. 2590.

RECORDS MANAGEMENT ONLY

CLASSIFICATION SECTION

No. of Additional Correspondents: _____ Media: L Individual Codes: 4000 _____
 Prime Subject Code: WE003 Secondary Subject Codes: HE025 _____

PRESIDENTIAL REPLY

Code	Date	Comment	Form
C	_____	Time: _____	P- _____
DSP	_____	Time: _____	Media: _____

SIGNATURE CODES:

CPn - Presidential Correspondence
 n - 0 - Unknown
 n - 1 - Ronald Wilson Reagan
 n - 2 - Ronald Reagan
 n - 3 - Ron
 n - 4 - Dutch
 n - 5 - Ron Reagan
 n - 6 - Ronald
 n - 7 - Ronnie

CLn - First Lady's Correspondence
 n - 0 - Unknown
 n - 1 - Nancy Reagan
 n - 2 - Nancy
 n - 3 - Mrs. Ronald Reagan

CBn - Presidential & First Lady's Correspondence
 n - 1 - Ronald Reagan - Nancy Reagan
 n - 2 - Ron - Nancy

MEDIA CODES:

B - Box/package
 C - Copy
 D - Official document
 G - Message
 H - Handcarried
 L - Letter
 M - Mailgram
 O - Memo
 P - Photo
 R - Report
 S - Sealed
 T - Telegram
 V - Telephone
 X - Miscellaneous
 Y - Study

DEPARTMENT OF HEALTH

NOV 8

Venezo 11/3
 Can't find original!
 Please use this as
 an original + answer
 asap as this is
 a White House
 request. Thanks,
 Danov

FOIA (b)(6)

Dear Mr. & Mrs. **FOIA (b)(6)**

Your letter to President Reagan has been referred to Dr. C. Everett Koop, the Surgeon General of the U.S. Public Health Service, for necessary action.

Dr. Koop is presently out of the country and will be returning in mid-November. Your letter will be brought to his attention immediately upon his return to the Office.

Sincerely yours,

151

John C. Duffy, M.D.
 Assistant Surgeon General
 Director of Medical Affairs
 Office of the Surgeon General

Dictated by: JCDuffy:vad, 11/9/83

78924

FILE
 COPY

OFFICE	SURNAME	DATE	OFFICE	SURNAME	DATE	OFFICE	SURNAME	DATE

OCT 24 1983

Mr. and Mrs. FOIA (b)(6)
FOIA (b)(6)

Dear Mr. and Mrs. FOIA (b)(6)

President Reagan has asked me to respond to your letter to him of September 16.

First let me tell you that I am sure I share the President's position in saying that we are thankful that you did not abort your baby. We both trust it will be a healthy youngster when it is born.

I would like to suggest to you that you wait until your baby is born before deciding what your problems might be on this 10-90 percent chance you talk about.

It would seem that you misunderstand the Baby Doe Regulations. In no way are these regulations responsible for anything the parents might do about a pregnancy before birth of the child or about their child after delivery. The Baby Doe Regulations seek merely to give a child who is handicapped at birth the same treatment that would be given to a child who is not handicapped at birth. You claim that the Government has decided what should be done about the 10 percent of babies you mentioned in your letter. The Government's interest is, as I hope yours is also, to ensure that a child who is born with a handicap gets the same fluids, nutrition, concern, and consideration that a normal baby would get.

We do hope your baby is normal but if not and you need advice and counsel please do not hesitate to be in touch with this office.

Sincerely yours,

C. Everett Koop
C. Everett Koop, M.D.

Prepared by: CEKoop:mt:10/24/83#78924

THE WHITE HOUSE OFFICE
REFERRAL

OCTOBER 14, 1983

TO: DEPARTMENT OF HEALTH AND HUMAN SERVICES
ATTN: SURG. GEN'L KOOP

ACTION REQUESTED:
DIRECT REPLY, FURNISH INFO COPY

DESCRIPTION OF INCOMING:

ID: 178946
MEDIA: LETTER, DATED SEPTEMBER 16, 1983
TO: PRESIDENT REAGAN
FROM: MR. AND MRS. **FOIA (b)(6)**
FOIA (b)(6)

SUBJECT: REFERS TO "BABY DOE RULING" TESTING PROVED NO
DOWN'S SYNDROME BUT DID INDICATE CHROMOSOME
PROBLEM - DOES NOT WANT TO ABORT BUT DOES NOT
KNOW HOW THEY CAN BEAR MEDICAL EXPENSES IF
THEY DO NOT

PROMPT ACTION IS ESSENTIAL -- IF REQUIRED ACTION HAS NOT BEEN
TAKEN WITHIN 9 WORKING DAYS OF RECEIPT, PLEASE TELEPHONE THE
UNDERSIGNED AT 456-7486.

RETURN CORRESPONDENCE, WORKSHEET AND COPY OF RESPONSE
(OR DRAFT) TO:
AGENCY LIAISON, ROOM 91, THE WHITE HOUSE

SALLY KELLEY
DIRECTOR OF AGENCY LIAISON
PRESIDENTIAL CORRESPONDENCE

14 OCT 83 000004

TRACER 789-

Sept 16, 1983

178946

President. Reagan

There may be an angle you did not address before ordering your "Baby Doe Hot Line". It may have been brought into existence to save infant lives otherwise lost because parents and doctors agree that the quality of life is insufficient to warrant the ~~expense~~ emotional and financial drain on the family responsible.

I do have personal immediate interest in this situation. I am pregnant, near six months along, and since I am 39 years old, had an amniocentesis last month. That is the earliest this test could be performed, to check the "baby" for Down's Syndrome. It is quite an expensive test, \$1,000.⁰⁰. Fortunately, the test proved there was no Down's Syndrome; unfortunately, it ~~showed~~ did show a chromosome had broken off and transplanted itself onto another. This happens once in 1500 of the tested pregnancies. The best info we can get is that there is a 10% chance that our child will be born with severe mental retardation plus birth defects. In other words, you ask for a first, regular little babies. He has been advised by professionals and friends alike to "terminate", "abort", "Call it off". Why? Because these (over)

People fear the child ^{might be}
within the 10% and they know
as I know that we have no desire
to bring to ~~this~~ life a helpless,
hopelessly retarded child due to
no fault of our own. I also know
we cannot financially handle the
surgery ~~that is~~ hospitalization
required in a child with severe
birth ~~defect~~ defects.

Believe me, I respect life before birth,
as after; for that reason I cannot
force myself to follow the advise
given. I cannot do away with
this ~~90%~~ 90% chance of having
beautiful, normal child, in order
to dispose of a 10% chance of being
stuck in an ugly situation, fighting
hospital, doctor, and all levels of
Government. ~~What is to~~ What is to
be done with a totally abnormal
birth? Who is going to be financially
responsible? We are not insured,
we have our income from a small
self owned business, and are hard
pressed to pay for the \$2,000.00 already
~~and~~ invested in the tests run, and figure
a way to come up with the rest of the
required for a normal birth, let alone
one with complications.
As this is working around, it seems

the ~~un~~ is fortunate person who ca. no
afford to gamble will be forced to go
the route of aborting a baby that
nine times out of ten will be perfectly
normal. And your Baby Doe rule
is responsible. It does not allow
us to find out for sure which way
this pregnancy is before deciding
what to do! We have lost our
right to informed consent.

Since you took an immediate interest
and acted, after Baby Doe was dead,
I would appreciate your thoughts
on my questions while our baby
is still unknown, hiding the secret
of its health from parents and Mrs.
Baiki.

~~the point we have to consider~~ Since
the Government ~~has~~ decided what
should be done about a 10% baby, the
Government should also have the financial
responsibility and provide lifetime care,
don't you agree?

Sincerely,

FOIA (b)(6)