

membership, including representatives from professional health-care organizations, social science and legal professions, government officials, parents' groups, and the beverage-alcohol industry. The Chairperson shall be elected by the Advisory Committee. The Committee shall report to the Minister of Health and Welfare Canada, whose department shall provide funding for the Committee.

(B) NATIONAL RESOURCE CENTRE ON ALCOHOL AND THE FOETUS

As our public hearings progressed, it became apparent that there is a need for a national resource centre to deal with the many issues associated with FAS and FAE. Such a centre could make a valuable contribution in this area, operating perhaps in the manner of a "centre of excellence" both for studies on FAS/FAE, development of treatments for victims and drinking mothers, and for coordinating information for dissemination across Canada.

The Canadian Centre for Substance Abuse in Ottawa operates a national clearing-house for information on drugs and other substances, including alcohol, and could participate directly or indirectly in the development and operation of a national resource centre on alcohol and the foetus. An existing centre of excellence in this area is the British Columbia FAS Resource Group at the University of British Columbia Department of Pediatrics and the Sunny Hill Hospital for Children in Vancouver.

The Sub-Committee believes that existing resources should be used to the maximum extent in creating a national centre.

RECOMMENDATION NO. 2

The Sub-Committee recommends that the Minister of Health and Welfare Canada, in consultation with the Provinces and Territories, promptly establish a National Resource Centre on Alcohol and the Foetus, the purpose of the Centre being to coordinate and disseminate information across Canada on all aspects of Foetal Alcohol Syndrome (FAS) and Foetal Alcohol Effects (FAE). The Centre could most effectively and economically be developed from a currently active FAS/FAE resource group, such as The Canadian Centre on Substance Abuse.

(C) PROVINCIAL CO-ORDINATORS FOR FOETAL ALCOHOL SYNDROME AND FOETAL ALCOHOL EFFECTS

There is a need for improved provincial coordination of resources, programs and activities to deal with the many complex issues associated with FAS and FAE. First, it is necessary to make the public more aware of the risks to the foetus posed by maternal consumption of alcohol. The education and counselling of pregnant women is a priority and the resources for this could be effectively organized and coordinated at the provincial or territorial level. The early diagnosis of FAS and (especially) FAE children would be enhanced if there were a central source of information and expertise in each province and territory which health-care professionals could contact. Provincial and territorial resources and expertise for the treatment, care and education of FAS and FAE victims could be more efficiently managed and dispensed by a central coordinating office. Similarly, a provincial or territorial co-ordinator could assist families in organizing and contacting support groups, which have been shown to be very effective in assisting parents and families to deal with the many problems associated with FAS and FAE.