

It is interesting to point out the INAC has discovered through its experience in the Americas that exchanges on indigenous-peoples issues has become a very useful foreign policy tool - they have found bilateral cooperation on indigenous related issues or interest has built trust and contacts that have had a positive impact on discussions within multilateral fora such as the UN or OAS.

Health Canada was enthusiastic about the reporting it received from the pilot project. During last year's SARS crisis, DFAIT was critical in coordinating accurate and timely international reporting of vital importance to Health Canada. However, in the context of the pilot reporting project, Health Canada expressed an interest in gathering information on on-going policy priorities, and specifically, the wide topic of Assisted Human Reproduction, which covers such areas as in vitro fertilisation, stem-cell research, and cloning. The reporting is particularly timely as the federal government is currently developing legislation on Assisted Human Reproduction. This is a fast-changing and complex social policy issue influenced by medical and scientific research that is now going on in a number of countries.

The Health Canada contact indicated that much of their international focus has been on Europe. However, recently Asia has seen a number of unexpected breakthroughs in Assisted Human Reproduction, yet the Canadian network of contacts has been limited in the region. The pilot work resulted in reports from Bangkok, Singapore, and Kuala Lumpur (the latter still to come). Health Canada found the report from Singapore particularly valuable, as the Department had not been aware that Singapore was so advanced in this field. Although South Korea was not part of the pilot project, it has also recently been the site of major and unexpected research advances related to human cloning.

Health Canada observed that building understanding and contacts on Asian work on Assisted Human Reproduction is of value because it can facilitate building of alliances for international agreements. In general, Health Canada saw future collaboration with FAC as symbiotic in nature, as our overseas missions can also be used to disseminate Canadian information on Assisted Human Reproduction as Health Canada is currently preparing an information kit on the proposed Canadian legislation. Given Canada's multicultural and multi-faith social demographics, the Canadian approach to this sensitive legislation is of relevance to countries in Southeast Asia countries with similar multicultural and religious social environments.

An interesting element about reporting on Assisted Human Reproduction, and the building of contact networks in the process, is that this reporting can help brand Canada as a world leader in science and technology. A related "branding" of Canada is our leadership in the health field of anti-tobacco policies. As part of the pilot project, reports were received from some of the Southeast Asian missions on tobacco usage, production and government policies. Health Canada indicated that Canadian approach to curbing tobacco