Legislation authorizing the work of the CDC’s Division of

Birth Defects & Developmental Disabilities

Section 399H of the Public Health Service Act

**PART O-FETAL ALCOHOL SYNDROME PREVENTION AND SERVICES PROGRAM**

**Sec. 399H [2801] ESTABLISHMENT OF FETAL ALCOHOL SYNDROME**

**PREVENTION AND SERVICES PROGRAM**

(a). FETAL ALCOHOL SYNDROME PREVENTION, INTERVENTION AND SERVICES DELIVERY PROGRAM.-The Secretary shall establish a comprehensive Fetal Alcohol Syndrome and Fetal Alcohol Effect prevention, intervention and services delivery program that shall include

1. an education and public awareness program to support, conduct, and evaluate the effectiveness of –
2. educational programs targeting medical schools, social and other supportive services, educators and counselors and other service providers in all phases of child-hood development, and other relevant service providers, concerning the prevention, identification, and provision of services for children, adolescents and adults with Fetal Alcohol Syndrome and Fetal Alcohol Effect
3. strategies to educate school-age children, including pregnant and high risk youth, concerning Fetal Alcohol Syndrome and Fetal Alcohol Effect;
4. public and community awareness programs concerning Fetal Alcohol Syndrome and Fetal Alcohol Effect; and
5. strategies to coordinate information and services across affected community agencies
6. a prevention and diagnosis program to support clinical studies, demonstrations and other research as appropriate to-develop appropriate medical diagnostic methods for identifying Fetal Alcohol Syndrome and Fetal Alcohol Effect; and develop effective prevention services and interventions for pregnant, alcohol-dependent women; and
7. develop appropriate medical diagnostic methods for identifying Fetal Alcohol Syndrome and Fetal Alcohol Effect; and
8. develop effective prevention services and interventions for pregnant, alcohol-dependent women: and

(3) an applied research program concerning intervention and prevention to support and conduct service demonstration projects, clinical studies and other research models providing advocacy, educational and vocational training, counseling, medical and mental health, and other supportive services, as well as models that integrate and coordinate such services, that are aimed at the unique challenges facing individuals with Fetal Alcohol Syndrome or Fetal Alcohol Effect and their families.

**FY 2009 HOUSE MARK**

TheCommittee is concerned about the prevalence of FAS in the U.S. and notes that drinking during pregnancy continues to be the nation's leading known preventable cause of mental retardation and birth defects. The Committee encourages CDC to continue and enhance efforts to prevent, reduce, and diagnose FAS disorders. The Committee requests that CDC submit a progress report within six months on the contributions made to .preventing and reducing FAS disorders, and for CDC's future plans, including programmatic and funding priorities. **[Pages 111, House Report 110-231]**

**FY 2009 SENATE MARK**

The Committee isconcerned by the prevalence of fetal alcohol spectrum disorders (FASD) in the United States and notes that drinking during pregnancy is the Nation's leading known preventable cause of mental retardation and birth defects. To publicize and promote awareness of this critical public health information, the Committee has provided sufficient resources to continue these activities. The Committee notes that the National Task Force on Fetal Alcohol Syndrome and Fetal Alcohol Effect is due to expire in October 2007. The Committee requests that the CDC submit a progress report within six months of the Task Force’s contributions to preventing and reducing fetal alcohol spectrum disorders. The report should outline future plans for the Task Force, including programmatic and funding priorities. **[Page 90-91, Senate Report 110-107]**