Interactions with a Violent Past

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In the documentary film *A Story from the Corner of the Park* by Vietnamese director Trần Văn Thủy, we are taken down a narrow alley in Hanoi, to the small home of a three-generational family. The film unfolds to tell the story of how this family is affected by Agent Orange from a war long over. When the film came out in 1996, there was very little attention to Agent Orange’s impact in Vietnam; few Vietnamese and even fewer Americans knew that there were an estimated three million Vietnamese with illnesses associated with exposure to Agent Orange, including at least 150,000 children born with severe multiple birth defects believed to be caused by their parents’ or grandparents’ exposure.¹ The Vietnamese government was in the process of normalizing the country’s relations with the United States and there was little support for those who brought attention to the “wounds of the war” during this sensitive time in US-Vietnam relations. Ten years later, those victims of Agent Orange, an herbicide used during the war in Vietnam that was contaminated with dioxin, have their photos displayed in exhibits throughout the country, their stories told in the Vietnamese and foreign press, and their fate discussed in high-level meetings between the US and Vietnam.

But why now, three and a half decades after the end of the war, has the fate of those affected by Agent Orange become a *cause célèbre* in Vietnam? Is it simply because the United States and Vietnam have reached a point in their relationship that the painful aspects of the war can now be brought to light? If so why is there intense focus by the media, by government officials, by individual Vietnamese on those affected by Agent Orange and not as much focus on the victims of the other legacy of the war —
Unexploded Ordnance? Why has there been increased international attention on the “Agent Orange Victims”? How much of this hesitation by the United States to confront this “significant ghost” of the war in Vietnam, as former US Ambassador to Vietnam Raymond Burghardt referred to Agent Orange, is based on the inability of the many in the United States to put the Vietnam War behind them? More fundamentally, what is an “Agent Orange Victim” and how have the lives of those born today been altered by a chemical whose use ended more than 40 years ago?

After recounting the reluctance of both American and Vietnamese governments to confront the issue of “Agent Orange Victims” until very recently, I briefly review the history of the use of Agent Orange and other herbicides during the American-Vietnam War. The wartime damage to the environment of the defoliants, and the ongoing environmental dangers of the residual “dioxin hotspots” around former US military bases, as I explain in the following sections, is becoming more understood and in various stages of being mitigated (Hatfield 2009). I, nonetheless, argue that the physical, psychological, social, and economic damage caused by the use of Agent Orange have long been controversial and will take much longer to address. Due to improper manufacturing, the herbicide has become a defining symbol of the ongoing damages of the war inflicted upon the human and ecological landscapes in Vietnam. I discuss in the final part of the article the political impacts of Agent Orange as it plays out in Vietnam, in the United States, and internationally, which are complex and tend to lead to polemics that have hindered progress on finding a solution to the “Agent Orange issue.” However, Agent Orange must be understood and redefined in order for the real work to begin to mitigate its ongoing health and environmental impacts.

Misinterpreting Agent Orange or Denial?

American visitors to Vietnam often note how surprised they were to find that the Vietnamese have “forgotten the war,” that they have “forgiven” the United States, and that they hold no “hatred or ill-will” for Americans. On the surface, these statement are correct. More than 75 percent of the population of Vietnam is under 40 with no personal recollection of the American war. For most Vietnamese, the United States is first of all a country, not a war. However, it is simplistic to say that the war has been “forgotten.” For those families who lost loved ones during the war or after to one of its ongoing legacies, there is a daily reminder when they make offerings to their family altars. The Vietnamese who fought on the side
of the Americans including those who left Vietnam as refugees have their own memories about the war.

As for “forgiving the United States,” on the surface this is also true. For those who were alive during the war, most will say that they never blamed the “Americans” for the war but blamed the US government at that time. They point out that it is Vietnam tradition to make peace with their enemies after the war is over. However, for many in the US, Vietnam is considered first a war and second, a country. Unfortunately for Vietnam, it has taken the United States a lot longer to make peace, for 20 years after the war, the United States imposed a trade and diplomatic embargo on Vietnam, hindered postwar reconstruction efforts and blocked most humanitarian assistance. Even today, relations with Vietnam for many, including some US congressional officials and State Department staff, are often hindered by the “Vietnam Experience” and all that entails. While Vietnam and the Vietnamese people may have been able to “put the war behind them,” in many respects the United States and its people have not, and this inability to come to terms with Vietnam hinders its ability to address the ongoing legacies of that war.

This is most vividly seen when dealing with the issue of Agent Orange. For many years, the US government was wary of dealing with Agent Orange, hoping that it would not gain momentum in Vietnam. In 2005, while visiting the US Embassy in Hanoi with an American delegation, our delegation was told by the Public Affairs officer that he was “tired” of hearing about Agent Orange and that it was just “propaganda being encouraged by the Vietnamese government.”

It was not until the past few years that one could have a constructive conversation with US Embassy officials in Vietnam about Agent Orange. The Embassy would eventually go as far as to acknowledge that this issue was hindering US-Vietnam relations or at the very least admit that it was “an irritant.”

It has become clear to me over time that some in the US government have vastly misunderstood what Agent Orange meant to the Vietnamese people and government. As a result, they took a very defensive position and either refused to talk about it or called Agent Orange a “propaganda campaign” by the Vietnamese government to gain the war reparations that the Vietnamese signed off on years ago. Many did not understand that the focus on the Agent Orange’s impacts began at the grassroots and had been met with considerable resistance by the Vietnamese government who was trying to move forward with the United States and did not want to raise this unpleasant business of Agent Orange. Nor did the Vietnamese
government want to give the wrong impression to the world that Vietnam was a large toxic waste site just as it was beginning to export its rice, fish and other agricultural products. When calling for “Justice” for Agent Orange Victims became more widespread, the United States could not believe it was not government-led (government sanctioned perhaps, but not driven by the leadership that was divided on the issue).

What the US Embassy missed was that advocating for addressing the legacy of Agent Orange in Vietnam followed a similar path as advocacy for this issue in the United States. Former Northern Vietnam Army soldiers frustrated by the lack of the Vietnamese government’s response to the illnesses they and their families faced, which they believed were associated with exposure to toxic herbicides in the South, began to speak out and request assistance for those affected by Agent Orange (Nguyễn Đôn Tú 1997). They were backed by a group of doctors and scientists, such as Lê Cao Đài, Phan Thị Phi Phi, Nguyễn Thị Ngọc Toàn, Nguyễn Thị Ngọc Phương, Võ Quý and others who had spent the war years in the regions sprayed by herbicides and had since been conducting research on the ongoing impacts of Agent Orange (Westing 1984; Lê Cao Đài 2000). By having unimpeachable “revolutionary backgrounds,” these early activists were able to get the Vietnamese government to pay attention to continuing impacts of Agent Orange.  

**Why Agent Orange?**

The most widely used herbicide sprayed by the US Air Force in “Operation Ranch Hand” during the Vietnam War was nicknamed Agent Orange after the orange stripe around the barrel identifying the contents as a 50-50 mixture of two herbicides, 2,4-Dichlorophenoxyacetic acid (2,4-D) and 2,4,5-Trichlorophenoxyacetic acid (2,4,5-T). If those two chemical components were the only contents in the 55-gallon barrels of Agent Orange, this aspect of the war in Vietnam would have remained a footnote in most history books. When speaking about Agent Orange today, we would be referring to the historical environmental damage or destruction of more than five million acres of the landscape in Vietnam, to the ongoing degradation of the sprayed areas that have not since been restored or re-purposed. Or possibly to refer to how this damaged landscape has altered the livelihood and spiritual life of populations that were so closely tied to the upland forests (Maitre 2006). These impacts were significant enough at the time of the war for the term “ecocide” to be coined in 1970 to describe them (Zierler 2011: 15–9).
If the barrels only contained 2,4-D and 2,4,5-T, the average Vietnamese and the average American would have no reference point for the term “Agent Orange.” There would likely be little memory in Vietnam or in the US of the actual spraying of the more than 20 million gallons of herbicides, other than by those who carried out the spraying or by the estimated 4.8 million Vietnamese civilians who lived directly under the spray runs (Stellman et al. 2003: 685). Others, particularly those who lived in the mountainous regions, may recall the spray planes that purposely targeted 500,000 acres of their cropland in an effort to deny the

Plate 7.1  Spray map of all herbicides used during the war in Vietnam, April 2000 (Sources: Hatfield Consultants and US Department of Army).
“enemy” food. Lê Cao Đài vividly recalls the spraying in the central highlands in his memoir:

Day before yesterday [24 July 1967], while some of us were on our way to the hospital’s farming plots, we crossed a hilltop just as enemy planes were spraying defoliants. This was some time between seven and eight o’clock in the morning. Three C-130 planes flew in a triangle formation very high above. Then, as they approached us, they turned into a line formation and seemed to hover above the treetops, causing the leaves to shake. We had only enough time to hide behind tree trunks. Then we saw something like a patch of mist spreading over the forest.

We covered ourselves with our ponchos and held handkerchiefs over our faces as we waited for the chemicals to settle. Then, we continued hiking to our fields. There, our workers were calling to each other to cut off all the young cassava tops. Those who had lived in the battlefields for many years say that only by doing so can we save the manioc roots underneath; otherwise, some days later, the chemicals will defoliate the cassava, and the underground manioc will turn bitter and become inedible.

By the time I returned to the hospital some days later, I could hardly recognize the path I had taken a few days before. The once luxuriant, green forest stood denuded; dead, yellow leaves lay all about the ground; the bare branches looked like gaunt hands reaching into the sky (Lê Cao Đài 2004: 149–50).

However, due to improper manufacturing of the herbicide 2,4,5-T, Agent Orange has become a symbol of the ongoing health and environmental consequence of war, as evidence that wars do not end when the bombs and bullets stop and not only impact the generation who fought or lived through the war but also potentially the succeeding generations. This has ensured that Agent Orange stays in the memory and physical landscape of hundreds of thousands of US veterans and their families and millions of Vietnamese and their families. Potentially, Agent Orange will continue to have an impact on the people on both sides of the Pacific for generations to come.

“Agent Orange” Defined

Usually when speaking of Agent Orange and its impacts, we are actually talking about dioxin. During the manufacturing of the 2,4,5-T component of Agent Orange, 2,3,7,8-Tetrachlorodibenzodioxin (TCDD), or “dioxin,”
was also produced as a contaminant when the temperature used to induce the chemical reaction was too high. The manufacturers were aware that they could have prevented, or at the very least reduced, the amount of dioxin produced by lowering the temperature of the chemical reaction used to produce 2,4,5-T to below 100 degrees Celsius. Alternatively, they could have filtered the 2,4,5-T after production to remove the dioxin contaminant (Sohn 1957; Trapp 1965). As the herbicide program escalated in 1968 and 1969, the manufacturers of 2,4,5-T increased their output to meet the demands of the US Department of Defense; as a result the amount of this unnecessary and unwanted contaminant varied from manufacturer to manufacturer and batch to batch depending on what measures were taken by the chemical companies to reduce the dioxin contaminant.\footnote{11}

Since the Vietnam War, TCDD has been found to be the most toxic of the persistent organic pollutants. The US National Toxicology Program (NTP) and the International Agency for the Research on Cancer list TCDD as a known human carcinogen, and in animal studies, it has been found to cause reproductive and developmental damage (Institute of Medicine 2009). It is not possible to know for sure exactly how much dioxin was distributed throughout Vietnam during the war. However, by using data from the testing of the remaining barrels of Agent Orange stored at Gulfport, Mississippi and Johnston Island after the herbicide program ended, Stellman \textit{et al.} estimated that anywhere from 221 to 366 kilograms of dioxin was in the more than 15 million gallons (57 million liters) of dioxin-contaminated herbicides sprayed, stored and spilled throughout southern Vietnam (Stellman \textit{et al.} 2003: 684). It is important to note the dioxin is rarely measured in kilograms; the more common measurement is in parts per million (ppm), per billion (ppb) or per trillion (ppt). To put this into perspective, one ppt is the equivalent of one-twentieth of a drop of water in an Olympic-sized swimming pool.

Nonetheless, it is much more common to hear the term “Agent Orange” to describe the ongoing environmental and health effects of the herbicides than the term “dioxin.” Diane Fox notes that Agent Orange has come to have many different meanings including: the 50:50 mixture of 2,4-D and 2,4,5-T; a generic term for all the herbicides used during the war; chemical warfare; a disease or condition, that is, “dying from Agent Orange” or a synonym for a birth defect; and it has been called a diversion, whereas one assumes every illness and birth defect is caused by Agent Orange so the real underlying causes are ignored (Fox 2007: 7–17).

It is due in part to these various meanings of “Agent Orange” that it has become so political, so controversial and so misunderstood. As a result,
it has taken the better part of the past 37 years since the end of the war to finally reach a point where the American and Vietnamese governments can dialogue about Agent Orange in order to find common ground instead of talking past each other or placing blame.

**Agent Orange’s Impacts Then and Now**

During the first several years of the war, the biggest concern about the use of Agent Orange and the other herbicides was focused on the damage to the ecosystem. Within two to three weeks of spraying, the leaves would drop from the trees which would remain bare until the next rainy season. About ten percent of the trees sprayed died from a single spray run. Multiple sprayings resulted in increased mortality for the trees. Extensive logging off of the defoliated trees also contributed to the destruction of 20 percent of the forest lands in southern Vietnam that may have regenerated if simply sprayed by herbicides. A minimum of 20 million cubic meters of timber was destroyed, though estimates range as high as 75 million if you take into consideration the additional impact of plows, bombing, napalm strikes and harvesting of defoliated trees (Westing 1984: 11; Westing 2002: 3).
Even today, the damage from the herbicides used during the war persists in the form of ecologically degraded landscapes in some parts of Vietnam. The prewar forests that existed in the upland forests before the spraying took hundreds of years to reach an ecologically-balanced mixture of large numbers of species of flora and fauna. Natural regeneration would take centuries to reproduce those landscapes. In addition, in some of the sprayed areas, soil erosion and landslides have sharply lowered soil nutrient levels and altered the topographical features of the landscape (Dwernychuk 2010).

The US military had assured its soldiers, its allies and the local Vietnamese population that the herbicides were not harmful to humans or animals, even dropping leaflets before some spray runs stating that the

Plate 7.3 A defoliated hillside and subsequent erosion in A Lưồi Valley, 1993 (Source: Hatfield Consultants).
herbicides were harmless. The herbicides were handled without protective gear, American soldiers recall reusing the Agent Orange barrels for BBQs and showers. There is little evidence to show that the US military knew that the herbicides they were using were harmful to humans or animals (Young 2009: 40–1). While the chemical companies and some advocates have insisted that the American government was aware of the dioxin contamination, the part of the military making the decision on where and how the herbicides would be used did not likely know that they contained dioxin and that this dioxin was toxic. The soldiers on the ground certainly did not know (Agent Orange Litigation 2006).

However, a 1969 study found that the 2,4,5-T component was teratogenic (fetus deforming) on laboratory rats (Courtney 1970: 866). Subsequent analysis of 2,4,5-T found that it was contaminated by TCDD. In April 1970, the US government restricted the use of 2,4,5-T in the United States and as well as in Vietnam. By the end of Operation Ranch Hand in January 1971, the damage to the landscape of Vietnam was already done. Testing in 1971 by three scientists from Harvard University found that the fish from the Đồng Nai and Saigon Rivers and the Cần Giờ coastal waters

Plate 7.4 MACV pamphlet panel, 1968.
had elevated levels of dioxin ranging from 18–814 ppt (Baughman 1973: 31). Tests of human breast milk revealed levels of dioxin as high as 1,850 ppt, leaving no doubt the dioxin had entered into the food chain and into Vietnamese population. What was little understood at the time was that the dioxin contamination from the herbicides would continue to cause harm for decades to come.

**A Lợrôi Valley: A Living Museum of Agent Orange**

The A Lợrôi Valley (formerly Shau Valley) in Thừa Thiên-Huê Province in central Vietnam is microcosm of the herbicidal war in Vietnam. The valley is 40 kilometers long and three kilometers wide and is bordered to the west by Laos. The steep mountains surrounding the valley were covered with triple canopy forest, the type that Operation Ranch Hand was aimed to eliminate. 224 spray missions were flown in the valley, which was also heavily bombed, during the war (Hatfield 1998). The Vietnam Forest Inventory and Planning Institute estimates that prior to the war, forests covered over 80 percent of the land area; after the war this was reduced to 50 percent. When one visits the valley today, one can still see areas of that remain barren of trees, although now many of the hillsides are covered with Acacia and Eucalyptus plantations, in part to stop further erosion and degradation of the soil, and in part to provide an income to the valley inhabitants.

For most of the war, the valley was under the control of the North Vietnamese Army. However, for a short period of time, the area housed three Special Forces bases: A Lợrôi in the north was operational from May through December 1965; Tà Bạt in the center of the valley from March 1963 until March 1964; and the A So base (formerly known as Shau base) in the southern end of the valley was operational from 1963 until 1966 (Hatfield 2000: 1). The valley was mainly inhabited by ethnic minorities, namely, the Ta Oy (Tà Ôi), Katu and Pa Co (Pa Kô), who prior to the American war, lived in the steep mountain terrain. The older residents of the valley vividly recall the planes coming over and the “mist that would settle on the crops” and how the crops would die a few days later. They talk about how they had to move down from their ancestral home in the hills to find food after their crops were destroyed by the herbicides, to find shelter after their homes were torched and to find safety so as not to be mistaken as the “enemy” by the US army and ARVN forces. The hill people who for generations practiced shifting cultivation leading a mobile
life, whose spiritual lives were tied to the forests, were now forced to till land in the valley floor, where there was a scarcity of water during the dry season, with poor-quality soil pock-marked with bomb craters and littered with unexploded ordnance.

The Center for Research and for Actions Against Trauma and Exclusion (CEDRATE) provide further examples of how the herbicides have had ongoing psychological, spiritual, cultural and economic impacts among those who lived in A Lưới District.

Before the war, there were forest genies and ‘fortune tellers’ [shamans]. But with dioxin poisonous substance, all trees have been destroyed. So the genies had to move to farther places. In the past, all ailments were caused by forest genies and ghosts. ‘Shamans’ know whether those illnesses are caused by forest, stream or earth genies … If the disease is caused by the forest Genie, the shaman will go to forests to pray and gather leaves to organize a ceremony for treatment of the disease … If all those ways of treatment are not effective, they would say that the disease is not caused by Gods, but dioxin.

— Elder in A Ngo Village, A Lưới (Doray and de la Garza 2006: 32–3).

The herbicides not only destroyed the forests that had provided a livelihood and traditional medicines but also were home for the various spirits that were vital to the animistic beliefs of the many ethnic minority people of this region (Doray and de la Garza 2006; Maitre 2006).

In the mid-1990s, Hatfield Consultants chose the A Lưới Valley for their research on the levels of residual dioxin that remained in the soil. As the area was far removed from any industrial site and under no intensive agricultural practices, any TCDD found in the valley could be traced back to the American War. Hatfield found that where herbicides were sprayed by airplanes, the levels of dioxin ranged from no detectable levels to slightly elevated levels, especially below the soil surface. It is believed that some of the dioxin that remained on the surface after spraying during the war would have broken down in the hot tropical sun. The dioxin that remained would have been washed away after years of heavy rain and soil erosion. The good news of their research was that for vast majority of the area of southern Vietnam, where there was aerial spraying of herbicides, there is no present-day threat from the dioxin (Dwernychuk 2006: 3).

However, Hatfield found that the more significant concern lay within and around the former US bases where the herbicides were stored. At the
A So base, in operation for three years, Hatfield researchers found levels of dioxin up to 897.85 pg/g (ppt). Even the Tà Bạt and A Lưới Special Forces bases, which were in operation for less than a year, had elevated levels of TCDD ranging from 4.3 pg/g to 35 pg/g. Hatfield also found that fish and ducks feeding in the contaminated area had high levels of dioxin in their fatty tissues. Moreover, the population that lived on the former base, even those who did not live in the area during the war, also had elevated levels of dioxin in their blood and breast milk. This proved beyond a doubt that the TCDD from Agent Orange was still found in pockets of the land in southern Vietnam, particularly around former military bases, and that the dioxin was continuing to enter the food chain, causing a health threat to a generation born long after the end of the war. Some remains of the war are neither residue nor relics, but constitute tenacious traces of a violent past that continue to inflict damages upon the ecological and human environment in Vietnam.

In 1991, Mr. Ngan and his wife, both Pa Co, moved from Hồng Thủy Commune in the north of A Lưới District to the former A So base (now Đồng Sơn Commune), which at the time was promoted by the government as a new economic zone.

I was able to save some money and start a fish farm, but I did not know that the land was contaminated with dioxin. My wife has been pregnant 13 times but most of the pregnancies only lasted two or three months. One of my daughters was born with birth defects; she died when she was two. My eldest daughter went up to the 11th grade but she was not able to go to school every day because of her terrible headaches, she also had to have an operation on her head. One of my daughters is almost blind and cannot move easily. My wife also has some health problems. I have had problems with my legs, for two years I was not able to walk, I had treatment and physical therapy and I can now walk again but it is still very painful, I cannot walk more than a few kilometers. I think that I am affected by dioxin because I never had these health problems when I lived in Hồng Thủy commune. I think maybe it is because of the dioxin poison because it is not just me, but my children as well.

Mr. Ngan and his family lived on the former A So base from 1991 until 2000 when he and the other families living in this area were relocated to a new village one kilometer away. The perimeter of the contaminated section of the base was fenced off. Mr. Ngan is now raising vegetables and fruit trees in his garden but he says it is very difficult because his wife and children cannot help him.
Hotspot Theory

Following their research in A Lưới, Hatfield posited that there might be other such “dioxin hotspots” throughout southern Vietnam; former military bases were of particular concern, especially bases where Operation Ranch Hand was located or there had been repeated perimeter spraying. Since the mid-1990s, Hatfield has surveyed former US military installations in southern Vietnam and has identified at least 28 potential “dioxin hotspots.” Additional testing in the past five years done by Hatfield and Vietnam’s Committee 33 at Đà Nẵng, Phú Cát and Biên Hòa bases, all of which were Operation Ranch Hand hubs, have found that parts of the bases are highly contaminated with TCDD and in need of remediation (Hatfield et al. 2009).

At the Đà Nẵng airbase, Hatfield found up to 365,000 ppt TCDD on the site where the barrels were loaded onto planes — 365 times the international acceptable standard for dioxin contamination in industrial locations. Walking in this sector, one can still detect a strong chlorine smell.
from the phenols (solvents) in the herbicides, reminiscent of garden weed-killer. One can also see the blackened soil caused by the oxidized chlorine molecules in the herbicides where no grass or shrubs can grow. Of particular concern are those hotspots where the TCDD is contaminating the food of local residents. A short walk away from the former herbicide loading area on the Đà Nẵng airbase is Sen Lake where the dioxin-contaminated sediment is the feeding grounds of fish that were found to have up to 400 times the acceptable level of dioxin, with the average being about three times the acceptable level of TCDD. Local residents who had consumed the fish in the lake have the highest levels of TCDD in the blood of any of the other residents Hatfield tested in Đà Nẵng. One 45-year-old man, who used to fish and consume his catch in the contaminated pond, had 1340 pg/g TCDD in his blood — approximately 200 times the level found in the blood of those living in industrialized nations and more than 400 times the level found in the blood of those living in the north of Vietnam (Hatfield et al. 2009: xiv). The lake is now blocked with a tall concrete wall prohibiting local residents from fishing in the lake (Hatfield et al.
Redefining Agent Orange, Mitigating Its Impacts

2009: xi). Agent Orange-infested areas in these “dioxin hotspots” are not only legacies of war, but these landscapes containing toxic debris exert ongoing ruination of people’s lives “as a corrosive process that weights on the future and shapes the present” (Stoler 2008: 194); I discuss in the next sections the uncertain fate of “Agent Orange Victims.”

**Who is an “Agent Orange Victim”?**

The vast majority of those in Vietnam who are believed to be affected by Agent Orange are those who were directly exposed to the herbicides or were exposed at the dioxin hotspots and now have cancers and other illnesses that have been found to be associated with dioxin. However, children with birth defects and other disabilities that are believed to be associated with their parents’ or grandparents’ exposure to Agent Orange have received the most attention in Vietnam and around the world. In recent years, these Agent Orange victims have been the subject of at least a half a dozen international documentary films. They have been photographed by renowned documentary photographers, frequently written about in foreign and domestic newspapers and the subject of several books, including a compilation of Vietnamese fictional short stories published in the US (Waugh and Lien 2010). In world history, “Agent Orange victims” as ruined bodies painfully emblematize a violent intervention in the name of freedom and security as part of escalating ideological struggles of the Cold War in Asia. When the issue of Agent Orange is raised in Western and Vietnamese media, it is the image of those children with severe birth defects, often unable to talk, who are lying prone on a bed in a poor rural village in need of round-the-clock care, which comes to the minds of most people. The child labeled as “Agent Orange victim” faces the greatest medical and educational challenges yet whose needs are not yet being met. They are the children whom Trần Văn Thủy notes “are pitiful beyond human endurance; they might create revulsion if we simply let our movie camera capture the naked reality” (Trần Văn Thủy 2004).

The majority of people with disabilities in Vietnam, including those believed to be affected by Agent Orange, live in rural areas of the country. Mr. Đồng (40 years old) and his wife Thủy (39 years old) live in Thiên Châu Commune, Thiên Phước District, Quảng Nam Province on a small plot of land about five kilometers down a very narrow road that crosses a river bed that is impassable during parts of the rainy season. This area was heavily sprayed by herbicides during the war, not only to defoliate the forests but also for crop destruction. Đòng and Thủy who grew up in
this region have had seven children — five born with some level of birth defect. Đồng earns less than US$40 a month raising rice and vegetables on his farm. His wife cannot help as she must be home with her two sons aged 25 and 18 who are completely paralyzed with a condition that appears to be similar to cerebral palsy but has not been diagnosed as the boys have never been to a doctor. They must be spoonfed, bathed, their toilet needs cared for, and frequently moved to avoid bed sores. Another son who had the same condition died when he was 23.

Thùy is also home with her 11-year-old daughter, Kim Hướng, who has arrhythmia and Down’s syndrome. Kim Hướng has been to Huế three times for her heart condition, the first time for an operation to repair her heart valve, the other two times to see more specialists; however, the doctors are not hopeful there is much more that can be done. When she becomes sick, which is often, she must be taken to the nearest hospital in Tam Kỳ, the provincial capital, about 30 kilometers away. Another daughter, 21 years old, has some paralysis in her legs but is able to walk with the help of canes. She used to help her mother with the care of her brothers and sister but decided to go to Tam Kỳ for a vocational training
program. Her father explains “she got tired of living at home, it was too
difficult.” On the days when Đồng does not need help, his son Hội travels
45 minutes each way by bicycle to the high school in the district capital.
Hoi receives a scholarship from the government for his school fees. How-
ever, his school uniforms, supplies, lunches and extra classes take up a
good percentage of the family’s income. Travel costs to bring Kim Hướng
to the doctors take up another large percentage.21

Although Đồng and Thủy have more children with disabilities than
most of the families I work with in Vietnam, their story is rather typical
of the families that are believed to be affected by Agent Orange. The
children have severe and/or multiple disabilities that require one caregiver,
usually but not always the mother, to be home at all times. This leaves
one wage-earner to meet the family’s financial needs. Much of the income
is utilized for medical costs and to send their other children to school or
for vocational training. Many of the services they need for their children
are located in the provincial capital or further away.

It is the situation of families like Đồng’s that contributes toward
many international and Vietnamese activists’ anger at what they perceive
as an insufficient humanitarian response by the US government to assist
those believed to be affected by Agent Orange. However, the US govern-
ment consistently states that there is not enough evidence to show whether
or not the birth defects of children such as Đồng’s children are related to
Agent Orange and its dioxin contaminant (Marciel 2008: 19; Marciel 2009:
17; Palmer 2010: 26).

The United States to some extent is not wrong claiming that it is
not possible to determine with scientific certainty who is affected by Agent
Orange and who is not. Dioxin has been found to cause birth defects in
animal studies in many different species including primates; however, there
is disagreement about whether these studies can be extrapolated to humans
(Birnbaum 2004). Therefore, one must rely on epidemiological studies to
verify whether there is an association between dioxin and illnesses or
abnormal birth outcomes. Most of the international epidemiological studies
on dioxin have been conducted on populations that were environmentally
exposed, such as US veterans, or those who were occupationally exposed,
such as chemical factory workers (Institute of Medicine 2009). These
studies do not mirror, however, the dioxin exposure that the Vietnamese
population experienced, potentially over many years of spraying; but in the
years immediately after the war, and for some, through present-day expo-
sure at the dioxin hotspots.
Vietnamese scientists have been conducting epidemiological research on the impact of dioxin upon human health since the late 1960s. Studies of veterans who served in the south compared to those who did not have been found to have increased rates of cancer, and nerve, digestive, skin and respiratory disorders (Quang et al. 2007). Other than liver cancer, these are the same conditions that the US Department of Veterans Affairs (VA) has found to be associated with exposure to Agent Orange and/or dioxin and are on the list of conditions eligible for compensation (US Department of Veterans Affairs 2010). Vietnamese researchers have discovered in studies of both exposed males and females that there is an increased risk of abnormal birth outcomes, including infertility, miscarriages, still births, and birth defects, compared to those who were not exposed. Among the birth defects, spina bifida, hydrocephaly, malformations of the extremities, musculature issues, developmental disabilities, congenital heart defects and cleft-palate are found (Võ Minh Tuấn et al. 2002: 463). There are also higher rates of children with multiple disabilities among exposed populations. Vietnamese researchers have also come across in their research higher rates of birth defects among the grandchildren of exposed population compared to those who were not exposed. However, some western scientists may claim that these studies have not been peer reviewed or published in scientific journals and suffer from serious limitations and design flaws (Schechter and Constable 2006: 1231).

Nonetheless, the US Institute of Medicine, tasked by the US government to review all the studies on dioxin and the herbicides used in Vietnam, has found that there is “limited or suggestive evidence of an association between exposure to the herbicides and spina bifida in the offspring of exposed people” (Institute of Medicine 2009: 7). Children of US Vietnam veterans with spina bifida qualify for VA benefits. In addition, the VA provides compensation to children of female veterans who served in Vietnam if they have one of the 19 birth defects listed. However, the VA is clear to point out these birth defects may be connected to service in Vietnam and not specifically to exposure to the Agent Orange, dioxin or other herbicides used during the war.

While the US Embassy in Vietnam has in the past accused the Vietnamese government of claiming that every child with a disability in Vietnam was a victim of Agent Orange, it is actually a more complex classification. To be classified by the Vietnamese government as an “Agent Orange victim” in Vietnam, one must first have some connection to Agent Orange by one’s own exposure, one’s parent’s or grandparent’s exposure. In addition, there must be no other family history of the condition or some other
known medical cause, such as birth injury or illness after birth. Serving or living south of the DMZ between 1961 and 1980 is sufficient evidence of potential exposure. Nonetheless, being labeled an Agent Orange victim is closer to a social classification than a scientific one. An Agent Orange victim is entitled to social benefits, for example, monthly stipends of about US$17 and occasional donations from Vietnam Association for Victims of Agent Orange/Dioxin (VAVA) or the Red Cross. However, according to VAVA and Red Cross officials who establish the list of beneficiaries, many families refuse to be classified as having an Agent Orange victim among their relatives. Although there has been an overwhelming level of solidarity for the Agent Orange victims in Vietnam, many children with disabilities still face stigma and discrimination in their communities (Lê Bạch Dương et al. 2007: 10). Many families do not want to take on that label of Agent Orange for fear that their DNA may be forever changed, bringing pain and suffering on future generations. They also worry that their healthy children may not find suitable mates if it becomes known that their family has been exposed to Agent Orange. Ministry of Labor, Invalids and Social Affairs (MOLISA) estimates that there are 1.2 million children with disabilities in Vietnam, while the Vietnam Red Cross estimates that 200,000 are affected by Agent Orange, so clearly the vast majority of the children with disabilities in Vietnam are not believed to be related to Agent Orange (UNICEF 2009: 11).

Why Now?

Perhaps one reason why there has been such public support in Vietnam and internationally for “Agent Orange Victims” in the past few years is related to the lawsuit filed in US courts against the chemical companies on behalf of victims from Vietnam. The advocates for Agent Orange victims in Vietnam were successful in getting the Vietnamese government to provide small stipends for some former Northern Vietnamese soldiers, though civilians and veterans of the Army of the Republic of Vietnam (ARVN) who were also affected were left out. The advocates first tried a humanitarian appeal to get the American government to provide assistance to those affected by Agent Orange. After several years of little headway, some of the advocates decided that the only course of action was to file a lawsuit. They explained their decision in a “Letter to the American People.”

We, the Vietnamese people, ceaselessly thirsty for peace and friendship, have exerted great patience in demonstrating our preparedness for
cooperation with the US in solving the cruel war’s consequences, especially those severe evils resulting from horrible chemical warfare. However, this has met no positive response …

In face of this situation, the Vietnamese victims of Agent Orange feel it necessary to file a lawsuit against the US chemical corporations, the suppliers of this toxic substance used in the Vietnam War and who gained enormous profits from the sufferings of millions of people.26

The Vietnamese advocates first had to ensure that the lawsuit met the leadership’s approval in Hanoi, many of whom were not pleased with such a direct confrontation with the United States during a sensitive time in the relationship between the two countries. By obtaining the support of one person that the Hanoi leadership could not ignore, General Võ Nguyên Giáp,27 they received the blessing to go ahead with the lawsuit.28

The “David vs. Goliath battle” of Vietnamese Agent Orange victims against Dow, Monsanto, and the other producers of the dioxin-contaminated herbicides, quickly became international news. The Vietnamese press also began to write stories almost daily about Agent Orange. Many international peace activists, especially those who were active in the anti-war movement during the war in Vietnam, began to rally behind VAVA, raising their voices in solidarity with the Agent Orange victims in a call for “Justice.”29 While the suit was going on, more than 12 million Vietnamese signed a petition in support of the lawsuit (VietNamNetBridge 2008).

Many Vietnamese and many foreigners did not realize that the lawsuit was not against the US government, but the fact that the US government came out in support of the chemical companies did not help this perception (VAVA v. Dow Chemical et al. 2004).30 The case was filed against the companies that supplied the toxic herbicides, alleging that the chemical companies had violated the Geneva Convention’s prohibition on the use of chemicals in war. Much of the harsh rhetoric around Agent Orange and the defensiveness it provoked in the US government coincided with the progress of the lawsuit and the decision facing the US courts whether or not the herbicides were “chemical warfare.” The lawsuit was dismissed by the US courts in 2005 and all subsequent appeals also failed to prove that the use of herbicides was a violation of international laws.

While the lawsuit played a major role in raising awareness about Agent Orange and its impacts on Vietnam and the Vietnamese people, it alone is not enough to explain why there still is a great deal of attention to Agent Orange victims in Vietnam. In fact, one could argue that the failure of the lawsuit has helped to increase support for those affected.
VAVA has morphed from an association representing the plaintiffs in the lawsuit to a mass organization with chapters throughout the country that conduct programs to provide services for families believed to be affected by Agent Orange. VAVA, the Vietnam Red Cross, Tuổi Trẻ ("Youth") Newspaper, and Vietnam Television all have raised millions of US dollars for Agent Orange victims. Perhaps the outpouring of donations is simply, as Trần Văn Thủy stated while introducing his film several years ago, because “we work first perhaps to ease our own conscience, work first for ourselves” and that these Agent Orange victims remind one of “how lucky I am that nothing happened to me, and that my two children are healthy” (Trần Văn Thủy 2004).

Whatever the reason, those affected by Agent Orange are now out of the shadows and showcased; they are often being portrayed by the press as “survivors,” their triumphs and successes highlighted. They are slowly, although not completely, losing the moniker “victim” and are no longer simply seen as helpless individuals waiting for the courts in the United States to acknowledge their suffering and their rights for “justice.”31 In other words, bodies of some Agent Orange-affected individuals have themselves become sites of resistance and resilience.

A Breakthrough in the Stalemate

The dismissal of the lawsuit also ended much of the harsh rhetoric that many advocates and foreign and domestic media were using to define “Agent Orange.” With the legal questions out of the way, what remained was a moral and humanitarian question of whether one could turn one’s back on land that was so heavily contaminated and on a population so clearly in need. By removing the question of who was at “fault,” it became possible for the US to contribute mitigating the impacts of Agent Orange simply for humanitarian reasons. The end of the lawsuit also coincided with a time of closer and stronger US-Vietnam relations on political, economic and security fronts. The US was now beginning to see Vietnam as a country and a powerhouse in Southeast Asia, strategically located next to China, and no longer as the war that had ended poorly and ushered in the “Vietnam syndrome.”

The Hatfield research on dioxin contamination in Vietnam led not only to a greater understanding of the ongoing impacts of dioxin, but also helped lead to a breakthrough in the US-Vietnam dialogue and action on resolving this issue. Before the Hatfield studies, the Vietnamese government was hesitant to push the US government to address this issue in
bi-lateral discussion, in part because of the fear that it would be perceived that the entire country, which was now becoming a major food exporter, was contaminated with dioxin. The Hatfield studies showed that dioxin contamination was limited to a few isolated areas, most of which were not agricultural lands. Tests conducted by Hatfield and other scientists also showed that the dioxin contamination of the fish and other animals was also isolated to those raised on hotspots (Schechter et al. 2003). At least, on the environmental contamination side, Agent Orange became a “manageable problem” (Dwernychuk 2006: 3).

One of the turning points to a more constructive dialogue on the Agent Orange issue was the joint statement made by President George W. Bush and Prime Minister Nguyễn Minh Triết in November 2006, where they agreed “that further joint efforts to address the environmental contamination near former dioxin storage sites would make a valuable contribution to the continued development of their bilateral relationship.”32 While not addressing the issue of disabilities related to Agent Orange, the statement publically acknowledged for the first time that dioxin contamination was a bilateral issue of concern to both nations. This joint statement paved the way for US Senator Patrick Leahy’s office to request in the May 2007 Iraq Spending bill that $3 million be allocated for “remediation of dioxin hot spots in Vietnam and to support public health programs in the surrounding communities.”33 The US Congress has since increased these funds by nearly sevenfold from $3 million in 2009 to $20 million in 2012 (Leahy 2010: S7169).34

**Putting the “One Significant Ghost” to Rest**

Agent Orange is now described by the US Embassy in Hanoi as one of its three war-related humanitarian issues.35 However, the United States continues to define the issue in terms of dioxin contamination at former US military bases, unlike the Vietnamese government, activists and the Vietnamese population in general who also define it in terms of dioxin’s impacts on human health. When Secretary of State Hillary Clinton visited Hanoi in July 2010, she stated, “We’ve been working with Vietnam for about nine years to try to remedy the effects of Agent Orange. […] I will work to increase our cooperation and make even greater progress together.”36 In a second visit to Hanoi in October 2010, Clinton clarified what this cooperation meant by announcing that the US government was committed to funding the clean-up the dioxin hotspot at the Đà Nẵng
airport for a total estimated cost of $34 million (US Department of State 2010; Committee on Foreign Affairs 2010: 40). Not a word was raised about addressing the potential health impacts, though.

However, from my discussions with Vietnamese activists, those affected by Agent Orange, and ordinary Vietnamese people, it became clear that they are also looking for some acknowledgement that the Vietnamese have had their health impacted by Agent Orange, like the US Vietnam Veterans who are eligible for disability payments from the American government. This was evident in Dr. Nguyễn Thị Ngọc Phương’s testimony to the US Congress in July 2010.37

The Vietnamese people, similar to the American Vietnam Veterans, are subject to all the diseases and birth defects recognized by American Veterans Administration, the Institutes of Medicine and the US Government … More than that, in Vietnam, we have identified many additional health problems due to repeated exposure to dioxin at a greater scale and during a very long period of time. … The US Veterans won a legislative victory for compensation for exposure to Agent Orange and received about $1.5 billion per year in benefits related to the use of this agent. … I propose that Congress agree to provide resources for comprehensive medical services, chronic care, rehabilitation, and educational services and facilities for Agent Orange/Dioxin victims.

Dr. Phuong’s testimony was followed by Ms. Trần Thị Hoan, a Vietnamese Agent Orange victim, who stated: “What do the victims need and want? We want those responsible for the terrible consequences of Agent Orange to hear our pain and then to respond as members of the human family. The chemical manufacturers and the US government who sprayed and dumped it in our country should respond to this human tragedy by doing the right thing” (Committee on Foreign Affairs 2010: 48).

The official position of the State Department on the health impact of Agent Orange in Vietnam according to the US Ambassador to ASEAN Scot Marciel is that “the United States does not recognize any legal liability for damages alleged to be related to Agent Orange. We continue to stress that the discussion of the effects of Agent Orange needs to be based on credible scientific research that meets international standards” (Marciel 2008: 10). The contrasting attitudes of one branch of the US government, the VA, providing monthly benefits totaling nearly $2 billion per year for more than 300,000 American veterans due to their exposure to Agent Orange, with another branch of the US government, the State Department, telling the Vietnamese that there is no causality between Agent Orange
and illnesses and disabilities in Vietnam is not lost on the Vietnamese advocates.  

The US official position regarding humanitarian assistance is to “provide assistance to people with disabilities without asking for evidence of cause or origin of the disability” (Committee on Foreign Affairs 2010: 27). It is in essence the only policy that the US government can follow, as pitting one disabled person’s needs against another’s is not ethically or morally acceptable. However, it is hard to determine how much of the $49 million given by the United States for disabilities programs in Vietnam since 1996 has actually reached the population of people with disabilities that the Vietnamese believe are affected by Agent Orange. The target of most of US humanitarian aid for disabilities to date has been those whose conditions are not believed to be associated with dioxin exposure but by landmines/unexploded ordnance, and those with minor or moderate disabilities who are able to attend school or participate in job training programs. They are all worthy recipients of humanitarian aid, but for the most part they are not those who are believed to be affected by Agent Orange and they are not those with severe, multiple and complex disabilities that the Vietnamese people and international activists are calling on the US government to assist.

**Conclusion**

It has been 50 years since the first spray plane dropped their load of herbicides over southern Vietnam. The violent past of the US’ devastating air campaign manifests itself in various materializations today: ecologically degraded landscapes, toxic inhabited lands and, cruelest of all, people’s bodies deformed through contamination with Agent Orange. One of the reasons why Agent Orange has captured the attention of so many in Vietnam and abroad may lie in the “victim,” who is overwhelming perceived as an innocent person, someone who was born long after the war, whose birth was anticipated with such joy as any child is anticipated around the world, and future may be so bright in postwar Vietnam. But instead of thoughts of hope for the future, this child, believed to be affected by Agent Orange, brings back the dark past and is a daily reminder not only to the parents but to the neighbors and the nation of the pain and suffering, of the insecurity and the hopelessness of the decades of war. Almost four decades after the end of the conflict, through a belated and painful recognition, Agent Orange-infected people have become themselves terrible lieux de mémoire for the American-Vietnam War, eliciting and embodying at
Redefining Agent Orange, Mitigating Its Impacts

the same time memories and images of inhuman violence. But perhaps their physical presence also functions as a necessary vehicle that forces Americans and Vietnamese alike to work through the unresolved issues of the Vietnam War that will enable us to finally put the war behind us and truly “normalize relations.”

Nonetheless, much more needs to be done. For decades, the “Agent Orange” issue came between the United States and Vietnam as neither country understood what the issue meant to the other. At first, Agent Orange hindered the ability of the two countries to develop trust but over the past several years, Agent Orange is slowly becoming an “irritant.” However, it is now an irritant that, with continued cooperation, can be eliminated. The US commitment to cleaning up Đà Nẵng will eliminate one of these hotspots but that leaves one more significant hotspot and up to 25 others whose level of contamination has not yet been identified. The more complicated issue is how to address the human health impacts which will take huge resources that need to be allocated by the Vietnamese government to develop the medical, educational and social welfare infrastructure that takes into account the specific needs of people with disabilities in general and those believed to be affected by Agent Orange in particular. This effort will also require international donors, in particular from the US government who cannot escape its history with Vietnam, of which legacies, among others, have resulted in the ongoing problems of Agent Orange and dioxin. However, until the US expands its humanitarian assistance to Vietnam to encompass more of the population that is classified by the Vietnamese as an Agent Orange victim, this “last significant ghost” will not be put to rest. Agent Orange will continue to have an impact on the people on both sides of the Pacific for generations to come.

Notes

1. There are no accurate numbers of the number of Agent Orange victims. However, the Vietnam Red Cross, using data from a Ministry of Labor, Invalids and Social Affairs survey, estimated that there were up to three million Vietnamese suffering from the effects of Agent Orange and at least 150,000 are children with disabilities associated with their parents’ or grandparents’ exposure. Hence, this is the number often quoted by the Red Cross, the Vietnam Association of Victims of Agent Orange, Vietnamese government officials, the media and activists, but there is no reliable source for this estimate at this time. See http://www.agentorangerecord.com/impact_on_vietnam/health/ [accessed 23 June 2012].
2. The definition of an “Agent Orange victim” will be explained later in the chapter. In brief, “Agent Orange victims” refers to those who have an illness or disabilities believed to be associated with exposure to Agent Orange and/or dioxin. It is not a scientifically valid classification.


7. In a 1 Feb. 1973 letter to the then Prime Minister of the Democratic Republic of Vietnam, Phạm Văn Đồng, President Nixon indicated that the US would provide approximately $3.25 billion in grant aid for postwar reconstruction in Vietnam as part of Article 21 of the Agreement on Ending the War and Restoring Peace in Vietnam signed in Paris on 27 Jan. 1973 (US Department of State 1977). Article 21 states: “In pursuance of its traditional policy, the United States will contribute to healing the wounds of war and to postwar reconstruction of the Democratic Republic of Vietnam and throughout Indochina” (US Department of State Bulletin 1973). This promise of “reparations” was frequently raised by the Vietnamese government during the postwar attempts to normalize relations. However, the US position was that because the 1973 Peace Accords failed, the “promise” had no legitimacy (Martini 2007: 28–30). The Vietnamese government dropped their demand for reparations during negotiations for normalization of relations under the Carter and later the Bush and Clinton administrations, and reparations became officially off the table when US and Vietnam normalized their relations in 1995. Nonetheless, this promise of reparations in the Nixon letter is raised today by some of the international advocates calling for justice for victims of Agent Orange.


9. This figure does not include those Vietnamese soldiers from both sides of the war who traveled through the sprayed regions during the war and those who were exposed on US military bases.

10. A footnote in Lê Cao Đài’s memoir notes that it is likely that Dai actually saw a C-123, not a C-130. The C-130 was a transport plane that looked very similar to a C-123. However, the C-123s were the planes used for spraying herbicides (Lê Cao Đài 2004: 150).

11. Agent Orange Litigation (2006: 61–6). The amount of TCDD in the 2,4,5-T used in Vietnam ranged from less than 0.05 ppm to just less than 50 ppm (Zinke 1974: S-11).

12. MACV (Military Assistance Command Vietnam). Translation of pamphlet panel to the left: Panel 5: “Because of the propaganda activities of the Việt Cộng, Mr. Nam also worried about the herbicides that the government was using. Mr. Nam: ‘Hey! Friend, are these sprays harmful to people, our
animals, the soil or our drinking water?’ Man Spraying: ‘How are you Nam? The only effect of the spray is to wilt the trees and make their leaves fall off. It causes absolutely no harm to humans, or to animals, the soil or drinking water. Look at me; you can see how healthy I am. Every day, while performing my duties, I’ll usually breathe in a lot of the spray. Look at me, do I appear sick to you?’”

16. Hatfield Consultants base in West Vancouver Canada is an environmental firm that measures and monitors contamination from persistent organic pollutants in the environment. Since 1994, they have been working in Vietnam to identify the level of residual dioxin and other contaminants at former US military bases as well as helping the Vietnamese to develop mitigation measures to prevent further exposure to the local population.
17. Hatfield (2000), Table 2.3. Typical background level of TCDD in the soil of industrialized nations is less than 10 pg/g. 1 pg/g is equal to 1 ppt.
19. The National Steering Committee 33 under the Ministry of Natural Resources and the Environment is tasked to provide expert advice to the Vietnamese government on the activities related to overcoming the consequences of the herbicides and other chemicals used by the US military during the Vietnam War.
20. Recent films include: Last Ghost of War (Gardner 2008); Agent Orange: Thirty Years Later (Trinh 2009); and Agent Orange: A Personal Requiem (Sakata 2007). Documentary photography include: Philip Jones Griffiths (Griffiths 2003); Goro Nakamura (Nakamura 2001); James Nachtwey (Nachtwe 2006). News articles include: “Unfinished Business: Suffering and Sickness in the Wake of Agent Orange,” Cleveland Plain Dealer Series (Shultz 2010); “Agent Orange: A Lethal Legacy,” Chicago Tribune (Grotto and Jones 2009). Books include: The Invention of Ecocide: Agent Orange, Vietnam, and the Scientists Who Changed the Way We Look at the Environment (Zierler 2011) and Agent Orange: History, Science, and the Politics of Uncertainty (Martini 2012).
22. US Department of Veterans Affairs 2010. Other conditions may also be eligible for compensation if the veteran can prove that there was no family disorder, birth injury, or conditions with well-established causes.
23. AP, 1 July 2010.
24. The Vietnamese government does not have criteria to identify Agent Orange victims; however, according to conversations with VAVA and the Vietnam Red
Cross, these are the criteria used to add an individual to their respective lists of those eligible for assistance due to Agent Orange. Formal criteria for identifying Agent Orange victims is being developed by Committee 33 with input from the Ministries of Labor, Invalids and Social Affairs and Health, VAVA and the Vietnam Veterans Association.

25. According to one of their brochures, the Vietnam Red Cross estimates that at least 200,000 children have disabilities believed to be associated with Agent Orange (Vietnam Red Cross, unknown date). However, they have also given this number as 150,000 so it is unclear how many children are considered Agent Orange victims. These estimates are expected to change as more surveys are done to identify “Agent Orange victims” using official criteria for classification.


27. General Võ Nguyên Giáp is considered the chief architect of the successful defeat of the French army, and therefore, a national hero. While long retired, Giap still has considerable influence within the ruling elite in Vietnam. However, his influence might be more symbolic than real.


29. Two international organizations supporting VAVA in their call for “justice” were the Britain — Vietnam Friendship Society that began an online petition calling for “Justice for Victims of Agent Orange” and the Vietnam Agent Orange Relief & Responsibility Campaign, a project of the US-based Veterans for Peace whose motto is “Justice for all Agent Orange Victims.”

30. VAVA v. Dow Chemical et al. (2004). Due to sovereign immunity, one cannot sue the US government unless it agrees to be sued.


34. Department of State, Foreign Operations and Related programs Appropriations Bill 2011: 55. Note: an additional $3 million was appropriated for health activities for dioxin impacted communities as per personal correspondence between Senator Leahy’s staff and Susan Hammond; Department of State, Foreign Operations and Related Programs Appropriations Bill Committee Report: 47.

35. As described by Ambassador Michael Michalak at a Jan. 2010 visit to the embassy in Hanoi. The other two issues are accounting for the Missing in Action and unexploded ordnance.

36. AFP, 26 July 2010.
37. Dr. Phuong has been researching the impact of dioxin on reproductive health in Vietnam for many decades at the Tu Du Maternity hospital in Ho Chi Minh City.


39. There is no breakdown of where the funding from the US for disabilities has been allocated. Early on, the US funds were mostly for mobility-related needs of landmine and war victims; more recently funds have been used to support disability rights, inclusive education and job training programs (Management Systems International 2005).