

ADDRESSING THE LEGACY OF AGENT ORANGE IN VIETNAM

DECLARATION  
AND  
PLAN OF ACTION

U.S. – VIETNAM DIALOGUE GROUP ON AGENT ORANGE/DIOXIN  
2010 - 2019

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## ADDRESSING THE LEGACY OF AGENT ORANGE IN VIETNAM

# DECLARATION

In the 35 years since the end of the war, the United States and Vietnam have made great progress toward friendly relations. But the war reverberates today in the lives of millions of Americans and Vietnamese. These include people affected then and now, directly and indirectly, by the U.S. spraying of Agent Orange and other herbicides over rural South Vietnam.

As U.S. Vietnam-era veterans know, some of the herbicides were contaminated with dioxin, a highly toxic and persistent organic pollutant linked to cancers, diabetes, birth defects and other disabilities. The U.S. and Vietnamese governments have both taken steps to care for veterans affected by dioxin exposure during the war. But much remains to be done for them and for others whose needs have not been met. Moreover, dioxin is still contaminating the environment in Vietnam and freshly affecting people's health from as many as two dozen "hot spots" where it was stored and handled.

This grim legacy hinders improved U.S. relations with Vietnam. Questions of responsibility, awareness and data reliability have for too long generated bitter controversy and stalled research and remedial action. A majority of Americans who have been polled to date agree that it is time to lay those issues aside.

In 2010, Vietnam marks four important events: the 1,000th anniversary of the founding of Hanoi; the 35th anniversary of the end of the war; the 15th anniversary of U.S.-Vietnam diplomatic relations; and Vietnam's chairing of the Association of Southeast Asian Nations (ASEAN). Media and political coverage of these events will put a regional and global spotlight once again on Vietnam and on the history and legacy of the war. Dioxin "hot spots," damaged landscapes and the human burdens of ill health and disability are the remaining open wounds from that conflict.

We therefore call upon the United States to join with the Vietnamese to fund a comprehensive and humanitarian effort to resolve the legacy of Agent Orange/dioxin in Vietnam. A cooperative effort would also promote exchange of best practices and information about dioxin's health effects so as to benefit the generations of affected U.S. veterans and their families.

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Such an effort is being proposed by the U.S.-Vietnam Dialogue Group on Agent Orange/Dioxin, which was established in 2007 with help from the Ford Foundation. The Dialogue Group is a bi-national

advocacy committee of private citizens, scientists and policy-makers. Its Vietnamese and American members include experts on toxicology, environmental clean-up, reproductive health, and comprehensive services for people with disabilities. Over nearly three years, we have traveled together in Vietnam, reviewed the evidence and sought additional expertise. Our joint assessment and common understanding of the situation has led to a three-phase Plan of Action that would achieve two goals over the next ten years:

- Clean dioxin-contaminated soils and restore damaged ecosystems; and
- Expand services to people with disabilities linked to dioxin, and to people with other forms of disability (hereinafter referred to as people with disabilities), and to their families.

Achieving these goals will require the combined efforts of governments, businesses and nongovernmental organizations. The Dialogue Group endorses the conclusions and recommendations in the Plan of Action and affirms that joining in this effort would be a fitting way for the United States to mark the important historic milestones of 2010 and to confirm and strengthen the growing U.S.-Vietnam partnership.

## U.S.-VIETNAM DIALOGUE GROUP ON AGENT ORANGE/DIOXIN

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President & CEO, The Aspen Institute

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# ADDRESSING THE LEGACY OF AGENT ORANGE IN VIETNAM

## THE SITUATION

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The war ended nearly 35 years ago, but it reverberates today in the lives of millions of Americans and Vietnamese men, women and children. These include the people affected – then and now, directly and indirectly – by the U.S. campaign to spray Agent Orange and other herbicides over about one-quarter of rural South Vietnam.

The campaign's goal was to deprive opposition forces of food crops and the ground cover that supported and sheltered them from U.S. attack. Between 1962 and 1971, at airports and U.S. operation centers throughout South Vietnam, more than 20 million gallons of herbicide were stored, mixed, handled and loaded into airplanes for the spraying campaign. The effort denuded five million acres of forest and destroyed crops in another 500,000 acres, an area the size of Massachusetts. Areas of Cambodia and Laos along the border were also sprayed.

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Agent Orange and some of the other herbicides were contaminated with dioxin, a highly toxic and persistent organic pollutant. Dioxin (2,3,7,8-tetrachloro-p-dibenzo-dioxin, or TCDD) has been linked by the U.S. Institutes of Medicine to cancers, diabetes, and nerve and heart

disease among people directly and indirectly exposed, and to spina bifida among their offspring. The International Agency for Research on Cancer and the National Institute of Environmental Health Sciences classify it as a known human carcinogen. It is toxic over many decades and does not degrade easily.

At least 4.5 million Vietnamese and the 2.8 million U.S. military personnel who served in Vietnam from 1962 to 1975 may have been exposed to Agent Orange or other contaminated herbicides. The Vietnam Red Cross estimates that up to 3 million Vietnamese adults and children —the best available estimates—have suffered adverse health effects, congenital and developmental defects.

Questions of responsibility, awareness, data reliability, causation and liability in this situation have generated emotional and legal controversy ever since the war ended. U.S. veterans have struggled to obtain adequate attention

to their own health concerns and those of their children and grandchildren. The U.S. Veterans Administration now recognizes 12 diseases and one birth defect related to herbicide exposure and has recently added three more diseases to the list of those eligible for compensation.

Progress is also being made in addressing Agent Orange/dioxin impacts in Vietnam. Individuals and organizations in the United States and Vietnam are working in a humanitarian spirit on a joint effort first to assess and then to remedy the continuing impact of dioxin contamination on the environment of Vietnam and to prevent further human exposure.

The U.S.-Vietnam Dialogue Group on Agent Orange/Dioxin was established in 2007 with help from the Ford Foundation as a bi-national committee of prominent private citizens, scientists and policy-makers. It is not an implementing agency, nor does it accept, receive or disseminate funds. Instead, its role has been to call attention to the need for five key actions: to improve the lives of Vietnamese with disabilities, including those who may have been affected by dioxin, through better methods of diagnosis, treatment and social participation; cooperate with the U.S. and Vietnamese governments to contain and clean up dioxin at three priority airport “hot spots”; set up a modern dioxin testing laboratory in Vietnam; foster programs for training of trainers in restoration and

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management of damaged landscapes; and educate the U.S. public on the issue. In the last three years, the Dialogue Group has seen important accomplishments under each of these five priority tasks.

The Dialogue Group’s 10-year Plan of Action to Address the Legacy of Agent

Orange/Dioxin in Vietnam, described in more detail below, is designed to help achieve significant further progress. It would help to eliminate the public health threat of dioxin hot spots, improve the lives of people with disabilities, restore the defoliated land, and remove a barrier to fully normal U.S.-Vietnam relations.

As a morally compelling need in the tradition of other post-wartime recovery programs, this Plan of Action deserves large-scale U.S. engagement and support.

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## THE CONTEXT

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U.S.-Vietnam relations have made major progress since the war ended in 1975. Diplomatic relations between the two countries were re-established in 1995. The United States granted Permanent Normal Trade Relations and Vietnam joined the World Trade Organization in 2007. The two nations now cooperate on a wide range of strategic and military issues, as well as in educational, political, cultural and economic exchanges.

Since 1987, the U.S. government has provided \$47 million for programs supporting Vietnamese with disabilities, chiefly through the Leahy War Victims Fund that helps those injured by explosives left over from wartime. Other grants have supported teacher training, hospital construction, job training for people with disabilities, and other assistance. It is unknown to what extent these programs reach those affected by Agent Orange/dioxin, as they were not focused on these concerns. There is ample evidence that significant gaps in services continue for people with disabilities in provinces that were sprayed or contain dioxin “hot spots.”

To better understand this need, the first formal U.S.-Vietnam scientific conference on Agent Orange/ dioxin was held in 2002. This was followed by field work to document environmental and human health effects, and by workshops on remediation techniques. The Ford Foundation began targeted grant-making in 2000 to stimulate dialogue and joint scientific exchanges.

Eventually, 28 hot spots of dioxin contamination in various degrees were pinpointed in southern Vietnam: areas where the herbicides were stored, leaked or spilled during handling, so that dioxin soaked into the soil or moved with rainwater into the sediment of nearby rivers, lakes and ponds. From there the toxin has moved up the food chain to the fat of fish and ducks and into human tissue.

By far the most affected areas are around the Da Nang airport in central Vietnam and the Bien Hoa and Phu Cat airports in the south. The majority of spraying flights were launched from these airfields. Unused stocks of herbicides were collected at Da Nang, Bien Hoa and Tuy Hoa after 1971. Damaged barrels were disposed of in local landfills, while the remaining herbicide was re-barreled for shipping to the South Pacific. It was destroyed there by incineration in 1977.

Independent analyses as recently as September 2009 confirm that urgent remedial action is needed – and can be highly effective. Dioxin levels in soil, sediment and fish in the Da Nang airport area are 300 to 400 times higher than international limits. Breast milk and blood samples from people who previously lived near the site and raised lotuses or ate fish from Sen Lake there showed the highest dioxin levels ever recorded among Vietnamese, more than 100 times international limits. The damage, in other words, continues today from generation to generation.

## THE CLEANUP EFFORT

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The good news is that this is largely a solvable problem. After years of stalemate, a Joint Advisory Committee of key U.S. and Vietnamese government agencies now meets yearly to discuss cleanup and remedial action on health and environmental impacts of Agent Orange/dioxin. In 2006, President George W. Bush and Vietnamese President Nguyen Minh Triet met in Hanoi and formally agreed that cooperative efforts to address contamination at the storage sites would contribute to the two countries' relationship. The U.S. Environmental Protection Agency has provided technical advice to Vietnam, recently launching a pilot project at the Da Nang airport to test biological methods of decontamination, which could offer a dramatic breakthrough in remediation.

Responding to Vietnamese and non-governmental organization requests, the U.S. Congress appropriated \$3 million for FY 2007, another \$3 million in FY 2009 and a further \$3 million in FY 2010 "for environmental remediation of dioxin-contaminated sites and related health activities in Vietnam, including through Vietnamese institutions and organizations..."

As of September 2009, the U.S. Agency for International Development (USAID) had obligated \$4.1 million. About half that sum is going to three U.S.-based non-governmental organizations to help Vietnamese with disabilities living in the Da Nang area (Save the Children, East Meets West Foundation, and Vietnam Assistance for the Handicapped). They are providing medical screening and corrective surgery, creating a disability tracking database, offering education and training opportunities, and strengthening local providers' capacity to help. USAID has also awarded a \$1.6 million contract to a U.S. company, CDM, for an environmental impact assessment and a design and work plan for dioxin cleanup at Da Nang. The U.S. Embassy in Hanoi has set aside another \$550,000 for administrative costs and to fund bilateral visits related to the Agent Orange/dioxin effort.

Vietnam, meanwhile, has worked steadily since 1980 to deal with Agent Orange/dioxin remnants on its own. In that year, an initial Ministry of Health committee began impact assessment work, and the interagency Steering Committee 33 was formed in 1999 to guide government decision-making on the issue. The Vietnam Red Cross established the Vietnam Victims Fund in 1998 and has raised more than \$22 million to assist the disabled poor. In 2003, the Vietnam Association of Victims of Agent Orange was set up as an advocacy organization; both groups have chapters nationwide that provide direct assistance to local residents.

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The Vietnamese government has spent \$6.25 million so far on dioxin cleanup and provides \$50 million per year in small monthly allowances for people with disabilities believed caused by Agent Orange/dioxin. Its activities in this area are closely monitored and avidly reported by Vietnamese news media, as are all related developments in the United States.

The Ford Foundation has provided \$11.7 million in grants to develop treatments and support for affected Vietnamese, test and contain contaminated soils, restore landscapes and educate the U.S. public and policy-makers on the issue. The foundation has also encouraged involvement and funding by new donors and partners, including the governments of Greece, Ireland and the Czech Republic; The Atlantic Philanthropies, Bill and Melinda Gates Foundation, Wallace Alexander Gerbode Foundation, Chino Cienega Foundation, and Nathan Cummings Foundation; and by UNICEF and the UN Development Programme.

As a result of these initiatives, many U.S., international and Vietnamese non-governmental organizations are now working on these issues: Active Voice, Asian-American Pacific Islanders in Philanthropy (AAPIP), Aspen Institute, Can Tho Association of People with Disabilities, Catholic Relief Services, Center for Social Work, Children of Vietnam, Communications Consortium Media Center, Disabilities Resources Development, East Meets West Foundation, Institute for Social Development Studies, International Center/Vietnam Veterans of American Foundation, Korean Disabled Veterans Association, National Organization on Disability, Renaissance Journalism Center, Save the Children, U.S. Fund for UNICEF, Vietnam Assistance for the Handicapped, the Vietnam Association of Victims of Agent Orange, Vietnam Public Health Association, Vietnam Red Cross, Vietnam Veterans of American and the War Legacies Project, among others. However, all their efforts combined are still meeting a small fraction of the need.

The time to hesitate is past. In 2010, Vietnam will celebrate four important milestones: the 1,000th anniversary of the founding of Hanoi; the 35th anniversary of the war's end; the 15th anniversary of the re-establishment of U.S.-Vietnam relations; and Vietnam's chairing of the Association of Southeast Asian Nations (ASEAN). A fully funded comprehensive effort to address Agent Orange/dioxin, the last vestige of the conflict between the two countries, would be a fitting way to mark these milestones and confirm and strengthen this growing partnership.

# THE U.S.-VIETNAM DIALOGUE GROUP ON AGENT ORANGE/DIOXIN

In early 2007, the Ford Foundation established the U.S.-Vietnam Dialogue Group on Agent Orange/ Dioxin, a bi-national committee of private citizens, scientists and policy-makers working to draw attention to this issue and to mobilize resources. The Dialogue Group was convened by then-Ford Foundation President Susan V. Berresford (now retired from Ford but active as convener). It is co-chaired by Walter Isaacson, president and CEO of the Aspen Institute, and Ambassador Ngo Quang Xuan, vice-chair of the Vietnam National Assembly's Foreign Affairs Committee. [See p. 3 for list of Dialogue Group members.]

The Dialogue Group defined its goal as resolving the Agent Orange/dioxin issue within the larger frame of improved U.S.-Vietnam relations. The Group has adopted a forward-looking approach to solving the Agent Orange legacy through a series of humanitarian responses undertaken cooperatively between Vietnam and the United States. It is mobilizing the overall effort and Plan of Action described below. Members of the Dialogue Group and expert staff working with them have become respected information sources for the U.S. Congress and for major media outlets.

With the Ford Foundation, the Dialogue Group sponsored a series of respected and influential assessments of dioxin residues in and around the

Da Nang airport and in the blood and breast milk of current and former area residents. A 2006 report, for example, led Vietnam to take interim measures to contain and immobilize the dioxin there, fence off the area and block the pathways through which dioxin was continuing to reach local people. Fishing and agricultural work were suspended on Sen Lake at the northern edge of the airport; soils were capped at the former mixing and loading area; and interim facilities were built to filter contaminated sediment from rainwater run-off.

In 2007, the Dialogue Group sponsored a national conference in Vietnam on disability and Agent Orange/dioxin, focusing on four heavily affected provinces. In 2009, the Ministry of Natural Resources and Environment announced creation of the Vietnam Persistent Organic Pollutants Laboratory, a \$6.75 million state-of-the-art facility funded by the Vietnam government and The

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Atlantic Philanthropies and the Bill and Melinda Gates Foundation. This will be a cornerstone of Vietnam's environmental management and a resource for Southeast Asia and will benefit future generations of Vietnamese as well as those currently affected.

Further studies of results from health care pilot programs and site cleanup work have identified ways to deal with the most pressing environmental and human consequences. In 2009, the Dialogue Group endorsed a study by the independent Hatfield Consulting firm (of North Vancouver, Canada) of 410 environmental and human blood and breast milk samples. The results provided a clearer understanding of existing dioxin contamination in Da Nang, where the feasibility of remediation efforts is being demonstrated. They indicated that the interim mitigation measures had succeeded in reducing the dioxin exposure of people near the Da Nang airport.

Members of the Dialogue Group have formulated a ten-year plan that could resolve a significant part of the Agent Orange/dioxin issues that remain between our two countries. Greater effort in Vietnam would also promote the exchange of best practices and information about dioxin's health effects so as to benefit the generations of affected U.S. veterans and their families. The Plan of Action builds on the last decade of humanitarian work by both nations' governments and by non-governmental organizations, the United Nations and other governments. The following pages outline the programs that would be conducted, and their required finance.

# THE PLAN OF ACTION

Fully addressing an issue of this complexity will require significant time, effort and resources. The Dialogue Group recommends the following Plan of Action for further international cooperation on addressing the Agent Orange/dioxin legacy in Vietnam.

The Plan builds from the five tasks the Dialogue Group highlighted at the end of its first meeting in January 2007. It incorporates recommendations of the Hatfield Consulting firm relating to the Da Nang site, the draft National Action Plan prepared by the Office of Committee 33 of Vietnam's Ministry of Natural Resources and Environment, and minutes of the third annual meeting of the U.S.-Vietnam Joint Advisory Committee on September 7-11, 2009.

Greater engagement of the U.S. public in these issues will be essential if U.S. government and private commitments to the Plan of Action are to be sustained over the coming decade. To this end, the U.S. media, policy-makers and civic organizations would be provided with relevant information on the issues, including reports from government agencies, non-governmental organizations and scientific experts. As civic engagement grows, additional activities would be scheduled to involve and engage interested people and to monitor the progress of the Plan.

The Plan would be carried out in three phases over ten years and would cost an estimated \$300 million. It would offer a significant part of the long-term solution to the Agent Orange/dioxin legacy in Vietnam. The U.S. government should play a key role in meeting these costs, along with other public and private donors, supplementing an appropriate continuing investment from the government and the people of Vietnam. The requested funds would be allocated only to the highest-priority tasks listed below. Further funds would allow attention to the additional priorities.

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# 1. CLEAN DIOXIN-CONTAMINATED SOILS AND RESTORE DAMAGED ECOSYSTEMS.

**Ensure protection of people living near dioxin hot spots and restore the productivity of damaged landscapes.**

***Phase One: Three years – 2010-2012 \$29.7 million***

## **Highest priority:**

- Immediately contain, remove and remediate dioxin-contaminated soil and sediment to complete cleanup at the northern end of the Da Nang airport.
- With conservation specialists and NGOs, complete an overview map of the remaining hot spots and surrounding areas and begin assessing dioxin contamination to determine the acreage (including sediment) that needs treatment and the order of mitigation priority.
- Apply Da Nang experience to make sure that dioxin hot spots at Bien Hoa and Phu Cat are safely contained, with mitigation plans in place.
- Conduct joint U.S.-Vietnam research to evaluate damaged lands, creating a reforestation, diversification or repurposing plan to ensure the optimum future use of such lands.
- Develop three models for restoration of biodiversity and sustainable ecosystems in the defoliated upland forests of A Luoi and Ma Da and the mangrove forest of Ngoc Hien.

## **Additional priorities:**

- Support training programs in environmental engineering, forestry and conservation at Vietnamese universities and for the staff of provincial environmental agencies.
- Report research findings and exchange remediation ideas and best practices through workshops and conferences.
- Promote safe food habits among people living near known and suspected hot spots so they avoid foodstuffs possibly contaminated by dioxin.

***Phase Two: Four years – 2013-2016 \$50.0 million (estimated)***

## **Highest priority:**

- Complete cleanup of Phu Cat and Bien Hoa bases and surrounding lakes by December 2015.
- Plant trees, rattan, bamboos or other renewable forest products in 25 percent of denuded lands or areas now covered with poor-quality trees or single-species plantations.
- Assess effectiveness of the cleanup, mitigation and remediation techniques at the three primary hot spots and apply successful experiences to secondary hot spots.

- Develop and conduct containment, remediation and/or mitigation programs at the remaining identified hot spots, achieving 50 percent total cleanup by 2015.
- Complete intensive reforestation in 2,500 hectares of the upland forests of A Luoi and Ma Da and the mangrove forest of Ngoc Hien.

**Additional priorities:**

- Retest residents, fish, ducks and other animals exposed to dioxin at hot spots to ensure that mitigation efforts have reduced dioxin levels as expected.
- Improve management of other contamination sources in the surrounding areas, such as uncontrolled combustion of contaminated materials and industrial emissions.
- Monitor the impact of the reforestation plan on the ecosystem and apply lessons learned to reforest/repurpose the remaining denuded regions.

***Phase Three: Three years – 2017-2019 \$18.0 million (estimated)***

**Highest priority:**

- Using scientific methods, assess effectiveness of techniques used at the first 10 to 12 secondary hot spots to verify that they have reduced dioxin levels in area residents and the food chain.
- Apply best practices to remaining hot spots so as to complete their cleanup/mitigation by January 2020, lowering dioxin levels at all sites below international limits.
- Reforest, diversify or otherwise restore to full use at least 50 percent of defoliated regions so that at least 30 percent of the reforested land is in multi-species forest as close as possible to pre-war conditions of biodiversity and sustainable habitat for wildlife.

**Additional priorities:**

- Assess the broader environmental impacts of reforestation efforts on local populations' livelihood and cultural life, habitats, and annual flooding and erosion.

**2. EXPAND SERVICES TO PEOPLE WITH DISABILITIES LINKED TO DIOXIN AND TO PEOPLE WITH OTHER FORMS OF DISABILITY (HEREINAFTER REFERRED TO AS PEOPLE WITH DISABILITIES), AND TO THEIR FAMILIES.**

**Work with the government health system and non-governmental organizations to improve public health and prevent further dioxin exposure, and to improve service delivery to people with disabilities, including those who may have been affected by dioxin.**

***Phase One: Three years – 2010-2012 \$68.3 million***

**Highest priority:**

- Assist the Vietnamese in developing and conducting a nationwide survey of people with disabilities and creating a birth defects registry pilot program, using results to

create a road map for provincial authorities to improve medical, educational, and social relief programs for people with disabilities at the provincial, district and commune level.

- Establish or strengthen professions that serve people with disabilities such as occupational and rehabilitation therapy and speech pathology, developmental specialists and mental health practitioners at medical universities and technical training institutions in Hanoi, Ho Chi Minh City and Hue, and conduct training programs for staff of hospitals and health stations in the heavily affected regions of Vietnam.
- Assist Vietnam to develop a system for maternal surveillance and screening, monitoring of child development and early-childhood intervention in order to improve services to affected people in or near the three major hot spots (Da Nang, Bien Hoa and Phu Cat).
- Use lessons learned from medical, rehabilitation, educational and vocational interventions in Da Nang to establish pilot projects in Bien Hoa and at least one additional province.
- Strengthen training for Vietnamese public health professionals in disability diagnosis and treatment, and engage them in developing educational programs to ensure that the Vietnamese people receive appropriate information and screenings to reduce their risk of dioxin exposure.
- Support the development of a disability community in Vietnam that can partner with local and national authorities to improve the lives of people with disabilities and to support implementation of the UN Convention on the Rights of People with Disabilities.

**Additional priorities:**

- Develop or strengthen rehabilitation facilities and respite day care centers in provinces with high rates of people with disabilities.
- Assist Vietnam's healthcare system to improve the quality of diagnosis and treatment of cancers and other medical conditions linked to dioxin exposure.
- Pursue joint U.S.-Vietnam research initiatives on exposure pathways and the long-term health consequences of dioxin exposure.
- Establish Provincial Resource Centers to strengthen inclusive education, specialized education and vocational training programs for children and youths with disabilities to ensure a continuum of educational services addressing each individual's needs and abilities.
- Assist Vietnamese public health professionals in developing educational materials and programs to inform and screen individuals for conditions linked to dioxin exposure.
- Assist the Vietnamese government to expand existing health insurance subsidy plans and scholarship programs so as to cover at least 70 percent of poor households with people with disabilities or family members with illnesses associated with exposure to dioxin.

***Phase Two: Four years – 2013-2016 \$125 million (estimated)***

**Highest priority:**

- Establish bio-monitoring of populations living near dioxin hot spots, working with the national dioxin laboratory to test samples of blood and/or breast milk.

- Establish early identification, early intervention and parent support programs at district level health facilities for children with disabilities.
- Evaluate the pilot birth defects registry program and pilot projects to provide services to the disabled populations in Da Nang and Bien Hoa, and expand programs to more provinces.
- Assist Vietnamese authorities in reaching their goal of ensuring that all children with disabilities who are able to participate in inclusive education programs that have the resources they need to succeed.
- Survey people with disabilities and parents of children with disabilities to assess whether intervention programs are meeting their needs.

**Additional priorities:**

- Expand training programs, facility development, community base rehabilitation and early intervention programs to district-level health centers.
- Expand access to and improve quality of medical care for those suffering from cancers, diseases and other medical conditions associated with exposure to dioxin.
- Expand inclusive education programs to the district level in all provinces with high levels of children with disabilities.
- Improve antenatal care and provide testing and counseling as necessary for individuals on genetic effects of dioxin exposure.
- Establish and/or strengthen professions that serve people with disabilities, such as occupational and rehabilitation therapy and speech pathology, developmental specialists and mental health practitioners in departments at district-level health facilities in half of the most affected provinces.

***Phase Three: Three years – 2017-2020 \$9.0 million (estimated)***

**Highest priority:**

- Evaluate the improvements in the medical, educational and social service program and expand programs to the other provinces with high levels of people with disabilities or with large populations with medical conditions associated with exposure to dioxin.
- Evaluate training programs in the fields of rehabilitation, medical social work and teacher training to assess progress and guide modifications as needed.
- Evaluate commune-level community-based rehabilitation programs, parent and peer support programs, share best practices and replicate where possible.

**Additional priorities:**

- Assist the Vietnamese government in assuring that all poor households with people with disabilities or family members suffering from illnesses related to dioxin have access to medical care, social support programs and education services.
- Develop comprehensive evaluation of all medical and social service intervention to guide future interventions.

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**The Chino Cienega Foundation**

**The Nathan Cummings Foundation**

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