

**REPORT OF THE
DEPARTMENT OF VETERANS' AFFAIRS**

AGENT ORANGE TASK FORCE

**TO THE GOVERNOR AND
THE GENERAL ASSEMBLY OF VIRGINIA**



HOUSE DOCUMENT NO. 45

**COMMONWEALTH OF VIRGINIA
RICHMOND
1997**



COMMONWEALTH of VIRGINIA

Department of Veterans' Affairs

DONALD W. DUNCAN
DIRECTOR

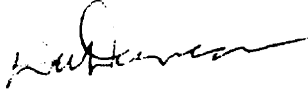
270 FRANKLIN ROAD, S.W., ROOM 1012
POFF FEDERAL BUILDING
ROANOKE, VIRGINIA 24011-2215

(540) 857-7104
FAX (540) 857-7573

December 10, 1996

MEMORANDUM

TO: The Honorable George F. Allen, Governor
and Members of the Virginia General Assembly

FROM: Donald W. Duncan 

SUBJECT: Agent Orange Task Force Report

Pursuant to House Joint Resolution 64, enclosed is a report of the findings and recommendations of the Agent Orange Task Force.

This Task Force has only been in existence since October of 1996. They have had two meetings, one in Roanoke and one in Richmond.

This report also estimates the amount of money necessary to implement their recommendations. This additional money would have to be appropriated by the General Assembly, as this Agency does not have funds for these activities.

DWD:bt

Enclosure

OUTLINE

- I Intro letter from the Task Force
- II Mission of the Task Force
 - Suggested costs estimate of DVA to do project
 - Specific Tasks
- III Statistics
 - Vietnam era Vets
 - Southeast Asia Vets
 - Vets in Vietnam and surrounding waters
- IV Current status
 - Status of research and probability of service connection
 - Current number on Agent Orange Registry with the VA
 - Current approved VA claims
 - Current approved VA claims
- V Task Force work completed
- VI Proposal to accomplish mission
- VII Budget Recommendations
- VII Conclusions

COMMONWEALTH OF VIRGINIA
AGENT ORANGE TASK FORCE
INITIAL REPORT

Mr. Connie O'Neill
Chairman
Virginia Board on Veterans Affairs

Dear Mr. O'Neill:

Enclosed is the initial Agent Orange Task Force report concerning our mission. You will find the report broken down into seven parts starting with our mission and ending with our recommendations and conclusions.

We look forward to working with you to accomplish the mission assigned to us in the House Joint Resolution No. 64 passed in the 1996 session of the General Assembly. We count on your support to do this job properly and in fact better than any other state or territory in the Union.

Sincerely,

A handwritten signature in black ink, appearing to read 'Lou James', with a long horizontal flourish extending to the right.

Lou James
Chairman
Virginia Agent Orange Task Force

II MISSION OF THE AGENT ORANGE TASK FORCE

- Disseminate literature and information on Agent Orange
- Establish a mechanism for informing Vietnam Veterans about availability of free screening for exposure to Agent Orange
- Develop cooperative relationships with other organizations for the purpose of disseminating literature and information on Agent Orange to Vietnam veterans and their families
- Monitor Congressional actions related to Vietnam veterans exposure to Agent Orange
- Monitor developments in class action suits
- Join and attend the National Conference of State Agent Orange programs

Cost estimate of DVA to carry out these mandates was \$94,045
No additional budget money was appropriated

III STATISTICS

* VIRGINIA VIETNAM ERA VETERANS 1993 ESTIMATES

Females	9,600
Males	<u>252,100</u>
TOTAL	271,700

% of all Veterans in State 32%

* US VIETNAM ERA VETERANS

In Service During Era	9.2 million (8.3 million alive)
In Southeast Asia	3.1 million
In Vietnam and Adjacent Waters	2.6 million

IV SUMMARY ABOUT AGENT ORANGE/DIOXIN

Agent Orange was, and still is, a chemical used to kill unwanted foliage. In Vietnam it was used to defoliate jungle growth to take away the enemy's natural hiding place. There are numerous studies linking dioxin, agent orange and others, as a carcinogen and a cause of many illnesses, particularly cancer.

The studies of Vietnam veterans have been flawed or incomplete but it is reasonable to assume a statistical connection between that of exposed civilians and exposed Vietnam veterans. For that reason there are major diseases that are presumed to be linked to Agent Orange exposure in Vietnam. The following have shown sufficient evidence of an association:

- Soft tissue sarcoma
- Non-Hodgkin's lymphoma
- Hodgkin's Disease
- Chloracne

The following have show limited suggestive evidence of an association:

- Respiratory cancers
- Prostate cancer
- Multiple myeloma
- Acute and subacute peripheral neuropathy (new disease category)
- Porphyria cutanea tarda (category change in 1996)
- Spina bifida (new disease category-relates to children)

I could go on and on about other diseases where sufficient evidence has not been clearly established to determine an association with Agent Orange. The conclusion, however, is that Agent Orange exposure for Vietnam veterans and their families is not a myth or minimal thing.

(Most of the above summarized information came from the latest reporting from the Institute of Medicine.)

There is no data available to show how many Virginia Vietnam veterans were exposed and how many are on the Agent Orange register. The following numbers can be assumed to be proportionate to Virginia.

Number in Agent Orange Registry nationwide	250,054
Number of VA claims	75,084
Number of VA approved claims	3,678

The task force believes there is enough evidence to support informing all Virginia Vietnam Veterans of the potential results of Agent Orange exposure. The previous statistics appear to discount the effects the Vietnam veterans are experiencing and that the "DVA" is taking care of the problem. The probable truth is the majority of Vietnam veterans were "Citizen Soldiers," drafted, served their country, returned home and were discharged from the military to continue their lives. Because of the emotional and political upheaval during the later stages of the conflict, this group of veterans tried to put the war behind them and pick up their lives as citizens.

Most did not stay informed or even admitted to their involvement in the armed forces because of the social and economic stigma attached to veterans. During the late 80's and 70's these same veterans adopted the mantra of their civilian counterparts to wit: Limited or no knowledge of the emerging war related health problems and issues to themselves and their children. Most believed that affected veterans were being provided help and finally, that the class action suit brought against the chemical companies resolved any outstanding health care and financial issues.

The list of dioxin related health risks continues to grow as the body of knowledge increases through research, documentation, and formal publication by the National Academy of Sciences. The VA is ready, willing and able to help when a veteran in need asks for assistance. The problem is the outdated methods of information delivery and no organized program of continuing education. Statistics show that the majority of Vietnam veterans continue to be dioxin ignorant and to a greater extent, subsequent generations of the veteran families.

Currently, there is no generational specific programs. However, they need to be educated about the "at risk" position the dioxin issue has placed upon them and be vigilant in detection of known health problems.

It is a statistical fact that the citizen soldier veteran of Vietnam is a “giver of self,” not a “taker of others,” which is why the task force and its information based programs are as necessary today, as it was 30 years ago and will be 30 years from now.

V WHAT HAS BEEN ACCOMPLISHED SO FAR

- 1) Two meetings have been held by the task force.
- 2) Four subcommittees were formed.
 - What other jurisdictions have been doing and how.
 - How to get information to vets.
 - What is current or projected in the future for legal action, i.e., class action suits.
 - Budget projections to accomplish the mission.
- 3) Report and recommendations to the Board on Veterans has been completed.

VI PROPOSALS TO ACCOMPLISH MISSION

Disseminate Information and Knowledge

Media

- Newspaper - paid ads - attempt PSAs first
- Radio - paid ads - attempt PSAs first
- TV -paid ads - attempt PSAs first
- Procure ad - audio + audio visual tapes for
TV, radio and meetings
 - Currently some may be
available from the VVA

Government

- Informational letters, pamphlets, brochures to VA hospitals and all military installations in Virginia to give to all Vietnam era veterans (Retiree Days on installations are effective places to give information)

Other

- Speaker Teams
 - Conduct town hall meetings in all areas of Virginia
- Establish web site with links to all ad sites on worldwide internet
- Send brochures to all VSOs for distribution to local posts and chapters
- Mass mailing of letter/brochures to Virginia doctors particularly general practitioners and dermatologists

VII APPROPRIATIONS RECOMMENDATION
(12 Member Task Force)

* Administrative Support One AP-14 (GR 9)	\$24,685+
Total Payroll	\$24,685
* Meetings 1 per quarter (12 members)	
- Per diem \$50 4 meetings 12 members	\$ 2,400
- Mileage 360 miles @ \$.24 per mile 12 members - 4 meetings	4,147
- Lodging \$60 per night (1 night) 8 members 4 meetings	1,920
- Meals per diem \$34 for 8 members 4 meetings	1,088
Total costs for travel	\$ 9,555
* Administrative cost for meetings	\$ 4,000
* Media, mailings, brochures, web site and maintenance, travel for speaking and town hall meetings	47,000
Total suggested budget	\$85,240

This should be additional money appropriated for the task exclusively.
Coordination and support still to come from DVA.

VIII CONCLUSION

In order to accomplish the intent of the joint resolution some funds need to be expended. The task force agreed that while 250,054 veterans have been registered, the preponderance of them did it long ago and have not followed up.

My personal story is indicative of our experience. I was tested at VA in the Dallas VA Medical Center about 1979. I was told they could not find any way to test my blood to see if I was exposed. I then saw a doctor who told me Vietnam veterans were a bunch of losers and cry babies and that the “agent orange thing” was a bunch of bull. I’ve never returned.

There is significant mistrust by Vietnam veterans and small wonder why. Our approach is to develop a communication process to break down the barriers. We want to insure as much as possible all Virginia Vietnam veterans are aware of the potential effects of their exposure to Agent Orange.

As I said in the introductions, we want to set this tone and be the prototype for the country on accomplishing what has been requested in the Joint Resolution. We feel the success of this endeavor will open the door for the DVA to lead to other good projects such as eliminating homelessness among the veterans within the Commonwealth of Virginia.

