



Faces of AGENT ORANGE

Ohio



Gary Jones's Story

By Jim Belshaw

Gary Jones's story is brought to you by the California Veterans Benefit Fund.

For Gary Jones, the puzzle that is Agent Orange can be explained, or more to the point, not explained, by two words — “circumstantial” and “coincidence.” The words are at once the core and the conundrum of his Agent Orange experience.

“The problem with all this Agent Orange discussion is that everything is circumstantial,” Jones said. “We can't prove anything. But after awhile, the word ‘coincidence’ just doesn't work anymore. Something is causing all these different problems.”

He pulled two tours of duty in Vietnam, one blue, the other brown. The first for the young Naval officer came in the deep water off the Vietnam coastline; the second came inland, in the brown water of the Cam Lo River, near the DMZ, where he worked delivering supplies with Marines and an ARVN unit.

“My job was kind of like being on the old Red Ball Express, but on water,” he said.

Before Jones returned to Vietnam with Vietnam Veterans of America in recent years, the dominate memory of the country for him always came with a reddish hue, not the deep, rich green that stretches across Vietnam as far as the eye can see.

“Everything was reddish,” he said. “Red mud, red water. Everything in my mind was red because we'd killed off the vegetation.”

The area in which he operated was heavily saturated with Agent Orange, the chemical defoliant being delivered by air, from the backs of trucks, and by hand. At the time, he said, no one knew much about the defoliant.

“We didn't have a clue,” he said. “You could smell the stuff. I thought it was mosquito spray or something. No one told us anything.”

Because he was stationed near a large base, certain amenities were enjoyed. The locals washed the Americans' clothes — in barrels that once held Agent Orange. The Americans, if they could get their hands on one of these barrels, often cut it lengthwise and used it as a barbecue.

For many years, Jones congratulated himself for escaping the lingering effects of the chemical that had brought so much misery to the lives of others. Then several years ago, he noticed a rash near his ankles. It would come and go, and come and go, never rising above the level of irritant.

“Then I had a pretty substantial breakout up and down my legs, and they did a biopsy on it and came back as ‘psoriasis-like,’” he said. “It's basically an immune-deficiency disease. In the most critical cases, it can become nephrotic. A year or two ago, I started getting pretty sick, and it turned out I was dealing with a nephrotic syndrome that attacked my kidneys. So now I have



Gary Jones in Vietnam



Jones and family



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Gary Jones's Story Continued...

two problems, and both are immune-deficiency related.”

At his own local VVA chapter, he spoke with a former Army warrant officer. The Army friend struggled with exactly the same health problem.

“Then he says, ‘I’ve got five other guys with the same thing,’” Jones said. “Now the word ‘coincidence’ has gone completely out of the conversation, and I’m thinking, ‘OK, you’re being hounded by immune-deficiency problems, and the group includes only those guys who were in-country in Vietnam. What does that mean?’”

He can prove nothing, continually finding himself circling back to “circumstantial.”

Then his oldest son developed the same rash, but on his chest, not on his legs. His youngest son battled a serious attention deficit disorder that still plagues him. Neither Jones nor his wife knows of anyone in their immediate or extended families with either of the medical diagnoses given their sons.

“I don’t expect to go to the VA and have a conversation about any of this,” Jones said. “I’m already being compensated for PTSD and a hearing loss. At one point I had decided to go in and talk about it, but I decided I needed to get a lot more evidence and a lot more of the story before I submit anything. But I plan to put it on my record.”

He said he has no complaints about the VA and, in fact, calls himself “a kind of advocate for the VA.” He’s heard all the horror stories about VA health care and says he believes them, but he also believes that, in the larger picture, the VA provides good

health care for veterans. Still, he sees room for improvement and changes.

He said statistics show that 80 percent of veterans don’t use the VA system at all. He would like to see the VA work closer with civilian doctors so the general practitioners will be more likely to make inquiries of veterans.

“In all the intake interviews I’ve done with new civilian doctors, I have never been asked: Are you a veteran? Where did you serve? What were you exposed to?” he said.

Jones wants the VA, and the government in general, to recognize that men and women in the armed forces are routinely exposed to toxic situations rarely faced by civilians.

“There should be a general health program where these people are monitored throughout their lives so that problems that are not only proven to be connected to their service, but are probably connected, are watched,” he said. “We need to stay on top of these health situations so when something connected to military service arises, they can respond to it quickly.”

Jones doesn’t think the VA can do this by itself. He sees a need for civilian health professionals to be part of the system.

“If what I’m suggesting is too much for the VA to do, and I’m inclined to think that it is, then the civilian medical community should be supported to take care of veterans who are not in the VA system,” he said.

“These Agent Orange guys are dying 30 and 40 years after the fact with no treatment. That should never happen. We owe our veterans the support they need.”

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