

CAMBODIA'S BORDER CONFLICT

Whilst the dispute over Cambodia's northern border with Thailand appears to have calmed at present, Prak Sokhonn, the Cambodia Foreign Minister, recently claimed that Thailand's military continues to occupy civilian areas in Cambodia, having barricaded some with barbed wire and shipping containers, posing a risk to a truce between the neighbours who clashed twice last year.

Up to 4,000 Cambodian families are unable to return to their homes along the disputed frontier because of the Thai incursions, despite a December agreement that halted weeks of fierce border clashes.

"The Thai military is still occupying territories well inside Cambodia," Prak Sokhonn said in a rare interview from Phnom Penh, listing at least four border locations as incursion sites. "The situation remains calm, but there are some risks as well. So we hope that Thailand will remain committed to the full implementation of the ceasefire."

In response, Thai military and government officials referred to a statement by Thailand's foreign ministry that dismissed Cambodia's accusations as baseless.

"The maintenance of current troop positions following the ceasefire constitutes direct compliance with agreed de-escalation measures," the Thai ministry said. "This cannot be misconstrued as territorial occupation."

With fighter jet sorties, exchanges of rocket fire and artillery barrages, the two neighbours battled for 20 days in December, following a July round of clashes that ended after phone calls to both sides by President Donald Trump.

The December fighting killed 101 people and displaced more than half a million on both sides, in the latest flare-up of a century-old dispute between the countries that has occasionally exploded into conflict.

In recent weeks, Cambodia has asked Thailand for a meeting of the Joint Boundary Commission, in an effort to demarcate the border, but Bangkok has not confirmed its participation.

"The occupied village issue will be a priority for us, because we need to solve those problems in order to allow our people to go back home," the Cambodian Foreign Minister said.

Thailand's foreign ministry said it was finalising procedures for the talks, which would happen after a new government takes office following a February 8th election.

Besides an understanding not to beef up troops on both sides of the border, the December 27th truce also agreed on the return of displaced civilians.



"The two waves of fighting have caused a lot of damage, to both civilian life and infrastructure," Prak Sokhonn added, "it destroyed bridges, schools, pagodas, roads, and buildings".

Although Donald Trump was instrumental in halting the July clashes, and then oversaw the signing of a wider ceasefire deal in October, his latest calls have, so far, proved unsuccessful in ending the dispute.

MSAVLC's Trustees are particularly concerned about the conflict because of the effect that it could have on two of the projects which we support close to the disputed border.

The Trustees remain in contact with Cheng Rostitus, who is in charge of New Hope Children's Home. Three years ago the Home moved to the city of Poipet, which straddles the Thai-Cambodian border. We understand that Rostitus and the remaining children in his care have now returned to their original site in Yea Ort Village, some 30 kilometres from Poipet, where they are relatively safe from the conflict.

Thankfully DDSP's Director, Pheng Samnang, recently reported to us that his work in Pursat was unaffected by the conflict. Despite the fact that the western edge of Pursat Province does border Thailand, there have been no hostilities there.

MSAVLC's Trustees' planned visit in March to these projects will only go ahead if it is safe to do so.

AGENT ORANGE

Agent Orange is the name given to one of the deadly chemicals which were sprayed by the American forces over Vietnam during the Vietnam War, to defoliate the countryside. It was known as Agent Orange, due to the colour of its storage containers. More than 50 million litres of poisonous chemicals were used during the war and they contained nearly 170 kg of dioxin. Dioxin is one of the most toxic substances ever produced by mankind, and it causes many kinds of severe diseases including cancers, neurological disorders, spinal bifida, a decrease in immunity, disorders in the endocrine and reproductive systems and birth defects. Many of these disorders are incredibly severe and disabling. Often they are fatal.

Following the spraying of these chemicals in Vietnam, dioxin entered the food chain via the land and rivers, and subsequently to plants, animals and people. It is now indisputable that the chemical enters the body and is passed on from one generation to the next. Unfortunately nobody knows exactly how many generations will be affected in the future.

Vietnam's ecological systems bore the immediate brunt of the defoliants. Five million acres of forests and 500,000 acres of cropland were damaged or destroyed. Nearly half of the nation's protective mangrove trees, crucial for defending against coastal storms, were lost. Much of this land remains degraded and unproductive even today. Meanwhile, the herbicide leached nutrients from the soil, leaving portions of the Vietnamese landscape barren and highly vulnerable to climate-related impacts.

The chemical's toll on human health is even more harrowing. The Vietnamese government estimates that as many as four million citizens were exposed to Agent Orange, with around three million people suffering from its health effects.

The Vietnam Red Cross attributes at least 150,000 cases of severe birth defects to Agent Orange exposure. According to studies, children born in contaminated regions have shown higher instances of cleft palates, additional fingers or toes, developmental disorders and cancers.

The chemical is not only dangerous to those directly exposed. Dioxin has a half-life of 11 to 15 years in the human body, and in buried or submerged environments, such as river sediments, it can persist for over 100 years. It has been found in the blood and breast milk of exposed populations even decades after the war. The impact can span multiple generations, affecting children, grandchildren and potentially great-grandchildren of those originally exposed.

In Vietnam, the three million people affected are some of the poorest people in the country. Seventy percent of the families are classified as living below the poverty line and a fifth of the families have three or more victims. Many are very seriously disabled; ninety percent are jobless.

The burden of care for these victims falls on their parents or relatives, many of whom are now in their old age. The problem is great and will be made more so when the parents and carers of these victims eventually die.



An officer from the Vietnam Association for Victims of Agent Orange (VAVA) presenting a wheelchair donated by MSAVLC (note our logo) to a victim in Nam Dinh Province, north-east Vietnam.

VAVA, the Vietnam Association of Victims of Agent Orange/Dioxin is a non-profit organization, established in 2004. It is composed of victims of agent orange/dioxin and thousands of volunteers to support and assist those victims, many of whom are veterans or retired service personnel.

VAVA gives help to victims in their homes and in rehabilitation centres, and priority is given to the poorest families. Sadly many thousands have already lost their life, and many thousands of children died at birth or who had been born with very severe deformities.

Since 2014, VAVA has raised 928 billion Vietnamese Dong (about £26 million) to support victims, of which 58 billion Dong (about £1.6 million) comes from foreign individuals and organizations, such as MSAVLC.

With that support, VAVA has built and maintains four nurture and rehabilitation centres for victims, and a central headquarters in Hanoi. It has built 1,550 houses for victims and granted scholarships for victim's children. It helps victims find jobs, provides healthcare and natural disaster relief, and funds holidays for victims and their carers. VAVA has also built 26 centres for support and rehabilitation and vocational training for victims with disabilities throughout Vietnam.

MSAVLC has been helping VAVA for the past twenty years, with monetary help and providing equipment, particularly wheelchairs for people with disabilities who are unable to walk.

MSAVLC has worked closely with VAVA headquarters in Hanoi, providing over 2,300 standard or assisted wheelchairs to Agent Orange victims in every one of Vietnam's Provinces. The latest consignment of 531 wheelchairs was sanctioned by the charity's Trustees in November 2024. Following the correct procurement and purchasing procedure, VAVA officers arranged the distribution to old soldiers and civilians whose health had been directly affected by the chemicals and to second and third generation victims who had been born with deformities.

VAVA officials recently sent many photographs of the recipients of the wheelchairs, and the accompanying pictures show just some of the grateful victims.

Note: 'Tang' means 'a gift'.



Above: A quadriplegic victim receives his wheelchair in Quang Ninh Province, northern Vietnam.

Above right: A young victim in Nghe An Province in central Vietnam.

Right: A group of victims of Agent Orange in northern Vietnam's Thai Binh Province



Below: Two of the poorer recipients of wheelchairs in Ninh Thuan, a coastal province in southern Vietnam.



CHILDREN'S HEARING PROJECT

The Trustees recently received the Children's Hearing Services Project first year report from Glyn Vaughan, Director of All Ears Cambodia (AEC). The project facilitates hearing screening and audiology clinics to counter ear disease and hearing loss in Khmer schoolchildren and newborn babies. It is funded by MSAVLC.

The work, in part, combines screening of school children for chronic otitis media (the leading cause of hearing loss globally) with a neonatal hearing screening service to detect congenital hearing loss.

Working in partnership with local schools and NGOs, as well as the neonatology department of a non-profit hospital in Kampot, All Ears Cambodia has created two distinct screening programmes:

- one targets infective disease in school-age children with onward referral to AEC for treatment.
- the second is a stepped screening process for newborns involving two tests: oto-acoustic emissions and automated auditory brainstem responses.

Those babies failing the screen are provided full diagnostic assessments at All Ears Cambodia's Phnom Penh clinic to determine their hearing levels. And with that information, AEC can fit hearing aids on babies in need.

The long-term aim of this primary health care work is the reduction of preventable disease and hearing loss. Potential beneficiary figures should be viewed in the context of not only countering disease and hearing conservation, but also the reduction in complication rates and so, the reduction in morbidity and even mortality.

At All Ears' Phnom Penh clinic they also see children directly, whether as walk-in cases or under the wing of one of their many partner NGO's. Much of this caseload requires primary ear health care to treat infectious disease or other anomalies of the outer or middle ear.

These paediatric services also benefit from voluntary placements of health professionals from overseas through AEC's Continuing Professional Development Program. Professionals offer their time and expertise free of charge in the training of the AEC team.



Hearing and ear health are fundamental to children's education, but in Cambodia they are largely neglected. In fact in some villages, chronic ear disease in Khmer children is so common, it is considered normal. Of children in need of hearing aids, less than one percent has them, and the cost of a modern digital hearing aid is more than a Cambodian peasant would pay for his house.

Your donations to MSAVLC allow All Ears Cambodia to reach out and help these babies and children. Thank you.

TRUSTEES' VISIT

It is nearly three years since the Trustees' last Monitoring and Evaluation visit to Vietnam and Cambodia, and so a visit is now being planned for March this year.

The Trustees hope to visit all of our current projects. The main aims of the visit are:

- To discuss with directors the projects which we have funded recently and proposals for future project funding.
- To view and check any equipment which has been purchased recently using MSAVLC funds.
- To meet patients and clients who have benefited from the aid sent by the charity.
- To check records of transactions, receipts and maintenance protocols.
- To obtain verbal or written reports and photographs so that we are able to report back to the Trustees, our supporters and donors.

Reports and photographs from the visit will be published as usual, on our website, www.msavlc.org, and on our Facebook page, www.facebook.com/MSAVLC. This time however, we also hope to share some of our experiences on Instagram:- [msavlc2025](https://www.instagram.com/msavlc2025/).

DATA PROTECTION

MSAVLC is committed to making sure that our communications with you are secure, considered and welcomed. We promise to respect any personal data that you share with us, we will keep it safe, and we will not share it with third parties.

If you no longer want to receive the Bulletin and want to be removed from our mailing list, please contact:

John Firth,
Honorary Treasurer MSAVLC,
1 Hillside, Tregunnel Park,
NEWQUAY
Cornwall TR7 2AJ.

Or email:
msavlc.treasurer@gmail.com

Published by:
Medical & Scientific Aid for Vietnam, Laos & Cambodia
Anchor Cottage,
3 Horsefair St,
Charlton Kings,
CHELTENHAM
GL53 8JF

VIETNAM, LAOS & CAMBODIA
MEDICAL & SCIENTIFIC AID NEWS BULLETIN
Editor: Peter Lidgard

Printed by: ajgreenprinting.com