

## Thailand offers tourists 'the Aids attraction'

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A hospice in Thailand offers morbid sightseers access to its Aids patients - dead and alive - for a fee&hellip;

You'd expect to find the dead bodies at the back of the hospital, not in the reception. With some enthusiasm, my guide for the morning pointed out the mummified corpses of a few recent outpatients.

Brown and shrivelled, the eight adults and three children grimaced, their earthly forms still twisted and corrupted by the disease that had ravaged their bodies in life.

A three-hour train ride from the Thai capital Bangkok, Lopburi is famed for its monkey-populated ancient ruins.

The railway station makes a point of this and is adorned with resplendently kitsch eight-foot-high simian statues.

But Lopburi's other, more unlikely, tourist attraction is its Aids hospice: the largest of its kind in Thailand.

And, as the statues at the railway station remind the visitor of what they have come to see, so the display in the hospice lobby is designed to force home what this place is all about.

Each naked corpse is laid out either on a concrete slab or pickled in a tank of greenish formaldehyde.

Plinths hold index cards detailing the names and ages of each victim, and more pointedly how they had contracted HIV.

Promiscuous unprotected sex, shooting-up with dirty needles and dodgy tattoo parlours are the most common culprits.

My "tour guide" during this unlikely curiosity was a local restaurateur called Piak Fosaktrakool.

He assured me all of the bodies had been donated by their owners in the interests of medical science - namely shocking those who would gaze upon them after their deaths.

One particularly pathetic mummy earned a double take.

It was a former ladyboy, his (her?) extensive surgical alterations all too apparent as he/she lay motionless for all to see.

Such is the fate of a handful of Thailand's estimated one million carriers of HIV and Aids.

Though government hospital treatment and medical care is available to some, humiliated by the disease's stigma many families turn their sick relatives away to places like this.

Lopburi's private hospice is run by the monks of Wat Phra Bat Nam Phu temple and monastery.

There are no hospital fees; the institution relies entirely on public donations. Hence the bodies at the entrance.

In a nearby anteroom, the shock tactics continue.

Hundreds of Hessian sacks are heaped in a pile labelled "The Bone Hill". It is the final resting place of ground-down Aids victims neither destined for reception-hall stardom nor claimed by their grieving or indifferent families.

Outside, a row of Henry Moore-esque statuettes stand baking in the morning sun.

Piak assured me that these too were made using patients' ashes, though this time I chose not to believe him.

A self-confessed former "playboy", he had become involved with the hospice after the death of a friend from HIV-related illness.

He regularly approached Western diners at his restaurant and asked them to come and visit the hospital, perhaps to make a donation.

Some had even stayed on to work as volunteers.

But what proportion of the earnest public's money goes towards the patients' care and treatment?

Not all of it, Lotte, a Dutch volunteer worker told me.

For example, a new temple is under construction and it needs an expensive centrepiece Buddha statue, she explained.

I was introduced to her as she changed the bedding of a weak and incontinent patient and asked if she would mind talking to me during her break.

She agreed.

From the start, I realised she would never be described by a court of law as a "credible witness".

A qualified nurse back in the Netherlands, she had come to Thailand after her daughter's suicide. The tragedy had spurred her into voluntary work, but had also led to a "spiritual awakening" whereby she subscribed to the theories of "Shamanic healing".

For the uninitiated, this involves reaching an altered state of consciousness in order to communicate with sick patients' souls.

Though such techniques could arguably be of psychological benefit to some terminally ill patients, whatever Lotte told me still had to be taken with a pinch of salt.

Her details of the place were disturbing nonetheless.

Not only were some of the charitable contributions towards the running of the hospice being siphoned off for other projects, the standard of care within it left much to be desired.

Some of the its medical staff, deeply suspicious of or frightened by Aids, would often neglect patients who were too weak to eat or go to the toilet by themselves, leaving them to go hungry if they couldn't pick up their plates and dirty if they couldn't get up to relieve themselves.

"It is down to the volunteers," said Lotte, "to deal with these needs, but there simply aren't enough of us to go around."

At the time of my visit there were just two or three nurses for about 100 patients.

And, unlike in a government or private hospital, no expensive combination treatments were available there. Patients were simply put there to die, whether with dignity or not might depended on the individual's mental state up to the last day they were breathing.

Despite the odds, Lotte did, however, offer some stories of hope.

Her eyes gleamed with a spiritualist's light when she talked of the tiny differences she personally had been able to make. "In a normal day," said Lotte, "you do whatever needs to be done&hellip; But if you do small, personal things, patients can be very grateful. Sometimes I'm touched to the point of tears."

For example, the daily washing of a patient with severe scabies was rehabilitation enough to let her to walk again before she died.

Another patient in intense pain had benefited enormously from a simple massage.

It is easy to judge such places from a Western perspective.

Phra Bat Nam Phu's tourist attraction status and some of its activities may well be regarded as distasteful, but one should not forget that without it many patients would literally be left on the street.

At least here they have beds, some care and attention and a roof over their heads.

Their surroundings are clean and modern, some of the less sickly patients are able to stay in private chalet-style accommodation and muse around the gardens as they please. Moreover, the act of giving alms to temples is a process deeply engrained in Thai culture.

Yet I left the hospice with a sense of unease.

The place had the feel of a processing plant where people were disposed of: a latter-day Auschwitz in the heat of the tropics.

Though the intent of the morbid lobby display is to shock visitors into awareness of the Aids problem (and in so doing, garner more donations) I couldn't help feeling that whoever set it up had somehow lost their way.

The authorities themselves were not available for comment at any time.

Even the Dutch volunteer was fearful she would be dismissed if they found out she had spoken so candidly. Other volunteers there, including a Belgian doctor, avoided me altogether.

One final unpleasantry was in store on my return to Bangkok.

Piak had asked the previous evening if I would make a donation (deposit in advance) but he didn't want to take the money at the hospice itself.

Challenged on this, he openly admitted that aside from the driver's fee, he was keeping some of it for himself.

So functions Thailand's Aids attraction, laudable on the outside but underneath perhaps just another way to make an easy buck.

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