

HIV/AIDS: An Introduction

1. Vocabulary Building

infection	感染	spread	広がる
Ministry of Health	厚生省	developing countries	発展途上国
increase	増える	trend	傾向
rate	速度	decrease	減る
accelerate	加速する	accurate	正確な



2. Reading

JAPAN: "Japan Reports Record Number of New HIV Infections in April-June" Associated Press (08.23.06):: Chisaki Watanabe

Japan's Health Ministry recently announced an increase in new HIV infections that may indicate the infection rate is accelerating. In three-months, from April to June of this year, 248 cases were found. This was the largest number since July-September in 2004, when 209 infections were reported, according to ministry official Yasuaki Hashimoto. The ministry did not give a cause for the increase. There was an increase in the number of infections among middle-aged Japanese. One reason for this may be that more people in this age group are being tested. HIV testing is widely available in Japan.

Japan has 17,000 HIV/AIDS patients, a low number compared to many other countries. According to UNAIDS, Japan's infection rate is 1 in 7,529, much lower than the 1 in 110 rate in Thailand. However, the rate at which HIV has spread in Japan in the past 10 years is similar to that of developing countries. Japanese tend to have low HIV knowledge and to view it as a foreign problem. "We are greatly concerned about the trend," said Hashimoto.

According to the ministry's AIDS Surveillance Committee (エイズ動向委員会), two-thirds of newly infected patients (患者) are in their 20s and 30s, but infections among older people are also increasing. The ratio of those newly infected in their 40s and 50s rose to 31 percent in April-June, up from 22 percent in the previous quarter, said the committee's statement.

Hashimoto said the increase could be due to June's awareness campaigns that included longer clinic hours so that older people, often in managerial positions, could be tested.

Reported cases of HIV, which have been rising since 2002, hit a record high of 832 cases in 2005. The number of reported AIDS cases decreased in 2005 after a two-year increase. Experts say that an accurate number of cases in Japan is not known, estimating the number to be two to four times the reported totals.

3. Reading Comprehension

Partner A: Ask your partner these questions. (Partner B, turn to page 3)

1. In Japan, is the rate of HIV infection going up, staying steady, or going down?
2. When was the largest number of new cases reported?
3. According to the article, how many HIV/AIDS cases have been reported in Japan?
4. According to the article, do most Japanese people know a lot about AIDS?
5. How many cases of HIV were reported in 2005?

HIV/AIDS: An Introduction

4. Song: **I'm Beautiful** by Brinsley Evans, sung by Bette Midler from the album "Bathhouse Betty", Warner Bros. 1998

"That's it, baby! When you got it, flaunt it, flaunt it!"

This is the Divine Miss M and I'm here to share with you some rare and stimulating insight into my cosmic fabulousity. It's really very simple. I simply believe with all my heart:

I'm beautiful, I'm beautiful, I'm beautiful, dammit!
I'm beautiful, I'm beautiful, I'm beautiful, dammit!
I'm beautiful, so beautiful, I'm beautiful, dammit!
I'm beautiful, I'm beautiful, I'm beautiful, dammit!

"Go away, little girl," they used to say.
"Hey, you're too fat, baby, you can't play."
"Hold on, Miss Thing, what you trying to do?
You know you're too wack to be in our school."

Too wack, too smart, too fast, too fine,
too loud, too tough, too, too divine.
I said you don't belong. You don't belong.
Too loud, too big, too much to bear,
too bold, too brash, too prone to swear.
I heard that song for much too long.

Ain't this my sun? Ain't this my moon? Ain't this my
world to be who I choose?
Ain't this my song? Ain't this my movie? Ain't this my
world? I know I can do it.

I'm not too short, I'm not too tall, I'm not too big, I'm not
too small.
Ooh, don't lemme start lovin' myself!
Ooh, don't lemme start lovin' myself!
I'm not too white, I'm not too black, I'm not too this, I'm
not too that.
Ooh, don't lemme start lovin' myself!
Ooh, don't lemme start lovin' myself!

I'm beautiful, I'm beautiful, I'm beautiful, dammit!
I'm beautiful, I'm beautiful, I'm beautiful, dammit!

It's time to call it what it is. Don't play the naming game.
Become what you were born to be and be it unashamed.
"Go away, little boy," I can hear them say,
"Everybody on the block says they think you're gay.
Hold on, my friend, do you think we're blind?
Take a look at yourself. You're not our kind."

Too black, too white, too short, too tall,
too big, too green, too red, too small.
I said you don't belong. You don't belong.
Too black, too white, too short, too tall,
too blue, too green, too red, too small.
I heard that song for much too long.

Ain't this my sun? Ain't this my moon?
Ain't this my world to be who I choose?
Ain't this my song? Ain't this my movie?
Ain't this my world? I know I can do it.

People always ask me, "Miss M, how did you get so far
on so little?" Shut up!
Well, I woke up one morning, flossed my teeth and decided,
"Damn, I'm fierce!" You look good!
You can be just like me! A goddess? Yeah!
Don't just pussy foot around and sit on your assets.
Unleash your ferocity upon an unsuspecting world.
Rise up and repeat after me: "I'm beautiful!"

I'm beautiful, I'm beautiful, I'm beautiful! (Can you say that?)
I'm beautiful, I'm beautiful, I'm beautiful! (I don't hear you!)
I'm beautiful, I'm beautiful, I'm beautiful! (Louder!)
I'm beautiful, I'm beautiful, I'm beautiful! (Hey!)

That's it, baby, when you got it, flaunt it, flaunt it!

Ain't this my sun? My sun! Ain't this my moon? My moon!
Ain't this my world to be who I choose?
Ain't this our song? Ain't this our song? Ain't this our movie?
Ain't this our movie?
Ain't this our world to be who we choose?

I'm not too short, I'm not too tall,
I'm not too big, I'm not too small.
Ooh, don't lemme start lovin' myself!
Ooh, don't lemme start lovin' myself!
I'm not too white, I'm not too black,
I'm not too this, I'm not too that.
Ooh, don't lemme start lovin' myself!
Ooh, don't lemme start lovin' myself!
I'm beautiful, dammit!

Stop and think about how your
words and actions can hurt
someone else -
or can help them.



5. Looking at YOU

How did people limit you when you were a small child? Write some phrases to express this. For example:

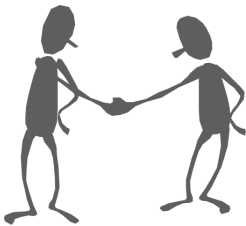
Example: When I was a child, my parents told me I couldn't ride the roller coaster because I was too short.

1. When I was a child...

2. When I was a child...

- The singer says that it doesn't matter what other people think about her. She knows that she is beautiful. How do people judge beauty in your culture?
 - Is beauty only the way someone looks? Is it only the way they dress? Do you think beauty is more than looks?
 - Tell your partner about someone you know who is beautiful, but not just their face or body. What makes that person beautiful to you?
 - How are YOU beautiful? Write THREE things about yourself that *you* think are beautiful: (you don't have to show these to anyone! :-)
- 1.
 - 2.
 - 3.
- What are your favorite lines in the song? Why?

6. Putting it Together



Questions for discussion

1. Where did *you* first hear about HIV or AIDS? (at school, on TV, from movies, your family, friends, etc.)
2. Did you study it in school? If so, about how many hours did you study about it?
3. What facts do you know about AIDS?
4. Where is it a problem in the world?
5. How often do you hear about it in the news?
6. Of all the information we studied in this class today, what information surprised you?
7. Do you think AIDS is a problem in Japan? Do you think it could become a big problem in the future?
8. YOUR QUESTION:

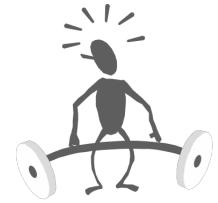
Reading Comprehension Partner B: Ask your partner these questions.

1. How many new cases of HIV were found in Japan in the second quarter of 2006?
2. Give one reason why there are more cases of middle-aged people with HIV in Japan.
3. Is the infection rate in Japan higher or lower than countries like Thailand?
4. Which age group has a large number of new infections?
5. What is the real total of people who have HIV/AIDS in Japan?

A Brief History of AIDS (World/U.S.)

1. Vocabulary Building

viruses	ウイルス	transfer	移動
species	種類	hunter	ハンター
infection	感染	illness	病気
theory	理論	researcher	研究者
wound	けが	epidemic	伝染病



2. Reading

The Origins of HIV *Adapted and abridged from <http://www.avert.org/origins.htm>*

Three of the earliest known cases of HIV infection are:

- 1959: A blood sample taken from an adult male living in the Democratic Republic of Congo
- 1969: HIV found in tissue (動植物の細胞の組織) samples from an American teenager who died in St. Louis, Missouri, USA
- HIV found in tissue samples from a Norwegian sailor who died around 1976

In 1998, doctors studied the blood sample from 1959. They thought that humans first caught the HIV virus around the 1940s or the early 1950s. Other scientists have dated the sample even earlier - perhaps as far back as the end of the 19th century. In January 2000 however, the results of a new study said that the first case of HIV-1 infection happened around 1930 in West Africa.

So, how did it start?

The HIV virus is very similar to a virus that is found in some kinds of chimpanzees in west-central Africa. That virus is called SIV. Some researchers say that the virus crossed species from chimps to humans many years ago.

How could HIV have crossed species?

Scientists have known for a long time that certain viruses can pass between species. The most commonly accepted theory is the 'hunter theory'. According to this theory, humans were infected with SIV when they killed and ate chimps who had the virus. Or maybe the infected blood got into cuts or wounds on the hunter. Normally the hunter's body would have fought off SIV, but maybe the SIV virus changed into HIV.

An article published in The Lancet in 2004, also shows how the transfer of other viruses from monkeys and chimps to hunters is still occurring even today. Researchers tested 1,099 people in Cameroon and discovered about 1% were infected with SFV (Simian Foamy Virus), an illness that people used to think only infected some kinds of monkeys. Researchers think that people catch these viruses through butchering and eating monkey and ape meat. Discoveries such as this make many people think there should be a ban on bushmeat hunting to prevent simian viruses being passed to humans.

By 1980, HIV had spread to North America, South America, Europe, Africa and Australia. The epidemic continues to spread. In this course we will be learning about many reasons why the virus continues to infect 11,000 people and cause nearly 8,000 deaths **every day**.¹

¹ http://data.unaids.org/pub/GlobalReport/2006/200605-FS_globalfactsfigures_en.pdf

A Brief History of AIDS (World/U.S.)

A Timeline of the History of AIDS (U.S.)

Adapted and abridged from <http://www.aegis.com/topics/timeline/>

1959 Scientists think they find the earliest case of AIDS. The discovery suggests that the many different global AIDS viruses all shared a common African origin within the past 40 to 50 years.
1978 Gay men in the US and Sweden -- and heterosexuals in Tanzania and Haiti -- begin showing signs of what will later be called AIDS.
1982 CDC (USA) links the new disease to blood. The term AIDS ("acquired immune deficiency syndrome") is used for the first time on July 27th. Larry Speakes, President Reagan's press secretary jokes about AIDS during press conference on October 15th. US President Ronald Reagan has not used the word "AIDS" in public yet.
1983 CDC (USA) warns blood suppliers of a possible problem with the blood supply. Institut Pasteur (France) finds the virus (HIV).
1984 Dr. Robert Gallo (US) says he discovered the virus that causes AIDS; however, this is about a year after the French discovery. US President Ronald Reagan has not used the word "AIDS" in public yet.
1985 The U.S. Food and Drug Administration (FDA) approves the first HIV antibody test. Blood products begin to be tested in the US and Japan. The first International Conference on AIDS is held in Atlanta (US). US President Ronald Reagan mentions the word "AIDS" in public for the first time in response to a reporters questions on September 17, 1985.
1987 The drug AZT becomes the first anti-HIV drug approved by the FDA. The recommended dose is one 100mg capsule every four hours <i>around the clock</i> . Canada stops distribution of HIV-infected blood products. The US does not allow HIV-infected immigrants and travelers into the U.S. On April 2nd, President Reagan delivered his <u>first</u> "major speech" on AIDS, calling it " <i>public enemy number one.</i> " A family -- including three HIV-positive sons (hemophiliacs) -- have to leave their home (Arcadia, Florida, US) after an arsonist set fire to it.
1991 10 million have HIV worldwide (WHO). More than a million are in the US. Professional basketball player Magic Johnson tells the world he has HIV.
1996 Japanese Green Cross Pharmaceutical Corp. is taken to court for dealing in HIV-tainted blood. TIME magazine's 1996 Man of the Year is AIDS researcher Dr. David Ho. Basketball star Magic Johnson returns to play basketball. Heavyweight boxer Tommy Morrison announces he is HIV positive. California voters passed a law (55.7% to 44.3%) to allow medical use of marijuana. Arizona passed a similar law by a much larger margin, 65.3% to 34.7%.

3. Pair Quiz

Global HIV/AIDS Estimates, end of 2005

Student A (Student B, turn to page 3)

Look at the table below. Ask your partner questions to find out the missing information. Example, "How many people were living with HIV/AIDS in 2005?"

Worldwide	Estimate	Range
People living with HIV/AIDS in 2005	38.6 million	33.4-46.0 million
Adults living with HIV/AIDS in 2005		31.4-43.4 million
Women living with HIV/AIDS in 2005	17.3 million	14.8-20.6 million
Children living with HIV/AIDS in 2005		1.7-3.5 million
People newly infected with HIV in 2005	4.1 million	3.4-6.2 million
AIDS deaths in 2005 (<i>How many people died... "</i>)		2.4-3.3 million

The latest statistics on the world epidemic of AIDS & HIV were published by UNAIDS/WHO in May 2006, and refer to the end of 2005.

[Adapted and abridged from <http://www.avert.org/worldstats.htm>]

A Brief History of AIDS (World/U.S.)



4. Looking at YOU

Take a few minutes to complete the spaces below. You do **NOT** have to share your answers with other students.

Personal Inventory

School Subjects

I like _____.
 I do not like _____.
 I am good at _____.
 I am not good at _____.
 I am good at this subject, but I do not like it: _____.
 I am not good at this subject, but I like it: _____.

Activities

I like _____.
 I do not like _____.
 I am good at _____.
 I am not good at _____.
 I am good at this activity, but I do not like it: _____.
 I am not good at this activity, but I like it: _____.
 I prefer being involved in individual activities _____ or group activities _____. (Check one.)

Relationships with Friends and Adults (Check the statements that apply to you.)

I am generally well liked: _____.
 I am generally not well liked: _____.
 I have a group of friends: _____.
 I prefer having one or two friends: _____.
 I am a leader: _____.
 I am a follower: _____.
 I prefer people who like the same things I like: _____.
 I prefer people who like different things: _____.
 I have the support of significant adults in my life: _____.
 I have the support of a group of peers: _____.

Food Preferences

I like to eat _____.
 I do not like to eat _____.
 I do _____ do not _____ eat a balanced diet. (Check one.)

Relaxing

I relax by _____.
 I like relaxing alone _____ or with other people _____. (Check one.)

This activity from <http://school.discovery.com/lessonplans/programs/selfesteem/>

Questions to think about...

1. What is self-esteem?
2. Why is it important in relation to the topic of HIV?

Global HIV/AIDS Estimates, end of 2005

Student B

Look at the table below. Ask your partner questions to find out the missing information. Example, "How many people were living with HIV/AIDS in 2005?"

	Estimate	Range
People living with HIV/AIDS in 2005		33.4-46.0 million
Adults living with HIV/AIDS in 2005	36.3 million	31.4-43.4 million
Women living with HIV/AIDS in 2005		14.8-20.6 million
Children living with HIV/AIDS in 2005	2.3 million	1.7-3.5 million
People newly infected with HIV in 2005		3.4-6.2 million
AIDS deaths in 2005	2.8 million	2.4-3.3 million

The latest statistics on the world epidemic of AIDS & HIV were published by UNAIDS/WHO in May 2006, and refer to the end of 2005.

[Adapted and abridged from <http://www.avert.org/worldstats.htm>]

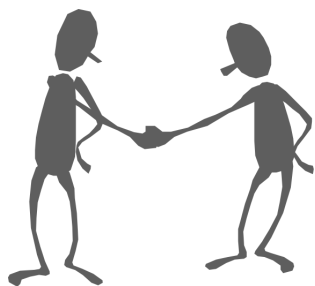
A Brief History of AIDS (World/U.S.)

5. Putting it Together

What have you learned in this unit?

Review the reading passage on page 1. Check whether the following statements are true (T) or false (F).

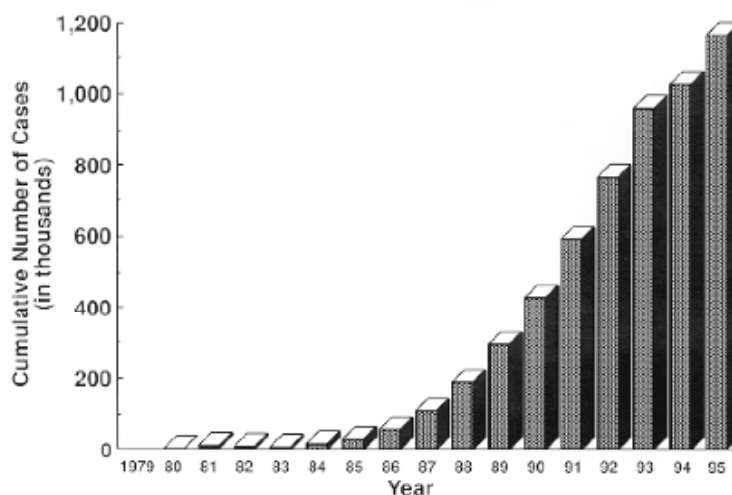
1. ___ The earliest case of HIV infection seems to have occurred around 1930.
2. ___ Researchers think that the first humans caught the HIV virus from eating raw fish.
3. ___ Other kinds of viruses can pass from animals to humans.
4. ___ Some people think hunting and eating wild animals should be illegal.
5. ___ In 1980, the HIV virus could be found in five continents.



Questions for discussion

1. Where did you first hear about HIV or AIDS?
2. Did you study it in school? If so, about how many hours did you study about it?
3. Of all the information we studied in this class today, what information surprised you?
4. Looking back at the chart on page 2, why do you think it too so long for the president of the United States to talk about the AIDS situation in public?
5. How many names of famous people who were HIV-positive (=had the virus) can you find? Write them here:

6. Look at the chart below. What year were you born? About how many cases of AIDS were there in that year? How many are there today?
7. With your partner, think of some reasons why the virus has spread around the world so fast.
8. If you could ask researchers or doctors some questions about HIV/AIDS, what would you ask them? Write your questions here:



"QUANTIFYING THE EPIDEMIC"

National Institutes for Health (U.S.)

<http://www.niaid.nih.gov/publications/hivaids/3.htm>

A Brief History of HIV/AIDS in Japan

1. Vocabulary Building

hemophilac	血友病	intimate	肉体関係
donor	献血者	disability	身体障害者
Ministry of Health	厚生省	pharmaceutical	薬剤
homosexual	同性愛者	innocent	無罪
heterosexual	異性愛者	guilty	有罪



2. Reading

The history of HIV/AIDS in Japan began 1983. It is not clear exactly who the first AIDS patient was. Some research shows that the first patient was a hemophilac. Other sources say it was a gay man living in New York. However, it is true that the first large numbers of HIV cases occurred from blood. Since 1978, blood products used to treat hemophilia were imported to Japan. The products were cheaper than products produced in Japan, but doctors could sell the new products at the more expensive, market price. The new blood products were made from the blood of thousands of blood donors. Some of the donors had HIV, the virus that causes AIDS. In 1985 the Ministry of Health allowed heat-treated blood products (heat treating kills the virus), but did not stop the sale of unheated products. The price of unheated products went down and doctors continued to give them to patients until 1987. In this way, 60% of the hemophilacs in Japan became infected with HIV.

In 1986 and 1987, three female heterosexual patients were found to have AIDS. It was very difficult for people with HIV to “come out,” or to say publicly, that they had the virus. In 1988, Akase Noriyasu, an HIV-positive activist, agreed to be interviewed on NHK. In the interview he said,

“I’ll just be pleased if you show me as an ordinary old man with hemophilia, an old timer who contracted HIV and is having fun despite his disability. I’d like my friends to have courage and spend their time in a meaningful way. It’s okay to worry and it’s okay to think about all sorts of things, but time marches on, no matter how much you worry.”

Some of these patients went to court against the government and the pharmaceutical companies, such as Green Cross, that sold infected blood products. The court battle began in 1989 and ended in 1996. The court decided that Dr. Abe Takeshi, the leading advisor on blood products, was innocent. However, three Green Cross officials were found guilty.

Because the early cases of HIV infection were found in hemophiliacs, and because the mass media focused on HIV-positive homosexuals in the U.S., there were myths that Japanese people could not get the disease. Many people thought it was a foreign disease or one that only certain people could catch, for example gay men or prostitutes, or that you can only catch it in another country. These myths continue to today. However, the Japanese population is equally at risk of infection here at home. Between 1985 and 1999, 70% of Japanese men and women with HIV had caught the virus within Japan.

Today there is no completely accurate way to know how many people have HIV in Japan, but the numbers are growing. Many people who have the virus do not get tested because they believe they are not at risk. They might give the virus to other people during intimate contact. If everyone understands more about the disease and makes a change in her or his behavior, we can begin to stop the spread of HIV in Japan.

Source: Cullinane, Joanne. “Tainted Blood and Vengeful Spirits: The Legacy of Japan’s Yakugai Eizu (AIDS) Trial.” Culture, Medicine and Psychiatry, Volume 29, Number 1, March 2005, pp. 5-31(27).

A Brief History of HIV/AIDS in Japan

Sept. 7-13, 1992

Japan: A symposium called 'Society Living With AIDS' takes place at the Toshi Center Hotel, in Tokyo. The hotel, however, refuses accommodation to Sean Duque, an AIDS activist from Honolulu and one of the speakers, because he is infected with HIV.

3. Song: A Time to Remember and Recall by Sean Duque

They've gone before us
What can we do in their footsteps?
They were playful like children
Folks like you and me

They were friends, they were lovers
People we've known in this lifetime
And we've shared special moments
That's how it used to be

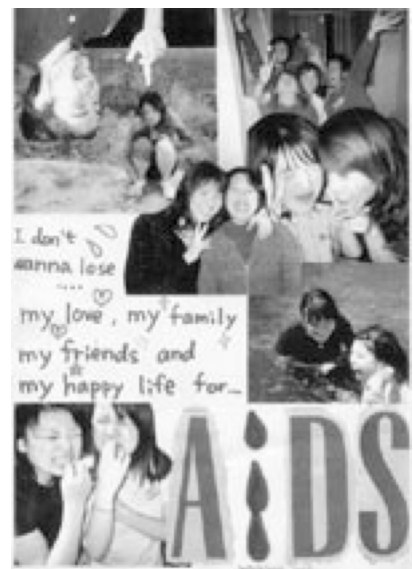
Chorus

Give a little bit of love, give a little bit of love to God's children
Give a little bit of love, give a little bit of love from your heart, oh
Give a little bit of time, give a little bit of time to remember
Give a little bit of time, give a little bit of time to recall
The greatness in them all

They were all special people
Who paved out a path for survival
To leap further hardships
And make other people see

That they were all children
Children of their mothers and fathers
They were sisters and brothers
They were friends and family

(Chorus)



Questions for Discussion

1. What is your impression of the song?
2. What is the main message of the song?
3. How do you think Sean felt about not being allowed to stay at the hotel in Tokyo?
4. Many years ago, there was a lot of discrimination against people who had HIV/AIDS. Do you think there was good reason at the time to be afraid? Explain.
5. Do you think there is good reason *today* to be afraid? Explain.
6. YOUR QUESTION:



4. Looking at YOU

In our relationships with other people, we sometimes makes assumptions. An **assumption** is an idea or belief that we think is true, but we don't have proof. Riddles (なぞなぞ) often make you assume information that is not given. Here's one you might like to try. Work with a partner and see if you can find the answer.

Anthony and Cleopatra are found dead on the floor.
 The window is open but it is not broken.
 The door is locked.
 There is water and pieces of glass where they lie dead.

How did Anthony and Cleopatra die?

Did you figure it out? What were your assumptions? Did you assume that Anthony and Cleopatra were human beings? Did you assume that something like the window, a drinking glass, someone's glasses, or a glass vase had been broken? Did you assume someone or something had come in through the window? Did you assume that someone had wanted to kill them? (The answer is on the last page.)

Some of these assumptions may be right, but others are wrong. We make assumptions like these every day. In our relationships, they could cause problems.

What is a good way to handle your assumptions about other people? Look at the situations below¹. What *other* ways could you react? Work alone or with a partner and write down another way you could look at the situation. Number 1 is given as an example.

1. Your friend hung up on you (you were talking on the phone and your friend suddenly ended the conversation without saying goodbye).	
One reaction: <i>"I can't believe he hung up on me! He doesn't care about anybody but herself!"</i>	Give the benefit of the doubt: <i>"He hung up on me. Maybe I was treating him poorly. Or maybe he's in a bad mood today and my comments were too much for him to handle."</i>
2. You and your partner went on a picnic with Ken and Aki. At the end, they took home all the leftover food.	
One reaction: <i>"They are so selfish!"</i>	Give the benefit of the doubt:
3. You pass your teacher in the hall. She recognizes you and asks you for your name – again.	
One reaction: <i>"I don't think that teacher likes me. She can't even remember my name!"</i>	Give the benefit of the doubt:

Learning to give people the benefit of the doubt will help you to think differently. If you look for ways to see the best in people, it will make you a much happier person and your level of stress will go down.

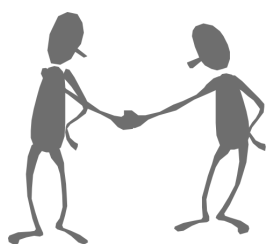
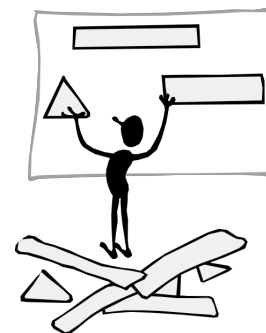
¹ This activity adapted from Words Can Heal Handbook available from www.wordscanheal.org

5. Putting it Together

What have you learned in this unit?

Review the reading passage on page 1. Check whether the following statements are true (T) or false (F).

1. ____ Imported blood products were first introduced to Japan in 1983.
2. ____ Akase Noriyasu worked for the Ministry of Health.
3. ____ The belief that only gay people or hemophilacs can catch HIV is not true.
4. ____ In just four years' time, seventy percent of Japanese people were catching the virus in Japan, not abroad.
5. ____ The passage suggests that it may be possible to prevent more cases of HIV/AIDS in Japan if we learn about the disease and change our behavior.



Questions for discussion

Discuss the following questions with a partner or in small groups.

1. What was your reaction to the early history of HIV/AIDS in Japan?
2. Have you studied this information before? If so, where?
3. Have you heard the topic of AIDS discussed in the mass media? If so, where?
4. What role does the media play in teaching the public about AIDS and other diseases?
5. Do you think the media should do more to educate the public?
6. How do stereotypes start?
7. Do you ever see stereotypes in the media? If so, give some examples.
8. Which of these two statements do you agree with:
 - a. I think media should do something to stop stereotyping in their reporting the news.
 - b. I think stereotypes can't be helped. People will stereotype anyway.
9. Give some reasons WHY you chose your answer in question 8 above.
10. Explain how stereotypes might be related to the spread of HIV in Japan.
11. Read the statement by Akase Noriyasu on page 1. What do you think of his advice?
12. Do you think his advice can apply to anyone or just to HIV-positive people?
13. If you could talk with Mr. Akase, what questions would you ask him? Write your questions here, if you like:

14. What are some ways to fight the myths that only certain groups of people can catch HIV?
15. YOUR QUESTION:

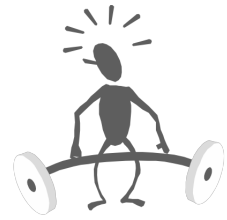
? ? Do you know about HIV? ? ?

Answer to the riddle on p. 3: Anthony and Cleopatra were goldfish. They were in a glass bowl on the counter. A cat came in through the window, saw the fish and tried to get them out of the bowl. The bowl tipped over and crashed on the floor. The cat was scared and ran back out of the window.

HIV/AIDS and Discrimination

1. Vocabulary Building

believe	考える ; 思う	associate with	仲間にする
situation	状態	discrimination	差別
ignorant	無知	needle	
landlord	管理人	misunderstanding	誤解
housing	住宅	dismiss	くびになる



2. Reading

Around the world, people living with HIV/AIDS face many problems in society. They are often treated differently from other people. A person with HIV or AIDS sometimes risks losing her or his family, friends, and more, when other people learn the person has the virus. Discrimination is the unfair treatment of people because they belong to a certain group. For people living with HIV/AIDS, discrimination can take many forms.

One of the most frequent forms of discrimination happens because people do not know enough about the virus, HIV. They may think it is easy to catch in everyday life. They might not want to shake hands with someone who has AIDS, for example. They may believe that they can get the virus by sharing the same glass or plate with, or kissing someone who has HIV. Even though these situations will not cause HIV infection, many people around the world remain ignorant about this disease.

Another problem HIV-positive people encounter is discrimination in work, housing, or education. In some cases, when an employer finds out an employee is taking medicine for HIV infection, the employee might soon be looking for another job. Although it is illegal in many countries to dismiss a person for having HIV, relationships in the workplace may get so bad because of rumors or harassment that the HIV-positive person can no longer



continue to work there. In some countries, landlords have not rented to HIV-positive people, and students have been turned away from school because of their HIV status. In 1985 Ryan White was turned away from his high school in Kokomo, Indiana (USA). He won a court battle, and eventually was accepted at a high school in a nearby town. Even today, in many countries there are many HIV-positive children who are not allowed to attend school with other children.

There is a widespread stereotype that only certain kinds of people can catch HIV. Some people believe that only prostitutes, gay men, or people who use needles for drugs can get AIDS. They may think, “I do not sleep with many people, I am not gay, and I don’t use drugs, so I can’t catch HIV.” These people might not want to associate with people who have HIV or AIDS. Beliefs like these can cause families to turn their sons or daughters, mothers or fathers away from home. They can break up friendships.

One root cause of AIDS discrimination is a misunderstanding of the disease. Society must learn that *anyone* might be at risk of infection unless they take precautions in intimate relationships. It has nothing to do with being a “good” or “bad” person, and everything to do with education and changing one’s behavior. We can only hope to end discrimination when we start to see people with HIV/AIDS as people like everyone else, with challenges to face, and hopes and dreams for the future.

HIV/AIDS and Discrimination

3. Song: Streets Of Philadelphia*

- * Where is Philadelphia?
- * Why is it famous?
- * What is its nickname?
- * What do you know about the film, "Philadelphia"?

Listen to the title song from the film and then discuss your impressions with your partner.

I was bruised and battered
I couldn't tell what I felt
I was unrecognizable to myself
I saw my reflection in a window I didn't know my own face
Oh Brother are you gonna leave me wastin' away
On the streets of Philadelphia
I walked the avenue 'til my legs felt like stone
I heard the voices of friends vanished and gone
At night I could hear the blood in my veins
Black and whispering as the rain
On the streets of Philadelphia
Ain't no angel gonna greet me
It's just you and I my friend
My clothes don't fit me no more
I walked a thousand miles
Just to slip this skin
The night has fallen, I'm lyin' awake
I can feel myself fading away
So receive me brother with your faithless kiss
Or will we leave each other alone like this
On the streets of Philadelphia

Glossary

bruised	あざ
battered	虐待された
unrecognizable	認識できない
reflection	反射
wastin' away	衰弱する
vanished	消える
veins	血管
slip	脱ぐ
fading away	消えていく
faithless	不誠実

*Copyright © Bruce Springsteen (ASCAP)
© 2005 Sony BMG Music Entertainment, Inc.

Checking understanding

- 1) Why doesn't the singer recognize himself?
- 2) Why does he think of the color of his blood as black?
- 3) Why don't his clothes fit any more?
- 4) What does "faithless kiss" mean?

4. Watch a Scene

Now watch the following scenes from the film and discuss the questions below:

Scene 1:

- What was Miller's reaction to shaking Beckett's hand?
- Why do you think he reacted this way?
- How many lawyers did Beckett go to?
- What was the result each time he asked them to represent him? Why did this happen, do you think?
- How do you think Beckett feels when he leaves Miller's office?

Scene 2:

- Beckett is doing research for his case in the library. What is the librarian's attitude toward him?
- How do the other people in the library act?
- How would you define discrimination?

HIV/AIDS and Discrimination

5. Act Out the Scenes- Philadelphia

[From the film "Philadelphia, Sony Pictures Home Entertainment, 1993]

Beckett goes to Joe Miller's office to ask him to take his case.

Miller: All right. Take care. Mr. Beckett. Mr. Beckett. Come in.

Beckett: It's good to see you again, Counselor.

M: Judge Tate. Kendall Construction. Innocuous.

B: Yeah.

M: How are you? What happened to your face?

B: I have AIDS.

M: Oh, oh, I'm sorry. I...

B: Can I sit down? Thank you. Oh! Look at this. You have a new baby.

M: Yeah. I got a little baby girl.

B: Oh! It's a girl, huh! Congratulations.

M: Yeah. One week old.

B: Kids are great.

B: Yeah.

M: Yeah, thank you, Beckett. I'm real excited about it. Listen, I, uh... What can I do for you?

B: I've, uh, I've been fired by Wyant, Wheeler. I plan on bringing a wrongful termination suit against Charles Wheeler and his partners.

M: You want to sue Wyant, Wheeler, Hellerman, Tetlow and Brown?

B: Correct. I'm seeking representation.

M: Continue.

B: The night before it was due I worked on the complaint in my office. I left a copy of it on my desk. The next day the complaint vanished. No hard copy. All traces of it mysteriously gone from my computer. Miraculously, a copy of the complaint was located at the last minute, and we got it to court on time. But the next day I was summoned to a meeting with the managing partners. They were waiting for me in the conference room.

M: Continue.

B: I misplaced an important complaint. That's their story. Wanna hear mine?

M: How many lawyers did you go to before you called me?

B: Nine.

M: Continue.



B: From the day they hired me to the day I was fired I served my clients consistently thoroughly with absolute excellence. If they hadn't fired me that's what I'd be doing today.

M: And they don't wanna fire you for having AIDS, so in spite of your brilliance they'd make you look incompetent. Thus the mysterious lost file. Is that what you're trying to tell me?

B: Correct. I was sabotaged.

M: So you were concealing your illness.

B: That's correct.

M: All right, explain this to me like I'm a two-year-old, okay? Because there's an element in this thing I just cannot get through my thick head. Didn't you have an obligation to tell your employer you had this dreaded deadly infectious disease?

M: I don't buy it, Counselor.

B: That's very disappointing.

M: I don't see a case.

B: I have a case. If you don't want it for personal reasons...

M: That you. That's correct. I don't...

B: Well, thank you for your time, Counselor.

M: Mr. Beckett. Uh,... I- I'm sorry about what happened to you. It's a bitch, you know.

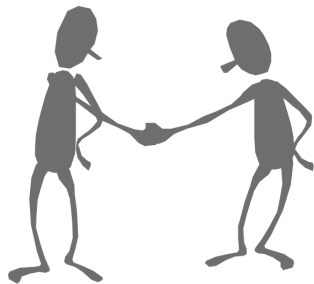
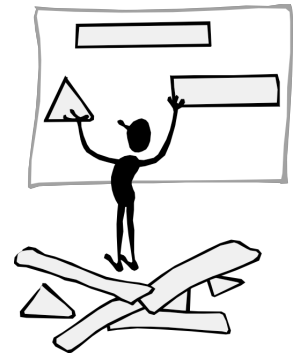
HIV/AIDS and Discrimination

6. Putting it Together

What have you learned in this unit?

Review the reading passage. Discuss the following with a partner or in small groups.

1. What is discrimination?
2. Name three ways that HIV-positive people might experience discrimination.
3. Who was Ryan White?
4. What are some reasons why people assume they won't catch HIV?
5. What is one way to prevent discrimination based on someone's HIV status?



Questions for discussion

Discuss the following questions with a partner or in small groups.

1. What do you think can be done to change people's attitudes toward PWH/PWAs? (PWA= Person with AIDS; PWH=Person with HIV)
2. Is it legal in your country for a company or school to discriminate against HIV-positive people? What could happen if someone experiences discrimination based on their HIV status?
3. Some people think that people with HIV deserve what they get because they could have prevented it. Do you think this is a form of discrimination?
4. Some people say there are no people with HIV around them, or they do not know anyone who has HIV. If people with HIV are afraid of discrimination, would it be easy for them to tell their friends or relatives? Why or why not?
5. What role does the media play in helping to end discrimination?
6. Do you know any musical groups that have written or sung songs about HIV/AIDS? Tell about them.
7. If you could write a song to help stop discrimination toward PWH/PWAs, what kinds of things would you want to say in your lyrics?
8. If you could make a short video to help stop discrimination toward PWH/PWAs, what kinds of things would you want to include in your video?
9. If you could design a poster to help stop discrimination toward PWH/PWAs, what kinds of things would you want to include in your poster? Where would you put your poster?
10. YOUR QUESTION:

Just don't laugh. No matter how funny a joke is, if it's at someone else's expense, don't even crack a smile. It may stop the joker from hurting others in the future.

From <http://www.wordscanheal.org/>



The Red Ribbon

In 1991, an art project called Visual AIDS was held in New York. Paul Jabara created the idea for a global symbol in the fight against AIDS.

The Red Ribbon has become a worldwide symbol for supporting HIV-positive and people living with AIDS. It unites the people in the common fight against this disease.

red like love, as a symbol of passion and tolerance towards those affected.

red like blood, representing the pain caused by the many people that died of AIDS.

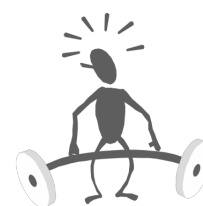
red like the anger about the helplessness by which we are facing a disease for which there is still no chance for a cure.

red as a sign of warning not to carelessly ignore one of the biggest problems of our time.

War, Conflicts, and HIV

1. Vocabulary Building

conflict	争い	isolated	孤立
torture	拷問	refugees	難民
ethnic cleansing	難民浄化	survive	切り抜けて生き残る
target	標的	trafficking	売買(麻薬などの)
impregnated	妊娠された	prostitution	売春



2. Reading



Violence against women, especially rape, has been widespread in recent wars. From conflicts in Bosnia and Herzegovina to Peru to Rwanda, girls and women have been raped, put in prison, or tortured.

Rape is often used as a weapon of war in 'ethnic cleansing'. More than 20,000 Muslim girls and women were raped in Bosnia after fighting began in April 1992. Teenage girls have been a particular target in Bosnia and Herzegovina and Croatia, according to The State of the World's Children 1996 report. The report also says that impregnated girls have been forced to give birth to 'the enemy's' child.

Violence affects women of all ages. For example, in some attacks in Rwanda, almost every teenage girl who survived an attack by the military was later raped. Many of those who became pregnant were thrown out by their families and communities. Some left their babies behind; others committed suicide.



In addition to rape, girls and women are also forced into prostitution and trafficking during times of war. Sometimes top officials in the government and military know it is happening, and this makes it difficult to stop. During World War II, women were taken from their families, put in prison and forced to satisfy the sexual needs of occupying soldiers. Many Asian women were also involved in prostitution during the Vietnam War. The also continues in today's conflicts.

In a conflict area, families are often not able to stay together. This makes women and girls especially at risk of violence. Nearly 80 percent of the 53 million people who have to leave their homes because of war today are women and children. When fathers, husbands, brothers and sons are taken away to fight, they leave women, the very young and the elderly to take care of themselves. These people often have to go to camps to find food and shelter.

Another problem is sexual violence in these camps. The number of rapes was reported to be very high at camps for Somali refugees in Kenya in 1993. The camps were in isolated areas, and hundreds of women were raped in night attacks or while looking for firewood.

Finally, sexual violence against women and girls means there is a high risk of infection with sexually transmitted diseases (STDs), including HIV/AIDS. There are several reasons why it is easier for women and girls to catch diseases during war time: as refugees, they move from place to place, there are soldiers traveling over wide areas, and there is a lack of health services and public education. These are also reasons why it is more difficult to treat the diseases.

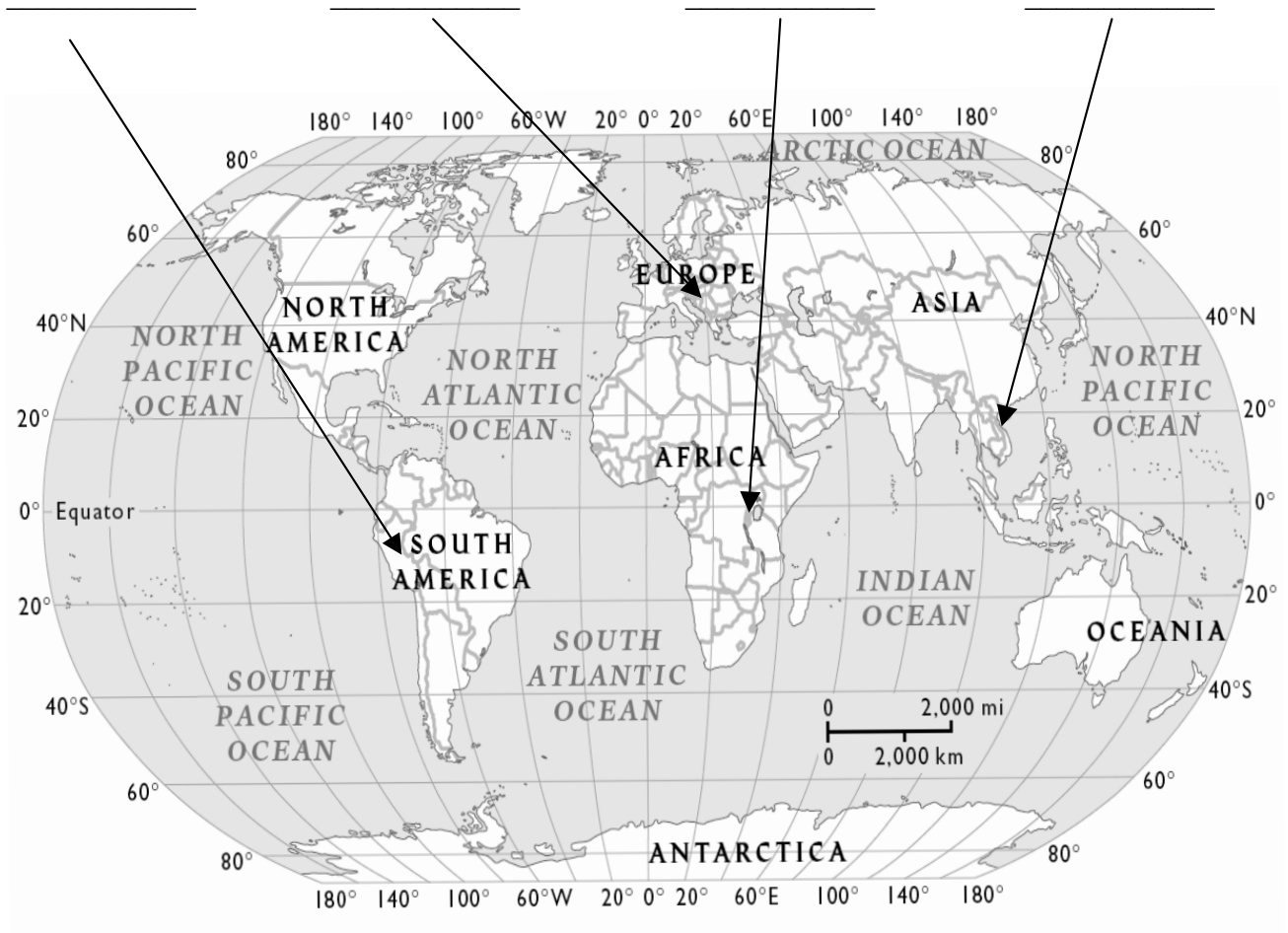
Adapted and abridged from: <http://www.unicef.org/sowc96pk/sexviol.htm>

War, Conflicts, and HIV

3. Reading Comprehension Questions

1. What might happen to women who are caught in wars? (circle all that are true)
 - a. They might receive an education
 - b. They might be separated from their families
 - c. They might be forced to work as prostitutes
 - d. They might be raped
 - e. They might get good medical care
2. How many girls were reported to have been raped in the fighting in Bosnia? _____
3. What sometimes happens when women give birth to “the enemy’s” child? _____
4. Why is it hard to stop forced prostitution during war time? _____
5. What percent of today’s refugees are women and children? _____
6. Name three reasons why it is easier for women and girls to become infected with diseases during war time:
 - a. _____
 - b. _____
 - c. _____
7. On the map below, label the places mentioned in the article.

Rwanda Peru Bosnia Vietnam



4. Act Out the Scene - Hotel Rwanda

“Hotel Rwanda” trailer from http://www.rottentomatoes.com/m/hotel_rwanda/trailers.php

Paul: My name is Paul Rusesabagina. I am the house manager of the most luxurious hotel in the capital of Rwanda. A place that my family and I happily called our home. Until the day everything changed.



Daughter: Daddy...

Son: There are soldiers on the streets.

Voice: They're killing everyone.

Voice: It's a massacre.

Paul: The United Nations are here now.

UN Peace Keeper: We're here as peace keepers, not as peace makers.

Guard: We've got trouble at the gate.

Paul: This is a four-star hotel, not a refugee camp. I have no means to protect these people.



Narrator: When a country descended into madness...

Doctor: They're killing Tutsi children to wipe out the next generation.

Narrator: And the world turned its back...

Paul: How can they not intervene? Hundreds of thousands are dying.

Reporter: If people see this, Paul, they'll say, Oh, my God, that's horrible, and then go on eating their dinners.

Narrator: One man had to make a choice...

Paul: All of the whites are leaving, even the UN soldiers.

UN Peace Keeper: All the superspowers, everything you believe in, Paul. They're not going to stop this slaughter.

Paul: We have been abandoned. There will be no rescue. We can only save ourselves.

Woman: We can't give up.



Narrator: United Artists presents the true story of a man who fought impossible odds...



Paul: I cannot leave these people to die.

Son: Papa!

Narrator: To save everyone he could...

Paul: They say you led the massacres.

Soldier: You will tell them the truth.

Paul: I will tell them nothing unless you help me.

Narrator: And created a place...

Paul: Go inside the hotel.

Narrator: Where hope survived...

Tatyana: You're a good man, Paul.

Paul: We need to help one another. That is the only thing that is keeping us alive.

Narrator: HOTEL RWANDA.

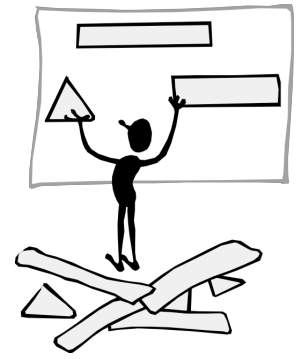


5. Putting it Together

What have you learned in this unit?

Discuss the following questions with a partner or in small groups.

1. How is war related to the spread of AIDS?
2. Why are women especially vulnerable?
3. In your opinion, when crimes such as rape happen during war time, what should the following groups do:
 - a. The United Nations
 - b. Humanitarian organizations (for example, Doctors Without Borders and UNICEF)
 - c. World leaders
 - d. The international community (you and me)
4. YOUR QUESTION:



6. Additional Reading

Reasons for Conflicts: Looking at Congo

It starts with a hospital room full of women who have been gang-raped and then shot in the vagina. I am standing in a room in the Panzi Hospital in Bukavu, the only hospital that is trying to deal with the bushfire of sexual violence in Eastern Congo. Most have wrapped themselves deep in their blankets so I can only see their eyes, staring blankly at me. Dr Denis Mukwege is speaking. “Around ten percent of the gang-rape victims have had this happen to them,” he says softly, his big hands tucked into his white coat. “We are trying to reconstruct their vaginas, their anuses, their intestines. It is a long process.”

“We suddenly had so many women coming in with post-rape lesions and injuries I could never have imagined. Our minds just couldn’t take in what these women had suffered.” The competing armies had discovered that rape was an efficient weapon in this war. Even in this small province, South Kivu, the UN estimates 45,000 women were raped last year alone. “It destroys the morale of the men to rape their women. Crippling their women cripples their society,” he explains, shaking his head gently. There were so many militias around that Dr Mukwege had to keep his treatments secret – the women were terrified of being kidnapped again and killed.

In Congo there is a place called Kalehe. Here is where men, women and children – lots of children – dig with their hands in the ground, looking for coltan. Coltan is a metal that is used in your mobile phone, lap-top computer, or Playstation – and 80 percent of the world’s supplies are located in the Democratic Republic of Congo.

Militias, not the government, control these mines. They also control diamond and other mineral mines. They capture local people, hold them at gunpoint, and force them to work in the mines. The militias then sell the minerals to many British, American and Belgian companies.

The country will pay people to join the Congolese National Army, but only \$5 a month. If they join one of the militia groups that control a gold mine or a diamond mine or a cassiterite mine or a coltan mine, they can get \$60 a month. As long as we in the outside world are still buying these minerals, the conditions in Congo will not improve.

Excerpt adapted and abridged from

Congo's tragedy: the war the world forgot by Johann Hari

05/18/06 "The Independent" http://www.friendsofthecongo.org/pdf/congo_tragedy_indep_may_06.pdf

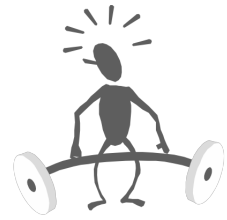
and “**The War The World Ignores**”: **A Look at War-Devastated Congo & The Country’s First Multi-Party Elections in 45 Years**

07/08/06 <http://www.democracynow.org/article.pl?sid=06/08/07/1436229#transcript>

Women, power, and HIV infection

1. Vocabulary Building

property	財産、資産	cure	治療法
passive	受動的な	depend on	頼る
disease	病気	exchange	交換
virgin	清純な	abuse	暴力
STDs	性病	outcast	追放された人



2. Reading

There is one thing many cultures share: there is always a clear difference between women's and men's roles, who has the power to make decisions, and who controls money or property. In many societies people don't openly talk about sex. Many people think that 'good' women should not know about sex and should be passive in sexual situations. This makes it difficult for women to learn about how to prevent some diseases. It also makes it difficult for them to talk with their partner about using condoms.

In addition, in many societies, many people think that unmarried girls should stay virgins. These girls often do not ask for information about sex because they are afraid people will think they are sexually active. If they don't know about things like sexually transmitted diseases (STDs) they increase their risk of infection. In some cultures, virginity also puts young girls at risk of rape and sexual pressure because some people believe that sex with a virgin can cure a man of infection.

Third, women often depend on men for money. This increases the chances that women will exchange sex for money, gifts, food, or a place to live.

Finally, violence against women is related to women's chances of catching HIV. In some studies, from 10 to over 50 percent of women report being hit by an intimate partner. And one-third to one half of physically abused women also report forced sex.

From other research, we also know there are reasons why women cannot talk with their partner about using a condom or only having one partner in their relationship. Often, women cannot talk about these things because they are afraid of physical violence. They might also be afraid of losing someone they love very much. It is also difficult for them to leave relationships that they think are risky.

In many societies being a social outcast or even being killed are very real possibilities for women who tell others that they have HIV. This is one reason that stops many women from getting tested. Yet, HIV testing is so very important for receiving treatment or for getting drugs to prevent the transmission of HIV from a woman to her child.

Adapted from: Approaches For Empowering Women In The Hiv/Aids Pandemic — A Gender Perspective - Geeta Rao Gupta address
http://www.findarticles.com/p/articles/mi_m2872/is_1_27/ai_71563337

Comprehension Questions

Check whether the following statements are true (T) or false (F).

1. ____ In some cultures, women are not supposed to know or talk about sex.
2. ____ People in some cultures might think a girl is already having sex if she asks for information about sexually transmitted diseases.
3. ____ Sometimes, if a girl or a woman does not have enough money, she might sell her body to get food or a place to sleep.
4. ____ The fear of a relationship ending might be one reason a woman would not ask her partner to use a condom.
5. ____ Many women do not get tested because they do not want to prevent giving HIV to their baby.

Women, power, and HIV infection

3. Song: Don't Throw Your Life Away

Ms. Dynamite, from the album "46664: Part III" ©Warners, 2004

In life we have the good, the bad, and the plain evil
He's of the devil
Won't stop taking all types of people
He roams from home to home late at night, Mr. Promiscuous
Sisters and brothers
Even defenseless _____ on his list
Disguised, he hides his face behind passion

So dangerous it's ridiculous
Whoever, wherever, whenever
Don't think it could _____
Cause even unborns are at risk

CHORUS

Don't throw your life away (make sure you protect it)
Don't throw your life away (when you're giving affection)
Don't throw your life away (now won't you hear my cry)
Don't throw your life away ('cause I don't want to see you die)

I pray you don't _____ what they feed you
It's not just gays and hos and those who're using needles
She could be stunning
That don't mean nothing
Don't watch the face
This killer don't discriminate
He shows no sign when he's _____
Silent assassin
Waiting to hurt them
He makes mourners out of _____
Lovers unaware
Don't know he's there, killing each other

Chorus

We've got to stop being careless
We've got to use our awareness
It could be _____
You don't even know it
So stop being selfish
Don't neglect your sexual health
And make sure you protect _____
And it could be you
You don't even know
You could _____ someone else

Chorus

["People, keep loving yourself. Keep protecting yourself. I love you!"]

Glossary

roams	歩き回る
promiscuous	乱交
disguised	変装している
passion	熱情
ridiculous	ばかばかしい
protect	守る
affection	愛情
hos (slang word for prostitute)	
stunning	とても魅力的
assassin	暗殺者
mourners	会葬者
unaware	気がつかない
be careless	不注意な
selfish	自分本位
protect	守る

4. What's Happening?

For each of the pictures below answer the following questions.



1. What's happening?
2. Who do you think each of these people are?
3. How do each of the people in the picture feel?
4. Why is this happening?
5. What are the power relations between the people?
6. How could this situation have been prevented?



7. What things are common in each of these situations?
8. What are the attitudes/feelings in all these situations toward people with HIV/AIDS?
9. What are the effects on people who experience these situations?

5. Telling Others about Ourselves

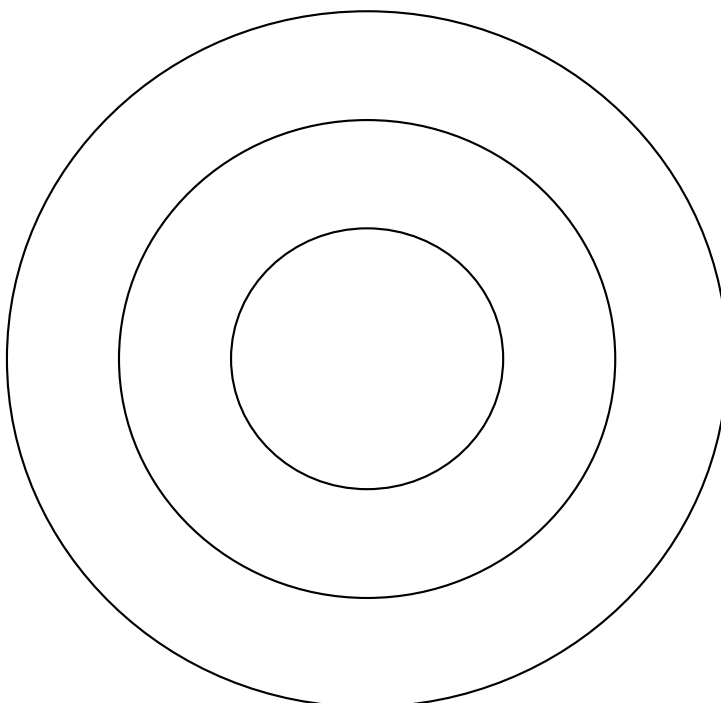
For most people, it is easy to tell others about our everyday lives, our happy times, and even our dreams for the future. It is often difficult to tell others about our problems.

On the diagram below, show the important people in your life—mark them on inner circles. People who you know less well are placed on the outer circles. Become aware of the people who you think are most likely to support you when you have a problem. *You do not have to show this to anyone else.*



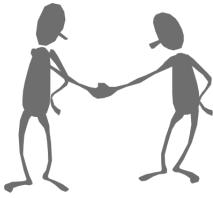
The first person she told was her cousin—her father's sister's daughter. She is a very close and understanding relative and her response was very encouraging. Her cousin thought her so courageous to have tested and remarked how most people do not know their status. At this stage, E is not sure if her cousin ever told others. It really helped E to tell her cousin—it was "one load lifted."

Extract from E's story, Zambia



Activities on this page adapted from "HIV Stigma Toolkit" available from <http://www.changeproject.org/technical/hiv/aids/stigma.html>

6. Putting it Together: Questions for discussion



1. Women around the world have a greater chance of catching HIV than men. Give some reasons why this is true.
2. Do you think it is difficult for women in your country to ask their partners to use condoms? Why/why not?
3. In a couple who are intimate, who do you think is responsible for discussing sexual issues?
4. If one partner refuses (says “no”) to use a condom, what options does the other partner have?
5. What are some reasons why women have lower literacy rates than men in the countries mentioned below?



AIDS RISK INCREASING IN ASIA, SAYS NEW UNAIDS REPORT

Women in Asia are increasingly vulnerable to HIV. Gender inequality mixed with HIV is placing Asian women and girls in double jeopardy. In Asia, 30% of girls are married before the age of 15, and 62% before 18, often with much older husbands.

http://data.unaids.org/Media/Press-Releases03/PR_ICAAP_01July05_en.pdf



World Literacy (2005 est.)

definition: age 15 and over can read and write

total population: 82%

male: 87%

female: 77%

note: over two-thirds of the world's 785 million illiterate adults are found in only eight countries (India, China, Bangladesh, Pakistan, Nigeria, Ethiopia, Indonesia, and Egypt); of all the illiterate adults in the world, two-thirds are women; extremely low literacy rates are concentrated in three regions, South and West Asia, Sub-Saharan Africa, and the Arab states, where around one-third of the men and half of all women are illiterate



Source: <https://www.cia.gov/cia/publications/factbook/fields/2103.html>

QUICK QUIZ

1. “Gender inequality” means _____
2. How many girls in Asia get married before they reach the age of 18? _____
3. Worldwide, how many people were not able to read or write in 2005 (estimated)? _____
4. How many of people who could not read or write were women? _____
5. In South and West Asia, Sub-Saharan Africa, and the Arab states, how many women cannot read? _____

HIV/AIDS: What are they?

1. Vocabulary Building

immune system	免疫	cell	細胞
bacteria	バクテリア	symptoms	症状
patient	患者	stage	時期
pneumonia	肺炎	acquire	感染、~になる
deficiency	不足	develop	進行



2. Reading

What is the immune system? The immune system is the part of your body that helps to keep you healthy. There are a lot of cells in your blood that will kill viruses, bacteria and other things that could make you sick. In a healthy person, there are lots of these cells, called "T" cells. If you don't have enough T-cells, you can get sick easily.

In 1979, doctors in America and Europe started to see many patients who were sick because they had problems with their T-cells. These patients didn't have many T-cells in their bodies. Doctors looked for the reason. They found that these people had a virus in their bodies. They called the virus HIV, which stands for Human (that means it's only in people, not animals or insects) Immunodeficiency (*immuno* means the immune system; *deficiency* means there isn't enough) Virus. In other words, HIV is a virus that causes not enough immune system in people.

When HIV gets into your body, it starts to slowly kills the T-cells of the immune system. At first, there may be no symptoms that signal that you have the virus. Some people might feel like they are catching influenza, but the symptoms go away in a few days. Later, when the body's immune system is very weak, it cannot fight against common viruses. At this stage, when people develop serious diseases such as cancers or pneumonia because they have a weak immune system. Doctors call this stage AIDS, which stands for acquired (you catch it from someone) immune deficiency (not enough immune system) syndrome (a word for a group of diseases).

How long does it take for symptoms of AIDS to develop? Well, it really depends on each person, but on average it takes about ten years for HIV to destroy enough of a person's immune system so that they cannot fight serious diseases. A person who has the HIV virus may not know that they have it because there may be no symptoms for many years. During that time, they could give the virus to someone else through unprotected sexual contact.

If a person has HIV, there might be enough virus in their semen (精液), vaginal fluid (膾分泌液), or blood to infect a partner during sexual contact. If they do not use a condom or other protection, there is a risk that those infected fluids (体液) could pass into the uninfected partner. HIV can pass through membrane (粘膜) in the vagina, mouth or throat, or open sores in the genital areas.

It is important for people who have had unprotected sex to get an HIV test. Right now, there is no vaccine and no cure for HIV or for AIDS, but if someone finds out early that they have the virus, there is very good medicine available that will help them to live longer, healthier lives. Waiting until the virus destroys the immune system makes it difficult for doctors to help keep them well.

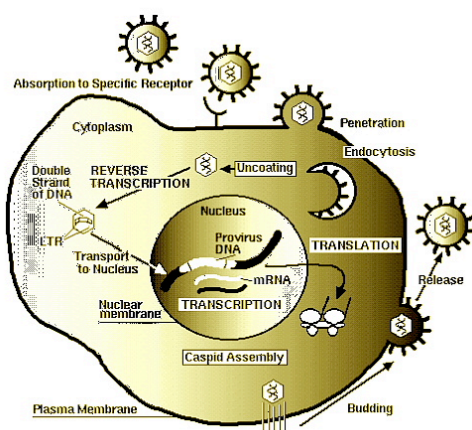


Diagram of HIV from <http://www.rhodes.edu/biology/glindquester/viruses/pagespass/hiv/retrovirus.jpg>

3. VIDEO: “In Our Own Words” 1999. Available from www.family-health.net

In this video, five teenagers tell their stories about living with HIV. All five caught HIV through unprotected sex. They talk about their fears and about their dreams for the future.

Pedro

1. Where does Pedro come from?
2. What was Pedro’s dream for the future?
3. List some of Pedro’s questions:

Antigone

True or False?

1. Antigone just wanted to be happy.
2. She had a very clear plan about her life.
3. She said she was in a lot of pain.
4. To deal with her pain, she ate.
5. When she was drunk, she had unprotected sex.
6. When she was 20, she stopped drinking.

David

Correct these sentences.

1. David understood his sexuality.
2. David was 18 years old.
3. David was feeling good about himself.
4. David is heterosexual.
5. After he graduated, he had a chance to study ballet in Japan.

Veronica

1. How did Veronica catch HIV?
2. After finding out she had HIV, how did it affect her dreams?
3. How did she feel?
4. What view did she share with her family?

Kerry

1. What were Kerry’s dreams?
2. How did Kerry catch HIV?
3. What happened to her hopes, dreams, and expectations?
4. Kerry says,
“I’m never going to have a normal _____.
I’m never going to have _____.
I’m never going to get _____.
I’m never going to grow _____.”

☞ What do you think is the main message of the video?



4. Looking at YOU

What are YOUR dreams for the future? Look at the chart below. Spend some time thinking about what you want in your life. Make notes in each of the areas listed below. (You do NOT have to show this to anyone.)

work	<i>Ten years from now, I want to....</i>
family	<i>Ten years from now, I want to....</i>
friends	<i>Ten years from now, I want to....</i>
living place	<i>Ten years from now, I want to....</i>
hobbies and interests	<i>Ten years from now, I want to....</i>
other	<i>Ten years from now, I want to....</i>

Choose one person in the video. How is that person's life similar to yours? What is your reaction to what they had to say in the video? Write your reaction here OR talk about it with a partner.



5. Putting it Together

What have you learned in this unit?

Review the reading passage. Discuss the following with a partner or in small groups.

1. What is the immune system?
2. What do T-cells do?
3. What was special about many patients that doctors began to see in 1979?
4. Can you catch HIV from mosquitoes?
5. What is the difference between HIV and AIDS?



Questions for discussion

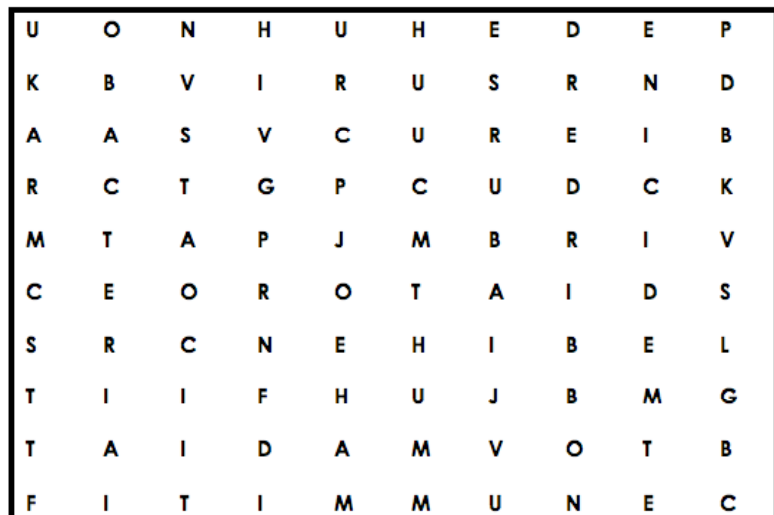
Discuss the following questions with a partner or in small groups.

1. If someone catches HIV and if there are few or no signs (symptoms), how do you know if someone has the virus?
2. Why is it a good idea for people to get tested for HIV?
3. Why is it NOT a good idea to wait for many years to be tested?
4. Who should get tested?
5. Some people might be afraid to have an HIV test. What advice would you give them?
6. What was the most interesting thing you learned in this unit?
7. If you could tell your friends or family something about HIV/AIDS, what would you want them to know?
8. When do you think people should learn about HIV/AIDS? In elementary school/junior high/senior high/university? Give reasons for your opinion.
9. YOUR QUESTION:

HIV / AIDS Word Search

In the box below, can you find these words? They may be written forward, backward, or diagonally.

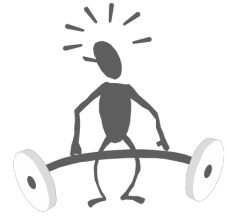
AIDS
bacteria
care
cure
HIV
immune
medicine
pneumonia
protection
red ribbon
support
virus



Testing and Treatment

1. Vocabulary Building

antibody	抗体	Public Health Centers	保険場
donation	献血	result	結果
accurate	正しい	reading	計測
expose	さらす	figure	数
treatment	治療	effective	効果がある



2. Reading

Many people worry about getting an HIV test. They have a lot of questions such as “Where should I go to have the test?” or “How much does it cost?” Other people do not want to give their name because they are worried about their friends or family finding out they have had the test. Here in Japan, the process is really very simple.

Public Health Centers in Japan offer a test called the HIV Antibody Test. Antibodies are proteins that the body makes whenever there is a virus. The antibodies try to search for and destroy the virus in the body. The HIV test looks for antibodies to the HIV virus. If you have HIV antibodies, it means you have the virus.

The HIV test is free at the Public Health Center, and you do not have to give your name. They take a small sample of your blood and give you a number. You come back in one week and they will give you the results of the test.

There is some very important information to understand about the test. If someone has been infected with the virus, it takes a while for the body to make enough antibodies to allow the test to give an accurate reading. It is recommended that the person having an HIV test wait until 12 weeks *after* she or he thinks they may have been exposed to the virus.

One other piece of advice: *never* use blood donation to find out your HIV status. Blood donation centers do not have information about hospitals and support services for someone who might test positive (positive means there are HIV antibodies in the person’s blood).

If someone tests positive, they are introduced to a hospital where doctors and counselors can take good care of them. There are many very effective medicines available today, and more are being developed. Although the medicines are not cheap, the Japanese national health care insurance covers most of the expense.

At the beginning of July 2006, there were 7,838 reported cases of HIV in Japan and 3,842 cases of AIDS*. Researchers say that these figures are only the tip of the iceberg. There are many people in Japan who do not think they could have the virus so they do not get tested. Perhaps they do not know enough about the virus, or perhaps they are afraid to find out whether or not they have been infected. It is important to be tested soon after you think you might have been exposed so that if it turns out you do have the virus, doctors can give you good advice about treatment.

A few notes about treatment

Very effective medicines are available in Japan, and new medicines are being developed. Currently, a drug “cocktail” is often used. It is a combination of three or more drugs. The first one stops HIV from entering cells. The second one stops HIV from changing into RNA. The third stops HIV from making copies of itself.

One problem is that there are often very strong side-effects (副作用) when a person takes these medicines. However, if a patient continues to take the medicine, the disease becomes manageable.

Testing and Treatment

* 1, 438 cases of HIV infection from unheated blood products are not included in these figures.

3. Act Out the Scene - Reality Bites ©2004 Universal Studios



- Vickie: You don't even know I'm sitting here... maybe... Probably dying of A.I.D.S. And I'm totally alone.
- Lelaina: Vickie... Well, uh... you're not alone. Hey. Look, I'm sorry for everything I said... and I'm sorry for being such a bitch... but I have to tell you, you're not alone. You're not, and you're not dying of A.I.D.S.
- Vickie: You don't understand. Every day, all day... it's all that I think about, OK? Every time I sneeze... it's like I'm four sneezes away from the hospice. And it's like it's not even happening to me. It's like I'm watching it on some crappy show... like "Melrose Place" or some shit, right? And I'm the new character. I'm the H.I.V.-A.I.D.S. character... and I live in the building, and I teach everybody that it's OK to be near me, it's OK to talk to me. And then I die... and there's everybody at my funeral... wearing halter tops and chokers or some shit like that.
- Lelaina: Vickie, stop, OK? Just stop. You're freaking out, and you know what? You're gonna have to deal with the results. Whatever they are, we're gonna have to deal with them... just like we've dealt with everything else.
- Vickie: This isn't like everything else.
- Lelaina: I know that, all right? But it's gonna be OK, you know? I know it's gonna be OK. "Melrose Place" is a really good show.

Discuss the Scene

How does Lelaina try to support her friend?

What could she have done differently?

What are some ways to support a friend who is waiting for the results of an HIV test?



4. Looking at YOU

In many areas of our lives, we do not have a great deal of control. For example, we must pay taxes, follow traffic rules when driving, and pay our bills on time. In other areas, we have a lot of control. We have control over the decisions we make.

You have the control in your life. Of course, you can say, “My mother told me to,” but who really controls you? You do. You determine what you do in life.

How much do others influence you? How much are you worried about what others think about you and the things you do? How important is status to you? Everyone needs to feel good about themselves, but how much do we need to depend on the opinions of others?

Take a few minutes to complete this chart. Check ✓ your answers. (You do NOT have to show this to anyone else.)

	Unnecessary (I do NOT want to have / do this)	Not very important	Neutral	Very important	Essential (I HAVE to have / do this)
Listen to the most popular music					
Use common slang/ vocabulary					
Conform my opinions to my friends’ opinions					
Wear the latest fashions					
Have brand goods like bags, shoes, wallets, etc.					
To have a girlfriend/boyfriend so I can be like everyone else					
Watch the most popular TV shows					
Wear the latest make-up styles					
Read trendy magazines					
Check my e-mail regularly and respond quickly					
Follow the latest gossip about stars (タ レント)					

Now try this. Close your eyes and think back to this morning. You were on the train, the bus, or walking to school. Who did you see around you? How many people can you remember? What kind of shoes was each person wearing? What brand of bag did each person have? How many of the people around you did you know? How many of the people on the train/bus, etc. will remember YOU? How many will remember—or care—what YOU were wearing, carrying, listening to?

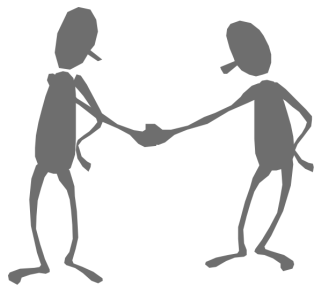
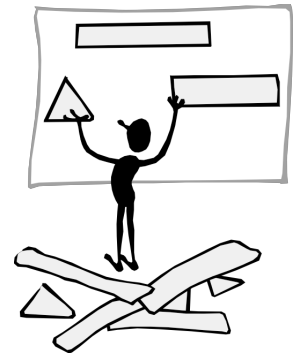
People don’t really look at you or the things you have, but they DO remember how you treated them.

5. Putting it Together

What have you learned in this unit?

Review the reading passage. Discuss the following with a partner or in small groups.

1. Where can someone go to get an HIV test? How much does it cost?
2. Why do you have to wait 3 months from the time you think you were infected until you get a test?
3. Why shouldn't you donate blood to find out if you have HIV?
4. Why do some people avoid getting tested for HIV?
5. Are there good medicines for HIV in Japan?



Questions for discussion

Discuss the following questions with a partner or in small groups.

1. Some people might be afraid to have an HIV test. What are some of their fears?
2. What advice would you give them?
3. What was the most interesting thing you learned in this unit?
4. If you could tell your friends or family something about getting test for HIV, what would you want them to know?
5. Do you think more people should get tested? Why/why not?
6. What is a good way to tell the public about getting tested for HIV?
7. Have you seen or heard information about testing in the mass media?
8. What role does the media play in helping to spread information about HIV and about testing?
9. Do you know any musical groups that have written or sung songs about HIV/AIDS? Tell about them.
10. If you could make a short video to help give information about HIV/AIDS and about getting tested, what kinds of things would you want to include in your video?
11. If you could design a poster to encourage people to get tested, what kinds of things would you want to include in your poster? Where would you put your poster?
12. YOUR QUESTION:



Further discussion

Look at the cartoon on the left. What would you say to the junior high school students? What would you say to the parent? If YOU were a parent, how would you want your children to learn about HIV/AIDS?

STIs, Talking with Your Partner

1. Vocabulary Building

sexually transmitted infections	性交感染	trend	傾向
chlamydia	クラミジア	passive	言いなり
alarming	驚くべき	indicate	示す
pregnancy	妊娠	developed nation	発展途上国
rural	田舎	sore	炎症起こして



2. Reading Risky Business: Youth sex on rise, as are serious infections

By YUMI WIJERS-HASEGAWA

The Japan Times: Wednesday, June 19, 2002

A survey conducted at 7,127 clinics in eight prefectures showed the rate of eight major Sexually Transmitted Infections (STI) increased by 14 percent in women and 21 percent in men between 1998 and 2000. Many cases do not have symptoms at first, such as chlamydial infections and HIV infections.

The number of young people in Japan who have STIs is especially alarming. Some research data showed that 27.3 percent of females aged between 16 and 19 with an unwanted pregnancy had genital (生殖器) chlamydia.

Masako Kihara, an assistant professor with the department of public health at Hiroshima University School of Medicine, did three surveys, one in 1999 on 13,645 national university students, one in 2000 on 301 teenage couples interviewed in Tokyo's Shibuya and Ikebukuro districts, and one in 2001 on 11,781 high school students in rural areas. All of the surveys showed a trend of increasingly careless, "networked" and active sexual behavior among the youth.

In the case of the university students, 74 percent of those who had one sex partner during the past year used condoms, but only 43 percent of those who had five or more partners used them. About 58 percent of the male students said it was up to them to decide whether to use one.

"It is surprising that though more young women are becoming sexually active, there is still a traditional view that women should remain passive and not disagree with men (including about whether to use a condom)," Kihara said. Also, many people do not know that STIs can be transmitted orally, and the use of condoms during oral sex was extremely low, at 6 percent to 7 percent. Gonococcal infection (淋病), genital herpes (ヘルペス), genital chlamydial infection and syphilis (梅毒) are among the STIs that can be transmitted orally.

"More people with fewer partners are catching STIs because a partner was a person with an STI," Kihara said. In addition, many people have many partners. In the study among the rural students, 20 percent of the second year of high school students with sexual experience had more than four partners, and the couples' research in Shibuya and Ikebukuro indicated 33.3 percent of the boys and 34.6 percent of the girls between age 12 and 14 have had sex.

Yoshiaki Kumamoto, the president of the Japanese Association for Sexual Health Medicine, says, "Although the number of reported cases of HIV infection and AIDS is relatively low, Japan is the only developed nation in which cases of AIDS and HIV infection are still on the rise."

When someone has one STI, the chance of catching HIV is higher because HIV can enter the body through sore from as STI. For example, in syphilis or genital herpes, the chances of being infected with HIV rises between 10 to 50 times in men and as much as 50 to 300 times in women. Even STIs like genital chlamydia or gonococcal infection raise the chance by two- to five times in women," Kumamoto said.

Some STIs do not have symptoms. Genital chlamydial infection, for example, has no symptoms in 80 percent of cases in women and 50 percent in men. A survey Kumamoto did in 2000 showed that the rate of chlamydia infection among women 20 to 24 years old was about 1.3 percent. The data showed that 6.9 percent of married pregnant women aged between 20 and 24, and 27.3 percent of single pregnant women between 16 and 19, were infected with chlamydia. At 12 public health centers in Tokyo the rate of teenage girls infected with chlamydia was 49 percent. Kumamoto believes that close to 1 million people in Japan have chlamydia.

The situation is serious because some STIs can cause infertility (不妊), stillbirths (死産), or cervical (子宮頸部がん), penile and mouth cancer through oral sex, the doctor said.

STIs, Talking with Your Partner

3. Song: "Positive" by Spearhead*

Make me, make me sweat
till I'm wet, till I'm dry
but then wipe this tear from my eye
haven't felt this warm in a long time
even out in the bright sunshine
in a lifetime of springtime

I fall into your arms
with my heart pumpin' on
like a bubblin' dub treck
like a garlicy hot tongue and lip smack

I did some contemplation [考えた]
before we got down to this consecration
[セックススする前に]
maybe baby something in your kiss said
it was an impetus [刺激]
for me to re-think this.

If I love you,
then I better get tested
make sure we are protected

I walk through the park
dressed like a question mark
Hark!
I hear my memory bark [吠える]
in the back of my brain,
making me insane [精神異常]
...like cocaine.

(chorus)
But how'm I gonna live my life if I'm
positive? [陽性]
Is it gonna be a negative? [陰性]
How'm I gonna live my life if I'm positive?
Is it gonna be a negative?
but how am I gonna live my life If I'm
positive?

It dawned on me [気がついた],
it seemed to me
this is unusual scenery,
this red light greenery
make me feel kinda dreamery,
thinking how I used to be

Arrive at the clinic
walk through the front door

take a nervous number
then I think some more
about all the time
that I neglected
makin sure that
I was protected.

They took my blood
With an anonymous [匿名の] number
two weeks waitin' wonderin'

I should have done this a long time ago
A lot of excuses why I couldn't go
I know these things and these things I must
know
'Cause it's better to know than to not know!

(chorus)

I go home to kick it [relax]
in my apartment
I try to give myself
a risk assessment [リスクの診断]
the wait is what can really annoy ya
everyday's more paranoia [被害妄想]

I'm reading about how it's transmitted
[どうやって移るか]
some behavior I must admit it [認める]
who I slept with, who they slept with,
who they, who they, who they slept with.

I think about life and immortality [不滅]
what's the first thing I do if I'm H.I.V.
have a cry and tell my mother
get on the phone and call my past lovers
I never thought about infecting another
all the times that I said "Hmm? Don't bother."

Was it really all that magic?
the times I didn't use a prophalactic [condom]

Would my whole life have to change?
or would my whole life remain the same?
sometimes it makes me wanna shout!
all these things too hard to think about
a day to laugh, a day to cry
a day to live and a day to die
'till I find out, I may wonder
but I'm not gonna live my life six feet under
[死んだ]

4. How to talk with your partner

Using a condom correctly every time you have sex will reduce your chance of catching HIV. Remember, though, that condoms are not 100% effective. If you decide to have sex with your boyfriend or girlfriend, you need to talk about using a condom or other barrier.

Here are some ways to bring up the subject:

- “I’m concerned about HIV. What do you think we should do to protect ourselves?”
- I feel embarrassed talking about this and it’s hard for me to even bring up the subject. But I think we need to talk about HIV and how to protect ourselves.”

Love yourself



Protect yourself

One partner says...	The other partner says...
“Just this once. I really like you!”	“No, I don’t want to. I’m just not ready.”
“I’m on the pill.”	“The pill works great for pregnancy, but condoms provide protection against infections.”
(Using a condom) “It will spoil the mood.”	“It will put me in the mood.” (or) “Fear of HIV spoils my mood.”
“You won’t catch anything from me.” (or) “I wouldn’t give you a disease.”	“I know you wouldn’t intentionally, but either of us could have an infection and not know it.”
“I can’t feel that much if we use a condom.”	“Well, you’ll feel even less if we don’t use a condom because we won’t be having sex.”
“I don’t have HIV.”	“It’s possible to have HIV or other STDs without knowing it. Let’s be safe.”
“Condoms aren’t 100% safe, so why use them?”	“The only thing that’s safer is not having sex. Condoms are the next best thing as long as we use them correctly every time.”
“I’m too embarrassed to buy them.” (condoms)	“Let’s buy a big box. Then we won’t have to buy more for a long time.”
“Lesbians don’t need to use protection.”	“It’s not who you are, it’s the fact that we need to reduce the risk of infection by using a barrier every time.”
“I don’t sleep around.”	“If you’ve had unprotected sex even one time, I want to use a condom.”
“I won’t use a condom.”	“Fine. I won’t have sex with you.”

Below are some situations. What could the people say to achieve a favorable outcome? Write answers to the questions below. (You do NOT have to show your answers to anyone.)

Situation #1

A and B have been dating for three months. They both say they are in love. They are at B’s house and have just finished watching a video. Now they’re kissing. A wants B to have sex for the first time. B doesn’t want to / is not ready. What should B say?

Situation #2

A and B have been dating for three months. They both say they are in love. They are at B’s house and have just finished watching a video. They’ve had sex before, using only the Pill for protection. B is willing to continue with the sexual relationship as long as A starts using a condom each time. A doesn’t want to. Now they’re kissing... What should A say or do?

Situation #3

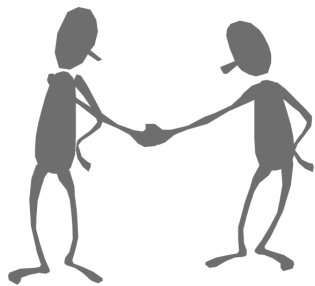
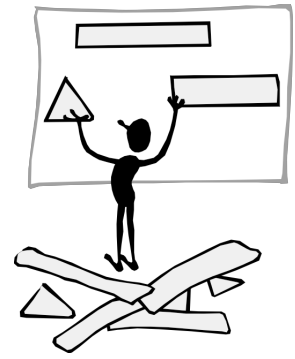
A and B are at a party and have had a lot to drink. Though they only met tonight, they’re really *turned on* (excited) by each other. They go into a room alone to get closer. They both want to have sex, but neither has a condom. A really wants to go further. What do you think B should say or do?

5. Putting it Together

What have you learned in this unit?

Review the reading passage. Mark the following sentences True or False.

1. All STIs have symptoms at first.
2. Researchers worry about the high number of young people with STIs.
3. In Kihara's study, at least 25% of the university students did not use condoms.
4. A person can catch many STIs from oral sex.
5. If you have one STI, it's harder to catch HIV.



Questions for discussion

Discuss the following questions with a partner or in small groups.

1. Michiko Hayashi, a 50-year-old high school teacher in Koto Ward, Tokyo, believes that young people have problems with sexual behavior because they cannot build a relationship based on self-esteem. "From an early age, the only thing parents want from their children is to get good grades. If a lonely girl meets a nice man who gives her attention, and who doesn't want to use a condom, she does not refuse," Hayashi said. "Parents should think more about the relationship they have with their children."
2. Kihara from Hiroshima University blames media. "All of Japan is exposed to TV and magazines that show sexual behavior by youth, but only about 10 percent of teachers and parents think it is all right for high school students to have sex. The gap between the adults and youth is very big," she said.
3. Schools don't want students to have too much sexual education because are afraid it will make more youth sexually active. 70 percent of schools don't teach a practical approach to safe sex, such as how to use a condom.
4. Prostitution (売春) is an important focus when discussing STIs in Japan. "The scale of prostitution in Japan is the largest among developed nations. Some 14 percent of Japanese men aged between 18 and 48 had an encounter with a prostitute during the previous year, while the figures in the U.S. and Europe were only between 1 percent and 2 percent," she said. R shows the rate was highest with younger men -- 19 percent of men between age 25 and 34 and 16 percent for men between 18 and 24.
5. "Enko," the abbreviation of "enjokosai," or teenage girls' "compensated dating," is another example of risky behavior recently seen more frequently among girls.
6. YOUR QUESTION:

Sex Trafficking and HIV Infection

1. Vocabulary Building

sexually transmitted diseases	性病		
forced	強制された	tricked	騙された
against their will	(人の)意志に反して	prevention	予防
victims	犠牲者	commercial	営業用
injure	傷つける、痛める	statistics	統計



2. Reading

Adapted and abridged from <http://www.phrusa.org/campaigns/aids/news062403.html>

Women who are most at risk of catching HIV are those who are trafficked – forced, or tricked into commercial sex. For several reasons, sex trafficking almost always leads to death for these women. First, victims cannot tell their partners to use condoms because they have no choice and no power. They often must participate in dangerous sexual activity that can give them sexually transmitted diseases (STDs). Second, trafficking victims are forced to have sex with many partners. And third, violence is common in commercial sex, particularly when women or children are forced to have sex when they do not want to.

Young girls' bodies are not yet fully grown and it is easy to injure them. This makes it easier for them to catch other STDs. Having one STD makes it up to 10 times easier to catch HIV. STDs are more common among women than men, and women often catch STDs at a younger age than men.

Trafficking is common many countries around the world, for example in Thailand and India. At the height of Thailand's AIDS epidemic, more than 80% of HIV/AIDS cases happened in women in the sex industry and their customers. It is difficult to get accurate statistics on how many women and girls work in the sex industry, but some studies show that there are 2.3 million women and girls held in prostitution against their will in India alone.

A study from Japan's National AIDS Surveillance Committee shows that female trafficking victims and other foreign women are at risk of catching HIV/AIDS in Japan: from 1985 through 1997, non-Japanese females total 34% of all HIV cases and 8% of all AIDS cases. [Today they total less than 16% of all HIV cases in Japan and 284 of 3,842 AIDS cases.¹]

Finally, it is also more difficult for trafficked women to receive medical testing, treatment, counseling, prevention services, or other health care. Often they cannot speak or understand the language in a foreign land, and they may not be able to get health care. Although Japanese citizens are able to receive government services for HIV/AIDS, trafficked foreign women and girls cannot receive such services.

Aklina's story*

Aklina Khatoon is a small, pretty 15-year-old girl from a village outside Calcutta. In a soft voice, she tells how a year ago a woman drugged her, kidnapped (誘拐) her and sold her to a madam (売春宿のおかみ) in Mumbai.

"I was then told that I would have to become a prostitute and I said that there was no way I would do that," she says. "But I was beaten so much, I was slapped, my whole body was covered in bruises, then they used hot iron rods to hit me - eventually I had to agree to it. My day began at six in the morning and I had about 12 to 14 customers on a daily basis and my day ended at 3am."

Aklina could not escape because she was guarded by the sister of the woman who sold her. Luckily, one day a customer let her call her parents from his phone. Finally she was rescued, but her terrible experience had not ended - there was the possibility of AIDS infection. Fortunately, she later tested negative.

According to one estimate, 70% of prostitutes in Mumbai (Bombay) are infected with the virus.



Aklina (left) with one of the women who helped her escape prostitution

¹ Ministry of Health, Labor, and Welfare <http://api-net.jfap.or.jp/mhw/survey/0608/coment.pdf>

* Aklina's story abridged and adapted from http://news.bbc.co.uk/2/hi/south_asia/4055143.stm

3. Song: That's What Friends Are For

(Carole Bayer Sager, Burt Bacharach) ©1989 Arista Records

sung by Dionne Warwick, Elton John, Gladys Knight and Stevie Wonder

Listen to the song and fill in the blanks. When you have finished, compare your answers with your partners'. Then answer the questions below.

THAT'S WHAT FRIENDS ARE FOR

And I never thought I'd _____ this way
And as far as I'm concerned I'm glad I got the _____
to say

That I do _____ I love you
And if I _____ ever go away
Well then close your eyes and try
To feel the way we do _____
And then if you can remember

Keep smiling, keep shining
Knowing you can always _____, for sure
That's what friends are for
For good times and bad times
I'll be _____ forever more
That's what friends are for

Well, you came and opened me
And now there's so much _____ I see
And so, by the way, I thank you
Oh, and then, for the times when we're _____
Well, then close your eyes and _____
The _____ are coming from my heart
And then if you can remember...

UNITED STATES:

"Dionne Warwick Receives US Award for AIDS Campaigning"
Agence France Presse (01.27.04)

On Tuesday, singer Dionne Warwick received the American Citizen Honor Award for her efforts in raising funds for AIDS research. US Ambassador to Singapore Frank Lavin presented the award to Warwick in recognition of her 20-year involvement in HIV/AIDS. "We have to make people aware, not just through writing but also verbally and through demonstrations," said Warwick, who was in Singapore for a concert on Thursday. At a press conference, Warwick likened her involvement in AIDS to a train journey. "I was on the train from the beginning and until the disease is stemmed, I will not get off," she said. Warwick teamed with numerous other artists for the 1985 fund-raising recording "That's What Friends Are For" and a 1990 AIDS benefit concert at New York's Radio City Music Hall.

DISCUSSION QUESTIONS

- This song was originally produced as a fund-raiser for an AIDS project (see article above right). Do you think the song is only for people with AIDS? Why or why not?
- Which of these words would you associate with this song? Circle them and say why. Why did you not circle some of these words?

hope	fear	support	friendship	lovers
difficulty	sisters	vacations	medicine	family
death	strength	danger	adolescent	future
- What are some ways that you can show people you care about them when they're going through tough times? Talk about this with a partner or in small groups.
- What are the qualities of a "good friend"?
- What do you think people with HIV/AIDS or other stigmatized (烙印を押された) illnesses need most?
- How is this different or similar to what people with other illnesses need?



4. Looking at YOU

Many times we are not aware of how much support we have from relatives, friends, teachers, or coworkers.

What are your sources of support? Think of all the areas of your life where you have support from the people around you. List them below. (You do NOT have to show this to anyone else.)

If I have a problem at home, I can always talk to _____.

If I have a problem at school, I can always talk to _____.

If I have a problem at work, I can always talk to _____.

If I have a problem with a close friend, I can always talk to _____.

If I have a problem in a romantic relationship, I can always talk to _____.

What kind of support?

When you have a problem, what kinds of things do you want someone to do for you?

	Yes	No
Tell me what I should do		
Change the subject / talk about something else		
Listen to me calmly		
Offer logical solutions		
Suggest a variety of choices that might solve my problem		
Not judge me		
Solve my problem for me		
Let me solve my problem in my own way		
Other:		

How do you support others?

If one of my family members came to me with a problem, I would support them by _____

_____.

If one of my classmates came to me with a problem, I would support them by _____

_____.

If one of my coworkers came to me with a problem, I would support them by _____

_____.

If one of my best friends came to me with a problem, I would support them by _____

_____.

If my girlfriend/boyfriend came to me with a problem, I would support them by _____

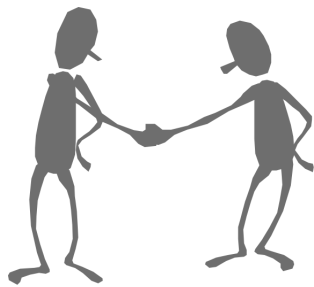
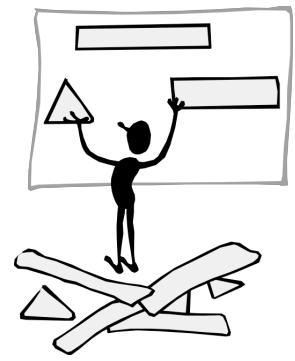
_____.

5. Putting it Together

What have you learned in this unit?

Review the reading passage. Discuss the following with a partner or in small groups.

1. Why do women or children who are trafficked have a higher risk of catching STDs or HIV?
2. Why are young girls especially at risk of catching STDs?
3. How many women have been forced to work in the sex industry just in India?
4. Why is it difficult for trafficked women in Japan to get help?
5. Why did Aklina agree to work in the sex industry?



Questions for discussion

Discuss the following questions with a partner or in small groups.

1. What are some things that can be done to help women and children who are trafficked?
2. What can countries do?
3. What can the police do?
4. What role does the media play in helping to end sex trafficking?
5. If you heard someone say that anyone who has HIV deserves what they get, what would you tell them about trafficking?
6. If you could make a short video to help stop sex trafficking, what kinds of things would you want to include in your video?
7. If you could design a poster to help stop sex trafficking, what kinds of things would you want to include in your poster? Where would you put your poster?
8. YOUR QUESTION:

EXTRA READING

According to a 2006 U.S. government report*, natural disasters increased the chances that children were forced to work in psychologically, physically, or sexually dangerous conditions. The earthquake and tsunami in Indonesia in December 2005 and the major earthquake in Pakistan in October 2005 created thousands of children who were separated from their families or who had become orphans. These children were at risk of being trafficked or forced to work rather than stay in school.

Millions of children around the world continued to engage in exploitative child labor in 2005. Children were involved in dangerous and illegal activities ranging from hazardous agriculture, mining and fireworks production, to prostitution, deep-sea diving or drug trafficking.

Children who worked in 2005 did so for a variety of reasons. Many worked in order to survive and earn income for themselves and their families. While some children performed light work for their parents in shops or on family farms, others worked under dangerous or abusive conditions, because they were discouraged or not allowed to go to school, did not have the money to do so, or could not find education programs they could attend. In 2005, new economic, social, environmental and political situations forced children to work. These included natural disasters, the death of a parent from HIV/AIDS, or armed conflict. These factors not only influenced whether children worked, and how often they worked, but what type of labor they did.

Poverty, Education, Orphans, and AIDS

1. Vocabulary Building

poverty	貧困	affected by	影響を受けた
interest	利息	widespread	広げた
un protected	コンドームなし	disease	病気
orphan	孤児	crisis	難局
region	地域	prediction	予言



2. Reading

Poverty is one of the leading causes for the spread of HIV/AIDS for several reasons. First, poorer people around the world may not have access to good health care. Even in the U.S., estimates show about 40 million people do not have health insurance. It is very difficult for low-income families to pay for medicines to fight diseases. This is also true for some *countries*.

Lower-income countries often have to pay back large loans plus interest on the loans to the World Bank or other lending agencies. For this reason, such countries might not have the money to spend on medical care for the people. They might not have enough money to spend on education either. If people grow up unable to read or write, it reduces their chances of finding employment that could bring them out of their poverty. They often have to accept dangerous work in factories. Some are even tricked or sold into sex work.

Also, people with very little income may have to travel long distances away from their homes to find work. They might become victims of sexual assault, or they might choose to have unprotected sex with local sex workers who might be infected themselves. In many cases poor people choose dangerous work because they are trying to find food for themselves or their families. If they do not have enough nutrition, it will also be easier for them to catch HIV during any unsafe sex because their immune systems are already weak.

Another growing problem of the AIDS epidemic is that of orphans. So far, about 15 million children have lost their parents to AIDS. Around 80% of these orphans live in sub-Saharan Africa, the region worst affected by the HIV/AIDS epidemic, where almost 26.6 million people have the disease. AIDS researchers say one of the main reasons the disease is so widespread is because unprotected sex is common.

In many countries, the children are taken in by grandparents or aunts and uncles. But if those adults are very poor, sometimes they cannot take care of the children, and many children are forced to live on the street.

According to a UNICEF report, in 1990, there were fewer than one million orphans in Africa under the age of 15. By the end of 2001 there were more than 11 million. It said that by 2010, about 20 million African children may lose one or both parents to the disease. In worst-hit countries like Botswana, Lesotho and Swaziland, where more than 30 percent of the people have HIV, as well as in Zimbabwe, more than 20 percent of the children will become orphans by 2010, almost all of them because their parents will have died of AIDS.

However, the orphan crisis doesn't only happen in sub-Saharan Africa. At the end of 2001, there were about 1.8 million orphans living in South and South-East Asia, 85,000 in East Asia and the Pacific, 330,000 in Latin America, 250,000 in the Caribbean, and 65,000 in North Africa and the Middle East.

The total in Asia will probably double by 2010 to 4.3million. Some reports warn the total in Asia could be even larger because of the number of HIV cases is growing in countries with large populations, such as China, India.

The number of orphans will also probably increase in Argentina, Brazil, Colombia, Guatemala and Mexico. In Latin American and the Caribbean, there were 578,000 AIDS orphans last year, 200,000 of them in Haiti alone. The prediction for 2010 is for the total to reach 898,000.

Even if action is taken now, the number of orphans will continue to rise for many years.



5. Looking at YOU

<http://home.att.net/~clnetwork/co-op/misurvey.pdf>

How Many Ways Are You Smart?

Directions:

Fold the paper vertically on the dark line so that the columns with the eight "multiple intelligences" are hidden. Read each statement below. Place a checkmark next to each item that is true about you. Then unfold the paper and circle the X in each row that you checked. Write the total number in each column at the bottom of the paper. How many ways are you smart?

Which of the following are true about you?

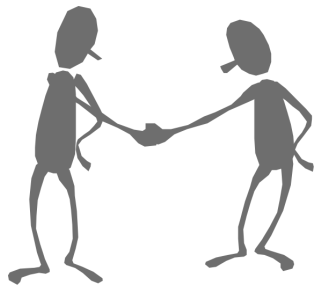
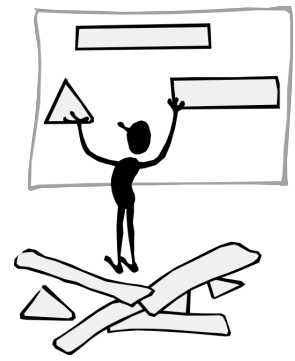
	Nature Smart	Number/Logic Smart	Word Smart	Music Smart	Picture Smart	Body Smart	People Smart	Self Smart
I enjoy singing and I sing fairly well.				X				
I enjoy crossword puzzles and word games.			X					
I'm good at solving jigsaw puzzles.					X			
I can read maps easily.					X			
I learn best when I can talk over a new idea.							X	
Picture, line, and bar graphs are easy to understand.					X			
I like to listen to music in my free time.				X				
I get along well with different types of people.							X	
I like writing about my thoughts and feelings.								X
Protecting the environment is very important to me.	X							
I enjoy caring for pets and other animals.	X							
I like drama and acting things out.						X		
I'm good at writing stories.			X					
I can understand difficult math ideas easily.		X						
I play a musical instrument (or would like to).				X				
People tell me I'm good at sports or dancing.						X		
I'm good at figuring out patterns.		X						
My best way to learn is by doing hands-on activities.						X		
I like spending time by myself.								X
I find that I'm often helping other people.							X	
I'm naturally good at taking care of plants.	X							
I enjoy solving problems and "brainteasers."		X						
Having quiet time to think over ideas is important to								X
I enjoy reading for pleasure.			X					
Totals								

6. Putting it Together

What have you learned in this unit?

Review the reading passage. Discuss the following with a partner or in small groups.

1. How is poverty related to the AIDS epidemic?
2. Why is it hard for low-income countries to pay for good education for their citizens?
3. Why do people sometimes accept difficult or dangerous work?
4. What might happen to children who lose their parents to AIDS?
5. In Asia, are the numbers of orphans going up or down? Why?



Questions for discussion

Discuss the following questions with a partner or in small groups.

1. What information in this unit impressed you the most?
2. If you could tell your family or friends one thing about what you have learned about poverty or orphans, what would you tell them?
3. What are some ways to help children who become orphans?
4. When severely-hit countries lose teachers as well, who will teach the children?
5. In many countries, farmers, truck drivers, and other people who are vital to the well-being of the nation die of AIDS. How can countries feed the population? Where will the people go to get food? What are the consequences of food shortages?
6. What organizations are there that are working to end poverty?
7. How does the Japanese government contribute to ending poverty around the world?
8. What role does the media play in helping to educate people about poverty and the effects of poverty on education, for example?
9. If you heard someone say that anyone who has HIV deserves what they get, what would you tell them about poverty?
10. If you could make a short video to tell people about the effects of poverty on people's lives, what kinds of things would you want to include in your video?
11. If you could design a poster to help end poverty, what kinds of things would you want to include in your poster? Where would you put your poster?
12. YOUR QUESTION:



1. Vocabulary Building

epidemic	伝染病	contraceptive	避妊薬
reluctant	乗り気でない	abortion	中絶
budget	予算	abstain	避ける
vary	異なっている	afford to	余裕がある
controversial	論争の	politician	政治家



2. Reading

The AIDS epidemic continues into its second decade. It spreads best under certain conditions: poverty, low education, lower status of women in society, wars and other conflicts, and cultural taboos regarding honest discussion about sex. Governments are often reluctant to take quick action on any of these areas, especially when it relates to sex. Although many elected officials are concerned about the health of their citizens, they are also concerned about keeping their supporters and about being re-elected.

There is also a wide range of opinions within governments about how to face the AIDS epidemic. Each year, a government has a limited budget to use. Out of that budget, the government must pay for things like defense, health and education programs, new roads, water or electricity systems. When a disaster happens, emergency money must be spent to help injured people and rebuild what has been damaged. In some cases, there is not enough money to spend a lot on AIDS treatment or prevention.

Another problem that appears when officials are trying to decide how to spend their budgets is pressure they feel from some powerful groups. Some groups may have business interest, such as the pharmaceutical companies that make millions of dollars from medicines. Also, groups may look at HIV/AIDS from a moral or religious standpoint. The viewpoints of these all these groups are usually very strong and can vary widely. It can cause people to take sides on the issue.

For example, one side might say that any issue or problem that is related to sex should be decided upon by the family, not in schools. This makes it difficult for schools to teach children or young adults about HIV/AIDS and how they can avoid catching it. Some people feel that, because HIV/AIDS is spread by sexual contact, young people should be taught that it is morally wrong to have sex outside of marriage, or that sex education may cause children to want to experiment with sex. Other people think that young people should know the basic facts so they can make wise decisions for themselves, not just because a parent tells them to.

The use of condoms is also a very controversial topic. Some people feel that the use of any kind of contraceptive is against their religious beliefs or social practices. Some people think abortion is a bad thing and that using a condom is similar to abortion. Other people think that using a condom is an important way to protect themselves from catching HIV. These people think that everyone should be able to get condoms if they choose to.

So, what does all of this have to do with politics? Well, let's go back to the budget. If there is a limited amount of money, leaders have to decide how to use it. Should they use it to make sure condoms are available for everyone, even if someone can't afford to buy them? Or should the money be spent on education? If the money is spent on education, should children *only* be taught to abstain from sex until they are married? Or should they also be taught about prevention *if* they decide to have sex? How should they spend the money on treatment? Should *all* people with HIV/AIDS receive the same treatment? In some societies, gays and lesbians are considered outcasts, and many people think they do not deserve the same access to medicines as non-gay people. Also, what if there isn't enough money for medicines for everyone who needs them? How should decisions like these be made?

These are just a few of the many problems that politicians have to face.

3. Song: The Last Song

Music by Elton John, lyrics by Bernie Taupin
From the album The One© 1992 Big Pig Music Limited

Yesterday you came to lift me up
As light as straw and brittle as a bird
Today I weigh less than a shadow on the wall
Just one more whisper of a voice unheard

Tomorrow leave the windows open
As fear grows please hold me in your arms
Won't you help me if you can to shake this anger
I need your gentle hands to keep me calm

`Cause I never thought I'd lose
I only thought I'd win
I never dreamed I'd feel
This fire beneath my skin
I can't believe you love me
I never thought you'd come
I guess I misjudged love
Between a father and his son

Things we never said come together
The hidden truth no longer haunting me
Tonight we touched on the things that were never spoken
That kind of understanding sets me free

brittle もろい

whisper 囁く

shake 解放

beneath (under)

haunting とりつかれる
touched on 話した

Questions for Discussion

1. Who is the singer singing to?
2. Why does the singer say, "Today I weigh less than a shadow on the wall"?
3. Why do you think the singer is angry?
4. How did the singer misjudge his father? (there are no right or wrong answers)
5. What kinds of things do you think they talked about?
6. What do you think "the hidden truth" could be in this song?
7. Which lines of this song impressed you most?
8. What memories do you have of your parents when you were a small child?
9. What kinds of things do you talk to your parents about now that you are an adult?
10. Are there things you don't talk about?
11. Are there thing you wish you could talk about with them?
12. YOUR QUESTION:





4. Looking at YOU

Think back on the HIV/AIDS education you had in school. Do you think it was enough? Write some thoughts here:

What do you think about the way the Japanese government budgets its money? Check your answers below: (there is no right or wrong answer!)

	Not enough	Just right	Too much	Not sure
Education				
Agriculture				
Health				
Transportation				
Defense				
Pension fund / Social Security				
Environmental Concerns				

If you wrote a letter to the Ministry of Education, would you praise it for its efforts to educate young people in Japan about HIV/AIDS or would you give your suggestions on how it can be improved? Below, write a short letter. Be sure to include information on your own AIDS education and your thoughts about how effective it was.

Ministry of Education
Marunouchi 2-5-1
Chiyoda-ku
Tokyo 100-8959

(date)

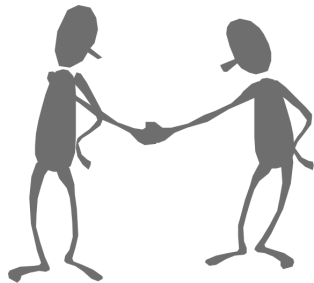
Politics and HIV/AIDS

5. Putting it Together

What have you learned in this unit?

Review the reading passage. Which of the following can you infer are True or False according to the passage?

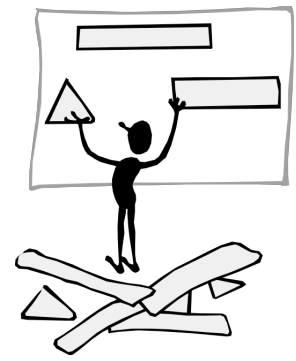
1. There are many reasons why AIDS has spread around the world.
2. Government representatives are always eager to work on the issue of AIDS.
3. Government leaders want to be popular.
4. Some companies can put pressure on governments to make laws in their favor.
5. Most people agree on how to teach children about AIDS.



Questions for discussion

Discuss the following questions with a partner or in small groups.

1. What are some problems that face governments when they try to budget money?
2. Imagine you were in charge of the budget. Which of these things would you give more money to? Why? the environment, defense, health care, education, new roads, water or electricity systems, the pension system, transportation, agriculture
3. If there is a limited amount of AIDS medicines available in a country, how should they be distributed?
4. If there is a limited amount of money for food distribution in a country, how should it be distributed?
5. What kinds of government programs are there in Japan to help people with HIV/AIDS?
6. YOUR QUESTION:



6. Extra Reading: How politics play out

U.S. president Bush has ordered \$15 billion to be spent over three years on AIDS programs in lower-income countries. However, there are restrictions on how that money can be used. 20 percent of the money can be spent on preventing HIV/AIDS, but a third of the money must be spent to emphasize abstinence until marriage and faithfulness to one partner. The rest goes to condoms and to efforts to reduce mother-to-child transmission and intravenous transmission. Other limitations include:

- No funding for any organizations that include family planning education such as how to use condoms or other forms of birth control. Acceptable education is “abstinence until marriage”
- US Trade Representative has threatened poor countries with trade sanctions for illegal use of intellectual property (i.e. patents for AIDS medicines)
- May 23, 2003: Bush signs an AIDS bill that suggests the U.S. will withhold giving AIDS medications to African nations if they refuse to accept genetically engineered food aid

Question for Debate

The current limitations on how the \$15 billion should be spent are acceptable. [Keep in mind that different cultures have different needs and circumstances. Remember that poverty forces people to take work that would not otherwise accept in order to feed their families. Much funding might not reach these people if strict limitations were put on how the money was spent.]

Quick Facts: In 2003, the U.S. spent \$365 billion on defense.

Source: Federation of American Scientists, <http://www.fas.org/asmp/profiles/aid/fy2005/FY05%20Presidential%20Budget%20-%20Summary%20Tables.htm>

In 2006 the budget estimate was \$510.3 billion

Source: Los Alamos Group, <http://www.lasg.org/USMilitarySpending.pdf#search=%222006%20budget%20estimate%20U.S.%20defense%22>