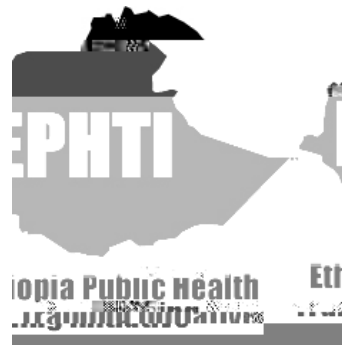


Improving Academic English Skills through HIV/AIDS Awareness

Student's Guide

For the Ethiopian Health Center Team



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Haramaya University

In collaboration with the Ethiopia Public Health Training Initiative, The Carter Center,
the Ethiopia Ministry of Health, and the Ethiopia Ministry of Education

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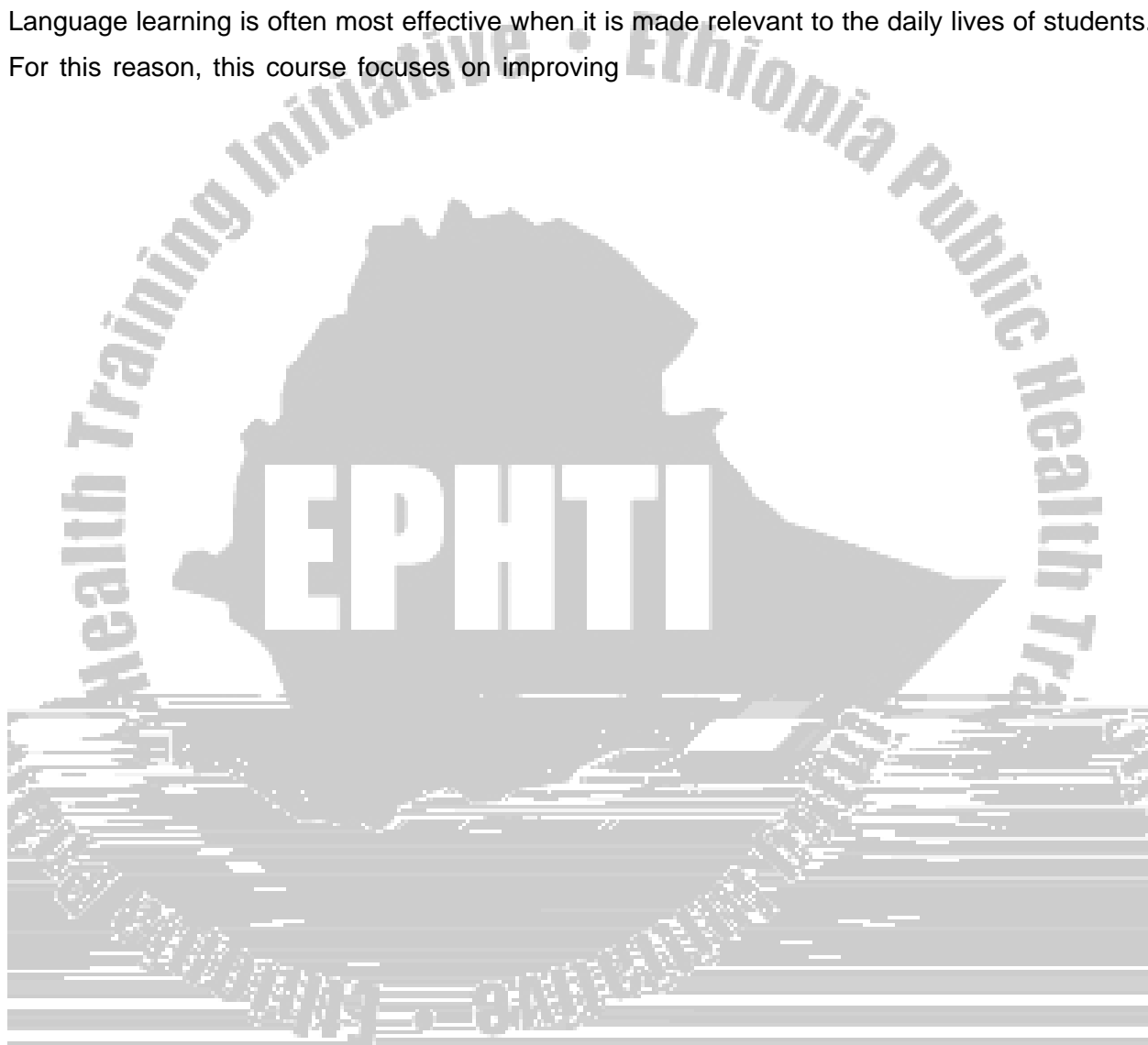


INTRODUCTION

Welcome to *Improve your Academic English Skills through HIV/AIDS Awareness*.

This course is designed for students who have completed the preparatory courses and who wish to further enrich their English language skills.

Language learning is often most effective when it is made relevant to the daily lives of students. For this reason, this course focuses on improving

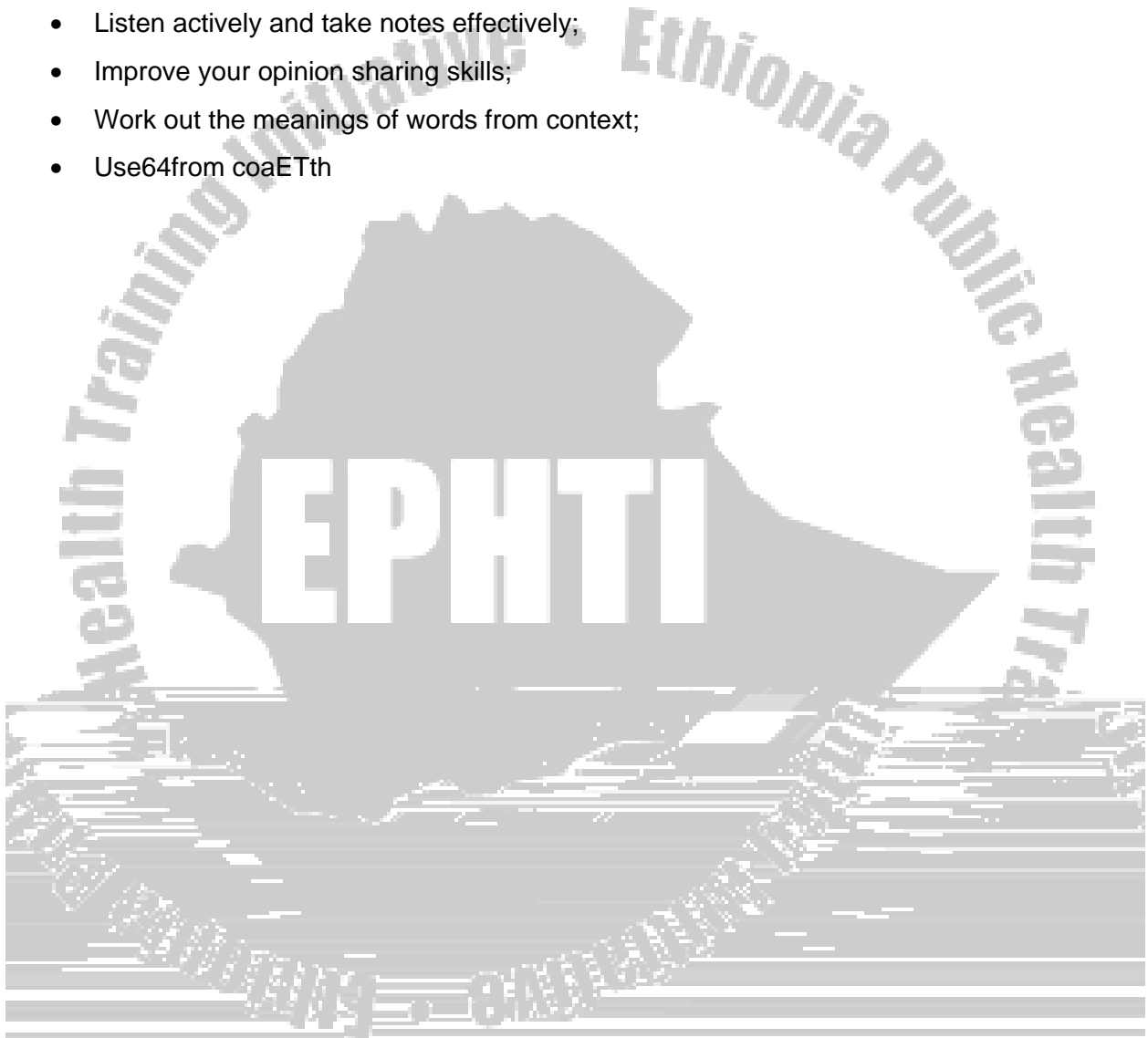


MODULE ONE

ESSENTIAL HIV/AIDS ISSUES

The objectives of this module are to help you:

- Improve your reading comprehension skills;
- Listen actively and take notes effectively;
- Improve your opinion sharing skills;
- Work out the meanings of words from context;
- Use64from coaETth



Section 3: Vocabulary

Section 4: Grammar

Section 5: Writing

Section 6: Reflection



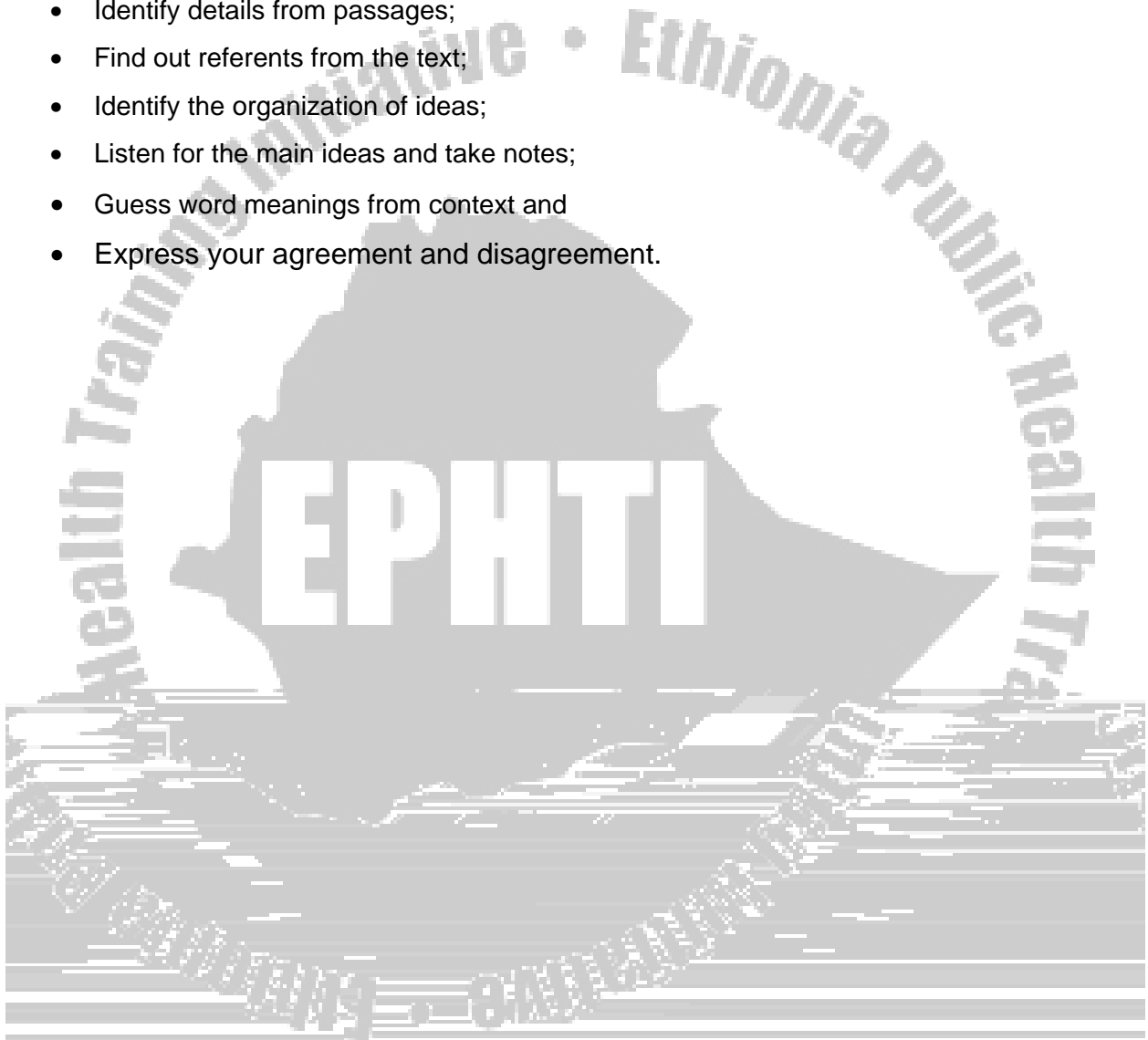
UNIT ONE

HIV/AIDS: HISTORY AND PREVALENCE

Objectives

At the end of this unit, you will be able to:

- Identify main ideas from a reading text;
- Identify details from passages;
- Find out referents from the text;
- Identify the organization of ideas;
- Listen for the main ideas and take notes;
- Guess word meanings from context and
- Express your agreement and disagreement.



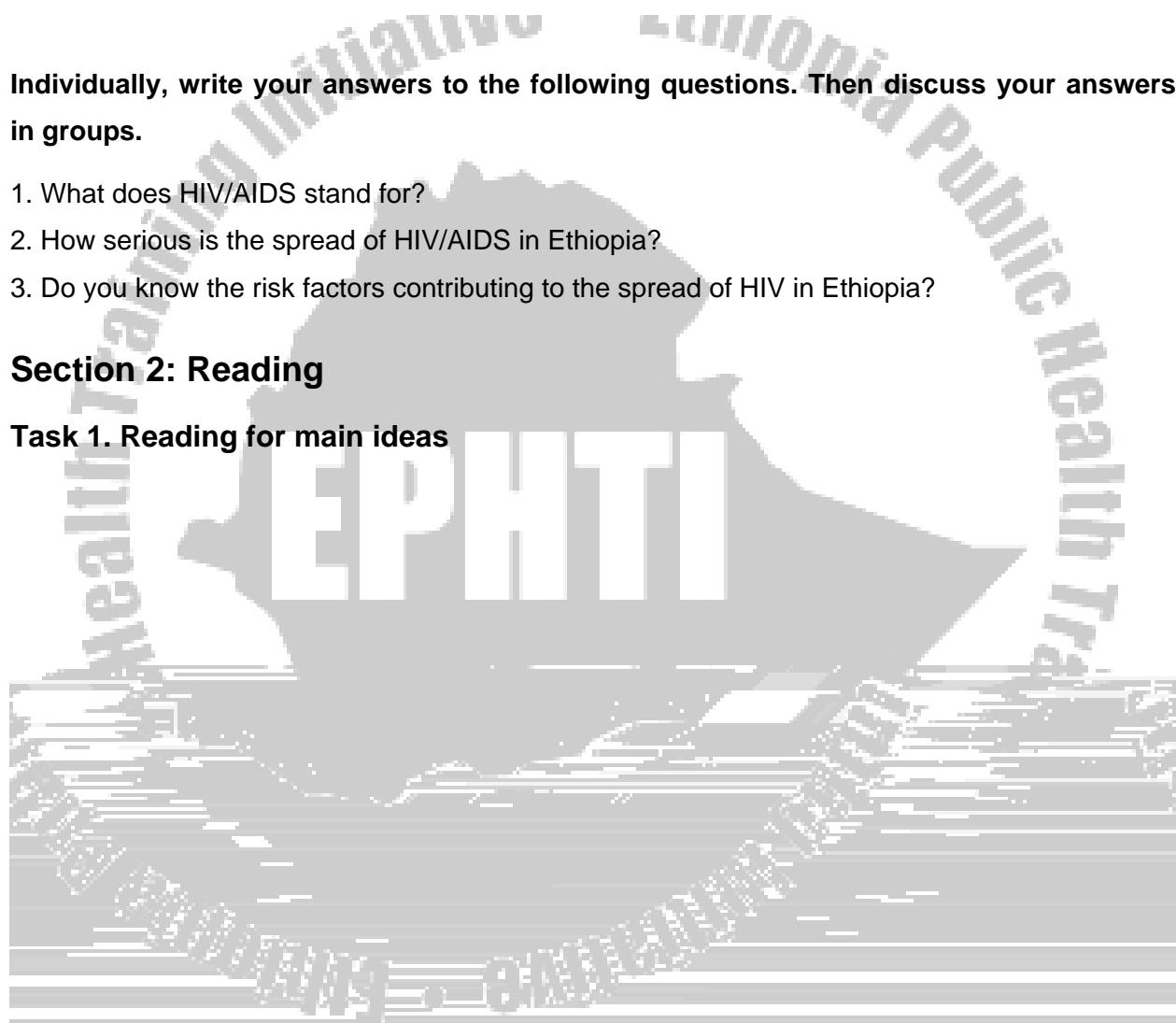
Section 1: Brainstorming

Individually, write your answers to the following questions. Then discuss your answers in groups.

1. What does HIV/AIDS stand for?
2. How serious is the spread of HIV/AIDS in Ethiopia?
3. Do you know the risk factors contributing to the spread of HIV in Ethiopia?

Section 2: Reading

Task 1. Reading for main ideas



Skim the following text and answer the questions that follow.

1. Human immune deficiency virus, HIV is a virus that attacks the body immune system. It is the virus that causes AIDS (acquired immune deficiency syndrome). There are two types of HIV: HIV-1 and HIV-2. HIV-1 has 8 subtypes: A, B, C, D, E, F, G, and H. Sub type “C” is the

dominant type of HIV present in Ethiopia, South Africa and India. It accounts for over half the infections in the world.

2. AIDS is a disease that destroys the body's immune system, leaving a person susceptible to life threatening illnesses. AIDS is the result of a long process that begins with infection.
3. AIDS was first recognized in the United States in the summer of 1981, when the U.S. Centers for Disease Control and Prevention (CDC) reported the unexplained occurrence of *Pneumocystis carinii* pneumonia in five previously healthy homosexual men in Los Angeles and of Kaposi's sarcoma (KS) in 26 previously healthy homosexual men in New York and Los Angeles. Within months, the disease was seen in male and female injection drug users (IDUs) and soon thereafter in recipients of blood transfusions and in hemophiliacs. As the epidemiologic pattern of the disease unfolded, it became clear that a microbe transmissible by sexual (homosexual and heterosexual) contact and blood or blood products was the most likely etiologic agent of the epidemic.
4. In 1983, HIV was isolated from a patient with lymphadenopathy, and by 1984 it was demonstrated clearly to be the causative agent of AIDS. In 1985, a sensitive enzyme-linked immunosorbent assay (ELISA) was developed, which led to an application of the scope of HIV infection among cohorts of individuals in the United States who admitted to practicing high-risk behavior, as well as among selected populations that had been screened, such as blood donors, military recruits and active duty military personnel, Jop Corps applicants, and patients in selected sentinel hospitals. In addition, sero-prevalence studies revealed the enormity of the global pandemic, particularly in developing countries.
5. The staggering worldwide spread of HIV pandemic has been matched by explosion of information in the areas of HIV virology, the pathogenesis (both immunologic and virologic) and treatment of the disease, treatment and prophylaxis of the opportunistic diseases associated with HIV infection, and vaccine development. The information flow related to HIV disease is enormous, and it has become almost impossible for the health care generalist to stay abreast of the available literature.
6. In Ethiopia, it is widely believed that the HIV epidemic began 18 years ago. The first evidence of HIV infection in Ethiopia was discovered in serological samples collected in 1984, followed by the first reported cases of AIDS in 1986.
- 7 The national response to the epidemic was prompt and began with the establishment of a task force on HIV/AIDS in 1985. In 1987, the Department of AIDS Control was established in the Ministry of Health and a national program to prevent and control HIV/AIDS was launched.

These activities were followed by a number of sero-survey across the country, to map the extent of the problem. Soon after these initial activities, major social and political changes occurred, including: the devolution of political power to the regional states, the creation of a federal system of government, economic liberalization, and the growth of the private and non-governmental sectors. These changes offered the regional states, non-governmentalex5 -ivT*.0009



Task 3. Reading for reference

Based on the reading passage, indicate what in the text the following word(s) refer(s) back or forward to.

1. it in *it accounts* (Paragraph 1)
2. the disease (paragraph 3)
3. who (Paragraph 4)
4. which (Paragraph 4)
5. these changes (Paragraph 7)
6. these activities (Paragraph 7)
7. the epidemic (Paragraph 8)

Section 3: Vocabulary

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Section 4: Listening

Task 1. Listening for the main ideas

TIPS

When you listen to a talk or lecture, it is rarely necessary to understand every word that is said. Understanding the overall meaning is much more important. Avoid concentrating on individual words and think about the general meaning.

Listen to a text about the geographic profile of HIV/AIDS in Africa and Asia. Then answer the following questions.

-

Decide whether the following statements are true or false based on the listening text.

1. The statistical information about the profile of the HIV epidemic gives accurate information about the type and situation of all people affected by the disease.
2. Worldwide, HIV is an infection mainly transmitted homosexually.
3. The largest number of HIV-infected people lives in Sub-Saharan Africa.
4. HIV prevalence rates in African countries show no signs of improvement.
5. AIDS appeared in Africa and Asia at exactly the same period of time.
6. The governments of India, Indonesia and China are taking aggressive measures to fight the spread of HIV/AIDS.

Task 2. Listening for detail

Once more, listen to the text, this time paying attention to details. Take some notes if you want to. Then fill in the blanks below.

1. Life expectancy in the thirty-five worst affected countries in Africa is estimated at _____.
2. Worldwide and particularly in countries of the South, HIV is an infection that is mainly transmitted _____.
3. Almost _____ percent of those with HIV is living in Sub-Saharan Africa.
4. In 2002 AIDS claimed the lives of an estimated _____ African people.
5. HIV prevalence among adults (15-49) exceeds 30% in the African nations of _____, _____, _____, _____, and _____.
6. HIV prevalence for pregnant women in South Africa fell from _____ in 1998 to _____ in 2001.
7. In Ethiopia, infection levels among women attending ante-natal clinics in Addis Ababa dropped from _____ in 1995 to _____ in 2001.
8. An estimated _____ Asians were living with HIV by the end of 2002.
9. There are an estimated _____ new HIV infections in India every day and there is a



Section 7: Speaking

Working in pairs, have a debate about the beliefs raised in Section 5. Each person should take a different position - one should agree with the beliefs and one should disagree. Use the expressions listed in Section 6 to defend your position.

Section 8: Reflecting

Think back to the tasks you have covered in this unit, indicate areas you feel comfortable and those you still feel need improvement.

Skills	Areas you feel comfortable with	Areas you want to improve in the future
Identifying main ideas		
Identifying details		
Finding out referents		
Identifying organization of texts		
Guessing word meanings		
Expressing agreement and disagreement		



UNIT TWO



Section 2: Reading





Table 1: Body Substances and Fluids and the Risk of Spreading HIV

Body substance/fluid	Known to contain virus or antibodies	Known to spread HIV
Blood	Yes	Yes, high risk
Semen	Yes	
Vaginal/cervical fluid	Yes	
Breast milk	Yes	
Saliva	Yes	
Urine	Yes	
Feces	Yes	
Vomit	Yes	Medium risk
Internal fluids: Cerebrospinal (around brain/spinal cord); Synovial (around joints); Amniotic (surrounding the fetus); Pleural (around the lungs)	Yes	Low risk, but infection can occur through the presence of traces of blood
Tears	Yes	Small risk to health staff
Sweat	Possible	
Skin	No	
Hair	No	
Nails	No	
Breath	No	

3. Why is it so important to make the distinction between body fluids shown to contain tiny amounts of virus and those that contain sufficient virus to spread the infection?

Task 3. Drawing implications and conclusions



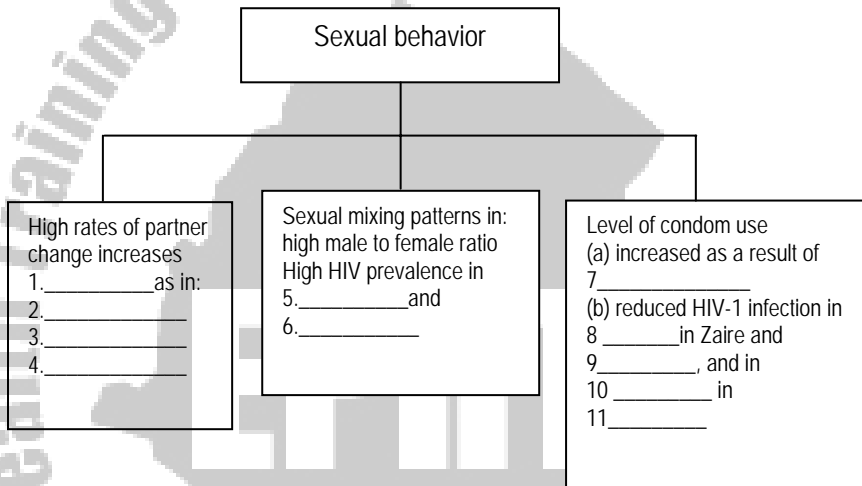
Section 3: Listening

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SEXUAL BEHAVIOR AND HIV

From: Alfredo Nicolosi 1994. *HIV epidemic: models and methods*. PP 80-1

Listen to a short talk about sexual behavior in Africa and complete the following chart.



Section 4: Writing

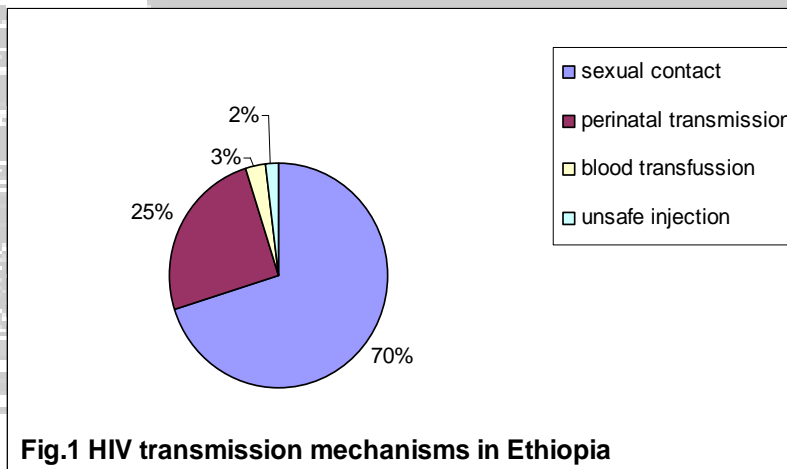
Task. 1 Interpreting a pie chart

TIPS

This section helps you to learn how to describe and interpret a pie chart effectively. A pie chart is a graph in the shape of a circle or 'pie'. The circle is generally divided into several parts and each part is given a label and a percentage figure. The total of all the parts will usually add up to 100%. Writers often use tables or charts along with the written text in order to clarify an abstract idea or to present evidence from research. Therefore, understanding them helps you to comprehend the text very well. You will also find it useful to use tables and charts in your own academic writing, and it will be important for you to be able to write clearly about them in order to show that you can interpret them.

A. Answer the following questions on the basis of the pie-chart.

1. What do you understand from the chart?
2. Which one is the most dominant mode of HIV transmission? Why do you think this is so?
3. What do the percentages indicate?



B. Write a descriptive paragraph using the data in the above chart. Use the answers to the questions under A above as a basis to develop the paragraph.

TIPS

You may use the following expressions to begin some of your sentences.

The pie chart illustrates/ describes/ shows/depicts...

As can be seen from the pie chart...

It can be inferred from the pie-chart that...

The pie-chart implies that...

One can draw a conclusion from the pie-chart...

On the basis of the pie-chart, I can say that...

In my view/opinion the reasons are...

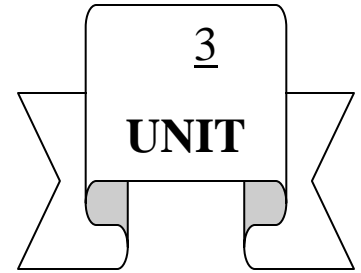
Section 5: Reflecting

By referring back to the activities and tasks you have covered in this unit, indicate areas in which you feel comfortable and areas you wish to improve.

Skills	Areas you feel comfortable	Areas you wish to improve
Listening and making notes		
Drawing conclusions		
Reading for main ideas		
Working out word meanings from context		
Describing and interpreting charts		

UNIT THREE

MANIFESTATIONS OF HIV/AIDS



Objectives

When you finish this unit, you will be able to:

- Guess word meanings from context;
- Transfer information from a text to a table;
- Use simple present tense to describe facts; and
- Write a short descriptive paragraph.

Skills in focus:

- Transferring Information
- Using simple present tense to write descriptions
- Guessing word meanings

Section 1: Brainstorming

Discuss the following questions in pairs/ groups.

1. What are the symptoms or manifestations of AIDS?
2. If a person has these symptoms, does that necessarily mean that the person has AIDS? Explain.
3. Is a person infected with HIV rapidly develop AIDS? Why do you think that?

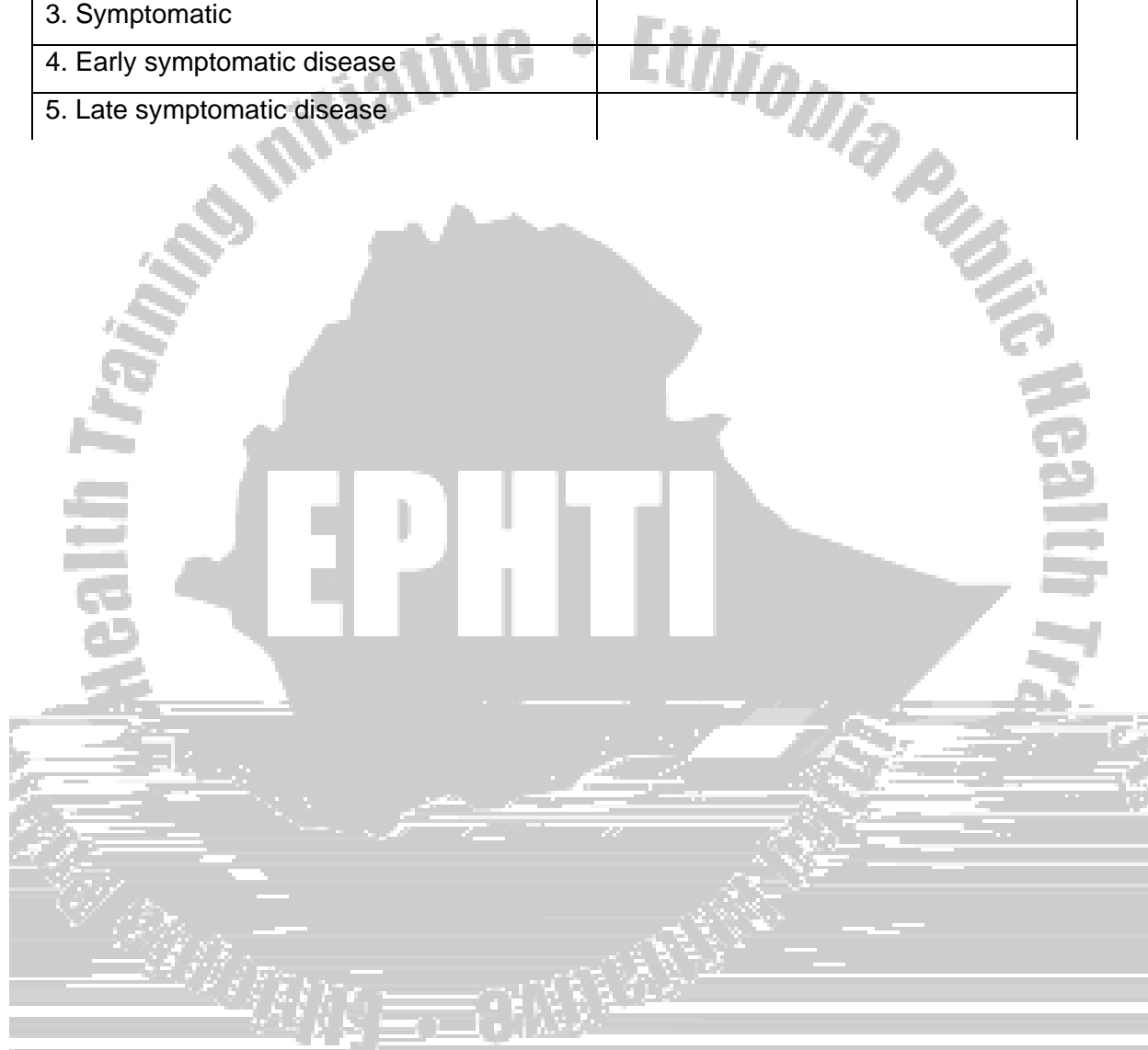
Section 2: Reading

TIPS

When you read a passage or listen to a lecture, there are many ways to take notes. One way is to set out your notes in a simple table. Often, this makes it much easier for you to see the main points clearly.

Fill the descriptions column in the following tables with short notes from the reading passages.

Phases of HIV Clinical manifestations	Descriptions
1. Acute HIV syndrome	
2. Asymptomatic period	
3. Symptomatic	
4. Early symptomatic disease	
5. Late symptomatic disease	



progression depends on the type of virus and also on the host-progression is fast in children under 5 years old, adults over 40 years old, and in those with concurrent infections.

5. The third phase is the symptomatic period. It is a period when HIV infected individuals develop HIV – related diseases and AIDS. It can occur at any time during the course of HIV infection. This period is further divided into early and late symptomatic diseases.
6. During the early stage of the disease, infection progresses and immunity declines, so that patients become more susceptible to infections. These include tuberculosis, pneumonia, recurrent fungal infections of the skin and oropharynx. Patients may develop constitutional symptoms (unexplained fever and weight loss) and chronic diarrhea.
7. Any infection that can occur during the early symptomatic disease stage can also occur in the late symptomatic phase. In addition, certain specific HIV – related diseases occur predominantly with severe immunosuppression. Some of the examples include cryptococcal meningitis, toxoplasmosis and cervical cancer.
8. It is important to remember that a person with some, but not all, of these symptoms will probably have a different, less harmful illness. The symptoms do not necessarily mean that someone has AIDS. Hence, a diagnosis is made based on certain diagnostic criteria. A diagnosis of AIDS is made in anyone with HIV infection and a CD₄⁺ T-cell count less than 200 / μ l. However, due to limited laboratory diagnostic facilities, WHO recommends case definitions for AIDS. The case definition is fulfilled in the presence of at least two major signs and at least one minor sign. Major signs include weight loss greater than 10% of body weight over six weeks, chronic diarrhea and prolonged fever for more than one month. The minor signs include persistent cough for more than one month, generalized pruritic dermatitis, herpes zoster, oropharyngeal candidiasis, chronic progressive or disseminated herpes simplex infection, and generalized lymph node enlargement.

Section 3: vocabulary

The words under Column A are taken from the reading passage. Match each with its correct definition given under Column B. If you don't know what the word means, try guessing from its context (i.e., the way it is used in the text).

Column A

1. consequences (*paragraph.1*)
2. manifested (*paragraph 3*)
3. progression (*paragraph 4*)
4. declines (*paragraph 6*)
5. susceptible (*paragraph 6*)
6. recurrent (*paragraph. 6*)
7. criteria (*paragraph 8*)
8. persistent (*paragraph 8*)
9. latent (*paragraph.2*)

Column B

- a. signs or symptoms
- b. development
- c. results
- d. weakens
- e. happens or returns again
- f. hidden
- g .long-lasting
- h. easily influenced or harmed by something
- i. a standard on which a decision is made

Section 4: Grammar

Read the following text and fill in the blanks with the appropriate simple present form of the verbs in parentheses. Then compare your answer with a partner.

- Third person singular adds-s/ -es
e.g. a. He/She/It calls everyday.
b. Lemma goes to church on Sundays.
c. My sister studies hard all her lessons.

- Verb to BE forms

I am		mortal.
We are		
You are		
They are		
He is		
She is		
It is		

Trunesh _____ (be) a poor lady who is only 25 years old. She _____ (live) in a small town called Babile. Tirunesh was a prostitute in one of the hotels in the town. She has a five year old son who is suffering from AIDS. Trunesh and her son _____ (be) weak and _____ (do) not seem as if they will live much longer since they are in the late stage of the disease. Their symptoms _____ (include) loss of weight, loss of appetite and diarrhea. Trunesh and her son _____ (be) just examples of thousands of people who _____ (be) victims of this terrible disease.

Section 5: writing

Using the above paragraph about Tirunesh as a model, write a description about Ibsa, using the following medical records.

Name: Ibsa Mohammed
Age: 30
Place of residence: Jijiga
Occupation: a Farmer
No. Of children: Two

Symptoms: Loss of weight, cough, spitting blood, etc.

Diagnosis: Tuberculosis (TB)

Section 6: Reflection

By referring back to the activities and tasks you have covered in this unit, indicate areas you feel comfortable with and areas you want to improve in the future.

Activities/tasks	Areas you feel comfortable with	Areas you want to improve in the future
Guessing word meaning from context		
Using simple present tense to describe facts		
Transferring information		
Writing short descriptions		



Section 5. Grammar

Section 6. Vocabulary

Section 7. Reflection



UNIT ONE
THE ECONOMIC
IMPACT OF HIV/AIDS

Objective



Section 1: Brainstorming

Discuss the following questions with your partner (s).

1. What do you think are the economic impacts of HIV/AIDS?
2. What social effects of HIV/AIDS have you noticed in your community?
3. What do you know about “stigma and discrimination”?

Section 2: Reading

Read the text entitled “Do you know this?” which focuses on the major economic impacts of AIDS. As you read, think about your own previous knowledge about the impact of the disease. Think also what the main point of each paragraph is.

Task 1. Reading for main idea

Answer the following question based on the passage that follows.

1. According to the first paragraph, what are the two major reasons that make it difficult to clearly identify the economic impact of HIV/AIDS?
2. According to the second paragraph, what is the general effect of HIV/AIDS on the annual per capita growth of Sub-Saharan African countries?
3. What is the writer’s main focus in paragraph three?
4. What general impact does AIDS have on the productivity of firms?
5. Why does the International Labor Organization identify HIV/AIDS as the single most important obstacle to social and economic progress in Africa?
6. What is the writer’s main concern in paragraphs 6 and 7?

DO YOU KNOW THIS?

1. It is difficult to identify the precise economic effects of HIV. Factors such as poor economic management, high inflation, corruption and deteriorating infrastructure, together with conflicts and population displacements, are common in many of the countries worst affected by HIV. At the same time, there is often a lack of accurate data both on AIDS itself and on how AIDS related illnesses affect different economic activities. In many countries, money spent on the military spending is far greater than that allotted to health or education. While it is essential to take these complex factors into account, it must also be acknowledged that the epidemic can only exacerbate the already precarious economic situation faced by many countries.
2. HIV/AIDS has a profound impact on growth income and poverty. As a direct result of HIV/AIDS, it is estimated that the annual per capita growth in half the countries of Sub-

Saharan Africa is falling by 0.5 to 1.2 percent. By the year 2010, per capita consumption may drop by 8 percent or more. In the case of a typical Sub-Saharan country with an HIV prevalence rate of 20%, it is estimated that the rate of growth of GDP will fall by about 2.6 percent each year. At the end of a twenty- year period GDP would be 67 percent less than would otherwise have been the case

3. The problem is not limited to Africa. In November 1999, a panel of economists, health professionals and other officials meeting at United Nations (UN) headquarters in New York



Table: Southern Africa: Labour force losses due to HIV/AIDS

	By 2005	By 2020
Botswana	-17.2%	-30.8%
Lesotho	-4.8%	-10.6%
Malawi	-10.7%	-16.0%
Mozambique	-9.0%	-24.9%
Namibia	12.8%	-35.1%
South Africa	-10.8%	-24.9%
Tanzania	-9.1%	-14.6%
Zimbabwe	-19.7%	-29.4%

Source: UN Africa recovery, from ILO and UN population Division Data

6. The effects of HIV/AIDS are perhaps most telling at the micro level, with families at the front line of the epidemic. The income of a family decreases dramatically when a breadwinner becomes ill with AIDS, and this in turn affects the family's saving and spending power. When AIDS affects households, patterns of agricultural production change. A large proportion of people in developing countries depend on agriculture for their living. Although accounting for perhaps just 20% of a country's wealth, agriculture may sustain up to 80% of the population. The effect of HIV/AIDS is devastating for farming families. When the male head of a household becomes ill, the family members caring for him spend increasingly less time tending the crops. Another factor affecting productivity in rural areas is "absenteeism" to attend funerals. UNAIDS reports that in Namibia mourning may result in a 25 % loss of production during critical production periods (e.g., sowing & weeding times). Families affected by HIV lose money from unsold cash crops, are forced to buy food they would normally grow themselves and also may have to sell farm equipment to survive.
7. In 1997 the Food and Agriculture Organization of the United Nations reported that care for male AIDS patients in the mid west of Côte d'Ivoire cost around 300 dollars per year, which was equal to a quarter and a half of the annual income of most small-scale farmers. A study in Thailand found that for one third of the rural families affected by AIDS their agricultural output was halved, threatening food security. In Kenya, households are estimated to lose 49-78% of their income when one person dies of AIDS, excluding funeral costs.
8. Care-takers are almost always women, who may also be infected themselves and are subsequently left without anyone to care for them and without any resources or income. Children, especially female children, are often pulled out of school either to care for ailing parents or untended siblings, or because there is no money for school fees. And in societies where the only security system for the elderly is the support provided by adult offspring, elderly people now need to fend for themselves as their offspring die and are frequently tasked with caring for a large number of orphaned grandchildren.

Adapted from Ann Smith & Enda McDonagh (2003). *The Reality of HIV/AIDS*. Caford. Maynooth, pp. 28-32.

Task 2: Reading for inferences

Reread the text and then attempt to answer the following questions, which ask you to infer information from the text.

TIPS

When you make inferences, you are drawing logical conclusions from facts and/or evidence presented to you. Some times this means working out the underlying or unstated view or idea in a text. For example, if you read a text which states that HIV/AIDS kills 5 percent of the productive work force in a certain country, you can infer that HIV/AIDS is having a negative impact on the economic and social development of that country. When you draw inferences, you use both the information in the text (textual information), plus your own background knowledge and experience (generally called non-textual information).

1. Based on the table, what can you infer about the future labor force in Africa?
2. Based on what the writer states in paragraph one, what can you infer about the relative importance of military power versus health & education in many African countries?
3. In paragraph 5, why does the writer think AIDS will result in increased numbers of child laborers?
4. What do you think the effect of HIV/AIDS is on the education of children, especially females?

Section 3: writing

Combine each group of sentences into one logical sentence. Here is an example:

1. Training in abortion procedures for all doctors should include the terms of the law.
2. It should also include the interpretation of the law.
3. Again, it should contain arguments of abortion.

4. It should include information on the links between contraceptive use and the need for abortion.

Training in abortion procedures for all doctors should include the terms of the law, its interpretation, arguments of abortion, and information on the links between contraceptive use and the need for abortion.

- A) 1. Reproductive and sexual health is about personal behaviour in health and sex.
2. It is also about the ability to negotiate safe sex.
3. It includes contraceptive and condom use whenever required.
- B) 1. Absenteeism and premature death of workers have a direct effect on the productivity of an enterprise
2. They also disrupt foreign investment patterns.
3. They affect the macroeconomic stability of a country.
4. They threaten the education and the health of orphans.

Section 4: Listening

POVERTY AND HIV/AIDS

You are going to listen to a text titled "Poverty and HIV/AIDS." Then complete the following two tasks.

Task 1. Listening for main idea

1. In many countries of the world, poverty and HIV/AIDS are two inseparable problems.
2. Poverty creates situations that make people more vulnerable to HIV infection.
3. The poor take risks, such as engaging in prostitution, because they do not care about their lives.
4. Poverty aggravates the spread of HIV and vice versa.

Task 2: Listening for the order of ideas

Listen to the text once again and arrange the following ideas in order of their occurrence in the text.

1. The complexity of factors that contribute to poverty
2. The general relationship between poverty and AIDS
3. How the desire to meet immediate survival needs leads to risk taking
4. How poverty and HIV/AIDS together erode families' economic resources
5. The reciprocal relationship between HIV/AIDS and poverty
6. The vulnerability of economically weak groups to HIV infection

Section 5: Speaking

Task 1. Reflecting

In your group, discuss these questions.

1. Which section of the society do you think is the most vulnerable to HIV/AIDS?
2. To what extent are youth vulnerable to HIV/AIDS?
3. What factors contribute to vulnerability of youth to HIV infection?
4. What measures do you think could be taken to protect youth from infection?

Task 2. Debating

Form two opposing groups to debate on one of the following issues.

1. There are many arguments about the relative vulnerability of men and women to HIV, and about whether men or women suffer more socially from being infected.
2. Based on the knowledge you have gained from the reading and listening activities presented in this unit, debate the issue of whether the health sector or the agricultural sector is more affected by the spread of HIV/AIDS.

TIPS

When you debate, you use language to defend your position. You use argument to persuade others about the importance or truth of what you say or believe. The person/people with whom you are arguing will use counter arguments to oppose you. The aim is to find



Section 6: Reflection



UNIT TWO

“LIVE AND LET LIVE”

Objectives

At the end of this unit, you will be able to:

-



Section 1: Brainstorming

Individually answer the following question and then discuss your answers in groups.

What does the saying “**Live and let live**” mean to you?

Section 2: Listening

-

LIVE AND LET LIVE

From: *HIV and AIDS-related Discrimination, Stigmatization and Denial (the case of India and Uganda)*. UNAIDS, Geneva, Switzerland, August, 2001.

Task 1. Listening for main ideas

Based on the listening text, are the following sentences true or false?

1. In developing countries, families and communities are generally supportive of HIV-infected persons.
2. Women experience less discrimination than men.
3. Only infected people are discriminated against in developing countries.
4. Families often conceal members' HIV-positive status because they fear their community's response.
5. According to the text, in India, an infected person is kept isolated from other community members to reduce transmission of HIV/AIDS.

virus. In many countries, discriminatory practices such as the compulsory screening of certain populations or “at-risk groups” cause both the stigmatization of such groups and a misplaced sense of security among those who do not see themselves as belonging to these segments of the population. Some studies have recently shown that there are wide gaps between more liberal national policies and the application of these policies and principles in practice. Even where supportive legislation exists, its application may be partial, uneven or ignored.

3. Restrictive and coercive measures frequently enacted to “protect” society from infection discriminate against, or exclude, those who are already infected. Laws that insist on the compulsory notification of HIV/AIDS cases and the restriction of an infected person’s right to anonymity and confidentiality, as well as the right to movement have been justified on the grounds that the disease constitutes a public health emergency. With other infectious diseases such responses may be justified, but in the case of an already highly stigmatized condition such as HIV/AIDS they result in punitive measures that further discriminate against people living with the disease and may drive those infected, and those most vulnerable, to becoming infected further underground.
4. Perhaps in consequence, numerous countries have now enacted legislation to protect the rights and freedoms of people living with HIV/AIDS and to safeguard them from discrimination. Much of this legislation has sought to ensure the right to employment, education, privacy and confidentiality, as well as the right to information access, treatment and support. However, the failure of governments to protect people living with HIV/AIDS from discrimination, through legislation or through the active enforcement of such legislation, is a violation of their human rights. The apathy of some governments in providing effective systems of prevention, treatment and care may also arise from more deep-seated stigmatization at a societal level.
5. Governments and national authorities contribute to HIV/AIDS-related stigmatization in other ways. They may, for example, cover up and conceal cases or fail to maintain reliable transparency. Ignoring the existence of HIV/AIDS, neglecting to respond to the needs of those living with HIV infection, and failing to acknowledge burgeoning epidemics in the belief that HIV/AIDS “can never happen to us” are some of the most widely reported examples of national denial. This denial fuels stigmatization by making those individuals acknowledged to have HIV/AIDS appear abnormal and exceptional. They do little to enable people to develop a more realistic appreciation of individual vulnerability, and in fact contribute to a vulnerability to the epidemic.

6. Stigma and stigmatization, both real and perceived, may also arise from a variety of community-level responses to HIV/AIDS. The harassment and scapegoating of individuals suspected of being infected or of belonging to a particular “at-risk group” has been widely reported. It is often stimulated by the need to blame and punish and can, in extreme circumstances, extend to acts of violence and murder. Attacks on men who are presumed gay have increased in many parts of the world and have been associated with the growing HIV/AIDS epidemic. Sex workers and street children in Brazil have likewise been singled out for violence and abuse. HIV/AIDS-related murders have been reported in countries as diverse as Brazil, Colombia, Ethiopia, India, South Africa and Thailand. In December 1998, a woman named Gugu Dhlamini was stoned and beaten to death by neighbors in a township near Durban, South Africa, after speaking out openly on World AIDS Day about her HIV status. Adapted from: *Comparative Analysis: Research Studies from India and Uganda: HIV and AIDS-related Discrimination, Stigmatization and Denial* (June, 2000). Prepared for UNAIDS, pp. 11-13.

Task 1. Reading for the main ideas

Read the above passage and answer the following questions

1. What does the writer want to emphasize in the first paragraph?
2. What does the writer want to emphasize in the third paragraph?
3. What is the writer’s main point regarding government’s national authorities’ contribution to HIV-related discrimination in the fifth paragraph?
4. In the sixth paragraph, what does the writer state about the community-based stigma and discrimination?

Task 2. Reading for detail

Reread the passage and answer the following questions, which ask you to identify the supporting details.

1. List five types law (legislation) passed by some countries to control the actions of HIV/AIDS-infected individuals.

- a. _____
- b. _____
- c. _____
- d. _____
- e. _____

2. List two major drawbacks or weaknesses of the policy of compulsory screening of certain populations or “at-risk groups”.

- a. _____

- b. _____

3. How have laws that insist on compulsory notification of HIV/AIDS cases been justified?

4. What types of legislation have been passed to protect the right and freedoms of people living with HIV/AIDS?

5. Describe the different ways governments and national authorities contribute to HIV/AIDS-related stigmatization.

6. Read the sixth paragraph and find out the variety of community-level responses to people with HIV/AIDS.

Section 4: Vocabulary

Task 1. Guessing word meanings from context

TIPS

Guessing from context is one of the most effective strategies for tackling difficult or unfamiliar vocabulary encountered when reading. In order to guess effectively, you have to use clues to the meaning of the difficult words. There are many types of context clues. Look at the following examples:

1. Synonyms: These are words that have similar meanings.

Example 1: AIDS has a devastating **impact** on the economic sector of a country. Its influence on the educational and health sectors has also been found to be great.

The word ‘impact’ is synonymous with the word ‘influence’. If you know the word ‘influence’, you can easily arrive at least at the rough meaning of the word ‘impact’.

Example 2: The African countries have many **formidable** problems. One of those is the prevalence of HIV/AIDS. What makes HIV/AIDS a terrible problem is that it destroys the economic and social bases of the countries.

The word 'formidable' is synonymous with the word 'terrible' in this context. If you know the word 'terrible', you can easily arrive at the rough meaning of the word 'formidable.'

Example 3: The cultural and social expectations that heighten women's risk of HIV also increase men's **vulnerability** to infection.

In this text, the word 'vulnerability' is synonymous with the word 'risk.'

2. Antonyms: These are words that have opposite or contrasting meanings.

Example: The victims of HIV/AIDS need social and psychological acceptance. Instead, the common place **denial** of their humanity affects not only the victims, but it also complicates attempts to prevent the disease.

In this text, the word 'denial' is antonymous to the word 'acceptance.'

3. Collocation: This is a structural situation in which words go together. A word may collocate with another content word, as in **strong discrimination**, or with words that serve grammatical functions, as in **discrimination against** or **isolation from**, etc.

Example: In Africa, there is a **high incidence** of HIV infection among farmers as well as pastoralists.

The collocational relationship between the word 'high' and the word 'incidence' may help you guess the latter to mean "occurrence" or "prevalence rate."

4. Definition: This is a statement of the meaning of a word or expression, usually pointing out what it is and what it is not.

Example: In the HIV/AIDS context, **advocacy** is a type of initiative that is concerned with addressing the roots and effects of injustices against HIV-infected people, with an attempt to mitigate the impacts of such injustices and the vulnerability of the victims. Based on the definition, one may guess 'advocacy' is a kind of supportive or encouraging, initiative program.

5. Hyponymy: This is a kind of meaning relationship where one dominant meaning holds within itself other sub-meanings.

Example: It is sad that HIV-infected groups become subject to many **prejudices**, such as discrimination, marginalization, proscriptive and judgmental attitudes in religious and other social gatherings.

All of the words or expressions separated from the word 'prejudices' by the connective 'such as' are examples of prejudice. If you know what each of these words means, you may easily know that 'prejudices' means 'biases.'

6. Restatement of the target word: This is a situation where writers restate the word they assume is difficult through hyphenation and other systems.

Example: **Stigmatization**--the social and cultural disgrace of the HIV-infected persons--is more devastating than the virus itself. The meaning of the word 'stigmatization' is restated within the two dashes.

7. Repetition of the target word: Writers sometimes clarify the meaning of a word they assume is difficult by repeating it several times.

Example: Risk-reduction strategies seek to provide individuals and communities with skills and strategies in their personal behavior or professional practices, in order to minimize the **risk** to them and others of HIV infection or re-infection. Such strategies are concerned with adopting measures that afford immediate protection (partial or complete) rather than, perhaps, focusing solely on permanent removal of infection risks.

As you see, the writer repeated the word 'risk'. By reading back and forth, you may guess the word to mean 'danger' or 'hazardous exposure.'

8 Word composition: It is possible to work out the meaning of a difficult word by separating its parts.

Example: In order to reduce the impact of AIDS, governments and NGOs should take **counter-discriminatory** measures against rules and practices that sometimes reinforce injustices against infected persons.

This word can be analyzed into **counter** (against) + **discriminate** (show prejudice against) + **-ory** (adjective marker). The rough meaning of the word, therefore, is an action or view that opposes discrimination and mitigates its impact.

9. Word Grammar: The grammatical structures of difficult words can provide some hints about their meaning.

Example: Hanna was born in a village 150 miles away from the capital city. She was not familiar with methods of protecting herself against sexually transmitted diseases, including HIV. Her **unfamiliarity** with the diseases and their modes of transmission exposed her to HIV/AIDS three years ago. The word can be analyzed into **un-** (negative marker) + **familiar**

Example: HIV exists in a world that struggles enormously to deal openly and honestly with human sexuality in all its diversity. Paradoxically, HIV has drawn attention to the **complexity** of human sexuality in a very public way and to a degree unthinkable before its appearance. It has revealed the hidden reality that sexual behaviour is governed by many diverse factors. Sexual orientation, power, societal norms, economic status and governmental policies all exert influence.

As you see, the above paragraph is about the complicated relationship between vulnerability to HIV/AIDS, human sexuality and other socio-economic factors. The writer used the term 'complexity' to reveal the complicated relationships between the factors. It is important to point out that, when you guess the meaning of a word, you can rely on more than one clue. For example, in addition to the wider context, the word 'diversity' is another clue to the meaning of the word 'complexity.'

Use your knowledge of clues and work out the meaning of the words written in bold in the following text.

INDIVIDUAL EXPERIENCE

1. People's experience of HIV/AIDS- related stigmatization and discrimination is affected by commonly held **beliefs**, forms of social stigmatization, and factors such as the extent to which individuals are able to **access** supportive networks of peers, family and kin. It may also be influenced by the stage of the epidemic and whether individuals feel they can be open about their sero-status, age, gender, sexuality and social status among a host of other **variables**.
2. Overall, the negative **depiction** of people living with HIV/AIDS-caused by the language and metaphors used to talk about the disease has reconfirmed fear, avoidance and isolation of affected individuals and, in some cases, friends and families. In a highly stigmatizing environment, people may **withdraw** from society as a means of self-preservation. This

Example: Thomas is less likely to live longer. Thomas is suffering from AIDS.

These are two separate statements, but statement 1 is the result of statement 2. Here is how you would combine them using the conjunctions listed above.

1. Thomas is less likely to live longer **as** he is suffering from AIDS. Or

As he is suffering from AIDS, Thomas is less likely to live longer.

Thomas is not likely to live very long **because** he is suffering from AIDS. Or

Because he is suffering from AIDS, Thomas is not likely to live very long. Thomas is not likely to live very long **since** he is suffering from AIDS. Or

Since he is suffering from AIDS, Thomas is not likely to live very long. Thomas is not likely to live very long, **for** he is suffering from AIDS.

You can also indicate cause and effect relationships using several common phrases. Some examples follow (where X is the cause and Y is the effect).

Y due to the fact (or owing to the fact) that X OR Due to the fact (or owing to the fact) of X, Y	Thomas is not likely to live very long due to the fact that (or owing to the fact) that he is suffering from AIDS. Due to the fact that (or owing to the fact that) that Thomas is suffering from AIDS, he is not likely to live very long.
X leads to Y	Lack of HIV awareness leads to increased risk of infection.
X brings about Y	Lack of HIV awareness brings about increased risk of infection.
As a result of X, Y	As a result of sleeping with prostitute, Thomas became infected with AIDS.
X results in Y	Lack of HIV awareness results in increased risk of infection.
Because of X, Y	Because of Thomas's risky behaviour, he became infected with HIV.
The result/consequence of X is Y	The result/consequence of HIV infection is sometimes AIDS.
As a result/consequence of X, Y	As a consequence of/result of sleeping with a prostitute, Thomas became infected with HIV.

The following table lists ideas that can be related through cause and effect. Write a complete sentence for each pair that links them together, using some of the phrases and/or conjunctions listed above.

Causes	Effects
AIDS epidemic	Socio-economic destruction in African countries.
The death of parents due to AIDS	Psychological disturbance and socio-economic insecurity of children
Caring for parents with AIDS	Children's forced to drop out from schools
Strong stigmatization	Some HIV-infected persons die prematurely
Fear of shame	The families hide the HIV-positive status of members.
Absenteeism due to AIDS –related illness	The productivity of a firms is weakened

Section 6: Writing

Based on what you have read and listened to in this unit, write a paragraph about your feelings toward stigmatization.

TIPS

1. First start with what *stigmatization* and *discrimination* mean.
2. Mention the diverse socioeconomic, psychological, educational, etc. effects of discrimination.
3. Point out your own personal feelings and opinions about how it should be stopped.
4. Write down the points you have identified in a paragraph.
5. Review the paragraph to edit language and correct organizational defects.

Section 7: Speaking

Task 1: Role play

Form groups of between 5-8 students. Each student should choose one of the listed social or professional roles below. Acting as your chosen role, pretend that you are speaking to an

audience and must orient them to the root causes and effects of HIV-related stigmatization, discrimination and denial (DSD). At this stage, you are required to take different social and professional roles, and orient your audience about the root causes of discrimination, stigmatization and denial (DSD) of HIV-infected persons. Go into a group of 5-8 students and express your views representing the following groups.

- A. Teacher
- B. Health professional
- C. Women's rights activist
- D. Religious leader
- E. Community elder
- F. Social worker
- G. Child rights activist
- H. Labour unionist

Task 2. Debating

Some people say that "HIV-infected persons isolate themselves." Others argue that "The community isolates the HIV-infected persons." Which view is right? Does what is called "HIV victim self-isolation" exist? If it does, in what ways? Debate this issue.

Section 8: Reflection

Look back at this completed unit and indicate how well you have done. Use the following scale to assess your progress:

- 4= Very good
- 3= Good
- 2= Fair
- 1= Not good

Skills	How well have you improved the skills of :	Rate yourself
Reading for the main idea	identifying the main ideas of the reading passage?	
Reading for detail	recognizing the details of a reading passage?	
Speaking	sharing your views with others?	
Structure	showing cause-effect relationships?	
Vocabulary	guessing the meaning of words from context?	

Write down areas you need to improve in the future:



UNIT THREE



3. What does the writer want to emphasize about tuberculosis (TB) in the third paragraph?
4. What does the writer want to point out in the fourth paragraph?
5. How does HIV/AIDS affect the proper functioning of schools and other learning institutes?
6. According to the sixth paragraph, how does AIDS affect family expenditure on education?
What about on government's educational investment in its citizens?

The Drastic Impact of HIV/AIDS on Health and Educational Sectors

1. The increased **demand** for health care for people with HIV-related illnesses is stretching the public health system of many developing countries beyond their limits. In the mid-1990s it was estimated that care for people with HIV **absorbed** 66% of the public health budget in Rwanda and over 25% in Zimbabwe. In 1997 public health spending for AIDS exceeded 2% of the gross domestic product (GDP) in 7 out of 16 African countries sampled. This is particularly **alarming** when we consider that the total health spending in these countries accounts for 3 – 5 % of GDP.

2. In recent years, HIV – positive patients have occupied over 50% of beds in the Provincial Hospital in Chiang Mai, Thailand, 39% at Kenyatta National Hospital in Nairobi, Kenya and 70% in the prince Regent Hospital in Bujumbura, Burundi. This means that patients needing hospitalization for other conditions are often being neglected. For example, hospitals in

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4. HIV affects education in numerous ways, from decreased enrollments and teacher numbers to reduced quality of service. AIDS has reduced the numbers of school-going children. In Kenya the number of primary school age children enrolled in school is 13 percent lower than it would be without HIV/AIDS. For Zambia, this figure is 20%. Because AIDS affects the socioeconomic health of families, fewer people can afford to keep their children in school. Children who are orphaned when their HIV-infected parents die are least likely to attend school. Those who do attend are affected by the emotional suffering caused by the illness and **bereavement**. Additional family chores also affect orphaned children's ability to participate and benefit from education.
5. In many parts of sub-Saharan Africa teachers, college lecturers, school inspectors and educational managers **constitute** the largest occupational group. They also often have a disproportionately high **incidence** of HIV infection. An estimated 860,000 children in sub-Saharan Africa (two-thirds of them in eight countries of the region) lost their teachers to AIDS in 1999. In the first 10 months of 1998 Zambia lost 1300 teachers, the equivalent of about two thirds of all new teachers trained annually. In Côte d'Ivoire five teachers per day are lost to AIDS. HIV/AIDS also indirectly affects teacher attrition and productivity. Increased rates of teacher attrition result when other sectors of government and industry seek educated **personnel** to replace those lost to AIDS. Productivity is lowered due to AIDS-related illnesses and absenteeism. Rural teaching positions have become even more **unpopular** with teachers in many countries. In 1996 a national survey in Zambia found that the long distances from a source of health care (which are mostly located in towns or cities) was an extra **disincentive** to teachers to teach in rural areas.
6. In some cases, students may also be subject to disproportionately high infection rates. At one South African university, it has been estimated that two-thirds of students will be HIV positive by the time they graduate. Thus, families' **expenditures** on their schooling will have been in vain, and they will lose not just a loved one, but also a possible source of future income. It also means that economies lose potentially skilled workers and that governments' educational **investment** is, therefore, wasted.

Adapted from Ann Smith and Enda McDonagh. (2003). *The Reality of HIV/AIDS.*, Caford, Maynooth, pp. 32-35.

Task 2. Reading for inference

Answer the following questions based on the information from the reading passage.



TIPS

Letter writing is an interesting activity and hobby. A good letter requires careful planning and organization of ideas. Before you write, however, you need to gather enough and relevant ideas. You can generate useful ideas in pairs or groups. Your letter should have three sections: an introduction, a main body and a conclusion.

Section 5: Grammar

Task1. Talking about the future

When we want to talk about the future, we use the future tense, which allows us to talk about future plans, happenings or occurrences. The following table summarizes some of the ways to express the future.

- A. Will + infinitive. e. g. (a) I **will visit** my uncle next month; (b) I **will call** you; (c) I **will never** have sex without condom.
- B. Be going to + infinitive. e.g. (a). We **are going to** lose money young men and women due to AIDS; (b) I **am going to** teach my little brothers about AIDS.
- C. The simple present tense is sometimes used to talk about the future. We use this form to talk about a fixed (scheduled) time. e.g. (a) The show **begins** at 5:15; (b) The plane **takes off** at 7:05.
- D. Will + be + present participle. This form, sometimes, called future continuous, is used to talk about things that will be in progress at certain time such as plans you might have. e. g. I will be talking with the hospital's medical director about the protection of care givers.
- E. The present continuous tense is also used to show future action, especially when we are talking about future events that have already been planned or decided. e.g. (a) I **am having** HIV test next Friday; (b) An HIV-infected person is coming to our university to share his experience with the students.

Look at the following sentences and match them with the forms of the future tense given above.

1. He is going to be the chairperson of our university's HIV/AIDS Prevention Unit.
2. The conference starts at 2 p.m. on the 15th

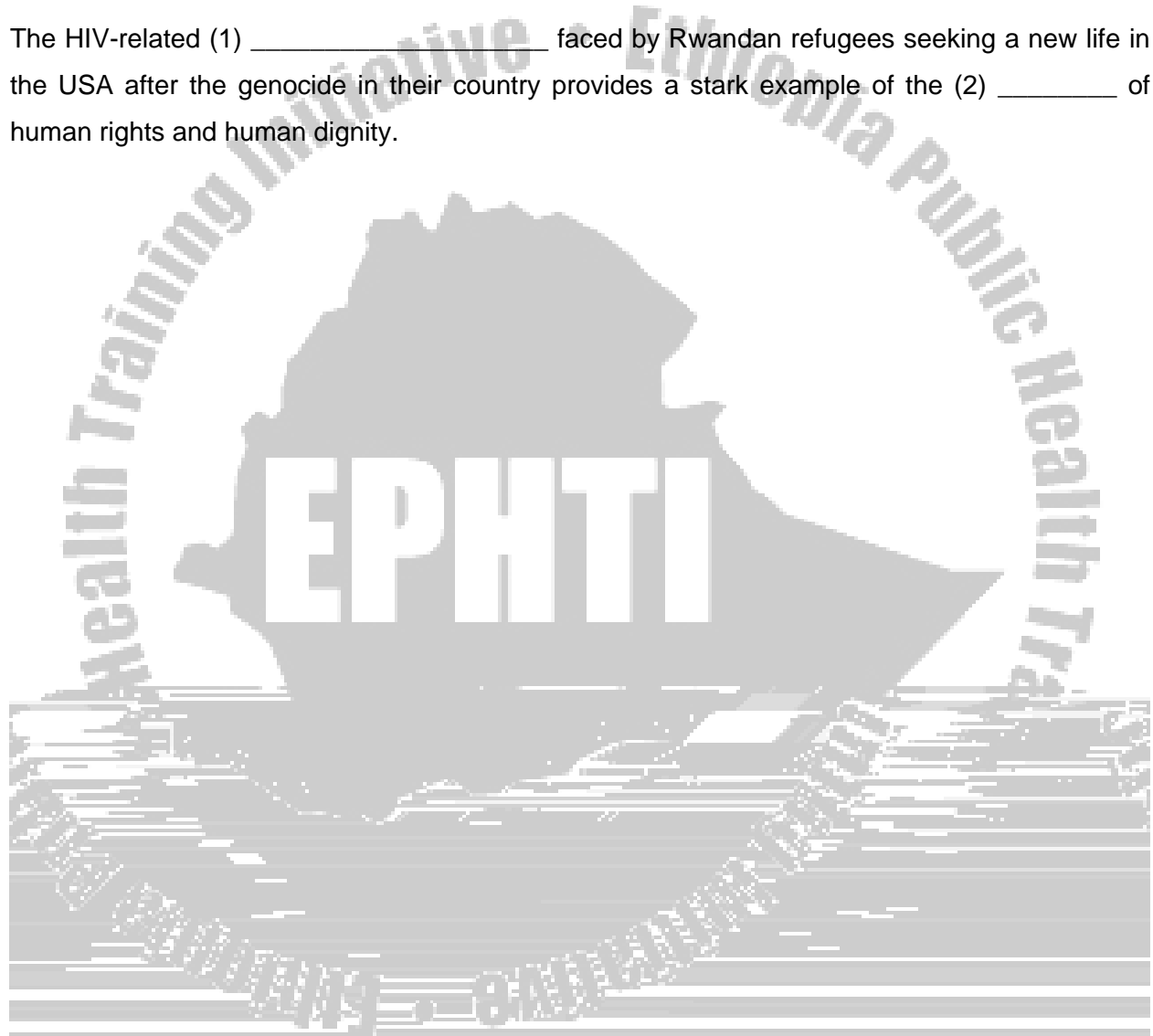


Task 2. Choosing the right word

The following words have been used so far in this module. Use them to fill in blank spaces of the text shown below.

denial *discrimination* *rape* *rejected*
disadvantage *examination* *raped* *vulnerable*

The HIV-related (1) _____ faced by Rwandan refugees seeking a new life in the USA after the genocide in their country provides a stark example of the (2) _____ of human rights and human dignity.



Section 7: Reflection

Look back at what you did in each section of this Unit and indicate how well you did, using the following scale.

4=Very good 3= Good 2= Fair 1=Not good

Skills	How well have you improved the skills of	Grade yourself
Reading for the main idea	identifying the main ideas of the writer?	
Reading for inference	Inferring writer's assumptions in the reading passage?	
Listening for the main idea	recognizing the main ideas of a listening text?	
Listening for reordering	reordering ideas?	
Speaking	sharing your views with others?	
Writing summary	summarizing?	
Writing letter	organizing an opinion letter?	
Using grammar	expressing the future?	
Guessing from context	working out the meaning of vocabulary items from context?	
Choosing the right words	Using vocabulary?	

Write down areas you need to improve on in the future:

MODULE THREE

EXPLORING THE RELATIONSHIP BETWEEN CULTURE AND HIV/AIDS

At the end of this module, you will be able to:

- Develop your study skills;
- Improve your independent learning skills;
- Develop your vocabulary learning strategies;
- Provide opportunities for you to express yourself and negotiate meaning; and
- Develop your self-management and self-assessment skills.

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UNIT 1: Sex, Sexuality and Cultural Issues

Section 1. **Brainstorming**

Section 2. **Speaking**

Section 3. **Reading**

Section 4. **Writing**

Section 5. **Listening**

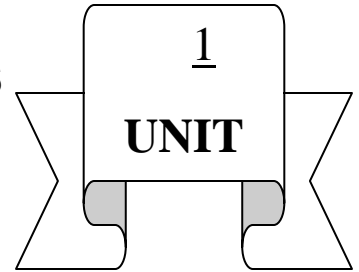
Section 6. **Grammar and vocabulary**

Section 7. **Reflections**

UNIT 2: Culture: For or against AIDS?

UNIT ONE

SEX, SEXUALITY AND CULTURE ISSUES



Objectives:

At the end of this unit, you will be able to: Discuss issues confidently and openly

- Skim a text;
- Match reading technique with your objective;
- Recognize arguments;
- Listen and take notes;
- Express your opinions, viewpoints, and feelings;
- Recognize transition signals; and
- Use correct verbs to report quotations.

Skills in focus:

- Presenting viewpoints/opinions
- Skimming
- Analyzing quotations in academic writing
- Speaking from notes



Section 1: Brainstorming

Task 1. Remembering your experiences

Answer the following questions individually and then discuss your answers in group.

1. What do you understand by the following terms?
 - sex
 - sexuality
 - culture
2. Have you ever been embarrassed to talk or express your sexual feelings? Who do you feel shy to talk with about sex and sexuality:
 - people older than you?
 - the opposite sex?
 - same sex?
 - a family member ?
 - a person outside your family ?
 - an Ethiopian?
 - a foreigner?
3. Do you know of any customs, beliefs, or practices that contribute to the spread of the HIV/AIDS? Explain how and why?
4. Do you know of any customs, beliefs, or practices that contribute to the prevention of HIV/AIDS? Explain how and why?

Task 2. Understanding cultures

Read the following text on culture. Then discuss with your peers the questions that follow.

Some cultures are “what if” cultures; they search for new possibilities and explanations. Some, however, are “what” cultures; they value analytical thinking, judging and reconciling ideas of why and how. Certain cultures are “that” cultures; they want to conserve past knowledge, with little or no change. Some cultures allow the forbidden. Some cultures are masculine.

- A. In which of the above culture(s) are you living?
- B. How do you think each type of culture impacts the spread/prevention of HIV/AIDS?

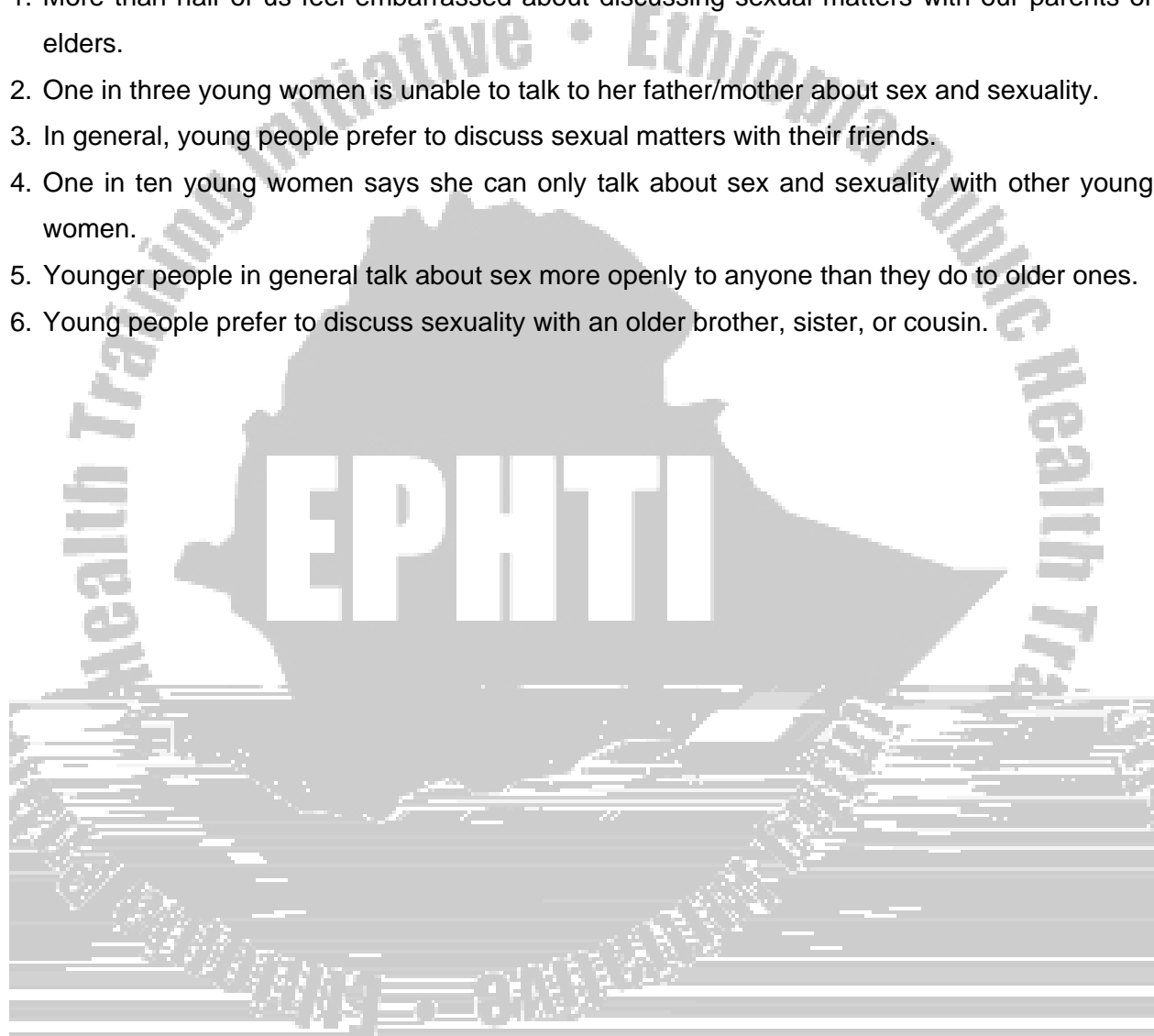
Section 2: Speaking

Task 1. Agreeing or disagreeing

Sit in pairs and decide whether you agree or disagree with the following statements.

Justify why you agree or disagree to your partner.

1. More than half of us feel embarrassed about discussing sexual matters with our parents or elders.
2. One in three young women is unable to talk to her father/mother about sex and sexuality.
3. In general, young people prefer to discuss sexual matters with their friends.
4. One in ten young women says she can only talk about sex and sexuality with other young women.
5. Younger people in general talk about sex more openly to anyone than they do to older ones.
6. Young people prefer to discuss sexuality with an older brother, sister, or cousin.



Task 2. Debating

In groups of four, take a position on one of the following controversial issues. Then find another group holding a position opposite to your groups. Argue, with evidence for your group's position and try to change the minds of the other group.

- Premarital sex should never be practiced.
- Sexual relationships cannot exist without love.
- Virginity is honor. One should never get married to a man or a woman who is not a virgin.
- Physical attraction is more important in choosing a sexual partner than just love.
- It is okay to have casual sex as long as you take preventive measures.
- AIDS is a punishment for humans' disorderly sexual behavior.

Task 3. Personalizing

A) Below are the feelings of some young students as regards marriage and partner choices. Pay attention to the way they have expressed their feelings. Pick out phrases that express stronger or weaker commitment to the speaker's position/ opinion.

Student 1: "I know that in some cultures it was the norm not to choose your own partner. I think it is still so in some countries. I guess may be that is the way it should be. If my parents want to choose my partner, I guess I wouldn't mind."

Student 2: "It's my life, my body, my choice. I would refuse."

Student 3: "I believe it's about time our parents left us alone to choose our partners."

Student 4: "One should get married to a person whom one likes but with the consent of parents."

Student 5: "I don't mind if my parents choose as long as they don't sp my bonts chsife, my by001 Tw[(a(h7(

You can use some of the following expressions in the tips box.

TIPS

Expressions for stronger commitment to your position/ feelings:

I strongly reject/condemn/deny...

I believe/feel...(that)...should/would never/mustn't be...

Expressions for weaker commitment to your position/hedging (not taking a definite position):

I don't mind if...

I don't rule out if...

I don't care (much) if...

C) Pretend that you have to decide how much of half a billion dollars (\$ 500,000) should go to which Ministry tackling the Ethiopia's serious AIDS problem. Answer these questions and present your views to the class, explaining your choice.

1. When deciding how much money should be spent, which ministry do you think should be given priority: Ministry of Health, Ministry of Education, Ministry of Agriculture, or Ministry of Capacity Building?
2. Which Ministry should receive the smallest share (or no money at all)?

Section 3: Reading

Task 1. Anticipating

TIPS

Anticipating what a text is about before you read can help you be more purposeful in your reading.

Before you read the article by William R. Finger titled, "Some Cultures Tolerate Risky Male Behaviors," write down your responses to the following questions. Then, share your answers with your peers.

1. What does “risky male behaviors” mean? Can you think of examples of such behaviors?
2. In your culture, do parents promote manhood and womanhood in the same manner?

Task 2. Skimming

Skim the article below. Then, write down your responses to the questions that follow. Discuss your answers in groups.

Some Cultures Tolerate Risky Male Behaviors

1. Boys generally engage in more risky sexual behavior than girls. Many cultures are more tolerant of male adolescent sexual activity and may even encourage it. Also, adolescent boys tend to use alcohol and drugs more often than girls, which can lead to sexual risk-taking.
2. The concept of manhood in many societies may discourage young men from showing affection or other emotions while encouraging them to seek control, success and power. Such pressures may prompt boys to act aggressively, which can lead to injuries, accidents and homicides.
3. In Mexico, for example, mortality rates for males and females are about equal until age 14, when male mortality begins to increase. Mortality is twice as high for males as for females among people 15 to 24 years old. The leading causes of death for young Mexican men are accidents and homicide.
4. Many men feel stress as a result of not being able to live up to the expected norms of manhood. “There are clear patterns of sex differences in substance use and suicide rates, with boys in developing countries generally reporting higher rates of substance abuse and boys committing suicide at much higher rates than young women,” concludes a World Health Organization (WHO) review of research on adolescent boys.
5. These pressures on males affect women negatively, encouraging some men to have sex only for physical gratification, to have multiple partners and to treat women with little respect or even violence. Boys generally begin sexual relationships at an earlier age and have more partners and are more sexually active before marriage than girls. Also, boys commonly witness irresponsible or abusive behavior toward women and girls, often within their own families, which can encourage them to act irresponsibly. As men grow older, these unhealthy behaviors may become more difficult to change.

What Boys Need

6. Encouraging young men to avoid risky sexual behaviors can result in better reproductive health for everyone. In a larger context, helping young men to develop self-esteem and a sense of purpose in life can lead to better treatment of women and less risky behavior. But



and youth groups. A Youth health Convention for boys has promoted better reproductive health through posters, slogans, essays, quiz programs and street plays. More than 2,700 boys from slums and another 2,600 boys in schools have participated.

12. One important need of adolescent boys is basic knowledge about reproductive health issues. In the slums of Lucknow, a city in north India where premarital sex is traditionally



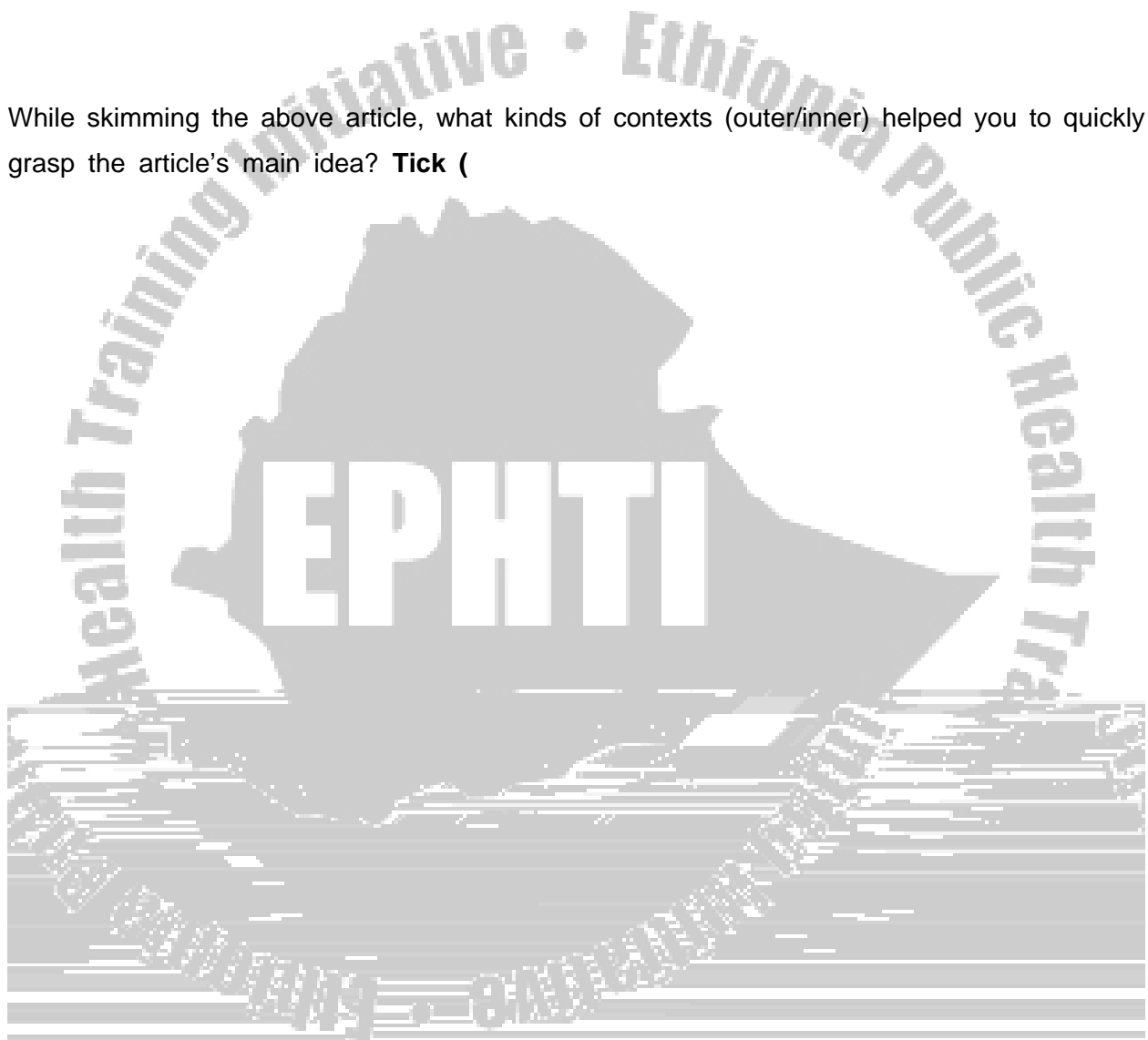
knowledgeable about the community and finding out what the participants know and are interested in learning. Using male staff was essential; offering employment training or recreation helped pave the way for providing reproductive counseling; and a playful, entertaining and non threatening approach worked best. “Preaching responsibility can turn males off”, the report says. Instead, these programs try to change males’ attitudes towards themselves, their relationships with women, and their futures.”

18. “Men are individuals with their own sexual and reproductive health needs,” says Freya Sonenstein of the U.S. based Urban Institute, which recently reviewed programs working with young men in the United States. “If we can empower men in this area, it will lead to greater gender equality.” The review concluded that a comprehensive reproductive health strategy



Task 3. Matching Reading Techniques with your purpose

While skimming the above article, what kinds of contexts (outer/inner) helped you to quickly grasp the article's main idea? **Tick (**

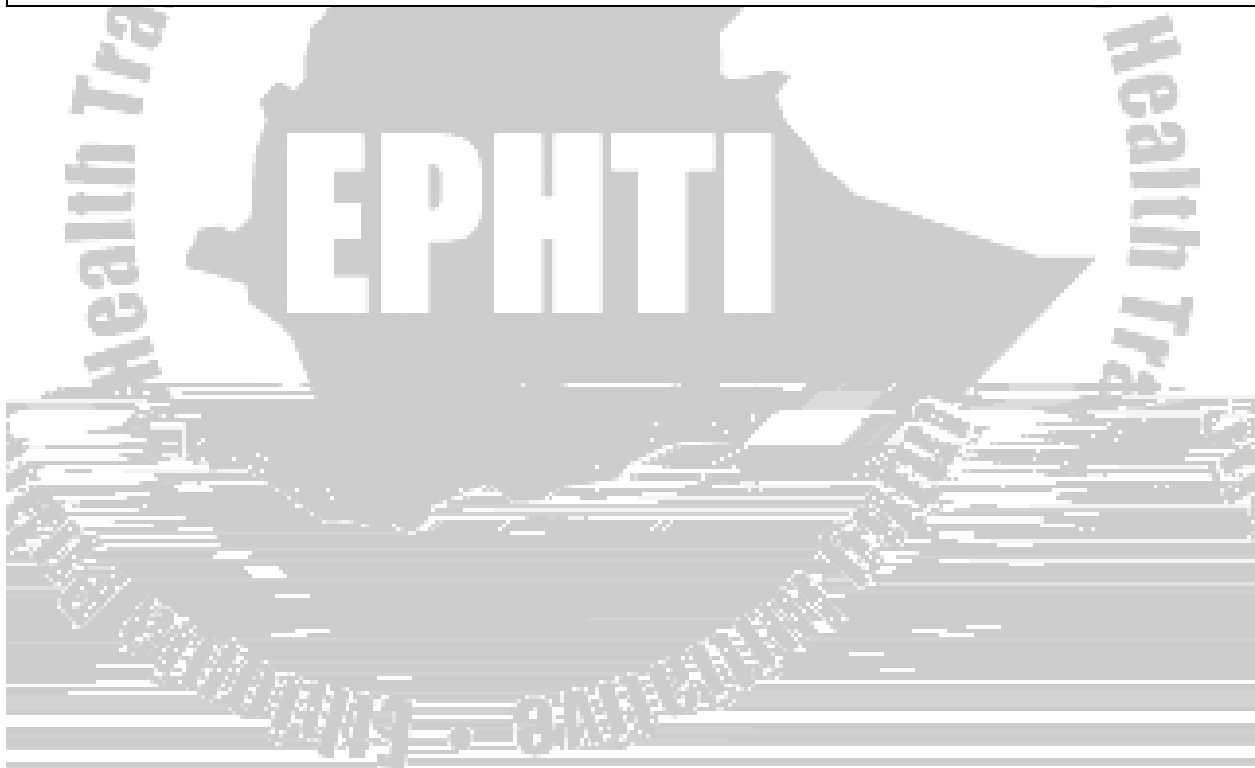


Section 4: Writing

In the previous section, you skimmed through a scientific/technical article. In this section you will

- call attention to a position that you wish to agree or disagree with
- highlight a particularly striking phrase or a passage by quoting the original

Expand the breadth or the depth of your writing writers frequently use both quotations and paraphrasing in work. As part of a summary of an article, a chapter, or book, a writer might include paraphrases of various key points with some quotations that are particularly striking or interesting. Examine how the writer used quotations. This will help you use quotations in a similar manner, both in oral presentations and in academic writings.



TIPS

Quotations add to your written and oral presentations and provide support and credibility to your work. Your academic writing, however, should not include too many quotations. They are meant to add depth to your arguments. There are two ways to include other people's ideas into your own writing:

- (2) quotations: Quotations must be identical to the original,
- (3) Paraphrasing: Paraphrasing involves putting another writer's thoughts into your own words.

Both quotations and paraphrasing must be attributed to the original author. There are several reasons to use quotations and paraphrasing in your writing.

They can:

- provide support for your claims or add credibility to your writing
- refer to work that leads up to the work you are now doing
- give examples of several points of view on a subject

Task 1. Understanding the purposes of quotations

Refer back to the text in Section 3, and then answer the following questions.

1. Identify all the quotations in the passage.
2. Why did the writer quote?

Task 2. Analyzing how quotations are used

Referring to Finger's article and to the quotations you identified in the last task, answer the following questions in pairs.

1. **Punctuation:** What type of punctuation has Finger used to show that he took the exact idea as it was originally written, with no change?
2. **Language form:** What common phrases does he use either before or after direct quotations in order to tell us who said them? Could these phrases be used before the direct quotation?

3. **Paraphrasing (rewording):** Find some examples of where Finger has paraphrased and reworded the quotation of another writer or speaker. In this case, you are not reading the



I admire the culture of because I would like to know more about the relationship between culture and Something that influenced me a lot from my culture is One big thing that influenced my culture, but came from the West is

Task 2: Listening for argument

Listen to the following lecture on Health and Culture. As you listen, take short notes on the following points:

- What culture means;

-

HEALTH AND CULTURE

From: UNAIDS, 1999, *Communication Framework for HIV/AIDS*, Penn State, pp. 34-38.

- Wrong perceptions concerning culture and health; and
- Points to be considered as regarding HIV/ AIDS, health and culture.

Task 3: Speaking from notes

Study the notes you took on “health and culture” and make a speech to your classmates, you can refer to your notes, but DON’T just read them word for word.

TIPS

One of the various reasons for gaining knowledge is to be able to pass it on to other people. Making a speech is one way to do this. You can do this by listening and taking notes from what you listen. Sometimes you may use the notes to make a speech to other people about the new information.

Section 6: Grammar

Task 1. Listening for signal words

Listen again to the above lecture—Health and Culture—and fill in the following table with signal words, using examples from the lecture, and from the newspaper, magazine, or journal article you used in Section 4 of this unit.

TIPS

Signal words, sometimes called *transitions* or *connectors*, are used to show links between ideas.

Additional Points	Contrast	Examples	Emphasis	Paraphrases	Summary
in addition	however	for example	in fact	that is	to summarize

Task 2. Reporting

Report—either orally or in writing—briefly what you read in the articles you brought to class (Section 4 Task 3 above). You may use some of these expressions:

X understood that HIV/AIDS ...

Y thought that...

X showed that...

Y intended that...

X attempted to show that...

Section 7: Reflection

How confident are you now about the following skills? Use this scale to assess your progress.

0=No confidence

1=Low confidence

2=Moderate confidence

3=High confidence

- _____ a. speaking about social taboos
- _____ b. expressing commitment to an opinion or hedging
- _____ c. skimming short articles
- _____ d. using quotations
- _____ e. note taking from listening
- _____ f. using reporting verbs while quoting
- _____ g. debating confidently on issues
- _____ h. identifying and using sub-skills in skimming when necessary
- _____ i. using signal words in appropriate context
- _____ j. self-assessing your progress

UNIT TWO

CULTURE: FOR OR AGAINST HIV/AIDS?

Objectives

At the end of this unit, you should be able to:

Objectives



Section 2: Reading

Task 1. Pre-reading

Before you read the article by Michael Holgate, discuss the following questions with your peers.

1. Are artists (musicians, writers, etc.) doing enough to raise community awareness about HIV/AIDS in Ethiopia? Give examples.
2. If you were an artist, what would you do to raise the “unheard voices” of parents, the communities, AIDS patients, and orphans concerning the disease and its impacts?
3. What are the impacts of cultural taboos on open discussions about HIV/AIDS, sex, and sexuality?

Task 2. Scanning

TIPS

‘Scanning’ is a reading strategy that helps you look through a text quickly to find a specific piece of information. For example, if you are looking for names (persons, places, things) or dates in a paragraph, you can scan the paragraph to pick out the information.

Read questions 1-4 below. Then scan the following article by Michael Holgate, titled “The ‘Ashe’ Experience in Jamaica” to find the answers as quickly as you can (you have 5-7 minutes ONLY).

1. What does the word “Ashe” mean? What does it refer to in this article?
2. According to the text, what cultural taboos in Jamaica “place a muzzle upon the mouths of parents and teachers”?
3. The writer says, “A good way to learn something is to teach it.” With what evidence does he support this statement?
4. According to the writer, performing a character or role leads to self-analysis. Self-analysis, in turn, leads to action. Support these relationships between performance, self-analysis, and action with a story from the text.

The “Ashe” Experience in Jamaica



young people find themselves as they begin their passage into sexual maturity.



example, the whole issue of masturbation can be an embarrassing thing to talk about, perhaps because there is only one person to take responsibility.

In Ashe discussions, we change the word associated with this activity to make it easier to discuss. All teenagers want to drive a car and get their license, so “masturbation” can be described as “driving.” And so young adults can more freely discuss driving and their concerns about driving; yet known that we are really talking about masturbation.

As a performer and facilitator during discussion sessions and workshops, I am keenly aware that my own levels of comfort and self- respect are important. Any insecurity participant’s sense from me as a facilitator will only make them less



Kenya: Female Circumcision
Mwaura Muigana

The operation was very painful. The midwife cut



Task 2. Understanding punctuation

Reread the above article about female circumcision in Kenya and discuss the following points.

1. Why did the writer put the words *tied* and *closed* in single quotation marks? (*Paragraph one*)
2. Why did the writer put an asterisks (*) after and above 'AIDS' in the third paragraph?
3. What is the role of the two dashes in the last paragraph?
4. Why did the writer hyphenate *25-year-old* in the second paragraph?
5. Pay attention to the way the double quotation mark/ inverted commas are used; both commas and periods are placed inside quotation marks.

Section 4: Reading

TIPS

To read critically, you first need to identify the speaker's/ writer's viewpoint. Then, identify how he/she supports his/her position. You can also relate it to and analyze it from socio-historical perspectives. Note that, to support their views or ideas, writers/speakers might use:

- Facts and figures;
- Firsthand experience;
- Logical reasoning;
-

Read the following poem critically and discuss the questions that follow.

Pain of Trust

Is there no place to hide?
I wished to be washed out with a tide
The shadow around is frightening me
I need to get away to be free
I know of a place I can go
My family doesn't have to know
It is not far from my home
It allows me to build up coverage alone
The pain, the anger, the frustration and all
these emotions could be my down fall
I know of a way to get rid of it
And I'm pretty sure it won't hurt a bit
I wonder if I'll go to heaven or hell
If I stay back any longer I'll never be able to tell
Before I could leave
I must write what no one believed

"Goodbye,

I'm sorry I had to leave this way
But the man you all trusted
Used me again and again
Bringing me shame and pain,
But mother it hurt more
To see that you didn't believe me before
Now you will know and be wiser
The abuser was your brother!"

Charlotte AURELIEN, age: 20

Youth Advocacy Movement- St. Lucia

(From: The IPPF newsletter by and for young people X-Press, Volume 5, Number 1 May 2003. page 6.
What happened to the "safe places?")

1. What do you think this poem is about? What clues make you think this?
2. Why is this poem important for the youth?
3. Why do you think the poet chose the title “Pain of Trust”?





Section 6: Grammar and vocabulary



2. Think of other adjectives that might imply sexual behaviours important to controlling/spreading AIDS. You may use a dictionary or thesaurus. Categorize these



D. Needles/not share/with anyone

- a. _____
- b. If _____

2. To allocate blame use the active.

Examples:

- a. She should have waited for someone to ask about his sexual history.
- b. If she had waited for someone to ask about his sexual history, it wouldn't have happened.
- c. Had she waited for someone to ask about his sexual history, it wouldn't have happened.

A. He/use/condom

- a. He should have used condom.
- b. If _____

B. The government /not leave /orphans forgotten

- a. _____
- b. If _____

C. We/not stigmatize/AIDS patients

- a. _____
- b. If _____

D. Hospitals/screen out/blood/before transfusion

- a. _____
- b. If _____

Section 7: Reflection

Below is a list of tasks you have practiced in this unit. Check (D) those you feel confident about.

- a. scanning a text
- b. understanding the use of punctuation
- d. understanding metaphors and connotations
- e. reading critically a poem
- f. listening and taking structured notes
- g. using active and passive constructions



MODULE FOUR



UNIT ONE

HIV/AIDS: MYTHS AND REALITIES

Objectives:

At the end of this unit, you will be able to:

- Share opinions;
- Acquire purposeful and analytic listening skills;
- Negotiate meanings in pairs and groups;
- Use English structure to give oral and written reports;
- Apply inference and analytical reading;
- Practice a vocabulary learning strategy; and

Evaluate your own learning practices.

Skills in focus:

- Listening for details
- Identifying implied meanings
- Writing short reports
- Giving oral reports
- Finding word partners



Section 2: Listening

Task 1. Listening for specific information

Listen to Part 1 of the text that explains practices considered to be helpful in overcoming the dangers of AIDS. While listening, complete the flow chart.

4.

Prevention

The image shows a large, faint watermark logo for the Ethiopia Public Health Training Initiative (EPHTI). The logo consists of a map of Ethiopia in the center, with the acronym 'EPHTI' written across it. Above the map, the text 'Health Training Initiative • Ethiopia Public Health Training Initiative' is written in a circular arc. Below the map, there is another line of text in Amharic script: 'ጤና ምክንያት ስልጠና ስራ ቤቅ'.

Task 2. Listening for details

A) Listen to **Part 2** of the text which discusses prevention strategies. Match the strategies under **Column A** with their correct descriptions under **Column B**.

Column A

- ____ 1. Personal empowerment
- ____ 2. Peer education
- ____ 3. Social marketing
- ____ 4. Counseling and HIV testing

Column B

- A. The use of advertising and distribution networks to promote condom use
- B. Reducing vulnerability to HIV by expanding people's choices and control over their own lives
- C. Spreading messages about HIV by recruiting educators of the same background and social standing as both audience and educator
- D. Providing medicinal advisory service and knowing one's sero-status.

B) Listen to Part 2 again. While listening, complete the table below with information and in mentioned in the text. Then compare your answers with your partner's.

Preventive strategies	Country/ies where it is applied	Specific actions taken
Peer education		
Personal empowerment		
Social marketing		

Section 3: Reading

Task 1. Predicting text contents

Look at the titles of the passage and that of the book below. Can you guess what the subject is? Consider why the write has chosen such a seemingly obvious title. Does HIV Cause AIDS?

(Taken from *AIDS Africa: Continent in Crisis* by Helen Jackson, 2002, Harare: SAFAIDS, pp. 5-6)

1. A separate question unfortunately receiving continued attention is whether HIV, the virus, is actually the cause of AIDS, the condition of sever loss of immunity that allows deadly infections to develop. Those who doubt this loosely led by American Metrologist Peter Duesberg variously argue that:
 - ⇒ HIV does not exist
 - ⇒ HIV does exist, but it is harmless and not lead to AIDS
 - ⇒ HIV is harmless on its own, but it can lead to AIDS when other health stressors are also present, such as malnutrition , poverty, illegal recreational drugs, tuberculosis (TB) or other infections (such as micoplasma).
2. These are misleading arguments ignoring all the extensive evidence that HIV does indeed lead to AIDS. HIV has been observed directly under electron microscopes – it certainly exists. It also leads to the development of antibodies in the blood that can be measured, and it can be detected directly through sophisticated HIV antigen tests.
3. That HIV leads to AIDS is shown by the fact that everyone who develops AIDS has HIV antibodies unless their immune system becomes so weak that it can no longer produce them. This is more common in young children shortly before death.
4. Does HIV only cause immune deficiency in people with other risk factors? Not everyone who develops AIDS is malnourished, has used recreational drugs, or has micoplasma infection or TB, so HIV infection, not one of these other factors, is the critical cause. People can develop weak immunity for other reasons than HIFV infection: for instance, if they are malnourished, if they have certain cancers, or if they are given drugs to suppress immunity (such as in transplant patients to prevent organ rejection). But in the 1980s and 1990s, these conditions did not occur on an unprecedented scale worldwide.
5. Poverty and malnutrition are increasing, particularly in Southern Africa worsening HIIV infection and speeding the progression to AIEDS. They are not, however, in themselves the

root cause of the epidemic of immune deficiency. Tragically, millions of people are



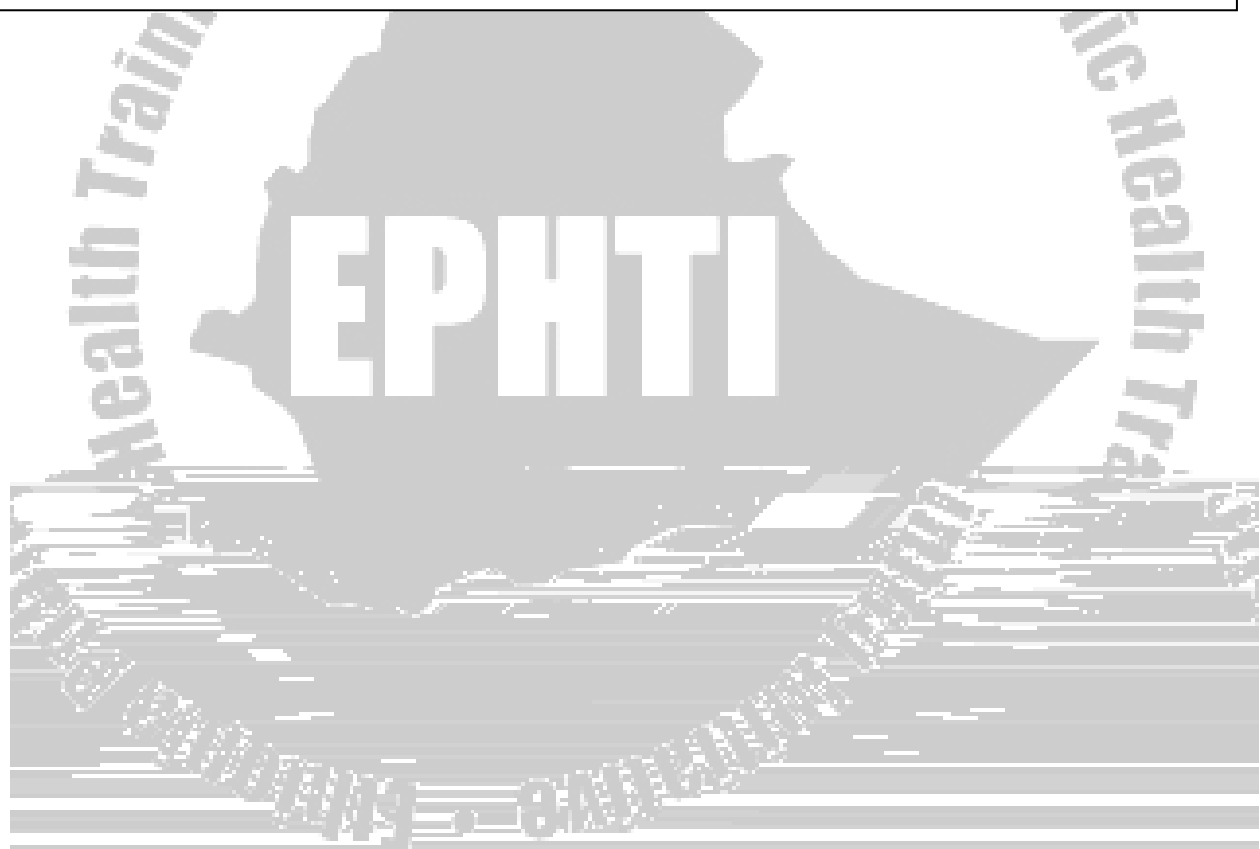
Task 2. Making inferences

Infer the tone of the text after you have read the tips. Also distinguish facts from opinions.

1. Identify more expressions from paragraphs 7 and 8.

TIPS

Text tone: Every argumentative text has a tone that reveals the feeling of the writer whether that is bitterness, optimism, anger, dism



Identify more instances from the text and compare yours with those of your partners. Then present your answers for class discussion.

Section 4: Speaking

Task1. Interviewing

Conduct interviews on the issues mentioned below. With four different students in your class find out what opinions they have. Read the tips before you begin the interviews

.Issues:

- The relationships between HIV and AIDS
- The effects of the debates about the causes of AIDS
- Students' attitudes concerning, abstinence, fidelity and condom use.
- Students' preferences about preventive practices

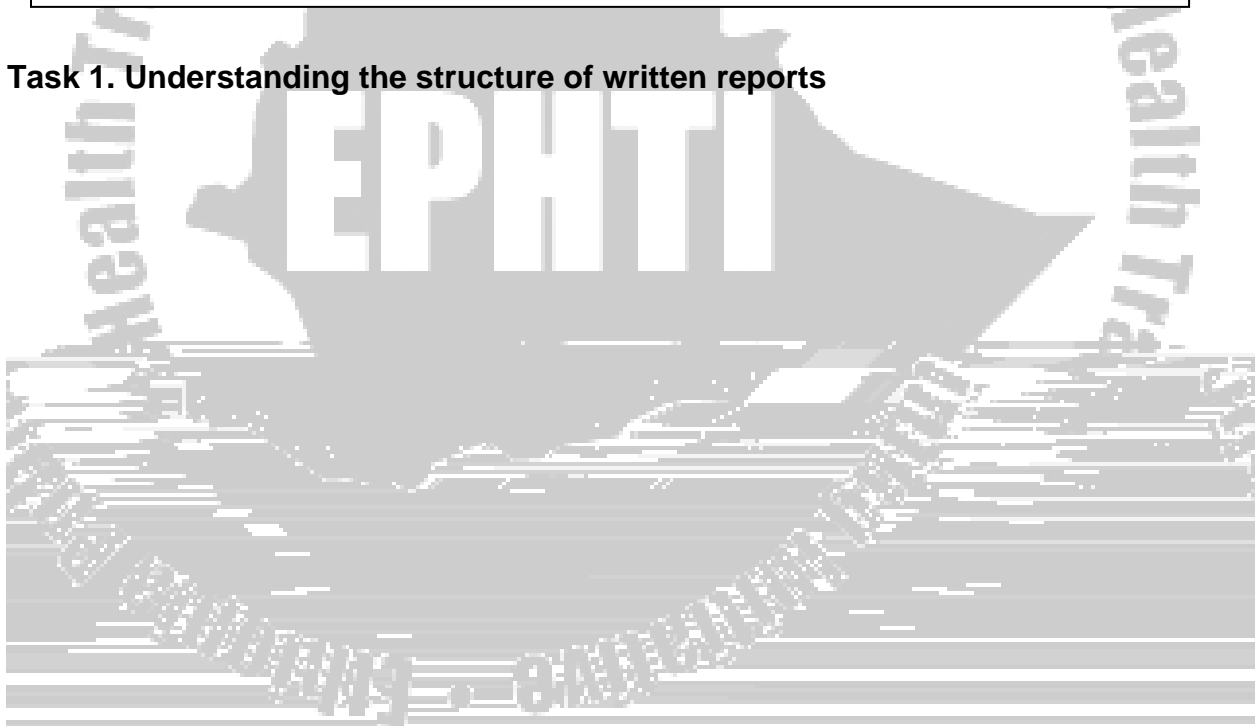
Record selectively all the major points you think useful; listen actively to your interviewee and interact freely.

Task 2. Reporting

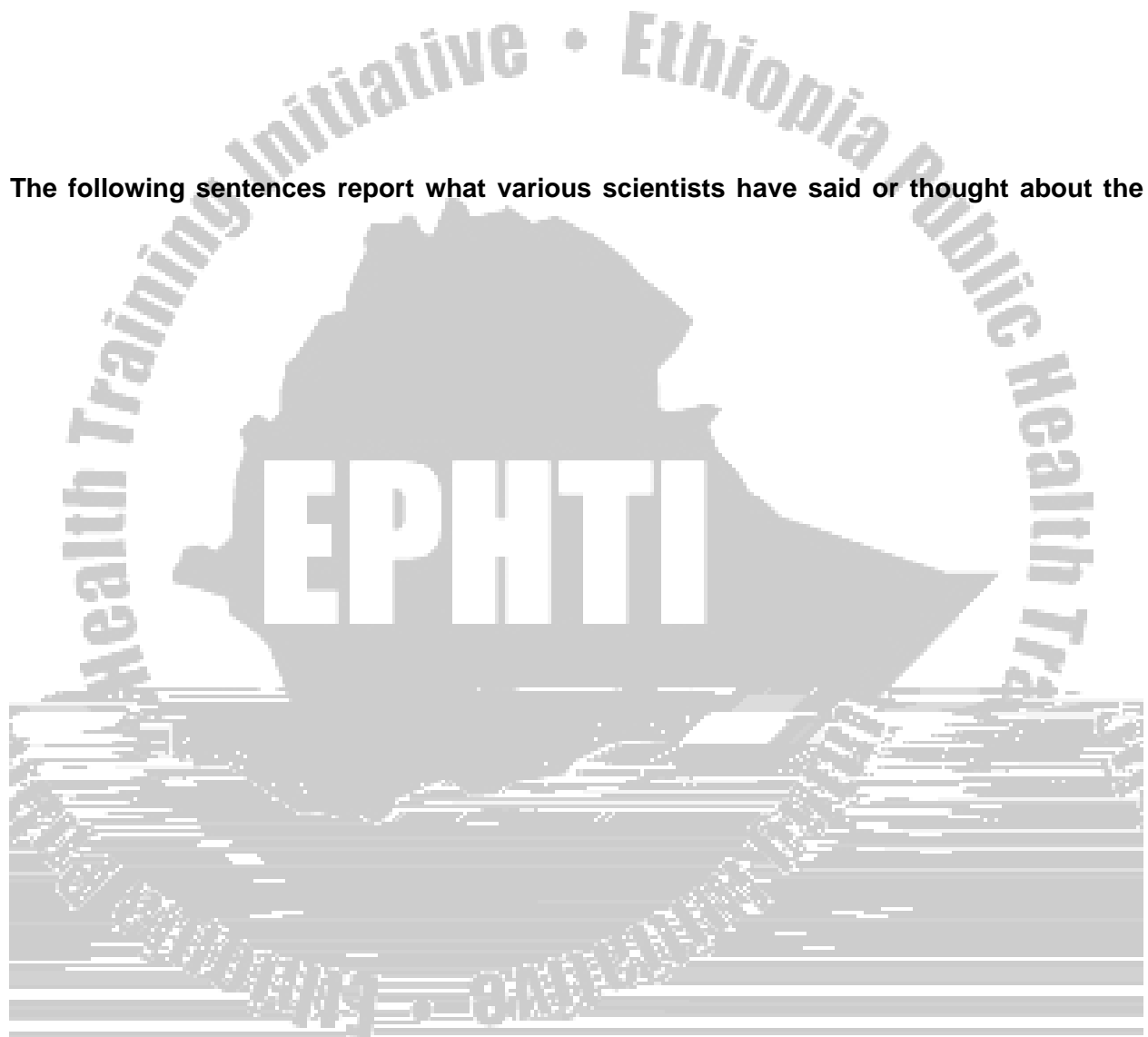
Based on your interview, prepare a short (5minutes) oral report to be presented to the class. Focus on the responses that were common among your interviewees.

Section 5: Writing

Task 1. Understanding the structure of written reports



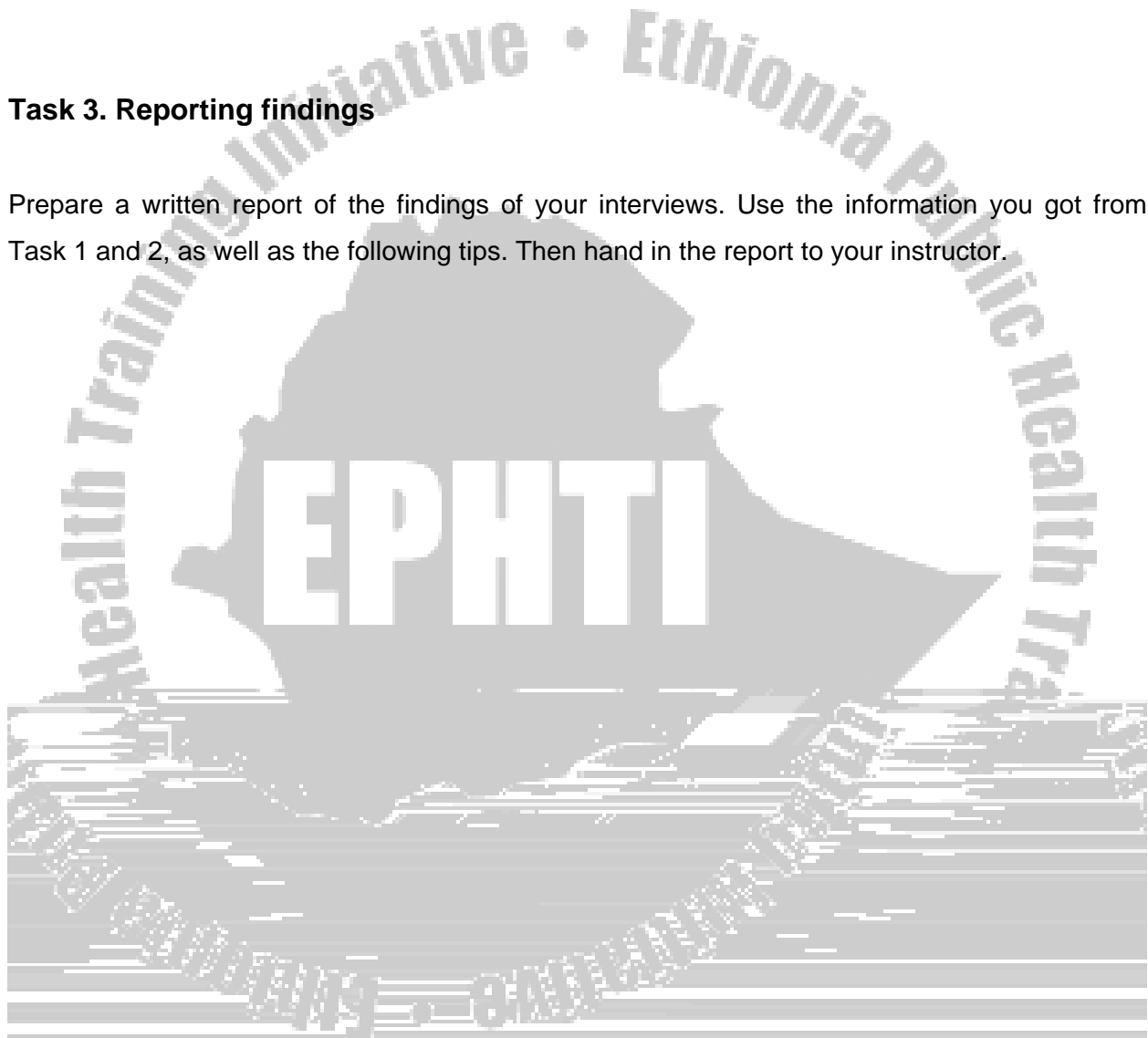
The following sentences report what various scientists have said or thought about the

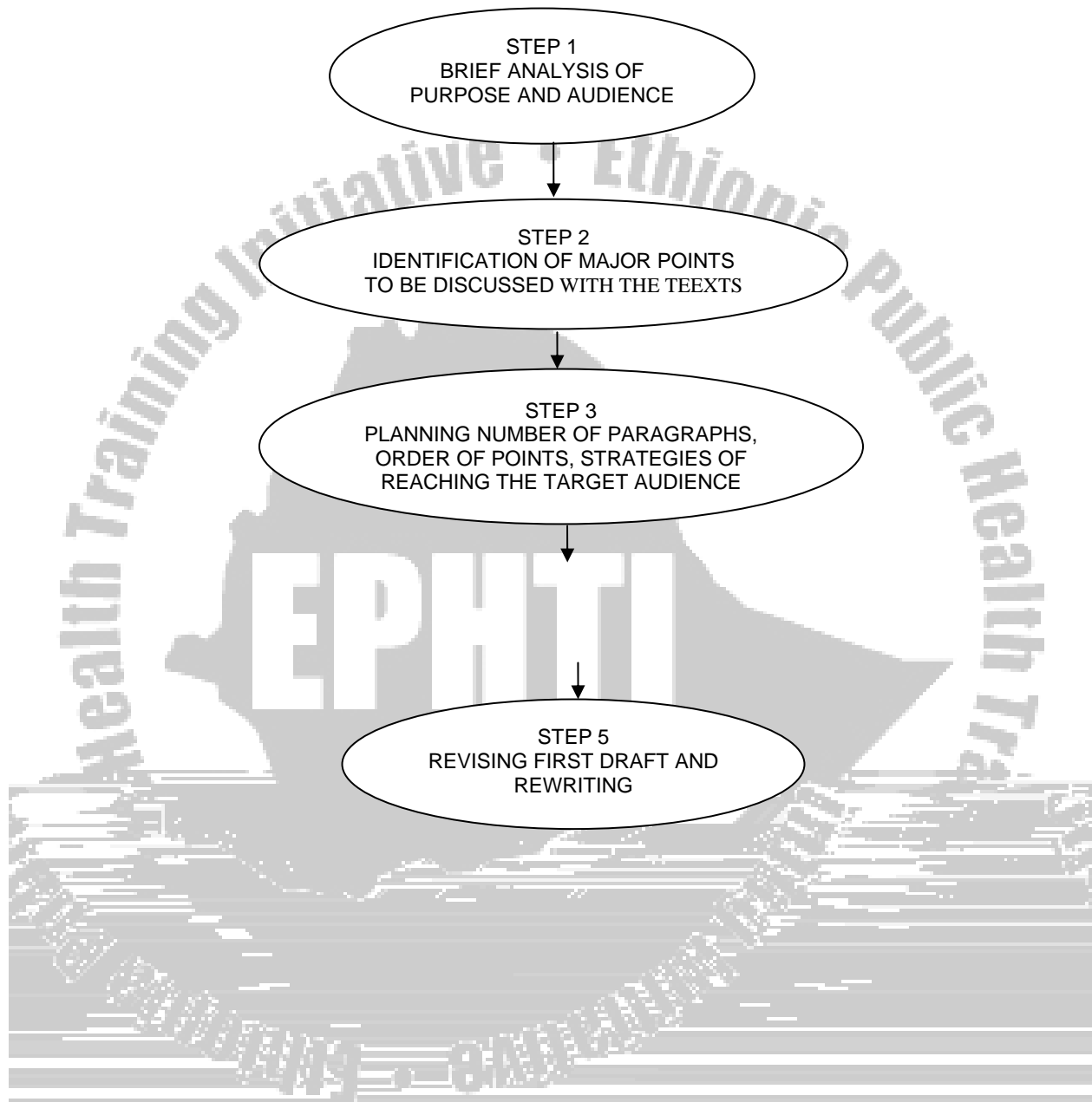


Reporting verb	Purpose of the verb in an utterance	Conjugation
ask	To pose questions	ask-asked-asked
complain	To show grievance	Complain-complained-complained

Task 3. Reporting findings

Prepare a written report of the findings of your interviews. Use the information you got from Task 1 and 2, as well as the following tips. Then hand in the report to your instructor.





TIPS

1. Commonly used reporting expressions

- Most of the students explained/ indicated/ replied.
- Two respondents reacted by saying...
- All of the interviewees were of the opinion that ...
- None of the students indicated that ...

2. Tense to be used:

- Simple past tense

3. Possible text structure

- **OPENING PARAGRAPH:** State purpose, main idea to be raised
- **DEVELOPING PARAGRAPHS.** One or more paragraphs, each dealing with one sub-issue; using introductory statements for each paragraph is preferred.
- **CLOSING PARAGRAPH:** Draw two or three conclusions on the basis of the information you obtained from the interviews.

Section 6: Vocabulary

TIPS

A). Complete the following table with five adjectives and five verbs that form strong word partnerships with the noun “disease.” For example, the verb “cure” collocates with the noun “disease” and forms cure disease. The adjective “preventable” also partners frequently with “disease,” creating “preventable disease.”

VERB	ADJECTIVE	KEY WORD
cure	preventable	disease
_____	_____	
_____	_____	
_____	_____	
_____	_____	
_____	_____	

Skills and linguistic forms
you mastered

Skills and linguistic forms you
were unable to master



UNIT TWO

OVERCOMING HIV/AIDS CHALLENGES

Objectives:

At the end of this unit, you will be able to:

- Comprehend textual and non-textual information through analytic readings;
- Read critically;
- Analyze quantitative data as evidence to support propositions;
- Present oral suggestions;
- Predicting;
- Use dictionaries effectively;
- Produce written suggestions and advice; and
- Reflect on one's own learning.

Skills in focus:

- Predicting
- Recognizing text organization
- Evidencing
- Using dictionaries effectively
- Making suggestions

Section 1: Brainstorming

Task 1. Activating your previous knowledge

Complete the following task to prepare for a series of activities.

1. Write what you know about the following terms.
Voluntary counseling
An HIV test
2. Many people are reluctant to have HIV test. What do you think their reasons are?

Task 2. Agreeing and disagreeing

Do you agree or disagree with the following statements? Support your position with justifications.

1. Governments must introduce mandatory premarital HIV testing laws.
2. Instead of wasting resources by spending millions of birr to buy testing equipment, Ethiopia must invest in other development activities like road construction and agriculture.
3. One cannot have a normal life once he or she has proved HIV-positive.

Section 2: Reading

Task 1. Reading critically

After studying the tips below, read the following text and make reasonable guesses about its purpose, its intended primary target audience and the date it was written. Identify evidence from the text to support your answer.

TIPS

Purpose of text: Texts vary considerably in their purposes. Their purposes can be to teach, to raise awareness, to change behaviour, to indoctrinate, to persuade, etc. For example, academic texts focus on imparting field-specific knowledge and skills. Periodical articles, such as those taken from magazines and newspapers mainly intend to share information and news

Audience of texts: All texts are targeted at a certain readership group. For instance, academic texts are mainly meant to be read by students and instructors.

Date of text production: Although a date of text production is usually indicated in the actual material, readers can guess roughly the time when the text was written from references made throughout discussion. For example, if references are made to Kofi Anana as Secretary General of the UN, readers can guess the text was written sometime in late 1990s.

PART ONE: Voluntary Counseling and Testing

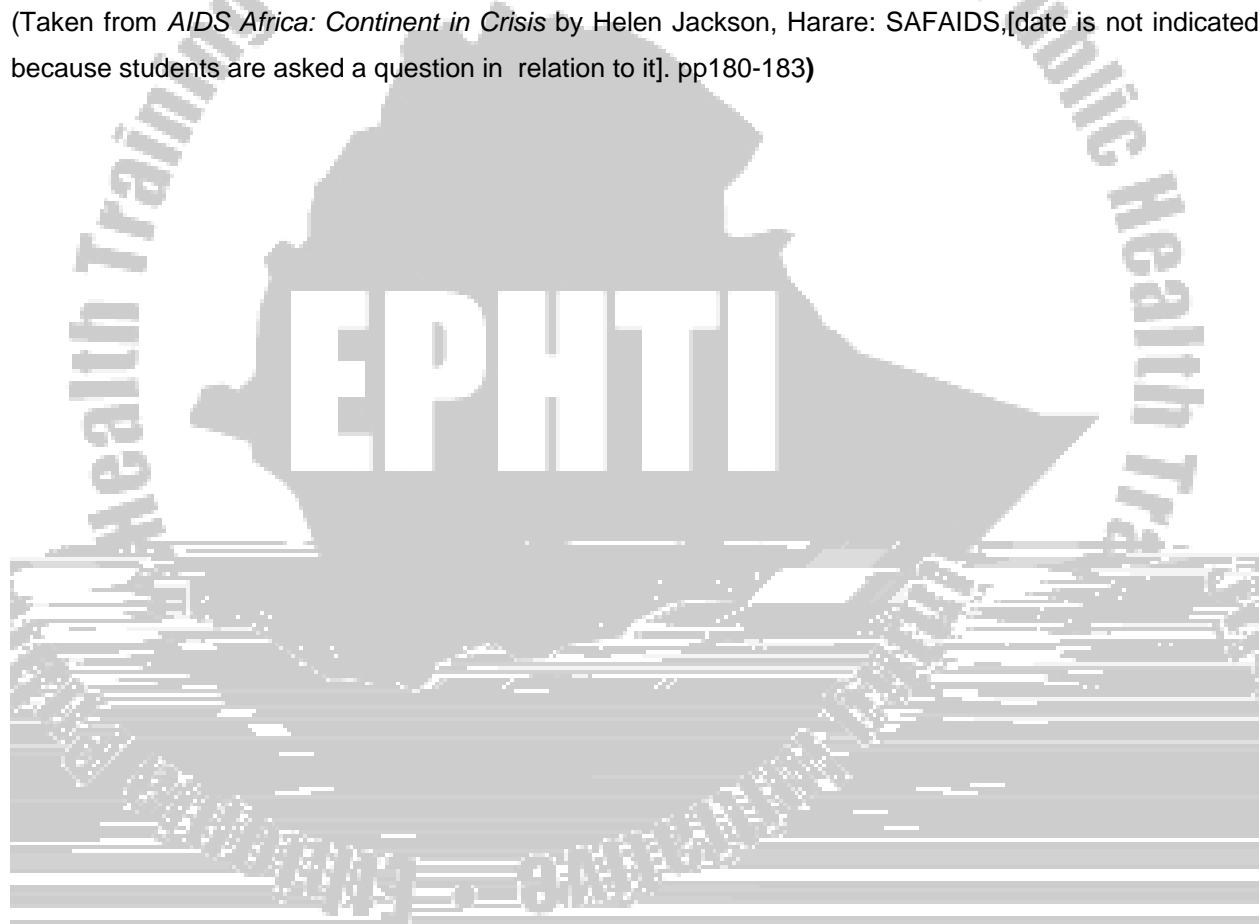
1. Many medical conditions require laboratory tests on samples of blood, urine, saliva or tissue to identify infections or other health problems. Tests may be carried out on healthy individuals to detect hidden problems or on people who are already ill. Other reasons for testing are to screen a population to determine the extent of a specific organism or infection and to safeguard blood supplies for transfusion.
2. In the case of HIV infection all of these apply. Repeat sentinel screening for HIV, that is, the repeated testing of certain population groups for HIV is a good way to measure how the epidemic is progressing, for example among pregnant women. In some countries, sex workers, hospital patients, people with tuberculosis or with sexually transmitted infections, army and police personnel, prison populations, drug injectors, homosexual (gay) men and other groups are also screened.
3. Blood donors are normally screened for HIV, but they may or may not be given their test results. The laws on testing vary from country to country, but whatever they are, they may be difficult to enforce. For example, even if pre-employment testing is illegal, preventing this is difficult if it is legal for companies to undertake medical examinations that include blood tests.
4. Although HIV is found in various body fluids, HIV tests are generally done on blood because the virus is most concentrated in blood. HIV causes the blood to produce HIV antibodies. The most widely used tests for HIV detect these antibodies, not the virus itself. These tests should really be called HIV- antibody tests, not "AIDS tests," as they only reveal underlying HIV infection and not the progression to AIDS.
5. The standard testing procedure is simple and relatively painless. Until recently, most tests involved drawing blood from a vein in the arm and sending the sample in a numbered bottle to a laboratory. Results came back in anything from one to several weeks depending on transport and laboratory facilities. The most common of these tests are ELISA tests (enzyme linked immunosorbent assay). Normally two tests are done on the same blood sample, and if they give different results, a third, confirmatory or tie-breaker test is performed. In the past, the standard confirmatory test in wide use was the Western blot, but cheaper confirmatory tests are now available. Elisas are now considered sufficiently sensitive and specific for a third, different ELISA to be used as a confirmatory test.
6. During the first few weeks after initial infection, HIV tests may not be accurate because it takes up to 12 weeks for antibodies to be produced in detectable quantities (the window

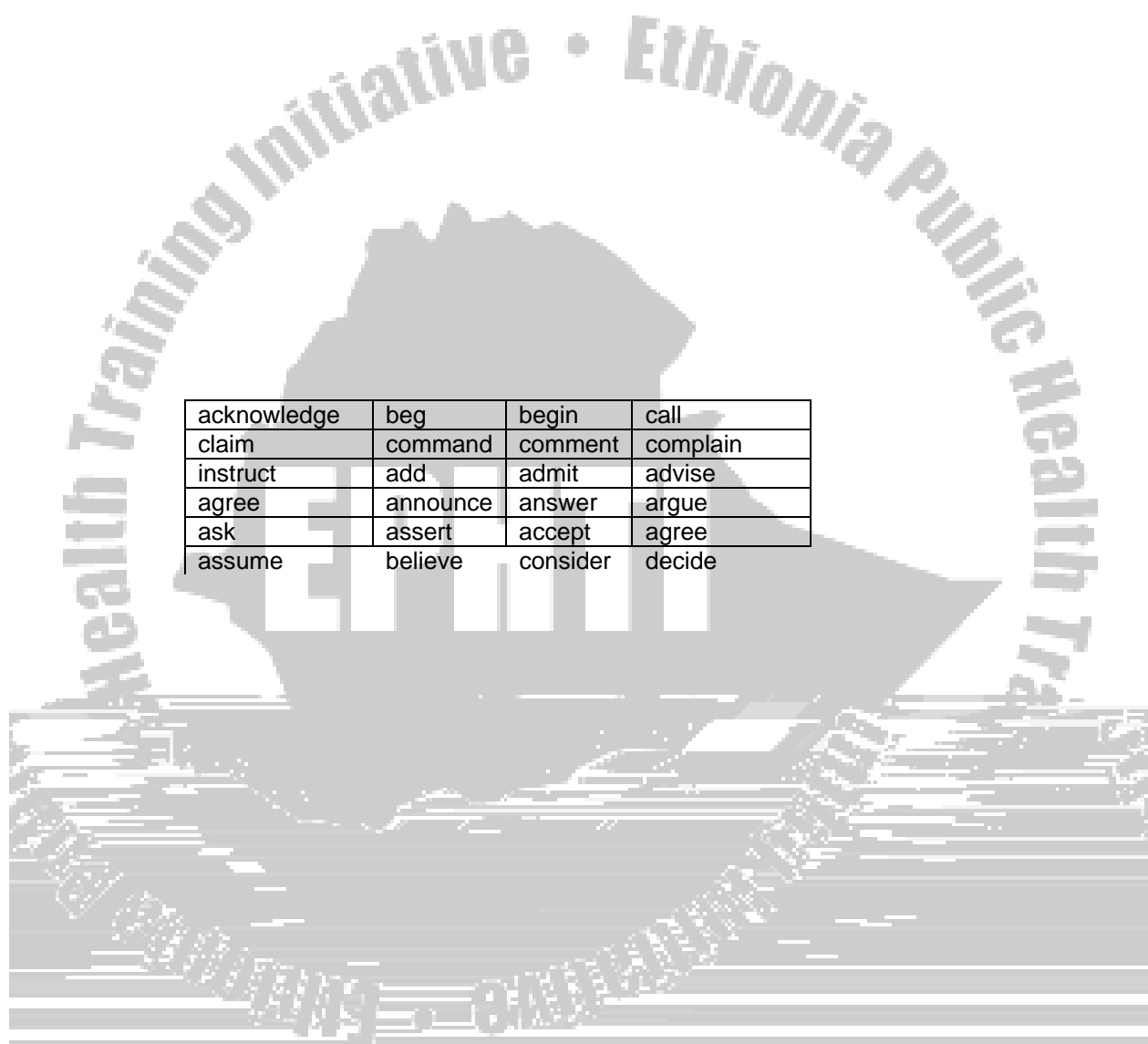


than imported ones and, if further research endorses it, including for HIV-2. It could lead to local production and export within the region.

10. Rapid tests provide quick results for relatives required to give blood in emergency situations, making emergency transfusion far safer. Rapid and simple tests also work out cheaper than ELISA tests for individual testing. Despite higher unit costs, they allow savings on laboratory facilities and staff, and they can be done individually or in small numbers without losing the economies of scale that ELISAs require to be cost effective. ELISAs currently remain cheaper for most sero-surveillance purposes and routine screening of donated blood when the laboratory equipment and staff are already in place and high volumes of tests are performed.

(Taken from *AIDS Africa: Continent in Crisis* by Helen Jackson, Harare: SAFAIDS, [date is not indicated because students are asked a question in relation to it]. pp180-183)





acknowledge	beg	begin	call
claim	command	comment	complain
instruct	add	admit	advise
agree	announce	answer	argue
ask	assert	accept	agree
assume	believe	consider	decide

2. Write a paragraph comparing and contrasting ELISA and Rapid tests based on the information you filled out in the above table.

PART TWO: Voluntary Counseling and Testing

(Taken from *AIDS Africa: Continent in Crisis* by Helen Jackson, pp. 187-190, 2002, Harare;SAFAIDS)

1. Many countries in sub-Saharan Africa and elsewhere are developing VCT services where HIV testing may be done free or for a small fee, after pre-test counseling. Wide differences in the extent of VCT services are apparent both within and between countries. Typically, urban sites precede rural ones. Uganda is one of the countries with the most well-developed and expensive VCT services and has considerable experience to share regarding VCT programming.
2. VCT may be set up within a hospital, clinic or other setting, or as independent services in communities. Increasingly they are linked with antenatal services to help parents prevent HIV transmission to the baby. Some AIDS service organizations offer VCT as part of a wider range of support, and support groups may link with VCT centers. Anonymity and confidentiality can be maintained by using numbers not names on the forms and samples. The health worker keeps the counterfoil matching the number and the name of the patient. Sometimes clients are encouraged to use a unique name that they can remember, such as their mother or father's first name, rather than their own, as an additional safeguard.
3. Access to information on one's HIV status is a human right as well as a public health measure: people have the right to know their HIV status so they can protect themselves and others from infection, improve their health care and plan for the future. VCT services provide a supportive venue for learning this essential health information.
4. A global review of VCT services by UNAIDS (2001:65) considers the weak, or aTdfes by6

	Self reported condom use		
	Before VCT	After VCT	
HIV +	10 %	89 %	With steady partner
	10%	100 %	With casual partner
HIV - male	16 %	38 %	With steady partner
	34 %	93 %	With casual partner
HIV - female	15 %	34 %	With steady partner
	14 %	94 %	With casual partner
Policy Project (2000:49)			

Table 1 gives encouraging results of increased condom use after VCT in Uganda in the early 1990s, suggesting highly responsible behavior changes with casual partners, less so with steady partners. This could be indicative of the difficulty of introducing condoms into steady relationships or it could mean that maintained monogamous relationships with a partner they either knew or hopped was HIV negative. Eleven percent of the people with positive results continued to put their steady partner at risk – and the figure might be higher but be underreported.

5. In this review of VCT outcomes, the majority of studies reveal benefits following VCT. However, many of the studies are descriptive, without control groups and have end points that rely on reported behavioral data (such as number of sexual partners or condom use) that are not supported with more objective outcomes... (T) here are, however, clear preliminary indicators that VCT is important in helping people reduce risky behavior, although societal and cultural pressures may sometimes override these. VCT is also shown to be important in enabling PLHA to access appropriate services, make decisions about future and family planning and benefit from inventions to prevent HIV – associated infections and MTCT ... There is, however, very little information on where behavior changes for both those who test seropositive and exonerative can be maintained in the long term.
6. Preventing HIV transmission is a critical reason for people to learn their HIV status. If negative, people may be motivated to stay negative, and they are counseled with this aim. If positive, people are counseled to avoid acquiring further virus or contracting other sexually transmitted infections (STIs), as exposure to both new HIV viral strains and STIs can hasten their progression to AIDS. They are also counseled to avoid spreading the infection to others.
7. Donors, policy makers and programmers need to justify new interventions not only on the basis of identified needs but also on criteria of whether the outcome justifies the expense: is

this a good way to spend money, or would another intervention achieve the same goal at less cost or more efficiently? Increasing evidence shows that VCT is a cost-effective strategy in HIV prevention (UNAIDS, 2001), but different modules of VCT in different settings vary widely in terms of cost especially with regard to how much infrastructure is already in place and what needs to be developed (UNAIDS, 2000c).

Task 4. Identifying evidence

In the above text, the writer supports her arguments with quantitative data. For example, look at the following:

Proposition: VCT is beneficial in preventing the further spread of AIDS.

Reason: People can protect themselves and others from infection, improve their health care and plan for the future.

Evidence: A survey conducted in early 1990s in Uganda revealed that condom use increased significantly after VCT (e.g. a 10 % condom use rate increased to 89 % after HIV-positive results among steady partners).

1. Identify more evidence from Table 1 that supports **the proposition** stated above.
2. Why do writers use tabulated figures like Table1?
3. The writer argues that “Table 1 gives encouraging results of increased condom use after VCT in Uganda in the early 1990s.” What evidence is here to corroborate this statement?

Task 5. Acknowledging sources

In groups of four, discuss the following questions.

1. What do (

Section 3: Listening

Task 1. Predicting main ideas

In a few minutes, you will listen to an explanation about condoms. List the major points you think will be raised in the explanation.

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Title of listening text: "Consistent condom use"
From: *AIDS Africa: Continent in crisis* by Helen Jackson, Harare: SAFAIDS, 2000, pp 106 -
113

Task 2. Identifying main ideas

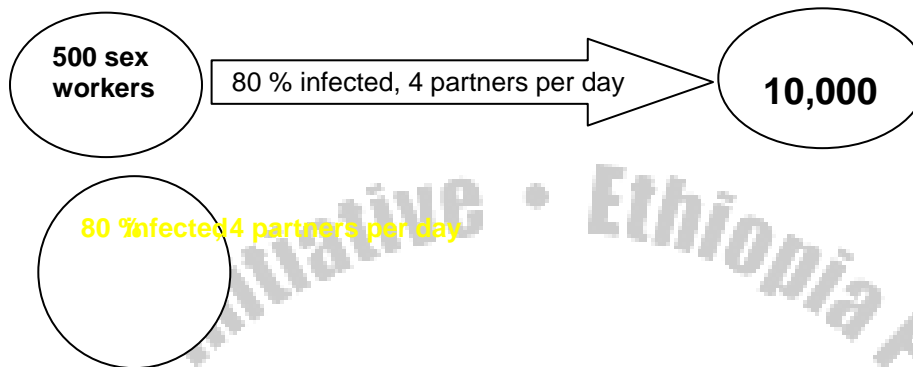
Now listen to the text. Note down all the major points you feel are important about condoms.

1. Compare your guesses about the main ideas in Task 1 with what you actually heard in the text.
2. In pairs, discuss:
 - a. Any facts, knowledge or information you had not heard before.
 - b. Any points you do not agree with.

Task 3. Relating oral explanations to a diagram

Listen to *Part 2* of the text about condoms, and take notes. Then, identify which part of the discussion relates to the following diagram. In a single paragraph, describe the diagram in relation to the text.

Figure 1. Infections averted per year by raising condom use to 85 % in two populations in Nairobi.



Task 4. Discussing myths and realities

There are a lot of rumors about condoms. Below are some of the things people say and think concerning condoms. Distinguish them as either “myths” or “realities.”

1. AIDS is an invention of imperialist countries to accumulate more capital through condom sales.
2. Condoms are deliberately fabricated to transmit HIV to healthy people.
3. Female condoms are not as protective as male condoms.
4. Condoms reduce peoples’ sexual power of partners.
5. Females are more resistant to condom use because it inhibits them in reaching orgasm.
6. Had it not been for the government subsidies, a single condom might have been sold at four times its present cost.
7. If used appropriately, condoms can prevent the transmission of HIV.

Task 5. Listening for confirmation

Listen to Part 2 of the explanation about condom.

1. Confirm the myths and realities you distinguished under Task 4.
2. Compare and contrast female and male condoms.

3. Complete the table below. Use the information to create posters that can be displayed on campus so that students can see and know something about the do's and don'ts concerning condom use.

Do's and Don'ts concerning condom use

Do's	Don'ts
<ul style="list-style-type: none"> • Use condoms even if your partner does not get satisfied. • • • • • • 	<ul style="list-style-type: none"> • Don't share condoms. • • • • • •

4. One way of increasing condoms' acceptability, according to the speaker, is by associating them with positive images such as love, sensuality, fun, sexiness, performance, excitement, safety, trust, care, or responsibility. Have you ever seen or heard any advertisement, music, movie, play, etc., that tries to associate condoms with these attributes? If you haven't, can you create some yourself? Complete the following table by writing both your own as well as other advertisements, music, movie, etc. you have seen or heard.

Association of condoms with	What you have



Task 3. Using dictionaries effectively

Suppose you want to learn to use the following words. What would be the best and fastest way to learn? Discuss the methods with your partners and complete the dictionary task that follows.

viral	abuse	de-stigmatize
trauma	immune	voluntary
hysteria	withdrawal	confidential
council	heterosexual	differential
diagnosis	empower	cope
self-blame	donate	self-esteem
sexuality	avoidance	chronic
orphanhood	risk-taking	promiscuous
addiction	opportunistic	prevalence

1. The words dictionary contains are called entries. All entries are arranged in alphabetical order. Put the above entries in the correct alphabetical order, like they would appear in a dictionary.

2. Complete the table below for each entry:

Entries	Word class	Syllable boundary	Pronunciation	Derivatives
abuse	verb/noun	a-buse (verb)	a'bjuz (verb)	abusive/abusively/ abusiveness

Section 5: Writing

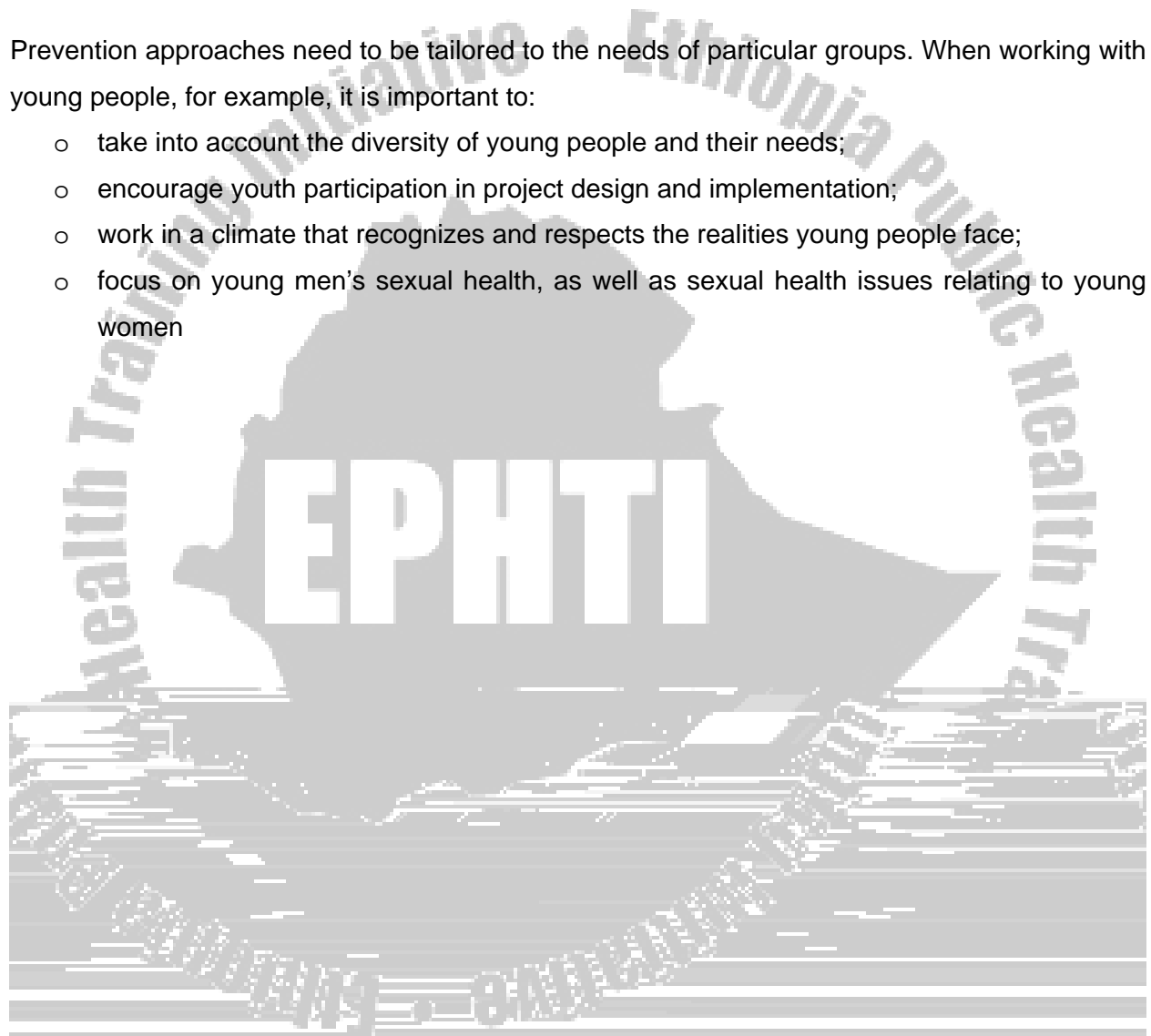
Task 1. Comparing techniques for making suggestions

Following are samples of AIDS preventive suggestions. Make a critical comparison of the techniques and the language used.

Sample 1

Prevention approaches need to be tailored to the needs of particular groups. When working with young people, for example, it is important to:

- take into account the diversity of young people and their needs;
- encourage youth participation in project design and implementation;
- work in a climate that recognizes and respects the realities young people face;
- focus on young men's sexual health, as well as sexual health issues relating to young women



Sample 3

I would suggest using female condoms for female prostitutes whose livelihood is prostitution.

It is certainly helpful to encourage youth clubs.

If I were a female, I would not become a prostitute.

It is essential that governments introduce sex education.

Many experts strongly advise against premarital sex.

One would be safer if he or she used condoms during sexual intercourse.

For a comparison, you might first identify dominant structures or patterns for making suggestions. This will help you learn useful techniques for future use. Also observe where and when to use each technique.

TIPS

There are several ways in which you can make suggestions and give advice.

Imperative mood: An imperative clause has the base form of a verb without a subject.

For instance:

Practice safe sex.

Be faithful to your partner.

Avoid bad sexual behaviour .

Modals:

Indication of importance: You can say that something is important or necessary by using a sentence beginning with the impersonal pronoun 'it', followed by 'is', an adjective such as 'important' or 'necessary,' and a 'that' clause. Look at these examples:

It is important that you know precisely what precautions to take during blood transfusion.

It is essential that the youth be taught about drug abuse.

It is vital that university students stop promiscuity.

Had better: You can use 'had better' to say that something is the right or correct thing to do. For example:

You had better form small anti-AIDS clubs.

If clause: A conditional clause can be used to offer advice as in the following example
If I were you, I would abstain from premarital sexual intercourse.

Task 2: Suggesting

Make HIV/AIDS preventive suggestions that might be displayed on classroom walls and boards. The suggestions should be made to promiscuous youth who are unable to change their behavior, who practice unsafe sex, and who watch pornographic movies.

Section 6: Speaking

Task 1. Preparing group suggestions

Read the following situations. Each situation needs thorough analysis, reflection, and solutions. In groups, after careful discussion, come up with realistic solutions and prepare a presentation in which you offer advice and suggestions.

1. Many university students think that campus life offers a lot of opportunities to find a love partner. Making use of such opportunities is essential. But sometimes these opportunities lead students to early sex practices. Early sexual activity will increase the likelihood of acquiring HIV.

2. Prostitution is a major problem in Ethiopia. Thousands of young females are prostitutes in an environment where practicing safe sex is quite difficult. They are highly exposed to HIV transmission.
3. Most Ethiopian families are still not openly discussing sex, sexuality and AIDS. Parents shy away from such issues, leaving their children uninformed about AIDS. The family is not making enough contributions to raising AIDS awareness.
4. Schools are becoming places where students obtain substances like khat, alcohol, cocaine, hashish, etc. Young children are becoming addicted to two or more substances, and the problem is spreading quickly all over Ethiopia. Addiction facilitates the spread of AIDS.

Section 7: Reflecting

In this unit, you were engaged in various tasks of language learning. Indicate your level of success by checking one of the measurement phrases mentioned below.

No.	To what extent you successfully completed:	To a great extent	Partially	Entirely unable
1	Recognizing the purpose of texts			
2	Recognizing the audience of texts			
3	Inferring date of text production			
4	Activating background knowledge about testing and counseling			
5	Analyzing organization of texts			
6	Comparing and contrasting textual issues			
7	Identifying writer evidence			
8	Interpreting writer conclusions			
9	Recognizing styles of referencing			
10	Identifying main ideas after listening to an explanation			
11	Relating a diagram to orally presented discussions			
12	Identifying functions of dictionaries			
13	Analyzing words through dictionary information			
14	Offering advice and suggestions			

