

INGLÊS***Brazil wins praise for Aids strategy***

Monday July 25, 2005

Brazil today won praise for its fight against Aids and HIV despite its refusal of US aid tied to policies favoured by socially conservative supporters of the Bush administration. At an international conference on scientific developments to combat the pandemic Dr. Helene Gayle, the president of the International Aids Society, said Brazil was leading the way even though it had rejected some international assistance. "Brazil, by maintaining an aggressive and comprehensive approach to HIV prevention, treatment and support is really a leader for our global effort", she told the conference. About 600,000 of Brazil's 183 million people are infected with HIV.

Last year, the country turned down \$40m (£23m) in US funding to fight Aids after Washington injected a clause condemning prostitution. Prostitution is legal in Brazil, and the health ministry said the refusal of the US aid was an issue of national sovereignty. The national anti-Aids programme provides drugs free of charge to anyone who needs them, and aggressively distributes condoms to sex workers.

The move made Brazil one of the first countries to oppose the Bush administration's policy of linking foreign aid to policies backed by the religious right. However, the country has been criticised by some activists who say the government has struck a deal with a major pharmaceutical company to avoid breaking the patent on the firm's anti-Aids drugs. Activists from the group Pela Vida said the deal with Abbott Laboratories to sell drugs to the government at a steep discount was insufficient to guarantee that free drugs would be available to all. The Brazilian health minister, José Saraiva Felipe, later denied the deal had been finalized.

"We once again confirm the promise of Brazil to help developing countries confront this epidemic", he said in remarks quoted by the Associated Press.

Scientists will present 2,060 papers drawn from research in 114 different countries at the four-day conference. The event opened as Bill Clinton, the former US president, launched a programme to double the number of children receiving treatment for HIV infection in Kenya by the end of the year. An estimated 100,000 children there are infected with HIV, but only 1,200 receive treatment. The Clinton Foundation aims to have 10,000 children on anti-retroviral treatment in at least 10 countries by the end of 2005.

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01. Brazil was praised because

- a) it turned down a UN aid to fight HIV, which was quite unusual.
- b) it welcomes international assistance to combat AIDS and HIV.
- c) it leads scientific developments in public health and global pandemics.
- d) it keeps a strong and comprehensive approach to HIV prevention, treatment and support.
- e) the number of HIV infected people decreased to 600 thousand.

02. Brazil refused US aid funding to fight HIV and AIDS

- a) because the Bush administration is socially conservative.
- b) even though the global leaders criticized the decision.
- c) due to a clause that condemns prostitution, which is legal in Brazil.
- d) and also stated that global leaders should consider national sovereignty and freedom in research.
- e) because the two countries have different official religious backgrounds.

03. The Brazilian anti-AIDS program

- a) distributes free drugs to people who need treatment.
- b) is aggressive and discriminates sex workers.
- c) provides free condoms to all the population and adolescents.
- d) has been developed jointly with the International AIDS Society.
- e) is similar to the Kenya anti-AIDS program.

04. According to the text,

- a) the International conference on AIDS/HIV was held in Washington in 2004.
- b) religious leaders are against prostitution and condom distribution.
- c) there will be 2060 scientists attending the four-day conference organized by Dr. Helene Gayle.
- d) Bill Clinton disagrees with the Bush approach towards the pandemic.
- e) Brazil does not accept aid linked to religious constraints.

05. Some activists say that

- a) the Brazilian government has been too critical about foreign aid.
- b) the Brazilian government has negotiated with laboratories to avoid breaking the patent.
- c) the discount negotiated would ensure that drugs would be available to all.
- d) Brazil will break the patents anyway to provide free drugs to all.
- e) the Brazilian minister of health wants to confront major pharmaceutical companies about drug costs.

06. The sentence of the last paragraph, "The event opened as Bill Clinton, the former US president, launched a programme to double the number of children receiving treatment for HIV infection in Kenya by the end of the year.", indicates that, by the end of the year.", indicates that, by the end of 2005, the number should be

- a) 100,000.
- b) 20,000.
- c) 10,000.
- d) 2,400.
- e) 1,200.

07. In the sentence of the third paragraph "The Brazilian health minister, José Saraiva Felipe, later denied the deal had been finalised.", the word "deal" refers to

- a) breaking the patent on anti-AIDS drugs.
- b) linking foreign aid to discriminatory policies.
- c) help developing countries to confront AIDS.
- d) interference in national sovereignty.
- e) sell drugs to the government at a great discount.

08. In the sentence of the third paragraph "However, the country has been criticized by some activists who say the government has struck a deal with a major pharmaceutical company to avoid breaking the patent on the firm's anti-Aids drugs.", the word "however" can be substituted, without changing the meaning for

- a) Nevertheless.
- b) Furthermore.
- c) Inasmuch.
- d) Somehow.
- e) Unless.

WHO estimates of the causes of death in children

Jennifer Bryce, Cynthia Boschi-Pinto, Kenji Shibuya and
Robert E Black

Background

Child survival efforts can be effective only if they are based on accurate information about causes of deaths. Here, we report on a 4-year effort by WHO to improve the accuracy of this information.

Methods

WHO established the external Child Health Epidemiology Reference Group (CHERG) in 2001 to develop estimates of the proportion of deaths in children younger than age 5 years attributable to pneumonia, diarrhoea, malaria, measles, and the major causes of death in the first 28 days of life. Various methods, including single-cause and multi-cause proportionate mortality models, were used. The role of undernutrition as an underlying cause of death was estimated in collaboration with CHERG.

Findings

In 2000-03, six causes accounted for 73% of the 10.6 million yearly deaths in children younger than age 5 years: pneumonia (19%), diarrhoea (18%), malaria (8%), neonatal pneumonia or sepsis (10%), preterm delivery (10%), and asphyxia at birth (8%). The four communicable disease categories account for more than half (54%) of all child deaths. The greatest communicable disease killers are similar in all WHO regions with the exception of malaria; 94% of global deaths attributable to this disease occur in the Africa region. Undernutrition is an underlying cause of 53% of all deaths in children younger than age 5 years.

Interpretation

Achievement of the millennium development goal of reducing child mortality by two-thirds from the 1990 rate will depend on renewed efforts to prevent and control pneumonia, diarrhoea, and undernutrition in all WHO regions, and malaria in the Africa region. In all regions, deaths in the neonatal period, primarily due to preterm delivery, sepsis or pneumonia, and birth asphyxia should also be addressed. These estimates of the causes of child deaths should be used to guide public-health policies and programmes.

09. O grupo CHERG

- a) trabalhou de 2001 a 2005 para estabelecer o papel da desnutrição como a principal causa da mortalidade infantil.
- b) desenvolveu estimativas a respeito das principais causas de mortalidade em crianças nos primeiros 28 dias de vida.
- c) concluiu que a desnutrição pode ser uma das causas de mortalidade infantil até os cinco anos de idade.
- d) foi formado por integrantes da Organização Mundial de Saúde em 2001 e trabalhou até 2003.
- e) descobriu que as principais causas de mortalidade em crianças de até 28 dias são pneumonia, diarreia, malária e sarampo.

10. O estudo descobriu que, em crianças com menos de cinco anos de idade,

- a) há seis doenças contagiosas que matam 73% das crianças anualmente.
- b) 94% é o índice de mortes na África, sendo que 54% destas crianças são desnutridas.
- c) ocorrem 10,6 milhões de mortes por ano, das quais 19% são causadas por pneumonia e 18% por diarreia.
- d) pneumonia neonatal e parto prematuro perfazem 20% das 54% de todas as mortes.
- e) somente 8% das mortes são atribuídas a doenças infectocontagiosas.

11. O texto recomenda que

- a) os dados sobre as seis principais causas de mortalidade infantil sejam usados em políticas e programas de saúde pública.
- b) o grupo CHERG continue as pesquisas para elaborar programas e políticas públicas mais realistas e abrangentes.
- c) deve haver programas de saúde pública diferentes para atender as necessidades de crianças até 28 dias e até 5 anos.
- d) a África tenha um programa de saúde pública específico para combater a malária e a desnutrição, que são seus principais problemas.
- e) deve haver um combate incisivo à desnutrição em programas públicos de saúde, pois é a principal causa de mortalidade de recém-nascidos.

12. Na sentença do quarto parágrafo "In all regions, deaths in the neonatal period, primarily due to preterm delivery, sepsis or pneumonia, and birth asphyxia should also be addressed.", a expressão "due to" indica uma relação de

- a) simultaneidade.
- b) temporalidade.
- c) alternância.
- d) seqüência de fatos.
- e) causalidade.

13. In the last sentence of the text "These estimates of the causes of child deaths should be used to guide public-health policies and programmes.", the word "these" refers to

- a) estimates about deaths in children younger than 5 years in Africa.
- b) estimates developed by CHERG, a group established by WHO.
- c) data obtained by CHERG about the first 28 days of life.
- d) correlations about public investment and effective health policies.
- e) global data about diseases that affect poor people in underdeveloped countries.

Wealth doesn't always predict good health

NEW YORK (Reuters Health) – The findings from a study of insulin resistance in Europe suggest that high earnings and an advanced educational level do not always translate into good health. In Denmark, children of the most educated and highest earning parents showed the least insulin resistance. By contrast, in Estonia and Portugal, just the opposite was seen.

Insulin resistance, also known as decreased insulin sensitivity, develops when blood sugar levels need to get much higher before insulin release is triggered. Over time, this resistance can cause health problems and lead to diabetes.

The findings, which appear in the current issue of the British Medical Journal, are based on a study of about 1,000 randomly selected schoolchildren living in each of the three countries. In the Danish group, children of the most educated fathers had 24 percent lower insulin resistance than children of the least educated fathers, lead author Dr. Debbie A. Lawlor, from the University of Bristol in the UK, and colleagues note. A similar association was seen with parent income. In the Estonian and Portuguese groups, however, children of the most educated fathers had 15 percent and 19 percent higher insulin resistance, respectively, than their peers of the least educated fathers. The magnitude of these associations was largely unchanged when the findings were adjusted for other potentially influential factors.

(...)

Source: *British Medical Journal*, July 23, 2005.
(<http://today.reuters.com>)

14. A pesquisa publicada no *British Medical Journal*

- a) conclui que a boa saúde é diretamente proporcional à riqueza das nações.
- b) estabeleceu que o nível mais baixo de insulina foi encontrado em pais de 24% dos estudantes dinamarqueses.
- c) avaliou a resistência à insulina na Dinamarca, Estônia e Portugal.
- d) inferiu que acabar com as desigualdades econômicas poderá promover uma adequação das políticas de saúde.
- e) associou o nível de escolaridade dos 1000 estudantes à renda familiar.

15. Os 1000 estudantes pesquisados

- a) são estonianos e portugueses pobres.
- b) vieram da cidade de Bristol, na Inglaterra, além de Portugal e Dinamarca.
- c) têm pais com alto grau de escolaridade e alta renda.
- d) foram selecionados aleatoriamente dentre crianças em idade escolar.
- e) têm uma dieta composta de muitos alimentos doces e calóricos.

ANSWER KEY (RESPOSTA-CHAVE)

1. d

No primeiro parágrafo, é dito que o Brasil teve uma abordagem forte e compreensiva quanto ao tratamento da aids, o que consta na alternativa **d**.

2. c

O Brasil não aceitou auxílio financeiro americano devido à cláusula que condenava a prostituição, legalizada no Brasil.

3. a

É possível ler no texto que o Brasil, com seu programa anti-AIDS, fornece medicamentos gratuitos para quem precisa de tratamento. Portanto, a alternativa **a** está correta.

4. e

Lê-se que o Brasil foi um dos primeiros países a se opor à administração Bush, que relacionava a ajuda a conceitos religiosos, portanto o Brasil não aceita ajuda relacionada a restrições religiosas. A alternativa **e** é a correta.

5. b

De acordo com o texto, ativistas criticaram o governo brasileiro por ter entrado em acordo com um grande laboratório. Portanto, é possível concluir que o governo brasileiro manteve negociações com laboratórios, o que faz a alternativa **b** estar correta.

6. d

O programa médico citado atende hoje a 1.200 crianças no tratamento de aids e pretende dobrar esse número até o final de 2005, ou seja, chegaria a um número de 2.400, o que encontramos na alternativa **d**.

7. e

A palavra *deal* (negócio) que aparece na declaração do Ministro da Saúde refere-se à venda de medicamentos com grande desconto (*sell drugs to the government at a great discount*) ao governo brasileiro.

8. a

However significa "entretanto", "todavia", e seu sinônimo é *nevertheless*, por isso a alternativa a é correta.

9. b

O grupo CHERG desenvolveu estimativas sobre as principais causas de morte de crianças nos primeiros 28 dias de vida. Encontramos isso no primeiro parágrafo do texto, o que faz da alternativa b a correta.

10. c

De acordo com o texto, 10,6 milhões de crianças morrem por ano devido a pneumonia (19%) e diarreia (18%). Estes dados estão na alternativa c.

11. a

No final do texto, é possível ler que as estimativas feitas em relação "às principais causas de mortalidade" de crianças com menos de 5 anos podem ser usadas em programas e políticas de saúde pública. A alternativa a está correta.

12. e

Due to significa "em razão de", "devido a", ou seja, expressa causalidade, o que encontramos na alternativa e.

13. b

O pronome *these* (demonstrativo no plural) refere-se às estimativas feitas pelo grupo CHERG, que foi criado pela WHO (Organização Mundial de Saúde). Isso faz da alternativa b correta.

14. c

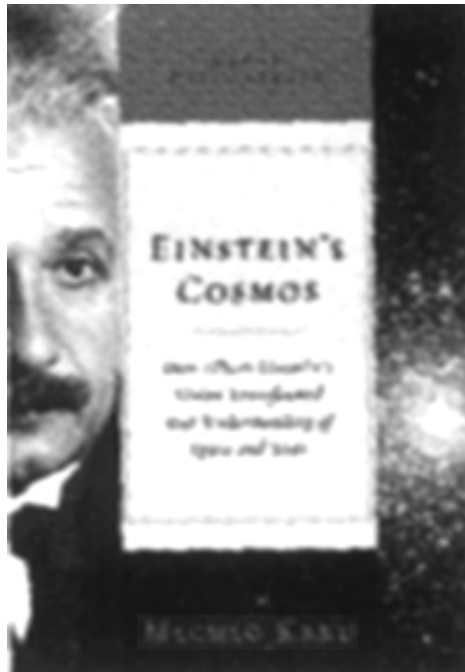
O estudo foi feito com crianças de três países: Dinamarca, Portugal e Estônia. Temos isso na alternativa c.

15. d

O texto diz que as 1.000 crianças de três países foram escolhidas aleatoriamente (*randomly*), o que encontramos na alternativa d.

(O texto que segue refere-se às questões de 1 a 4.)

Einstein's Mental Chalkboard



Albert Einstein's image is everywhere, adorning posters in college dorms, advertisements on the Web, T-shirts and coffee mugs. *Time* magazine anointed him Person of the Century, and just about anyone can cite his most famous equation. For all this brand recognition, though, it's safe to say that comparatively few people know what Einstein's theories of relativity actually describe. In *Einstein's Cosmos: How Albert Einstein's Vision Transformed Our Understanding of Space and Time* (Norton, \$23), City University of New York physicist and accomplished science writer Michio Kaku skims through the biographical and anecdotal details of the great scientist's life – topics exhaustively covered in Einstein's numerous biographies – and focuses instead on how he thought. More specifically, Kaku explores the visual metaphors Einstein used while devising the special and general theories of relativity. In doing so, Kaku enables the reader to see and think as Einstein did, leading us to a simpler, more complete understanding of several of the most important scientific ideas of our time. GREGORY MONE.

[Popular Science](#), May, 2004.

1. The author of this text is:

- a) Michio Kaku.
- b) Albert Einstein.
- c) Gregory Mone.
- d) Popular Science.

2. In the text, Einstein's popularity is contrasted with the number of people who:

- a) recognize the scientist's image.
- b) can cite his famous equation.
- c) identify him as Person of the Century.
- d) understand his theories well enough.

3. The book reviewed concentrates **mostly** on the scientist's:

- a) thinking processes.
- b) life and achievement.
- c) metaphorical theories.
- d) visual relativity.

4. The word **did** (line 16) refers to:

- a) see and think.
- b) do and enable.
- c) explore and devise.
- d) use and lead.

(O texto que segue refere-se às questões de 5 a 9.)



Exercise can be bad for you

By Adele Horin

April 24, 2004

Feeling guilty because you missed an aerobics class? Relax. Punishing yourself over missed work-outs is a sign you need to reassess your approach to exercise, experts say. It might not be healthy. Jonathan Mond, senior research officer in the department of psychological medicine at Canberra Hospital, has conducted a survey of women's exercise and eating patterns which revealed some problems: overexercise, exercise for the wrong reasons, and too much guilt. And it has uncovered the truth about exercise, hardly anyone does it for enjoyment. In his study of 230 women aged 18 to 45, Dr. Mond found 70 per cent exercised regularly and 12 per cent exercised for at least an hour every day. Among the 169 who exercised regularly, 10 per cent did so for 10 hours a week or more. One woman exercised 33 hours a week. The survey examined the relationship between exercise and eating disorders such as anorexia and bulimia. It also asked: when is exercise bad for your health? It found women who always felt guilty after they missed a regular exercise session were most likely to rate highly on measures for eating disorders. About 12 per cent of regular exercisers were in this category. Also vulnerable to eating disorders were the 20 per cent of women who said that a very or extremely important reason for exercise was to "improve their body shape or tone" or to "improve their appearance or attractiveness". These women were the most likely to have dysfunctional attitudes to eating and weight – to put an unhealthy emphasis on appearance, be preoccupied with food and be constantly restricting their intake.

Adapted from [The Age](#)

5. Dr. Mond's survey was about women's:

- a) views about diets and sports.
- b) attitudes to eating disorders.
- c) reasons to do heavy exercise.
- d) work-out and eating habits.

6. The text says that feeling guilty for missing work-outs can indicate you:
- have an unhealthy attitude to exercise.
 - avoid reassessing your work-out sessions.
 - can relax when taking exercises.
 - punish yourself by doing extra work.
7. The survey findings revealed the:
- relationship between exercise and lack of pleasure.
 - connections exercise can have with eating disorders.
 - effects of regular exercise on weight loss.
 - signs for reassessing attitudes towards exercising.
8. The **two** pronouns **it** (lines 7-8) refer to, **respectively**,
- over-exercise and enjoyment.
 - guilt and truth.
 - hospital and eating.
 - survey and exercise.
9. The word below that does **NOT** substitute for the word **survey** (line 5) is:
- research.
 - investigation.
 - report.
 - study.

(O texto que segue refere-se às questões de 10 a 15.)

Migration: 'A force of history'

by BBC news presenter George Alagiah

Adapted from <http://www.bbc.co.uk>



'Historically, the net effect of migration has been a benign one'

I was born in one continent, moved to a second and settled in a third. Asia, Africa and Europe; Sri Lanka, Ghana and Britain. They are stepping stones to a better life, landmarks along the journey of one migrant family. Our motivation for leaving the land of our birth over 40 years ago was no different to the reason so many make similar journeys today. The fact that these latter-day migrants are willing to risk so much underlines a fundamental truth about migration – the movement of people from poor and failing states to rich and stable ones is as inevitable as water running downhill. If water is a force of nature, then migration is a force of history. The challenge is not to try to stop it but how to manage it. Historically, the net effect of migration has been a benign one. Where would America be without the unparalleled movement of Irish people in the mid-to-late 19th Century? Where would modern Australia be if it had continued to rely solely on the flow of people from the "mother" country. When I discuss migration with people who have a rather different take on it, there is always that comical moment when they realise that – despite my English tones – I am an immigrant. An embarrassed "oh but you are different" is the

best they can offer to hide their prejudice. My answer is always the same. There is just as much chance that the timid Kosovan child who enrolls in a school today will one day go on to read the news on the BBC. I am where I am because I've been able to take advantage of the opportunities offered by a Britain at its best – a land of hope that is open and confident. To deny these chances to a new generation of migrants would be an injustice to the individuals concerned but, more important, it would mark a profound loss of faith in our nation's place in this new century of globalisation.

10. The author compares migration to running water because both are:

- a) occasionally controlled.
- b) historical processes.
- c) impossible to stop.
- d) stable movements.

11. Alagiah says that migration has a positive effect. To prove his point, he:

- a) questions the help the Irish immigrants gave America in the past.
- b) contrasts Australian and American immigrants who left for Europe.
- c) mentions two well-known historical migration movements.
- d) tells his own family story in order to give readers an example.

12. According to the author, the quote **"oh but you're different"** (line 15) reflects people's:

- a) prejudices.
- b) hopes.
- c) origins.
- d) realizations.

13. The author compares himself to a Kosovan child to imply that he:

- a) suffered no prejudice on the part of the BBC.
- b) believes schools today are as good as before.
- c) is not at all different from other immigrants.
- d) was also timid when he first got to Britain.

14. According to the text, which place does the author seem to consider his nation?

- a) Ghana
- b) Australia
- c) Britain
- d) Sri Lanka

15. People who **"have a rather different take on it"** (line 13) have a different:

- a) occupation.
- b) birthplace.
- c) culture.
- d) opinion.

GABARITO

1. C
2. D
3. A
4. A
5. D
6. A
7. B
8. D
9. C
10. C
11. C
12. A
13. C
14. C
15. D

Outras informações:

Questão	Globetrotter Unit	Grau de dificuldade	Assunto
1	16	Fácil	Text comprehension
2	16	Médio	Text comprehension
3	16	Médio	Text comprehension
4	11	Fácil	Text comprehension
5	7	Médio	Text comprehension
6	7	Difícil	Text comprehension
7	7	Difícil	Text comprehension
8	19	Médio	Text comprehension
9	19	Médio	Text comprehension
10	10	Fácil	Text comprehension
11	15	Médio	Text comprehension
12	15	Fácil	Text comprehension
13	15	Médio	Text comprehension
14	15	Médio	Text comprehension
15	15	Médio	Text comprehension