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DISABLING LANGUAGE AND AIDS: AN ANALYSIS OF LANGUAGE IN

MAINSTREAM MEDIA

A Project Presented to the

Faculty of California State University,

San Bernardino

In Partial Fulfillment

of the Requirements for the Degree

Master of Arts

in

Rehabilitation Counseling

by

Victoria Lynn La Cues June 1997

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DISABLING LANGUAGE AND AIDS: AN ANALYSIS OF LANGUAGE IN

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A Project Presented to the Faculty of California State University, San Bernardino

by

Victoria Lynn La Cues

June 1997

Approved by:

Joseph/Turpin, Ph.D.,//First Reader

5/27/97 Date

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ABSTRACT

The media has been a prominent means of communication regarding human immunodeficiency virus (HIV) and acquired immune deficiency syndrome (AIDS). This study examines language in mainstream national newspaper coverage over a twelve-year period and asserts that the occurrence of disabling language has decreased over time. Twelve years of AIDS coverage in the Washington Post, New York Times, Los Angeles Times, and Chicago Tribune were examined through content analysis procedures. Chi-square test for trend was computed, and results reveal a significant decrease in the use of disabling language in the newspapers examined as years increased. Implications of the findings are discussed in the conclusion.

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CHAPTER ONE

Introduction

The mass media has been a significant determinant of the quantity and quality of information disseminated to the public over the past two decades about human immunodeficiency virus (HIV) and acquired immune deficiency syndrome (AIDS). Past analyses have identified trends of AIDS coverage, largely focusing on the amount and content of the reporting. The identified trends tend to be associated with the type of media and socio-political factors (Altman, 1986; Shilts, 1987; Kinsella, 1989; Dearing & Rogers, 1992; Hallett & Canella, 1994). Research in this area continues to be important as technology allows for more efficient analyses of large texts.

Language in the media relating to HIV/AIDS issues has also been studied. Much of the research has examined usage of metaphors and labeling, with findings indicating that AIDS and people with AIDS have frequently been given negative and dehumanizing descriptions (Gayle, 1989; Gilmore & Somerville, 1994). The following section gives an overview of the literature about the representation of AIDS in the media and language usage in its communication about AIDS.

Literature Review

Media Representation

The media's initial hesitation to produce coverage on AIDS-related issues stemmed from social, cultural, moral,

and economic factors. One factor that hindered mainstream media coverage was the lack of personal effect AIDS had on their audience (Kinsella, 1989). Mainstream media attempt to present the news in a manner thought to be acceptable for "middle-America", which subscribes to abstinence from premarital sex and drug use, monogamy, and heterosexuality. Individuals whose ways of living deviate from these values are not accepted by the general public. Thus, an illness occurring predominantly in gay males was not considered to be interesting news for the larger population (Nelkin, 1991).

Political involvement played a role in the amount of media exposure regarding HIV and AIDS. In the early 1980s, the political attitudes of gays in San Francisco and New York differed. Gays in San Francisco had strong interests in civil rights issues, whereas many in New York were more concerned with weekend festivities and viewed gay rights more as privileges (Shilts, 1987).

In a study conducted by Dearing and Rogers (1992), factors influencing coverage of AIDS were explored during the years 1981 through 1988. The researchers analyzed the content of AIDS-related articles in the San Francisco Chronicle, the Los Angeles Times, and the Washington Post. The content was distinguished by four eras. The initial era from June of 1981 until April of 1983 characterized AIDS as a "mysterious new gay plague". AIDS was covered in ambiguous

and melodramatic terms, creating fear and hysteria in the public. The science era from May of 1983 until June of 1985 consisted of medical reporting. Stories were predominately written about transmission hypotheses during this period. The human era from July of 1985 until January of 1987 focused on personal stories. This era began as Rock Hudson announced his having AIDS, which personified the illness for much of the general public. The political era from February of 1987 until December of 1988 emphasized public policy issues. Findings among the papers were that the San Francisco Chronicle had more initial coverage and tended to report more humanistically than the other papers, and the New York Times covered the AIDS issue later and with less consistency.

The authors suggest the following factors to have contributed to the elevated AIDS coverage in the San Francisco Chronicle: 1.) high rate of HIV among residents in San Francisco; 2.) a full-time journalist covering AIDS on staff; 3.) strongly organized gay activist groups; 4.) gays holding politically powerful positions and affluence in the community; 5.) having a mayor heavily concerned with health issues; and 6.) two out of five men in San Francisco were gay. Factors having negative influence over the national AIDS coverage of the 1980s were thought to be the conservative ideology dominant during the Reagan Administration, stigmatization of the persons who initially

were identified with the illness, widespread confusion regarding transmission routes, the president's disinterest in the issue, and the New York Times' attitude of indifference and homophobia which affected other media.

Until AIDS appeared to be a threat to the larger population, the mainstream media did not consider AIDS as newsworthy (Baker, 1986). Baker looked at possible reasons for the hesitation in the reporting of AIDS issues between years 1981 and 1984 after collecting data from the New York Times Index. Baker found that when additional at-risk populations were identified in 1983 (i.e., female heterosexual drug users, receivers of blood transfusions, and infants born to females with AIDS), the number of AIDS articles published increased dramatically. In congruence with the above findings, Nelkin (1991) reports increased coverage of AIDS-related issues in May of 1983 following the Journal of the American Medical Association's editorial suggesting the possibility of AIDS being contracted through "casual contact" (e.g., kissing and food handling). However, as scientists rebutted this claim and the public was reassured of their low-risk of contracting the virus, coverage guickly declined.

The increased media coverage paralleling the recognition of other groups having AIDS stemmed from fear. As long as the virus was associated with "others", the majority of people had no concern about the issue. The

increased interest from the general public was due to the fear aroused by the possibility of the virus no longer being someone else's problem. This trend of interest demonstrates the magnitude to which people tend to disconnect themselves from others.

Recognition of the illness in drug users, prostitutes, and Haitians led to the stigmatization and labeling of these "at-risk" groups as were gay men (Kinsella, 1989). AIDS was labeled by the news media as a sexually transmitted disease rather than a viral disease, which brought increased stigmatization to persons with AIDS. The prevailing media message of monogamy or sexual abstinence seemed to be the only accepted solution to the spread of AIDS (Nelkin, 1991).

Albert (1986) investigated the issue of AIDS in the popular magazine press, and his aim was to document the media's creation of outcasting and stigmatizing individuals with AIDS based on their group affiliation. Content analysis was performed on AIDS-related articles published in national magazines between May 1982 and December 1983. Initially, AIDS coverage focused on people with AIDS who were gay and portrayed gay lifestyles as different and separate from the larger population. Albert asserts that the general public's perception of AIDS being a distant matter has been reinforced by the media in three ways: 1.) focusing on gay behaviors such as numerous sexual partners and "dangerous" sexual practices; 2.) reporting on the fear of AIDS in gay

communities, giving the larger population the message that it is dissimilar to the gay community; and 3.) labeling certain groups as "at-risk" or "victims", which falsely reassures the larger population of their safety from AIDS.

Social and cultural factors have significantly influenced media coverage of AIDS-related issues. Mainstream Western culture adheres to Judeo-Christian teachings, providing a basis for society to judge the worth of persons who fail to follow the dominant cultural values of heterosexuality, monogamy, reproduction, and abstinence from pre-marital sex and drug use. The media refrained from speaking of AIDS issues in a straight-forward manner so to not offend their general public; widespread confusion was the result. (Kinsella, 1989).

A study conducted by Clarke (1992) sampled a small number of AIDS-related articles in mass-circulating magazines from 1981 through 1985. Clarke found in the examination of content themes that monogamy, abstinence, and avoidance of drug abuse was emphasized; the virus was described as a consequence of shameful behavior; seemed to promote public fear and hysteria; and focused on lifestyle issues and uncertainty of causes rather than the disability aspects of the illness.

The established cultural norms of Western society has set the grounds for prejudice toward certain groups of people. Prejudice exists for several reasons: 1.) to keep

groups in subordinate positions; 2.) to avoid change; and 3.) to blame others for undesirable situations (Schaefer, 1990).

Prejudice is used to maintain the power of one group while keeping others in less opportune positions (Schaefer, 1990). The group adhering to dominant cultural values holds the power to shape living conditions of groups with different values. In our society, the power lies with White, Christian, heterosexual males. The movement toward "family values" in the 1980s was reflective of this group's attempt to secure its power after more than a decade of sociopolitically liberal movements. The religiously conservative emphasis on marriage, monogamy, and the nuclear family contributed to the shaping and reinforcing of prejudicial attitudes toward those with differing values and sexual orientations.

Another purpose of prejudice is the dominant group's resistance to change. Change produces anxiety and fear in many people, particularly when the change is associated with unfamiliarity. Our society's ethnocentrism, the belief that one's culture is superior to all others, results in a lack of interest in, understanding of, and respect for other cultures. This lack of interest, understanding, and respect creates barriers between groups of people and hinders the willingness to adjust to and accept change.

Schaefer (1990) describes the scapegoating theory of prejudice. This theory maintains that undesirable events and situations are attributed to those kept in subordinate positions. The blaming of others allows for the more powerful group to justify mistreatment of others and reinforces the division between "us" and "them".

Cultural and social norms have provided society with a framework for determining "appropriate" behaviors and lifestyles. Individuals who engage in nonconformist behaviors or those who lead lifestyles which deviate from established norms are more likely to be perceived as bringing negative situations upon themselves. Graham, Weiner, Giuliano, and Williams (1993) investigated perceptions of responsibility and blame concerning professional athlete Magic Johnson's HIV sero-positive status. Protocols were administered stating hypothetical transmission modes of his acquiring HIV to a sample of college students and 66 additional random individuals. The subjects were then instructed to rate the level of Magic Johnson's responsibility for contracting HIV and their feelings toward him for each hypothetical situation. The hypothetical causes of acquiring HIV were 1.) blood transfusion, 2.) conventional sex, 3.) promiscuous sex, 4.) homosexuality, and 5.) drug use. The results yield that blame and anger were highest when route of transmission was through drug use and, overall, subjects gave responses of

decreasing sympathy as the causes were associated with "deviance".

The quantity and quality of exposure of persons with AIDS who are affiliated with particular identity groups help form public perceptions about the disability. Media coverage of persons with AIDS has been shown to be inconsistent with statistics of identity groups having AIDS. Drushel (1991) examined four weeks in January and February 1986 of national press coverage of AIDS identity groups. The data was gathered through the Associated Press' Videotext service. The results show that gays and bisexuals were mentioned in 24% of the sample although they accounted for 71.8% of reported AIDS cases. Children and people with hemophilia accounted for two percent of reported cases, yet they were mentioned in more than 50% of the articles. Thus, gays and bisexuals were severely underrepresented, and children and people with hemophilia were overrepresented in the sample of articles.

Celebrities have been overly covered in the media, while other salient aspects (e.g., accurate methods of transmission, disabling conditions resulting from immune deficiencies, etc.) of the virus have been overlooked (Biddle, Conte, & Diamond, 1993). The researchers examined the coverage of actor Rock Hudson, Kimberly Bergalis, who was a young Florida woman, and professional athlete Magic Johnson. The media response to Rock Hudson's disclosure of

having AIDS was enormous; however, the coverage was predominantly personal rather than offering information about transmission methods, stigma, and acquiring the disease. Again, with coverage of Kimberly Bergalis' story of acquiring AIDS from her dentist, the media failed to report on scientific information. Instead, the public was exposed to her family's conservative views on differences among transmission routes; persons who contracted the virus through immoral behavior were to be blamed, while individuals with AIDS from blood transfusions were "innocent victims". The media responded to Magic Johnson's announcement regarding his HIV sero-positive status in three phases. The initial coverage was one of surprise, where the media repeatedly replayed his announcement of having HIV. The second phase presented him as a hero, exemplified in the New York Daily's title "His Huge Heart Will Lead Fight" and People's title "America Finds a Hero". This was followed by biased rebuttals by some journalists who questioned his hero status after acquiring HIV through personal behavior.

The content of AIDS-related articles in the news media has been studied through content analysis. Pitts and Jackson (1993) assessed the types of articles published most frequently in national Zimbabwe newspapers between the years 1987 and 1991. Articles were organized into eight categories according to their single or main themes. The categorization of all items was completed by a single reader, and a second

reader independently categorized 50% of the articles. Any discrepancies in categorization between the readers were remedied through discussion. The categories included statistics, search for a cure or vaccine, prevention, education and awareness, transmission, counseling and care, policy and economics, and personal portrayals. The authors found that an increase in coverage occurred across the years, and the number of articles and extent of coverage are associated. Results from the content analysis show that 'education and awareness' category contained the majority of items in each year, the range being 31% to 41% of the sample. 'Cure and vaccine' and 'policy and economics' categories also being a relatively large proportion of the coverage, each accounting for nine percent to 19% throughout the years examined.

Hallet and Canella (1994) found differences in coverage of AIDS between the mainstream and alternative press through examining article types in mainstream media in comparison to those in alternative press. The study examined the frequency of HIV-positive voices in the Arizona Republic, a mainstream newspaper, compared to the Phoenix New Times, an "alternative" press from 1986 through 1990. The authors' assertion is that the mainstream media rely on selected organizational sources for newsworthy information, resulting in an exclusion of voices of persons with HIV in the mainstream press. Text analysis of the articles showed that

the mainstream media tended to report on medical/scientific updates and public reaction stories; whereas, the alternative press more frequently published human interest stories, which were defined as an individual being the primary source. An average of 72% of articles in the New Times were classified as human interest stores; whereas, only an average of 12% of the Arizona Republic's sample fit into the human interest category. Additionally, it was found that the Arizona Republic infrequently cited individuals with HIV or AIDS compared to the New Times; the Arizona Republic had a mean of 20% of its stories having citations from persons with HIV or AIDS, and the New Times cited such individuals on an average of 75% of the its articles.

Content categories of AIDS-related articles were also examined by Lupton, Chapman, and Wong (1993) in Australian metropolitan newspapers and magazines from March until the end of September of 1990. Consistent with Hallet's and Canella's findings they found that personal stories accounted for 11.2%, being the most prevalent category, followed by stories concerning legal issues (10.2%), policy and political issues (7.1%), spread of HIV/AIDS (6.8%), and education campaigns (6.7%).

Federal government funding also determines the amount of media coverage an issue will receive. Generally, social issues receiving greater funding are covered more extensively than those receiving less from the government.

Thus, the scarce coverage of the early and mid-1980s is not surprising due to the Reagan Administration's slow response to the epidemic; former President Reagan did not publicly mention AIDS until 1986 (Kinsella, 1989). The 1980s White House Administration's disinterest in AIDS was in part due to the conservative political agenda consisting of "family values" and intolerance of drug use, which paved the way toward a growing of societal prejudice directed at "alternative" lifestyles. The prevailing liberal attitudes of the 1960s and 1970s toward sex and other social issues were curbed as the Reagan Administration got underway (Kinsella, 1989; Shilts, 1987; Altman, 1986).

Language and AIDS

Language is a powerful medium for creating and maintaining marginalized groups. The words and phrases chosen to describe people with disabilities influence people's attitudes toward them (Zola, 1993). The widespread labeling of persons with disabilities demonstrates that they are often seen exclusively in terms of their disabilities, which results in stereotyping, prejudice, and discrimination (Longmore, 1985). The movement toward person first language, in which the person precedes the disability, is an attempt to change society's perceptions of people with disabilities by focusing on their personhood rather than the disability.

The language used in the mainstream press heavily influences the public's perceptions and attitudes toward

persons with HIV and AIDS (Shilts, 1987; Kinsella, 1989). This section discusses language as it has been used in the context of metaphors, labeling, and its usage to maintain marginality and suppression of certain groups of people.

Metaphors are useful to journalists for making unfamiliar and complex material comprehensible to their audience (McAllister, 1992). Gilmore and Somerville (1994) discuss seven main metaphors used to explain the meaning of AIDS, which are described below.

The metaphor 'AIDS as death' illustrates not only biological death but also social and sexual death. The person with AIDS is frequently socially and sexually isolated.

Another metaphor 'AIDS as punishment' demonstrates society's prevailing attitude that persons with AIDS are being punished for living a sinful life. This metaphor reflects the widespread belief that individuals with AIDS are deserving of these illnesses associated with AIDS.

A third metaphor, 'AIDS as crime' reflects beliefs that having AIDS is due to engaging in criminal behavior. This metaphor helps to shape the view that one with AIDS is either guilty and responsible for acquiring the virus or an innocent victim.

'AIDS as war' is a metaphor used to compare HIV infection with a military enemy to be fought. At times it

has also been used to describe people with AIDS as the enemy.

'AIDS as otherness' is used to separate people into "them" and "us". Those in the "them" category are at risk of being exposed to HIV and those in the 'us' category are not at risk of exposure. The latter group is considered the "healthy" group.

The sixth metaphor is 'AIDS as horror' in which the virus is interpreted as a debasing antagonist. Individuals with AIDS are viewed as sinful and evil.

'AIDS as villain' is used to categorize people into 'heroes' and 'villains' (i.e., the 'good' versus the 'bad'). Individuals with AIDS are viewed as the villains, and those without the virus are seen as heroes.

Hughey, Norton, and Sullivan-Norton (1989) examined metaphors in the news media to determine if they can be used to identify changes in the meaning of AIDS. The researchers studied the metaphors in the United Press International, Washington Post, and Scripps-Howard News Service during the time period of July 1, 1985 and October 1, 1986. Three hundred metaphors were identified by locating all occurrences of the word 'like' and consequent examination of the passages for the determination of AIDS being compared to another idea. The results reveal that changes occurred in the use of metaphors during the time period studied. The comparison of AIDS with other diseases

declined along with a decrease in the use of AIDS to represent the dangers of life. In addition, the early part of 1986 marked the beginning of an increase in the use of AIDS to portray moral behaviors and lifestyles, which is consistent with Gilmore's and Somerville's (1994) identification of metaphors 'AIDS as punishment' and 'AIDS as crime'.

The health field also plays a pertinent role in the forming of public attitudes through the use of language and attitudes displayed by health care workers. A study conducted by Norton, Schwartzbaum, and Wheat (1990) investigated physicians' language regarding the AIDS issue. A stratified sample of physicians were given questionnaires on which they were asked about their knowledge of HIV and AIDS, and attitudes toward individuals with HIV and AIDS. In completing the statement "AIDS is like...", the most frequent response was a disease-oriented description (e.g., "AIDS is like a disease"); however, three percent of the sample compared it to a death sentence, with implications that the patients were deserving of the viral infection due to criminal or immoral acts.

Stigmatizing labels are used to maintain the marginality of minority groups, meaning to live outside the sphere of the dominant society, and results in the devaluation of and discrimination toward those being labeled (Gilmore & Somerville, 1994; Tewksbury, 1994). The

terms "GRID", short for gay-related immunodeficiency disease, and "gay plague" were printed in the media during the initial reporting of what was later termed acquired immunodeficiency syndrome. This type of reporting gave credence to the general public's idea that AIDS was a concern for "them", meaning those who were gay, and did not affect "us" (Gayle, 1989).

Recent research has focused on preferred terminology of referring to someone with HIV or AIDS. Tewksbury (1994) interviewed 62 Midwesterners with HIV during the years 1991 through 1993. The sample was made up of predominantly gay White males. His findings were that the subjects want their personhood to be emphasized rather than the illness; references such as 'persons with AIDS', 'persons living with AIDS', or 'I am HIV positive' were acceptable. Unacceptable labels include 'AIDS patient' and 'infected with HIV'. In agreement with Tewksbury, Gayle (1989) asserts that 'people with AIDS' is the preferred term.

'AIDS victim' is another unacceptable phrase to many individuals with AIDS. The term 'victim' is suggestive of an individual lacking control over his or her personal life experience, which may contribute to his or her feeling of disempowerment (Gayle, 1989; McAllister 1992). The media has also used 'victim' to describe "innocent" versus "guilty" victims. This is highly offensive to individuals

with HIV and AIDS because of the implication that some persons are deserving of having a devastating illness.

Use of language in educational campaigns and documentaries has helped to influence people's perceptions of HIV/AIDS, as well as influence sexual attitudes. The way in which information has been expressed through language contributed to the public's stereotyping, prejudice, and discrimination (Norton, Schwartzbaum, & Wheat, 1990).

Lupton (1994) examined 224 articles written about AIDS and condom use in the Australian press during 1987, and the portrayal of condoms was investigated in each article. The year 1987 was chosen due to the initiation of the Grim Reaper campaign, which was developed to warn heterosexuals of their risk of contracting HIV and to announce methods of prevention. No descriptive statistics were given; however, findings suggest that the messages were varied and contradictory. Articles written in favor of the use of condoms as prevention of acquiring HIV included those which promoted women taking control in their sexual relationships by using condoms. Conservative press coverage portrayed the endorsement of condoms as deviant, juvenile, and promoting sexual promiscuity.

Juhasz (1990) investigated the representation of women's sexuality in the following four AIDS documentaries: 1.) "Life, Death and AIDS", aired on NBC; 2.) "AIDS Hits Home", a CBS special; 3.) Donahue: AIDS Ward, aired on NBC;

and "AIDS: Changing the Rules", aired on PBS. Six sexual types were identified by Juhasz: 1.) middle-class yuppie single; 2.) unmarried procreating low-income woman of color; 3.) teenager forced to say no to sex; 4.) procreating white married woman; 5.) promiscuous prostitute; and 6.) de-sexed lesbian. Specific strategies were used to suppress women's sexuality. Non-verbal communication of discomfort and hesitation was used to condemn certain sexual behaviors. For example, one interviewer had an uncomfortable posture and hesitated when saying "oral sex". Messages of abstinence being the best method of safety from HIV was communicated by comparing sex with Russian Roulette to instill fear of having multiple sexual relationships. Failure to conduct personal interviews with prostitutes and not representing lesbian women communicated that the lives and identities of these people are less important than other women. The complete lack of lesbian representation implied that sex was not an issue for lesbians.

Scope of Research Problem

The investigation of language in the media helps to identify public reactions, perceptions, and attitudes toward issues. Terminology reflects and shapes attitudes (Tewksbury, 1994). Much of the literature has looked at the use of metaphors and labels when describing AIDS for the purpose of determining perceptions of and attitudes toward aspects of HIV/AIDS. Research in the area of language is

critical for better understanding and awareness of past and present language usage and its relation to trends in media representation of AIDS, which undoubtedly reflects and impacts societal attitudes toward AIDS (Norton, Schwartzbaum, Wheat, 1990).

Existing media research on AIDS has largely focused on the amount of media coverage and the identification of major themes in media representation of HIV and AIDS. Past studies have investigated a limited duration of media coverage, ranging from several weeks to several years. The present study examines language and major themes in mainstream national newspaper coverage over a twelve-year period. The study attempts to answer the following question:

1.) Does the occurrence of disabling language change over time?

The assertion that emerges from the research question is the occurrence of disabling language has decreased over time.

CHAPTER TWO Method

Sample

The data consisted of AIDS-related articles from four national newspapers, the Washington Post, the Chicago Tribune, the Los Angeles Times, and the New York Times. The papers were examined from January of 1985 through December of 1996, allowing for 12 consecutive years to be sampled. **Procedure**

The full-text newspaper archives were retrieved from Lexis-Nexis, a computerized database. The researcher of the study collected the sample. All articles written about AIDS were retrieved from the newspapers except volunteer opportunities, news summaries, and obituaries. Articles were downloaded according to paper, month, and year. Only stories with a minimum of five occurrences of the word "AIDS" were selected for the sample to ensure that each article was written predominantly about AIDS. In addition, the command for selecting articles with only the plural form of "aid" was used in retrieving articles. The thesis advisor and the researcher were in agreement of using these criteria for selection of the sample.

The data was classified by newspaper and year. Superfluous words, consisting of the headline, section, dateline, and byline, were systematically removed with a macro from all data for accurate word counts.

Content Analysis

Textpack PC¹, a computerized content analysis software package, was utilized to chart the language occurrences. A dictionary file was constructed in Textpack PC to analyze the occurrence of disabling language terminology and phrases and to define article categories (see Appendix A).

The dictionary file consists of all words and phrases that were analyzed. Words and phrases in the dictionary file considered to be "disabling" were reviewed and verified by the researcher's thesis advisor and two graduate students. A small sample of the data consisting of the months March, June, September, and December from the years 1986 and 1995 was analyzed using Textpack PC to determine the word frequencies. Based on this output, additional words were added to the file to form categories.

One hundred seven categories made up the dictionary file. The main themes of the categories were the following: 1.) disabling language, 2.) person first language, 3.) atrisk groups, 4.) transmission routes, 5.) education and prevention, 6.) treatment, 7.) funding, 8.) research, and 9.) hospice care. Words were listed as single words, word stems, or word strings and categories were indicated numerically.

Textpack PC, Release 5.0: Peter Ph. Mohler & Cornelia Zull (1995), Copyright ZUMA, Mannheim 1986, 1990, 1995 Zentrum fur Umfragen, Methoden und Analysen Postfach 12 21 55, D-68072 Mannheim Germany.

The data was analyzed by Textpack PC. This procedure yielded word frequencies based on the dictionary file and created a systems file in a format compatible to use in SPSS.

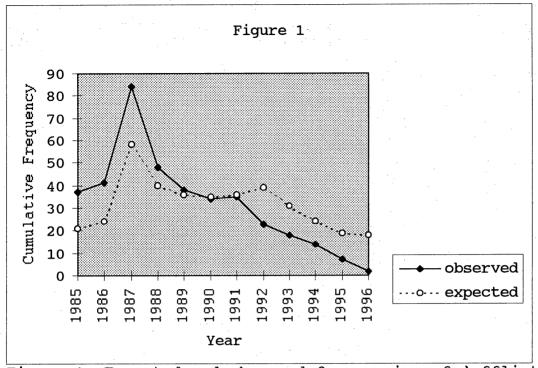
CHAPTER THREE

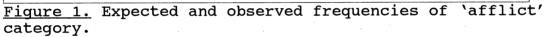
Results

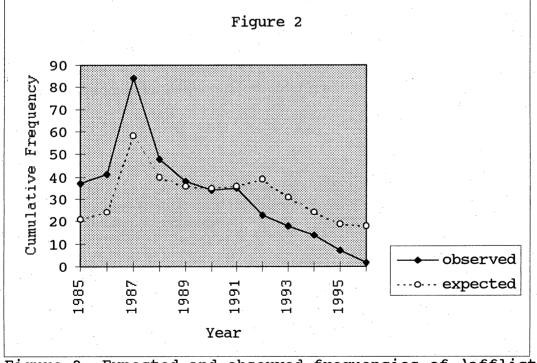
Crosstabulations of category words and years sampled were computed. Cell counts of words were obtained for all sampled newspapers according to year. The observed and expected frequencies were calculated for each cell.

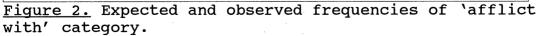
Chi-square test for trend was performed to examine the occurrence and nature of the relationships (Rosner, 1995). The trend of a relationship between two variables is computed with this statistic (i.e., do the proportions increase or decrease as year increases?).

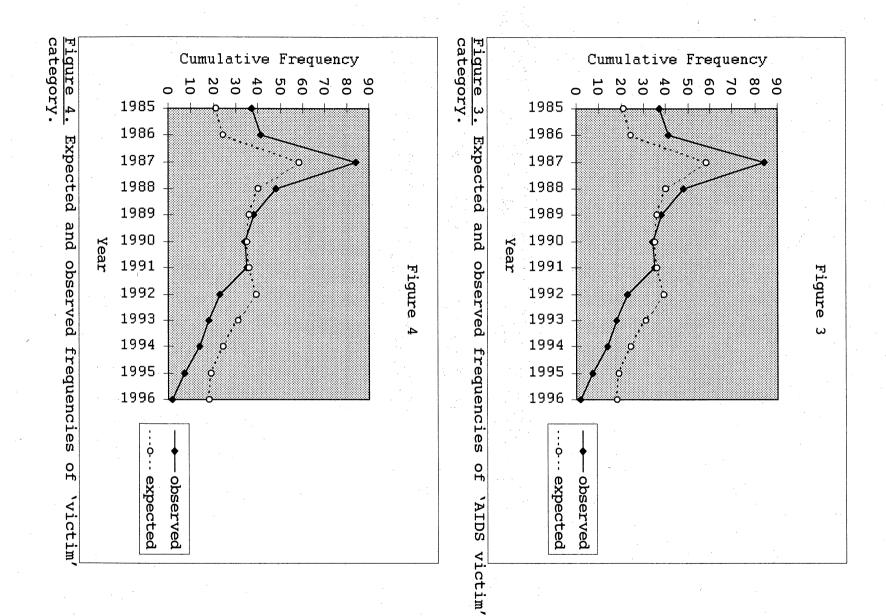
A significant descending trend of disabling language usage was found over time for the following categories: 1.) 'afflict', χ^2 (1, <u>N</u> = 74,339) = 104.4, <u>p</u> < .001; 2.) 'afflict with', χ^2 (1, <u>N</u> = 74,339) = 42.11, <u>p</u> < .001; 3.) 'AIDS victim', χ^2 (1, <u>N</u> = 74,339) = 1934.47, <u>p</u> < .001; 4.) 'victim', χ^2 (1, <u>N</u> = 74,339) = 1502.91, <u>p</u> < .001; 5.) 'disease', χ^2 (1, <u>N</u> = 74,339) = 2930.50, <u>p</u> < .001; 6.) 'AIDS patient', χ^2 (1, <u>N</u> = 74,339) = 952.54, <u>p</u> < .001; 7.) 'suffer', χ^2 (1, <u>N</u> = 74,339) = 78.97, <u>p</u> < .001; and 8.) 'suffer from', χ^2 (1, <u>N</u> = 74,339) = 105.08, <u>p</u> < .001.











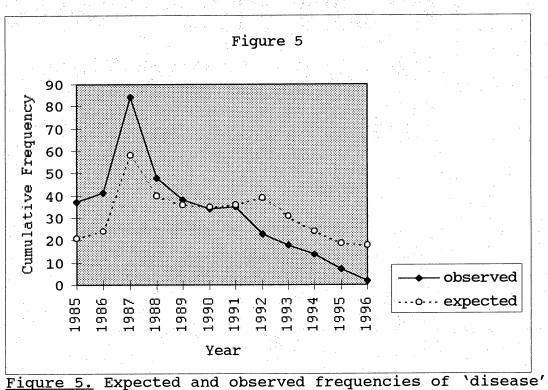




Figure 1, Figure 2, Figure 3, Figure 4, and Figure 5 show that the categories 'afflict', 'afflict with', 'AIDS victim', 'victim', and 'disease', respectively, occurred more frequently than expected between the years 1985 and 1987. Words and phrases in 'AIDS victim' and 'victim' categories began declining beyond expected counts in 1990 and remained lower than expected throughout the following years. 'Afflict' category, which included all forms of the word "afflict", occurred less often than expected from 1991 through 1996. Categories 'afflict with' and 'disease' decreased in occurrence in 1992 through 1996.

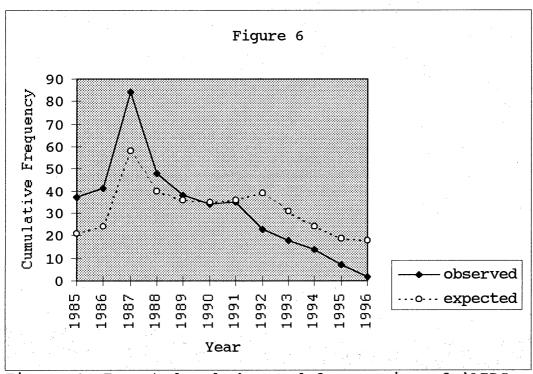
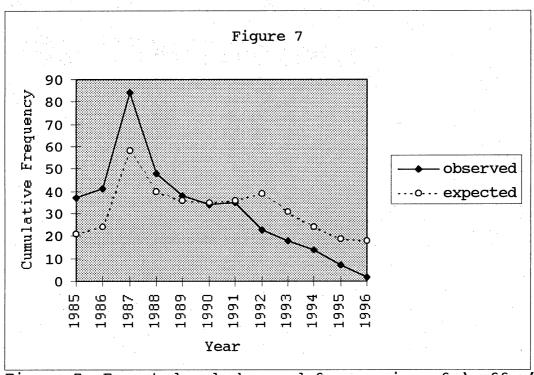
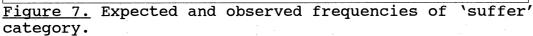


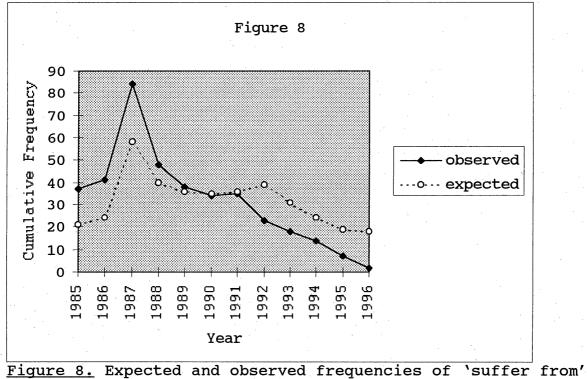
Figure 6. Expected and observed frequencies of `AIDS patient' category.

As shown in Figure 6, items in the 'AIDS patient' category occurred more frequently than the expected count during the years 1985 and 1989. The usage of the phrase remained lower than expected after 1991.

The observed frequencies in 'suffer' and 'suffer from' categories were lower than the expected frequencies in 1985 and 1986, as indicated in Figure 7 and Figure 8, respectively. Both categories occurred less frequently than expected from 1993 to 1996.







category.

CHAPTER FOUR

Discussion

The danger is that people may mistake what is basically a change of vocabulary for a change in behavior, practices, and attitudes. While practically all Americans have learned to talk inoffensively, not enough have learned to think differently, or to act positively (Young, 1964, p. 46).

As indicated by the findings of this study, a descending trend of disabling language was found over time. The usage of disabling language peaked during the 1980s and began declining by the early 1990s. The implications of this will be discussed in the following section.

Caution is necessary when interpreting the findings of this study. The language may appear to reflect more tolerance and acceptance of AIDS issues previously stigmatized; however, other factors may be playing a role in the changes of language. Alternate explanations are reviewed in the succeeding section.

Although terminology has shown to be an influence and reflection of attitudes (Hertog & Fan, 1995), attributing the decline of disabling language to changes in the general public's attitudes toward issues associated with AIDS would be naive and misleading. Attitudes may be less abrasive and may even be sympathetic toward those with AIDS who are considered to have no responsibility for their contraction

of HIV; however, attitudes toward groups of people initially identified as "at-risk" (i.e., gays and IV drug users) do not seem to differ greatly from the past. A recent example of this is "Corporate America's" complete lack of support for gay and lesbian issues. Major companies including J.C. Penneys, Macy's, and Sears withdrew their advertising during an episode of a television program, "Ellen", that addressed lesbian issues. These companies clearly communicated their position of intolerance of gays.

This is a stark example of the hegemony of mainstream media. Hegemonically, the media attempts to control American society's way of living by instilling dominant cultural practices, beliefs, and values. Large corporations have ownership of media outlets and, consequently, strongly influence the type of information and the manner in which it is communicated. American society is not presented unbiased information, contrary to what those in power would like us to believe. The facts which are chosen to be publicly released are, unfortunately, first in the hands of the controlling "Corporate America". This source of power paints a picture corresponding to the current sociopolitical agenda, therefore influencing the audience's interpretation of information. For example, many Americans viewed the 1992 Los Angeles riots as a group of "minorities" destroying their community rather than looking at the meaning of the behavior. Mainstream media helped shape this thinking by

primarily focusing on African American participation and by failing to provide intellectual commentary on the tragedy.

The increasing trend of big businesses regulating the dissemination of information poses tremendous dangers for the future of American society. Large corporations are more commonly holding stock in media sources and higher education institutions, which gives Corporate America increased power and opportunity to influence public perceptions and level of knowledge. Typically, issues in which the few in power have interest are addressed and tend to be slanted to accommodate their agenda. Society will most likely continue to engage in less critical thinking as the value of business continues to supersede that of education; thus, people will be more likely to accept information without inquiry or critique. A sad possible result could be the continuation of the American public being covertly brainwashed, producing succeeding generations of incognizant and apathetic individuals.

Another example of continued intolerance and unacceptance of gays and lesbians is the recent failed attempt to legalize gay and lesbian marriages in California. An inference can be made that notable attitudinal change has not taken place when a society believes it has the right to decide who can legally unite.

The controversy of using marijuana for medical purposes demonstrates the ignorance about the substance and

lack of genuine concern for people. Although the California Proposition 215, an initiative to use marijuana for medicinal use, was passed in 1996, much opposition exists. This opposition can be viewed as a reflection of concrete thinking processes, which is exemplified by the "just say no to drugs" message and the widespread acceptance of marijuana propaganda found in campaigns such as "Just Say No to Drugs". By accepting information from this type of campaign, we are allowing others to think for us and mold us into a society that fits their agenda. Thus, critical thinking and the seeking of knowledge are discouraged due to the popularization of a position which is based on scare tactics and the promotion of "American values", without giving all the facts.

This type of controversy illustrates the harsh reality of society's tendency to prioritize political agendas above people. Tutu (1983) stated, "Many have been brainwashed into thinking that legally right and morally right mean the same thing" (p. 31). Marijuana alleviates nausea, which helps individuals with AIDS and other types of chronic illnesses to eat and live with less pain. These benefits, in addition to the evidence that marijuana is not physically addicting nor has physical withdrawal effects (Maisto, Galizio, & Connors, 1991) would be reason enough for legalization if human needs were society's main concern.

Our society's overall unwillingness to distribute clean needles to intravenous drug users is another example of the lack of basic concern for people. The greater importance seems to be having a "drug-free" society rather than people's health and well-being. An obvious danger of this is the determination by the dominant group that other groups are not as valuable, and that other groups' choices to not conform to the mainstream culture's norms justifies their suffering.

The preceding discussion considered sociopolitical factors demonstrating society's intolerance of diverse populations, therefore suggesting no substantial attitudinal changes regarding AIDS issues. The following section discusses possible factors influencing the trend of decreasing labeling, including more consistent reporting, increased awareness of politically correct language, and the increased likelihood of AIDS having a personal effect on the general public.

During the initial reporting of AIDS issues, press coverage was scarce and inconsistent (Kinsella, 1989). Explanations include the lack of full-time AIDS reporters and limited amount of scientific information (Dearing & Rogers, 1992; Kinsella, 1989). The increase in scientific breakthroughs regarding treatment, and accurate information about transmission and prevention helps in the regularity of reporting. In addition, journalists who understand

infectious diseases are writing on AIDS issues; whereas in prior years, part-time reporters having no expertise in medical reporting were covering AIDS (Kinsella, 1989). The increased consistency in the language being used to describe the virus and the people who have AIDS is likely an outcome of coverage being produced by reporters with similar education and understanding of the virus.

The emphasis on using politically correct language may have been an influence on the descending trend of disabling language in the media. Mainstream media will report on issues in a manner acceptable to the dominant culture (Kinsella, 1989). Thus, because politically correct language is popular among "mainstream America", journalists make deliberate efforts to write and speak with politically correct terminology.

AIDS was initially thought to be a threat only to certain groups, and in the early years of AIDS coverage few journalists were affected by the virus. As the number of populations that were identified as "at-risk" increased resulting in AIDS having a personal effect for more people, coverage increased (Kinsella, 1989). As the debilitating effects of the virus began touching the lives of the general public, disabling language decreased. The media would have been inclined to report more sensitively and respectfully as AIDS became a recognized issue for "mainstream America".

Limitations of this study include the inability to determine if a relationship between language and attitudes exists, and the inability to discuss the findings regarding the occurrence of "at-risk" groups in the media. A longitudinal study examining language in the media and public perceptions of AIDS would be needed to assess the existence of a relationship. Additionally, analyses of the articles' content is necessary to make inferences about the mention of "at-risk" groups.

The present study poses questions which future research can attempt to answer. The following section considers areas needing further exploration, which include language, public perceptions, and future trends of dissemination of information.

As AIDS is written about in less labeling and stereotyping terminology, how is the content changing, if at all? If the decline in disabling language reflects an increase in tolerance and acceptance, we would expect to see these attitudes conveyed in the content as well. Future research is needed to assess whether mainstream media presents AIDS information with biases of dominant cultural values or with a balance of diverse perspectives.

Another concern indirectly related to this study is the consequences of the decline of publicly-funded media stations. How does this decline affect the delivery of news? A possible effect is that information given by the media

will become increasingly homogeneous. Research investigating this issue can assess the public's perceptions and knowledge of issues to determine the level of diversity in media stories.

Conclusion

Although language may seem to be on its way to a necessary revolution, what does this mean for America's future? Unfortunately, the demise of disabling language in written forms of media appears to be due to external factors rather than a reflection of liberal thinking and compassion for the human community. External pressures can help to diminish overt acts of discrimination; however, they will not have an impact on prejudicial attitudes. In fact, the discrimination may still exist in covert forms, which are more difficult to identify and confront. In hope of future peace and spiritual growth, American society must revolt against "Corporate America's" ideology by engaging in intellectual thought and living by humanistic values.

APPENDIX A: Dictionary File

0001	****AIDS
0001	AIDS
0002	****AIDSDIS
0002	AIDS discrimination
0003	****AIDSPT
0003	AIDS patient
0003	AIDS patients
0004	****AIDSRES
0004	AIDS research
0004	AIDS studies
0004	AIDS study
0005	****TEST
0005	AIDS test
0005	AIDS testing
0005	AIDS tests
0005	Antibody test
0005	antibody test
0005	HIV test
0005	HIV testing
0005	HIV tests
0006	****VICTIM
0006	AIDS casualty
0006	Victim
0006	victim
0006	Victims
0006	wictime
0006	victims
0007	****AFFLICT
0007 0007	****AFFLICT Afflict
0007 0007 0007	*****AFFLICT Afflict afflict
0007 0007 0007 0007	*****AFFLICT Afflict afflict Afflicted
0007 0007 0007 0007 0007	*****AFFLICT Afflict afflict Afflicted afflicted
0007 0007 0007 0007 0007 0007	*****AFFLICT Afflict afflict Afflicted afflicted Affliction
0007 0007 0007 0007 0007 0007 0007	*****AFFLICT Afflict afflict Afflicted afflicted Affliction affliction
0007 0007 0007 0007 0007 0007	*****AFFLICT Afflict afflict Afflicted afflicted Affliction affliction *****AFRICA
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0007 0007 0007 0007 0007 0007 0007 000	*****AFFLICT Afflict afflict Afflicted afflicted Affliction affliction *****AFRICA
0007 0007 0007 0007 0007 0007 0007 000	*****AFFLICT Afflict afflict Afflicted afflicted Affliction affliction *****AFRICA Africa
0007 0007 0007 0007 0007 0007 0008 0008	*****AFFLICT Afflict afflict Afflicted afflicted Affliction affliction *****AFRICA Africa *****ANAL Anal intercourse
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0007 0007 0007 0007 0007 0007 0008 0008	*****AFFLICT Afflict afflict Afflicted afflicted Affliction affliction *****AFRICA Africa *****ANAL Anal intercourse anal intercourse Anal sex
0007 0007 0007 0007 0007 0007 0008 0008	*****AFFLICT Afflict afflict Afflicted afflicted Affliction affliction *****AFRICA Africa *****ANAL Anal intercourse anal intercourse Anal sex anal sex
0007 0007 0007 0007 0007 0007 0008 0008	<pre>*****AFFLICT Afflict afflict Afflicted afflicted Affliction affliction *****AFRICA Africa *****ANAL Anal intercourse anal intercourse Anal sex anal sex *****ATHIRSK</pre>
0007 0007 0007 0007 0007 0007 0008 0008	<pre>*****AFFLICT Afflict afflict Afflicted afflicted Affliction affliction *****AFRICA Africa *****ANAL Anal intercourse anal intercourse Anal sex anal sex *****ATHIRSK At risk</pre>
0007 0007 0007 0007 0007 0007 0007 000	<pre>*****AFFLICT Afflict afflict Afflicted afflicted Affliction affliction *****AFRICA Africa *****ANAL Anal intercourse anal intercourse Anal sex anal sex *****ATHIRSK At risk at risk</pre>
0007 0007 0007 0007 0007 0007 0008 0009 0009	<pre>*****AFFLICT Afflict afflict Afflicted afflicted Affliction affliction *****AFRICA Africa *****ANAL Anal intercourse anal intercourse Anal sex anal sex *****ATHIRSK At risk at risk High risk</pre>
0007 0007 0007 0007 0007 0007 0008 0009 0009	<pre>*****AFFLICT Afflict afflict Afflicted afflicted Affliction affliction *****AFRICA Africa *****AFRICA Africa *****ATHICA Anal intercourse anal intercourse Anal sex anal sex *****ATHIRSK At risk at risk High risk high risk</pre>
0007 0007 0007 0007 0007 0007 0008 0009 0009	<pre>*****AFFLICT Afflict afflict Afflicted afflicted Affliction affliction *****AFRICA Africa ***** Anal intercourse Anal sex *****AFRICA Africa *****AFRICA Africa ***** Anal intercourse Anal sex *****AFHIRSK At risk at risk high risk *****BEHAV</pre>
0007 0007 0007 0007 0007 0007 0008 0009 0009	<pre>*****AFFLICT Afflict afflict Afflicted afflicted Affliction affliction *****AFRICA Africa *****AFRICA Africa *****ATHICA Africa *****AFRICA Africa ******AFRICA Africa ***** Anal intercourse anal sex *****AFRICA Africa ****** Anal sex ****** Africa ****** Africa ***** Anal sex ***** Africa ***** Africa ***** Africa ***** Africa ***** Africa ***** Africa ***** Africa ***** Africa **** Africa **** Africa **** Africa **** Africa **** Africa *** Africa *** Africa *** Africa *** Africa *** Africa *** Africa *** Africa *** Africa *** Africa ** Africa *** Africa ** Africa ** Africa ** Africa ** Africa ** Africa * Africa * * Africa</pre>
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0007 0007 0007 0007 0007 0007 0008 0009 0009	<pre>*****AFFLICT Afflict afflict Afflicted afflicted Affliction affliction *****AFRICA Africa *****AFRICA Africa *****ATHICA Africa *****AFRICA Africa ******AFRICA Africa ***** Anal intercourse anal sex *****AFRICA Africa ****** Anal sex ****** Africa ****** Africa ***** Anal sex ***** Africa ***** Africa ***** Africa ***** Africa ***** Africa ***** Africa ***** Africa ***** Africa **** Africa **** Africa **** Africa **** Africa **** Africa *** Africa *** Africa *** Africa *** Africa *** Africa *** Africa *** Africa *** Africa *** Africa ** Africa *** Africa ** Africa ** Africa ** Africa ** Africa ** Africa * Africa * * Africa</pre>

0012 0012 0012 0012 0012 0012 0012 0012	<pre>black female Black females black females Black individuals black individuals black individuals Black male black male black males black men black men black men black people black people black people Black women black women blacks</pre>
0013 0013	body fluids Exchange of bodily fluids exchange of bodily fluids
0013	exchange of bodily fluids
0013	Vaginal fluids
0013	vaginal fluids
0013	Vaginal secretions vaginal secretions
0013	vaginal secretions
0014	****CHILD
0014	Adolescent
0014 0014	adolescent Adolescents
0014	adolescents
0014	babies
0014	
0014	Bany
	Baby baby
0014	baby
0014 0014	baby Infant
0014	baby Infant infant
	baby Infant
0014 0014	baby Infant infant Infants
0014 0014 0014	baby Infant infant Infants infants Kid kid
0014 0014 0014 0014	baby Infant infant Infants infants Kid kid Kids
0014 0014 0014 0014 0014 0014 0014	baby Infant infant Infants infants Kid kid Kids kids
0014 0014 0014 0014 0014 0014	baby Infant infant Infants infants Kid kid Kids

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0022	drug addicts
0022	Drug use
0022	drug use
0022	drug user
0022	Substance abuse
0022	substance abuse
0023	****EDU
0023	Educate
0023	educate
0023	Education
0023	education
0024	****EJAC
0024	Ejaculat
0024	ejaculat
0025	*****FFRSRCH
0025	Federal funded research
0025	federal funded research
0026	*****GOVFUND
0020	Federal funding
0026	federal funding
0026	Federal funds
0020	federal funds
0026	
	Government appropriation
0026	government appropriation
0026	Government funding
0026	government funding
0026	government funding
0026	Government funds
0026	government funds
0026	Government subsidy
0026	government subsidy
0027	*****FUND
0027	Fund
0027	fund
0028	****GAY
0028	Gay
0028	gay
0028	Gays
0028	gays
0028	Homosexual
0028	homosexual
0029	****POSITIVE
0029	HIV positive
0029	Positive
0029	positive
0030	****HAITI
0030	Haiti
0030	Haitians
0031	****HANDI
0031	Disable
0031	disable
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0031 0031 0032 0032 0032 0032 0032 0032	Handicap handicap handicap *****LATINO Hispanic Latino latino Mexican American ****AFFLICTW Afflicted with afflicted with *****INFECT Infected infect infect *****INTER Coition Coitus Cojulate Copulate Copulate Copulate Copulate Copulate Copulate Copulation Fornication fornication Intercourse intercourse intercourse Intimate relations intimate relations Love-making Nake love make love Penetration *****ORAL Cunninglingas Felatio felatio
0037	Cunninglingas
0037	
0037	oral sex ****SIGOTH
0038	∧ « ▼ ▼ ▼ DIGUTH

0038 0038 0038 0038 0038 0038 0039 0039	Significant other significant other Significant others significant others Partner partner *****PATIENT Patient patient
0040	****PENIS
0040	Penis
0040	penis *****TDRUG
0041 0041	AIDS treatment
0041	AIDS treatments
0041	AZT
0041	Cocktail drug
0041	cocktail drug
0041	protease inhibitor
0041	protease inhibitor
0041	Protease inhibitors
0041	protease inhibitors
0041 0041	Pharma pharma
0041	*****PLAGUE
0042	plague
0042	Plague
0042	plague
0042	scourge
0043	*****POOR
0043	poor
0043	Poverty
0043 0044	poverty ****PREVENT
0044	Prevent
0044	prevent
0045	****PROST
0045	Prostitution
0045	prostitution
0045	Hooker
0045	hooker
0045	Prostitute
0045	prostitute
0045	Whore
0045 0046	whore *****PROTECT
0048	Protect
0040	protect
0040	*****RSRCH
0047	Research
0047	research

· .	0048	****SEM
	0048	Semen
	0048	semen
	0049	****SEX
	0049	Sex
	0049	sex
	0050	****SICKW
	0050	Sick with
	0050	sick with
	0051	****SUFFER
	0051	Suffer
	0051	suffer
	0052	****VACCINE
	0052	Vaccin
	0052	vaccin
	0052	****VAG
	0053	Vagina
	0053	vagina
	0053	****SUFFROM
	0054	Suffered from
	0054 0054	suffered from
	0054 0054	Suffer from
	0054	suffer from
	0054	Suffering from
	0054	suffering from
	0054	Suffers from
	0054	suffers from
	0055	****VIRUS
	0055	Virus
	0055	virus
	0056	****WHITE
	0056	White female
	0056	white female
	0056	White females
	0056	white females
	0056	White male
	0056	white male
	0056	White males
	0056	white males
	0056	White men
	0056	white men
	0056	White women
	0056	white women
	0056	Whites
	0056	whites
	0057	****HASAIDS
	0057	are HIV positive
	0057	has Acquired Immune Deficiency Syndrome
	0057	has acquired immune deficiency syndrome
	0057	has AIDS
	0057	has HIV

has Human Immunodeficiency Virus 0057 has human immunodeficiency virus. 0057 have Acquired Immune Deficiency Syndrome 0057 0057 have acquired immune deficiency syndrome 0057 have AIDS 0057 have HIV have Human Immunodeficiency Virus 0057 have human immunodeficiency virus 0057 0057 is HIV positive ****LESBIAN 0058 0058 qay female gay females 0058 0058 gay woman 0058 gay women 0058 homosexual female 0058 homosexual females homosexual woman 0058 0058 homosexual women 0058 Lesbian lesbian 0058 ****WITHAIDS 0059 0059 with Acquired Immune Deficiency Syndrome 0059 with acquired immune deficiency syndrome 0059 with AIDS 0059 with HIV with Human Immunodeficiency Virus 0059 0059 with human immunodeficiency virus with the Human Immunodeficiency Virus 0059 with the human immunodeficiency virus 0059 ****CASUAL 0060 0060 Casual contact 0060 casual contact 0060 Insects insects 0060 0060 Kiss kiss 0060 Kissing 0060 0060 kissing 0060 Mosquitoes 0060 mosquitoes Saliva 0060 0060 saliva 0060 Toilet 0060 toilet 0060 Toilets 0060 toilets ****DISCRIM 0061 0061 discriminat 0061 discriminat 0062 ****ATHIBEHAV 0062 At risk behavior

0062	at risk behavior
0062	High risk behavior
0062	high risk behavior
	*****DRUG
0063	
0063	Cocaine
0063	cocaine
0063	Crack
0063	crack
0063	Heroin
0063	heroin
0064	****PROM
0064	Promiscuity
0064	promiscuity
0064	Promiscuous
0064	promiscuous
0065	****STFRSRCH
0065	State funded research
0065	state funded research
0065	****AIDSVIC
0066	AIDS victim
	AIDS VICTIM AIDS victims
0066	
0067	****NEEDLE
0067	Needle
0067	needle
0067	Needles
0067	needles
0068	****GAYCOM
0068	Gay community
0068	gay community
0068	Homosexual community
0068	homosexual community
0069	****BLOOD
0069	Blood
0069	blood
0070	****BLOODT
0070	Blood transfusion
0070	blood transfusion
0071	****HETERO
0071	Heterosexual
0071	heterosexual
0072	****HETEROF
0072	Female heterosexual
0072	female heterosexual
0072	Female heterosexuals
	female heterosexuals
0072	
0072	Heterosexual female
0072	heterosexual female
0072	Heterosexual females
0072	heterosexual females
0072	Heterosexual women
0072	heterosexual women

0073 ****HETEROM 0073 Heterosexual male heterosexual male 0073 0073 Heterosexual males 0073 heterosexual males Heterosexual men 0073 0073 heterosexual men 0073 Male heterosexual 0073 male heterosexual 0073 Male heterosexuals 0073 male heterosexuals ****ETHNIC 0074 0074 Ethnic minorities ethnic minorities 0074 0074 Ethnic minority ethnic minority 0074 ****EPIDEM 0075 Epidemic 0075 0075 epidemic 0076 ****AIDSAWAR AIDS awareness 0076 0077 ****Pop 0077 Amyl nitrate 0077 amyl nitrate 0077 Poppers 0077 poppers 0078 ****BATH 0078 Bath house bath house 0078 0078 Bath houses 0078 bath houses 0078 Bathhouse 0078 bathhouse 0078 Bathhouses 0078 bathhouses 0079 ****FIST 0079 Fisting fisting 0079 ****HELPLESS 0080 0080 Helpless 0080 helpless 0081 ****GIG 0081 Gigolo 0081 qiqolo 0082 ****RUNAWAY 0082 Runaway 0082 runaway ****INFED 0083 0083 Adultery adultery 0083 Extramarital affair 0083

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0083	extramarital	affair
	Extramarital	
0083		
0083	extramarital	affairs
0083	Infidelity	
0083	infidelity	the second
0084	****MARIJ	
0084	Hash	
0084	hash	
0084	Hemp	
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0084	hemp	
0084	Marijuana	
0084	marijuana	
0084	Pot	
0084		
	pot	
0085	****PRISON	
0085	Convict	
0085	convict	
0085	Convicts	
0085	convicts	1. A.
0085	Criminal	
0085	criminal	
0085	Criminals	
0085	criminals	
0085	Felon	
0085	felon	·
0085	Felons	
0085	felons	
0085	Parolee	and the second second
0085	parolee	
0085	Parolees	
0085	parolees	
0085	Prisoner	
0085	prisoner	
	-	
0085	Prisoners	
0085	prisoners	
0086	****SIN	
0086	Amoral	
0086	amoral	
0086	Corrupt	
	. –	
0086	corrupt	
0086	Depraved	
0086	depraved	7
0086	Immoral	
0086	immoral	
0086	Profligate	
0086	profligate	
0086	Sin	
0086	sin	•
0086	Sinful	
0086	sinful	
0087	****MONOGAM	Y :
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0087	Monogamous						
0087	monogamous						
0087	Monogamy						
0087	monogamy						
8800	****DEVIANT				•		
8800	Aberrant	4					
8800	aberrant						
0088	Abnormal						
0088	abnormal						
8800	Anomalous						
8800	anomalous						
8800	Deviance						
8800	deviance						
0088	Deviant						
8800	deviant						
0089	*****IMMIGRNT						
0089	Foreigner			÷			
0089	foreigner	$(x_{i}) \in \mathcal{F}_{i}$					
0089	Foreigners						
0089	foreigners						
0089	Illegal aliens	5					
0089	illegal aliens						
0089	Immigrant	· .					
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0089	Immigrants						
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0090	****TCELL				.*		
0090	Helper t cells	5					
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0090	T Cells						
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0091	****CELEB						
0091	Earvin Johnson	n .					
0091	Freddie Mercu						
0091	Freddy Mercury						
0091	Greg Louganis						
0091	Kathy Bergalis	5					
0091	Magic Johnson						
0091	Rock Hudson						
0091	Ryan White						
0092	****ATHLETW						
0092	Athletes with	Acquired	Immune	Defic	iency	Syndr	ome
0092	Athletes with						
0092	athletes with						
0092	athletes with						
0092	Athletes with				*	-	
0092	athletes with						
0092	Athletes with	and the second		· · · ·		. «	
0092	athletes with					e e e	
0092	Athletes with		nunodef	iciency	/ Viru	IS	
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0092 Athletes with human immunodeficiency virus athletes with Human Immunodeficiency Virus 0092 athletes with human immunodeficiency virus 0092 Athletes with the human immunodeficiency virus 0092 ****STD 0093 sexually transmitted disease 0093 sexually transmitted diseases 0093 0093 STD STDs 0093 venereal disease 0093 venereal diseases 0093 0094 ****PRES President 0094 0094 president White House 0094 0094 white house ****CHURCH 0095 0095 Bible 0095 bible Catholic 0095 0095 Catholics Christian 0095 Christians 0095 0095 Church 0095 church Churches 0095 churches 0095 Minister 0095 0095 minister 0095 Ministers 0095 ministers 0095 Pope 0095 pope 0095 Priest priest 0095 0095 Priests 0095 priests Religion 0095 0095 religion 0095 Religions 0095 religions 0096 ****ANUS 0096 Anus 0096 anus 0097 ****LATF 0097 Hispanic female Hispanic females 0097 Hispanic woman 0097

0097 Hispanic women 0097 Latino female Latino females 0097 0097 Latino woman 0097 Latino women ****AFRF 0098 0098 African American female 0098 African American females 0098 African American woman African American women 0098 0098 Black female black female 0098 0098 Black females 0098 black females 0098 Black woman 0098 black woman 0098 Black women 0098 black women 0099 ****AFRM 0099 African American male 0099 African American males 0099 African American man African American men 0099 0099 Black male black male 0099 Black males 0099 0099 black males 0099 Black man black man 0099 0099 Black men 0099 black men ****LATM 0100 0100 Hispanic male 0100 Hispanic males 0100 Hispanic man 0100 Hispanic men 0100 Latino male 0100 Latino males 0100 Latino man 0100 Latino men ****STRICK 0101 AIDS stricken 0101 0101 Stricken with AIDS stricken with AIDS 0101 0102 ****HOSPICE 0102 Caregiver 0102 caregiver 0102 Caregivers 0102 caregivers 0102 Convalescent 0102 convalescent

0102	Counseling
OTO2	counsering
0102	counseling
0102	Custodial care
0102	custodial care
0102	Hospice
0102	hospice
0102	Skilled nursing
0102	skilled nursing
0103	****BISEX
0103	Bisexual
0103	bisexual
0103	Bisexuals
0103	bisexuals
0104	****CONTROL
0104	\mathbf{A}
0104	a
0104	and
0104	are
0104	is
0104	The
0104	the
0104	was
0104	were

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