



## **WORLD AIDS DAY BROLL- SCRIPT AND SHOTLIST**

**GEORGIA** – Sharing used needles among drug addicts, has been linked to about 70 percent of known HIV infections in Georgia. This is a story told by Georgia’s first recipient of free, state-sponsored anti-retroviral therapy. ARVs suppress HIV but cannot cure it. At the time of the story, October 2003, only 5 people were receiving ARVs for free, paid by the state; at least 50 people needed them. About 500 people living with HIV have registered with the government. The real total of people living with HIV could be three times that. Georgia has been granted USD 12 million over 5 years from the Global Fund to fight AIDS, TB and Malaria, mostly to fight HIV/Aids.

00:01:00 – Caucasus mountain sequence (**copyright holder**: Valery Odikadze).  
00:01:11 – Tbilisi, wide  
00:01:14 – Apartment building, exterior  
00:01:17 – “Sandro” – **NOT HIS REAL NAME** – walks upstairs, then fills generator, sequence  
00:01:40 – Sandro speaks, 2/3 back to camera, at window  
00:01:49 – people in streets of Tbilisi, various social strata, mostly young men  
00:02:23 – Sandro speaks  
00:02:27 – Heroin preparation in car & syringe discarded, sequence  
00:02:54 – Sandro speaks  
00:03:00 – Sandro walking, various (seen below hips only)  
00:03:10 – Sandro, face not visible, crosses parking lot, ambulance in view  
00:03:13 – camera, as “Sandro” walks down AIDS Centre corridor  
00:03:16 – blood test sequence with nurse, UNAIDS poster, CU of test tube filling.  
00:03:36 – Dr. Tengiz Tsertsvadze (MD), Director of Tbilis AIDS Centre, in corridor  
00:03:39 – Dr. Tsertsvadze speaks  
00:03:45 – AIDS Centre staff opens drugs cabinet and gives ARVs to Sandro  
00:03:52 – Sandro pours blue pills into his hand.  
00:03:55 – Dr. Tsertsvadze speaks  
00:03:59 – commercial Pharmacy, woman on ladder at shelves, 2 shots  
00:04:03 – Tbilisi people in older neighbourhood streets, various views  
00:04:20 – Sandro speaks  
00:04:23 – Candle, Sandro lights candle, genuflects, in AIDS Centre’s mini-chapel  
00:04:41 – Dr. Tsertsvadze speaks  
00:04:47 – Sandro approaches with empty backpack, the Georgian Drug Rehab NGO, “SASOEBA”  
00:04:54 – “SASOEBA” wall sign (in Georgian and English, very legible)  
00:04:57 – Sandro fills pack with condoms & syringes, helped by woman, sequence  
00:05:12 – Sandro walks outside with full backpack.  
00:05: 15 – “Global Fund” report cover (English, woman’s face on cover)  
00:05:18 – Dr. Tsertsvadze in his office, pulls AIDS book out, opens it, sequence.

00:05:30 – Sandro walking up path of famous monastery overlooking Mtskheta, Georgia’s ancient capital – a site easily identified in the region.  
00:05:40 – Sandro speaks leaning on monastery wall, above famous river junction  
00:05:47 – Sandro with wife at big, sunny window in a Tbilisi building  
00:05:55 – puppy joins its mother, outside window  
00:06:01 – Sandro speaks at monastery wall.  
00:06:05 – Young girl eating ice cream at vegetable stand  
00:06:11 – Boys playing football in Old Tbilisi street  
00:06:19 – Child runs down hill, shot comes to rest on blue syringe lying in the dirt  
00:06:26 – ends.

**00:01:18 – 00:01:38** - SANDRO – “When you crave heroin, you don’t care whose syringe it is. You can’t go to a pharmacy, you take the syringe, just rinse it, and use it.”

**00:01:40 – 00:02:27** - SANDRO – “My life brought me to the street. I was addicted for 5 years, until I turned 32. I never thought to marry or have children, and then it was time to give it up. But I felt awful without the drug. I decided to visit a doctor, or speak my family, speak with my brother.”

**00:02:28 – 00:02:52** - SANDRO – “With my friends, we used to use the same syringe, we prepared the drug together. Out of 7 friends, me and 2 others happened to get AIDS.”

**00:02:57 – 00:03:35** - SANDRO – “When I was diagnosed with AIDS, the Centre had no medicine. They received it 2 or 3 days later. I was the first who tried these medicines. Free of charge. The government paid for it. 4 people joined me later, they got the medicine for free too, but I knew many patients who could not afford this therapy.”

**00:03:36 – 00:03:58** - DR.TENGIZ TSERTSVADZE- “Fortunately we have not observed the epidemic boom as in Russia, Ukraine, and Moldova. Drug addiction is considered the most significant risk factor for AIDS and it’s taken into account in the national policy of Georgia.”

**00:03:59 – 00:04:39** – SANDRO - “The medicines I am taking cost one thousand dollars in pharmacies. There is another drug from India for 150 dollars, but many people can’t afford that either. Some of them are living in villages and cannot buy a ticket to come and get a test. We are trying to help each other. I had the same problem. With God’s mercy, I got medicine for free.”

**00:04:39 – 00:04:56** - DR. TSERTSVADZE – “You know that according to the Georgian law as well as in other countries of the former Soviet Union, drug addiction is considered a crime, so it means that drug addiction is illegal. Drug addicts don’t come easily to us. It’s difficult to work with them.”

**00:04:57 – 00:05:15** - SANDRO – “I take the syringes and bring them to where the drug addicts are. These people are not used to meeting outside, prefer to meet at home. Now I advise all drug addicts that if they shoot drugs anyway, it is better to use personal syringes and to watch the drug preparation themselves.”

**00:05:15 – 00:05:29** - DR. TSERTSVADZE - “The most important component of the project is that people with AIDS will receive not only free examinations and treatment of symptoms, but also specific anti-retroviral therapy.”

**00:05:33 – 00:06:25** - SANDRO – “I feel well now. I am taking medicines for the past 8 years. My goal is to have a child but the medicine cannot guarantee that the child will be HIV negative (**06:12**). At 11 or 12, children should be told the difference between good and bad by their parents. I do not want my child to be like me. I want my child to understand me. I believe my child would understand me.”

**INDONESIA:** In Jakarta, injecting drug users are becoming infected with HIV even faster than growth in the number of new users. The Jakarta hamlet of “Kampung Bali” is known locally for its serious concentration of drug users and dealers. But to reduce the spread of HIV as quickly as possible among injecting drug users, one NGO has been working with the local government medical clinic, treating drug addiction as an illness and offering support and materials for a harm reduction outreach programme that includes regular needle exchanges for registered drug addicts. Needle exchanges are experimental in Indonesia, implemented discretely in only a few sites where HIV is known to be spreading rapidly among injecting drug users.

00:06:56 – Jakarta freeway + high-rises  
00:07:01 – Train station platform, Jakarta newspaper reader; men in distance  
00:07:05 – People walking along passage  
00:07:08 – “Kampung Bali” sign, CU  
00:07:10 – Sign with vehicles, wide shot  
00:07:14 – “HIV” prevention banner strung over a street  
00:07:17 – Banner, CU  
00:07:21 – Street at NGO building Yayasan Pelita Ilmu (Institute for Scientific Enlightenment), called YPI.  
00:07:27 – “ARI” - **NOT HIS REAL NAME** – YPI Outreach Worker, in YPI office.  
00:07:31 – ARI + COLLEAGUE pack factory-sealed syringes, sequence.  
00:07:43 – PUNKY DJOKO, YPI Programme Manager  
00:07:54 – Government community medical clinic sign  
00:07:57 – entrance to clinic, with sign, wide.  
00:08:01 – green “Pharmacy” sign, CU  
00:08:03 – YPI COLLEAGUE enters inner clinic office with client  
00:08:06 – YPI COLLEAGUE mid-shot at desk  
00:08:09 – brown envelope with used syringes returned by CLIENT, sequence.  
00:08:15 – needles put in container, wide.  
00:08:16 – blue lid sealed (focus is a bit soft at start, but okay later)  
00:08:21 – Dr BAMBANG EKA, Min. of Health Consultant for Kampung Bali clinic.  
00:08:27 – people in clinic waiting area, outside, wide  
00:08:29 – toddler sequence, 2 shots  
00:08:37 – Dr. BAMBANG EKA working in clinic  
00:08:40 – Dr. BAMBANG EKA speaks  
00:08:50 – HAJI SISWANTO, Head Administrator, Kampung Bali, speaks  
00:09:11 – man in circle of YPI members speaks with Dr. & clinic staff  
00:09:20 – Dr. BAMBANG EKA speaks  
00:09:24 – Dr. BAMBANG EKA gestures in the circle, with syringe in-hand.  
00:09:36 – Dr. BAMBANG EKA speaks  
00:09:50 – pan of circle at YPI  
00:09:57 – clinic woman (b&w shirt) gestures at group  
00:10:00 – ARI, CU  
00:10:03 – Dr. BAMBANG EKA, mid-shot  
00:10:06 – 2 YPI members (red hat)  
00:10:10 – YPI member with keys  
00:10:14 – Dr. BAMBANG EKA speaks

00:10:17 – Dr. & staff in clinic, through window  
00:10:23 – ARI, tilts downward  
00:10:30 – ARI speaks  
00:10:34 – YP I member stacks pamphlets at YPI office table  
00:10:39 – YPI members conversing at table....  
00:10:42 – youth in hallway of clinic, woman passes then exits via door to outside.  
00:10:52 – ends.

**00:07:23 – 00:07:41**

ARI – “The opinion of their relatives is, ah ya, of their parents, is that, that’s it, let him die, they treat him like he’s dead already. With more information they open their eyes, and they begin to understand, return to normal, take him back into the family.”

**00:07:41 – 00:08:21**

PUNKY DJOKO - “This is considered against the law. We distribute the syringe with this cleaner, so we also teach them how to use it. But it is still illegal, therefore even if we indeed distribute it in the government medical clinic, we just package it here. This is thanks to our courageous friends bravely doing this. We don’t just give syringes away to registered drug addicts on the list, we teach them to be aware of the dangers of using drugs, and to reduce doses to lower risk.”

**00:08:22 – 00:08:49**

DR. BAMBANG EKA – “The main objective of YPI coming to this community is to raise awareness of the accelerating rate of HIV infection. After all, YPI won’t be here forever. So, we bring together community leaders, village and municipal administrations, police, in a special ring (“jejari”) to respond to the narcotics problem and HIV”.

**00:08:49 – 00:09:10**

HAJI SISWANTO – “Me here, I am involved as hamlet Administrator. There is actually an instruction from the Governor to curb the spread of narcotics. Indeed there is a close connection with the problem of AIDS.”

**00:09:10 – 00:09:16**

A YPI MEMBER – “ If I am carrying a needle because it was given to me here (fades)..”

**00:09:19 – 00:09:50**

DR. – “Naturally there are obstacles. The police force, administration and other institutions cannot put on paper they support this programme. They must wait until high-level policy changes. Rather than waiting for this, HIV is spreading faster, you see, they always want to begin at the large cities. It is better if, before that, we implement this on a smaller scale, but one that is more effective for them.”

**00:09:51 – 00:10:18**

DR. – “In Indonesia, the harm reduction programme is not yet legalised. We are trying hard to set up a steering committee to get a signed agreement (“MOU”) with the authorities that someone carrying a syringe is not tried, not breaking the law. But if the person is using narcotics, of course that is a crime here.”

**00:10:20 – 00:10:26**

DR – “It is better than doing nothing while waiting for a policy to be handed from above.”

**00:10:27 – 00:10:49**

ARI - "This hope given by the harm reduction programme is very important. Why so? Perhaps it is because of the follow-up. After all, it is difficult to stop drug distribution and its effects. If they (n.b. implies people who use drugs) still know very little about HIV, then how can this be?"

**HAITI** – In the late 1990's, a local medical clinic co-founded on Haiti's impoverished Central Plateau by Dr Paul Farmer, a Harvard medical school graduate and anthropologist, and other Haitian and US partners, began offering free anti-retroviral therapy to poor farmers as part of the clinic's overall medical assistance to the region. Then, the drugs were bought with money from private donors. Since, people living in a wide circle around Cange settlement, where the clinic is located, have seen many people recover or maintain their health on ARVs. The clinic helps its patients stay healthy at home as long as possible, with a network of local outreach workers who distribute the drugs daily to each person as required. Distancing AIDS from death thus has broken through stigma and discrimination felt elsewhere in Haiti, where access to free ARVs is low or non-existent.

The clinic's main success, already recognized worldwide, is to have challenged and proven wrong a mainstream, expert belief that providing ARVs to poor, illiterate people, in a poor setting, simply cannot be done. Though about 600 people now receive anti-retroviral drugs from the Cange clinic, about 50,000 Haitians living with HIV need the same drugs and the vast majority cannot get, or afford, them.

00:11:23 – Port au Prince traffic shot high, wide, pans right; bus with people on top; people walking in the crowded street (LAST SHOT: **copyright Twin Cities Public Television, St. Paul, Minn. USA**)

00:11:33 – Mme. Heureuse Charles walks over fields, sequence.

00:11:44 – Heureuse greets St. Ker François

00:11:49 – Heureuse speaks CU

00:11:54 – Heureuse gives St. Ker his pills

00:12:09 – Heureuse speaks, mid shot

00:12:13 – Heureuse giving pills to others, sequence

00:12:27 – Heureuse speaks

00:12:35 – St. Ker without his hat, child in corner of shot

00:12:41 – Heureuse speaks

00:12:46 – Dr. Fernet R. Léandre, Director, HIV/TB project at Clinique « Bon Sauveur ».

00:13:35 – Woman hops on horse and walks on poor road past two trucks. People travel over bad roads, long distances – sometimes 40 miles – to visit the clinic. 00:13:44 – Clinic Sign "Zanmi Lasante" (name of the NGO, "Partners in Health", that operates the clinic)

00:13:47 – Clinic entrance, people coming and going

00:13:51 – people lined up for weigh-in, with hospital staff member

00:13:57 – Dr. Paul FARMER, co-founder and current Medical Director, Clinique Bon Sauveur.

00:14:01 – Dr. Farmer with patient, and Dr. Pierre PAUL (standing)

00:14:07 – Dr. Farmer speaks, CU

00:14:52 – Assembly of outreach workers, wide

00:14:55 – Dr. Farmer takes seat in front of assembly

00:14:59 – Outreach worker

00:15:02 – Farmer response

00:15:04 – Girl looking

00:15:08 – Assembly, wide  
00:15:11 – Mme. Adeline Merçon, Educator at the Clinic  
00:15:23 – Adeline, with patient and Dr. Farmer in office  
00:15:27 – Adeline speaks  
00:15:37 – Clinic sign outside, pans diagonally to market below.  
00:15:49 – various people in the market  
00:15:55 – Mr. Saurel Beaujour, activist, People Living with HIV in Haiti, at table, slow reverse zoom  
00:16:03 – Saurel Beaujour speaks (looks up a lot)  
00:16:27 - ends

**00:11:45 – 00:11:58** – Mme. Heureuse CHARLES, Outreach Worker for Clinic Bon Sauveur – (Creole): Even though the work's a little difficult, I like it because I like to see people live in good health.

**00:12:07 – 00:12:45** –Heureuse CHARLES – (Creole): To go by each morning, to bring the medicine, go by each evening to bring the medicine, even three times a day for St. Ker François. And every morning I come by to be sure he takes his medicine, because his was a very serious case.

**00:12:48 – 00:13:33** – Dr. Fernet R. LEANDRE (Léandre), Director HIV/TB project at Clinic Bon Sauveur – FRENCH **original** :  
« En ce qu'il y a intérêt à la stigmatisation autour du VIH, il faut faire une rétrospective. Lorsqu'il n'y avait pas de médicaments, surtout quelle a été la perception des gens face à ce fléau, au niveau du Plateau Central. L'exemple bien simple qu'on aime souvent citer c'est par exemple au niveau de la prévention de la transmission mère enfant. Lorsqu'on offrait les femmes enceintes de faire des testes, donc comparativement, aujourd'hui on a cent pour cent des femmes qui acceptent de faire des testes parcequ'elles savent qu'elles vont bénéficier, qu'elles ont la possibilité d'avoir accès aux médicaments, aux anti-retroviraux. »

ENGLISH "As far as stigmatisation around HIV is concerned, one has to look back. When there were no drugs, especially as far as the people were concerned who were facing this on the Central Plateau. The simple example we often like to give, comparatively speaking, concerns prevention in the transmission from mother to child. Today when we offer pregnant women the opportunity to be tested, one hundred percent of the women accept the test, because they know they will benefit from it and will have the chance to get medicine, to get anti-retrovirals."

**00:14:06 – 00:14:51** – Dr. Paul FARMER, Medical Director, Clinic Bon Sauveur.

FRENCH **original**

« On avait la foi, quoi, ou l'assurance, qu'on était sur la bonne piste. Il fallait faire quelque chose de très sérieux. Il fallait monter le standard de traitement ici, en Haïti rural, et puis, on n'a pas trouvé de l'aide. Donc, on nous a dit qu'il n'y avait pas de coût-efficacité, ou ce n'était pas la technologie appropriée, que ce n'est pas approprié pour un milieu si pauvre, et que les paysans ne pouvaient pas suivre un tel régime, donc tout un tas d'excuses pour ne pas faire ce qu'on avait décidé de faire. »

ENGLISH (direct translation) "We had faith, or the assurance, that we were on the right track. We had to do something serious. We had to improve the standard of treatment here, in rural Haiti, and then, we didn't find any help. We were told there was no cost-efficiency, or it wasn't the appropriate technology, that it wasn't appropriate for such a poor area, and that the farmers were unable to follow such a regime, so it was all a bunch of excuses not to do what we had

already decided to do.”

**00:15:12 – 00:15:36** – Adeline Merçon (in Creole), Educator at Centre Zanmi Lasante.

FRENCH: “ On commença à me donner les médicaments. Je ne mangeais pas. J’ai commencé à manger et à boire. J’étais squelettique, j’ai commencé à grossir. Je n’ai plus aucun problème. Le 29 novembre (2003) j’ai 3 ans sous médicaments. Les voisins ne savent rien de tout ça. Tu vas à la clinique, les gens ne savent pas pourquoi. Mais chez moi on ne m’a pas maltraité. Au contraire ils m’ont soutenue. Sans leur soutien je serais morte. Le chagrin m’aurait tué.

ENGLISH: “They started to give me medicine. I wasn’t eating. I started to eat and to drink. I was skin and bones, I started to gain weight. I have no problems now. On the 29<sup>th</sup> of November it will be three years that I have been taking medication. The neighbours know nothing about this. You go to the clinic, they don’t know why. But at home, I wasn’t mistreated. On the contrary, they supported me. Without their support I would be dead. The sorrow would have killed me.”

**00:15:55 – 00:16:03** – Mr. Saurel BEAUJOUR, Activist, Association de Solidarité Nationale (ASON).

FRENCH original: “C’est le bi-centenaire de Haïti, je crois que nous avons beaucoup de misère dans ce pays, et nous avons beaucoup d’amis internationaux, et nous, association des personnes vivantes avec le VIH, fait appel à tous ces gens-là, et nous avons insisté avec notre gouvernement, de permettre que les gens vivant avec le VIH ont accès aux médicaments ARV. »

ENGLISH: “It’s the bi-centennial in Haiti, I think that we have a lot of poverty in this country and we have a lot of international friends as well, and we, the association of people living with HIV, call on all those people, and we have insisted with our own government to allow people living with HIV to have access to antiretroviral treatment.”

DATA for text voice-overs:
----------------------------

Haiti’s AIDS problem is exacerbated by its extreme poverty. Only one third of Haitians have paid work. The country’s 6 % HIV prevalence is the highest outside of sub-Saharan Africa.

Haiti will benefit from as much as 67 Million USD over 5 years from the Global Fund to fight AIDS, TB and malaria.

“Zanmi Lasante” is the Creole name of Partners In Health, the NGO that concentrates most of its work at Clinique Bon Sauveur on Haiti’s exceptionally poor Central Plateau.

Mr. **Saurel Beaujour** is member of the Association de Solidarité Nationale, ASON; about 200 people are members of ASON.

**ISRAEL** – AIDS activist Inbal Gur-Arieh of the Jerusalem AIDS Project, acquired HIV from a steady boyfriend when she was 19 years old. Now 30, she regularly visits schools, army bases, teachers groups, university students and other gatherings, to talk about the reality of living with HIV and why prevention is so crucial and so easy.

00:16:57 – “Oot High School” building corner, with Israeli flag in good breeze  
00:17:00 – picnic tables with teenagers  
00:17:04 – younger students enter building, 2 shot sequence.  
00:17:11 – shot of red ribbon and logo on T-shirt  
00:17:14 – girl with red ribbon, white t-shirt  
00:17:18 – girl in pink mouths question  
00:17:21 – Inbal seen first time, ¾ profile, mid shot  
00:17:28 – audience back to camera, facing Inbal and teacher, wide  
00:17:31 – Girl in Green with ribbon  
00:17:34 – Boys and girls in row with ribbons  
00:17:38 – Inbal speaks (Hebrew)  
00:17:52 – audience cut-away  
00:17:56 – Inbal speaks, continued  
00:18:11 – Inbal receives flowers, kids clap  
00:18:23 – Inbal stand-up in park, (English)  
00:18:34 – young pair walks away from camera on Jerusalem street  
00:18:38 – Inbal stand-up continued  
00:18:45 – Another young pair walks away down another street.  
00:18:51 – Inbal stand-up continued  
00:19:02 – Couple passes by Inbal on the street  
00:19:05 – Inbal stand-up continued  
00:19:16 – Couple with Inbal during streeter  
00:19:21 – Inbal stand-up continued  
00:19:26 – Girl in black shirt, at streeter, shakes Inbal’s hand  
00:19:33 – Inbal stand-up continued  
00:19:39 – Inbal at press conference  
00:19:43 – Photographer at press conference  
00:19:49 – zoom on Inbal; cut-aways at press conference, various reporters  
00:20:02 – Inbal, mid-shot in profile, counting pills at press conference  
00:20:08 – Pills close-up  
00:20:12 – Inbal stand-up, continues  
00:20:23 – ends

### **Inbal Gur – Arieh**

#### **00:17:19 – 00:17:36**

“They ask me how it is to live about AIDS, if I am afraid to die, if I want to have children. They ask me about how they can get AIDS. They’re asking a lot of the condom.”

#### **00:17:39 – 00:18:10 (Hebrew)**

“We are here with you today because most of the people living with HIV in the world are about your age. This is the age when they have sex and change partners. The most common things they think are, it won’t happen to me, I’m so young, I’m so strong, how is it possible that I can catch such an illness. This is an illness where people are supposed to be lying in the hospital. It’s not something that people who look healthy get.”

#### **00:18:24 – 00:19:40**

“When I was released from the hospital I didn’t know that other people know that I had AIDS. So I was living in my grandmother’s house, and I was very depressed. One day, we met, we saw a boyfriend, one of my boyfriends. He was my soul mate. When I walk up to him he just run away from me, to the other side of the road, and I was very in shocked. I realised that people know I’m HIV positive. And I cried for a long time, many hours. After a few hours, I decided I would write him a letter, and I write him a letter with a lot of tears in the letters.



And in the action of writing the letter and put it in his box...I decided to maybe to fight the disease. This is the moment I decided to fight the disease. I didn't realise then, but I realise now, this is the moment I decided to fight the disease."

**00:19:41 – 00:19:50** (Hebrew, partial sentence, incidental only to the press conference – kept to be able to offer some natural sound)

**00:20:50 – 00:20:19**

"It's not only for people that they are black or white, if you're homosexual, it's can happen to everybody, it's not about religions. I hope that they realise that HIV is everywhere. I don't look so far, I look to the day. This day and only this day. Tomorrow will be another day. If I will be living another day, it will be good."

**EGYPT** – To open up public discussion and awareness of HIV issues in Arabic-speaking countries, and to correct popular misconceptions about HIV, a campaign to Break the Silence on HIV/Aids is getting a boost from concerned television and movie stars, and other personalities. At the AIDS Hotline in Cairo, the media attention given to the campaign has led to a tremendous jump in calls. Egyptian star Mahmoud Kabil is one of the campaign participants.

00:20:43 – Sunlight traverses one pyramid  
00:20:52 – Camel riders trot over a dune  
00:20:59 – Young couple in park  
00:21:03 – People on park benches (deep shot)  
00:21:06 – Pretzel seller  
00:21:10 – View over Nile from Mahmoud Kabil's balcony  
00:21:13 – Mahmoud KABIL, Egyptian star, on balcony, CU  
00:21:19 – Mahmoud Kabil, interior, tilt up  
00:21:28 – Mahmoud Kabil speaks  
00:21:54 – Young man and woman discussing at curb, with heavy traffic behind  
00:21:57 – Young woman gazing into eyes of young man  
00:22:01 – Two young men walking and talking together  
00:22:05 – Young family trying to cross road with 2 small kids  
00:22:09 – Backgammon game at outdoor café, 2 middle-aged men  
00:22:13 – Young man, older man, two young women at bench  
00:22:17 – Two young women walk toward camera  
00:22:21 – Mahmoud Kabil speaks  
00:22:32 – Taxi driver gestures at traffic, shot from inside the car  
00:22:36... taxi driver's hand, showing wedding ring, adjusts radio  
00:22:41 – Mahmoud Kabil speaks  
00:23:05 – Phone rings at hotline office, male counsellor says Hello,  
00:23:13 – Man at phone booth speaks into receiver (back to camera)  
00:23:19 – Dr. Mervat El GUENEIDY, HIV/Aids Hotline, speaks, seated position  
00:23:24 – Woman's fingers dial red phone, Hotline pocket card seen by the phone  
00:23:27 – Female counsellor on white telephone, mid-shot  
00:23:31 – Young woman with red phone replies, CU  
00:23:34 – Counsellor replies  
00:23:37 – Dr Gueneidy speaks  
00:24:17 – Classroom with doctors/counsellors training for hotline, pans right  
00:24:35 – 3 male counsellors  
00:24:39 – Dr Gueneidy speaking in classroom  
00:24:42 – Counsellor writes on display easel  
00:24:45 – Counsellors (5, male & female, western & traditional dress)  
00:24:48 – Dr Gueneidy speaks in class, continued  
00:24:58 – Dr Gueneidy speaks, in original position (sitting)  
00:25:14 – Family watches television at home  
00:25:17 – Television is tuned to a show  
00:25:19 – Boy in family watches the show, CU  
00:25:23 – Man and woman internet users, 2 shots  
00:25:30 – Dr Gueneidy speaks  
00:25:34 – Ends.

**00:21:20 – 00:21:54**

MAHMOUD KABIL – "We gathered with my friend Hussein Fahmy and we talked with each other, that it was time to do something very sensitive for the Middle East to confront the taboos surrounding AIDS, and at the same time we are protecting future generations.

**00:21:55 – 00:22:42**

MAHMOUD KABIL – “People should learn that HIV does not come through sexual relationship only but it could come through blood transfusion. It comes through to the baby from the mother, it could come through a normal sexual relationship by a partner having HIV from other partners. What I want to say is that AIDS can enter any home, knock on any door without warning.”

**00:22:43 – 00:23:05**

MAHMOUD KABIL – “We agreed as artists that we are going to take advantage of programmes on television and other broadcasters to talk about the issues, how to break the silence. I really salute my friend Hussein Fahmy for all his efforts.”

**00:23:14 – 00:24:16**

Dr. MERVAT EL GUENEIDY – “The Hotline was formed in 1996, it started, because, to let people know about AIDS and STDs. The hotline is a way for people to talk freely, and it is a hundred percent sure that what they say will remain confidential. It’s very hard for young people and others in closed communities to talk about their sexual relations and subjects related to AIDS.”

**00:24:17 – 00:24:57**

Dr. MERVAT EL GUENEIDY – “No doctor is the same as another. Each one of us here has a different background and experiences. Each of us has a different character and feelings and each one has different moods. But to be a good doctor one has to be flexible, know how to speak with people who have problems with AIDS.”

**00:24:58 – 00:25:34**

Dr. MERVAT EL GUENEIDY – “We are a community that likes to watch television, and so it has a large effect on the Egyptian people; whether the effect is positive or negative we have to make use of that facility. Part of the success of the campaign was because we used TV to start talking about the hotline, about AIDS. As soon as the hotline phone number appeared on the screen, the phone calls increased. Maybe we took about 100, 200 calls in one hour, and the telephone was always busy.”

**LOGOS**

**00:25:37      Logo-English**  
**00:25:49      Logo- French**  
**00:26:01      Logo-Spanish**  
**00:26:14      Logo- Russian**

**GRAPHICS-ENGLISH**

**00:26:27      Adults and children estimated to be living with HIV/AIDS as of end 2003**  
**00:26:38      Estimated number of adults and children newly infected with HIV during 2003**

**GRAPHICS-FRENCH**

**00:26:49      Adultes et enfants vivant avec le VIH/SIDA estimations à fin 2003**

**00:27:01**    **Nombre estimatif d'adultes et d'enfants infectés par le VIH en 2003**

**GRAPHICS-SPANISH**

**00:27:12**    **Número estimado de adultos y niños viviendo con el VIH/SIDA a fines de 2003**

**00:27:23**    **Número estimado de casos nuevos de infección por el VIH en adultos y niños en 2003**

**GRAPHICS-RUSSIAN**

**00:27:34**    **Расчетное число взрослых и детей с ВИЧ/СПИДом, по состоянию на конец 2003 г.**

**00:27:45**    **Расчетное число новых случаев ВИЧ-инфекции среди взрослых и детей в 2003 г.**