

# 2020年度一般入学試験問題A

## 外国語（英語）

### 【注意事項】

1. この問題冊子には答案用紙が挟み込まれています。試験開始の合図があるまで問題冊子を開いてはいけません。
2. 試験開始後、問題冊子と答案用紙の受験番号欄に受験番号を記入しなさい。
3. 問題冊子には計5問の問題が英1～英7ページに記載されています。落丁、乱丁および印刷不鮮明な箇所があれば、手をあげて監督者に知らせなさい。
4. 答案には、必ず鉛筆（黒、「HB」「B」程度）またはシャープペンシル（黒、「HB」「B」程度）を使用しなさい。
5. 解答は答案用紙の指定された場所に記入しなさい。ただし、解答に関係のないことが書かれた答案は無効にすることがあります。
6. 問題冊子の余白は下書きに利用しても構いません。
7. 問題冊子および答案用紙はどのページも切り離してはいけません。
8. 問題冊子および答案用紙を持ち帰ってはいけません。

受験番号	
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〔問 1〕 次の英文を読んで、あとの設問に答えなさい。

Doctors often don't get the distinction between curing and healing, but <sup>(1)</sup>patients instinctively do. For most doctors, if the disease has been eradicated—well, <sup>(2)</sup>that's success. For patients, that's only part of the process—a significant one, obviously, but not the only one. Plenty of patients walk out of our hospitals, clinics, and offices with their diseases under control, and yet they do not feel healed.

Paying attention to emotions within the doctor-patient interaction doesn't guarantee healing, no doubt. But <sup>(3)</sup>ignoring them surely makes it less likely. <sup>(4)</sup>“Healing is a matter of time,” wrote Hippocrates, “but it is sometimes also a matter of opportunity.” Taking this opportunity can be prescriptive for both doctors and patients.

出典：Danielle Ofri, *What Doctors Feel: How Emotions Affect the Practice of Medicine*.

Boston: Beacon Press, 2013. Page 211.

- (1) 下線部(1)にある do の内容を明らかにして、下線部(1)全体を和訳しなさい。
- (2) 下線部(2)は具体的に何を表しているか、日本語で説明しなさい。
- (3) 下線部(3)にある them と it の内容を明らかにして、下線部(3)全体を和訳しなさい。
- (4) 下線部(4)を和訳しなさい。

〔問 2〕 次の英文を読んで、あとの設問に答えなさい。

When I was twelve years old, my grandfather began to act strangely. I had known Abbas Jebelli as a self-effacing man, whose strong sense of family frequently carried him from volatile Iran to our quiet street in Bristol, England. He used to arrive with suitcases filled with pistachio nuts and Persian sweets, smiling until the corners of his eyes wrinkled as he handed us our gifts.

It started with <sup>(7)</sup>inexplicable walks. When he was visiting, he'd leave the dinner table and then we would find him, half an hour later, aimlessly <sup>(1)</sup>wandering the neighborhood. "Please stop doing that," my father would say. "Bebakhshid," ("forgive me") was all Abbas ever replied in his native Farsi. His bright smiles were gradually replaced by a fearful, <sup>(7)</sup>withdrawn expression, as if he'd lost something irreplaceable. Before long, he didn't recognize his own family.

Something indefinably <sup>(2)</sup>peculiar had happened to him.

As far as I knew, though, Abbas was just getting old. For decades, human lifespan had been rising. In the 1940s you'd be lucky to make it to age fifty, my father had explained, but we're now living in the 1990s and Granddad was a leathery seventy-four-year-old whose mind, like his sight and nearly everything else, was slowly <sup>(2)</sup>wearing out.

But that explanation never felt right. My young mind had no notion yet of the endless intricacies of the human brain, of the 85 billion cells that knit fragments of the past together into a ghostly tapestry that we call memory. Perhaps it was the sheer indiscriminateness of this bizarre affliction. Why, if this was "normal," was my grandmother not going through the same thing? Why was the Queen still able to make such <sup>(2)</sup>eloquent speeches on television when Abbas couldn't even draw a clock face? Why, for that matter, wasn't *everyone* who reached old age experiencing this?

Seventeen years later, I am standing in a small, <sup>(2)</sup>dimly lit room in the Institute of Neurology at University College London. Glass beakers, pipettes, shelves filled with chemicals and reagents, and a large grey centrifuge surround me. The air is filled with the <sup>(2)</sup>stinging scent of ethanol, and there's a quiet <sup>(2)</sup>hum as curtains of sterile air separate me from the nearby workstations. I stare into a small light microscope, focusing the image until the contours of numerous circular entities come into view. <sup>(2)</sup>These are brain cells, taken from a rat, which I'm hoping will make some sense of what happened to my grandfather and millions of others just like him—all stricken by one of the most terrifying illnesses of modern times: Alzheimer's disease.

出典 : Joseph Jebelli, *In Pursuit of Memory: The Fight Against Alzheimer's*.  
London: John Murray, 2016. Pages xi-xii.

(1) 下線部(ア)～(ケ)の表している内容に最も近いものをそれぞれ①～④から1つ選び、数字で答えなさい。

(ア) inexplicable

- ① anticipating    ② distorted    ③ preventive    ④ unexplainable

(イ) wandering

- ① puzzling    ② roaming    ③ surpassing    ④ upsetting

(ウ) withdrawn

- ① dominant    ② immediate    ③ painful    ④ unsociable

(エ) peculiar

- ① conventional    ② exclusive    ③ strange    ④ worthy

(オ) wearing out

- ① becoming no longer usable    ② causing reaction    ③ restoring strength    ④ yielding fruit

(カ) eloquent

- ① ambivalent    ② fluent    ③ principal    ④ voluntary

(キ) dimly

- ① absolutely    ② hastily    ③ poorly    ④ tremendously

(ク) stinging

- ① foreign    ② indispensable    ③ obscure    ④ sharp

(ケ) hum

- ① drift    ② image    ③ sound    ④ vapor

(2) 下線部(コ)を和訳しなさい。

〔問3〕 次の英文を読んで、あとの設問に答えなさい。

Dr. Mark Sklansky, a self-described germaphobe, can't stop thinking about how quickly microbes can spread. "If I am at a computer terminal or using a phone or opening a door, I know my hands are now contaminated, and I need to be careful and I need to wash my hands," says Sklansky, a professor of pediatrics at the David Geffen School of Medicine at UCLA.

Not all health workers are so careful, despite strict handwashing policies in virtually all medical facilities. A 2010 study published in the journal *Infection Control & Hospital Epidemiology* shows that only about 40 percent of doctors and other health care providers ( ア ) hand hygiene rules in hospitals.

Hospital-acquired infections are a serious and potentially life-threatening problem. On any given day, 1 in 25 hospital patients ( イ ) at least one infection acquired while they are in the hospital, according to the Centers for Disease Control and Prevention. And studies show the hands of health care workers are often ( ウ ).

So Sklansky decided to test a new method for limiting the spread of germs and reducing the transmission of disease in the hospital: a handshake-free zone. "We are trying to ( エ ) to minimize hospital-acquired infection except for the most obvious and easiest thing to do, in my opinion, which is to stop shaking hands," he says.

Sklansky doesn't believe this is ( オ ) handwashing, but he does think reducing handshakes could help ( カ ) on the spread of infection. He first proposed the idea in a 2014 editorial published in the *Journal of the American Medical Association*. His proposal launched a lively debate about the possible risks of the ( キ ) greeting.

Then in 2015, Sklansky decided to ( ク ) the idea with a six-month experiment. He picked a place where patients are especially vulnerable—the neonatal intensive care unit at two of UCLA's hospitals, one in Westwood and one in Santa Monica. Infections among infants can cause them pain, prolong their stay in the NICU, require more medications and even put their lives ( ケ ).

Staff and families in the units were told the reasons for dropping the handshake. And signs were posted designating the new handshake-free zones. The signs feature two hands ( コ ) each other inside a circle with a blue line through it and the words: "To help reduce the spread of germs, our NICU is now a handshake-free zone. Please find other ways to greet each other."

<sup>(1)</sup>Other greetings include options like a fist bump, a bow or a wave. Handshakes weren't banned outright, but it was recommended that a smile or another non-contact form of salutation like a Namaste\* gesture might be better. "We aren't like a military operation," says Sklansky. "We are just trying to limit the use of handshakes."

In a survey of staff and family members about the experience, Sklansky and his colleagues found that establishing handshake-free zones does reduce the frequency of handshakes. And most health care workers support the idea.

The findings were published in the *American Journal of Infection Control*. The survey didn't determine whether avoiding handshakes actually reduced the rate of infections, but Sklansky hopes to answer <sup>(2)</sup>that question in a future study.

出典：Anna Gorman, “Handshake-Free Zones Target Spread Of Germs In The Hospital.”

NPR, May 29, 2017.

(注) *Namaste: a traditional Indian greeting or gesture of respect, made by bringing the palms together before the face or chest and bowing.*

(1) 英文の意味が通るように、空所(ア)～(コ)に入る最も適当なものを①～⑩から1つ選び、数字で答えなさい。同じものを2度使うことはない。

① a substitute for

⑥ gripping

② at risk

⑦ suffers from

③ comply with

⑧ time-honored

④ cut down

⑨ to blame

⑤ do everything

⑩ try out

(2) 下線部(1)を和訳しなさい。

(3) 下線部(2)は具体的に何を指すのか、日本語で説明しなさい。

〔問4〕 次の英文の意味が通るように、空所( ア )～( コ )に入る最も適当なものを①～⑩から1つ選び、数字で答えなさい。同じものを2度使うことはない。

One of the greatest challenges in global health is ( ア ) countries can keep a proper supply of life-saving medicines in rural areas. In some, like Rwanda and Tanzania, governments keep low stock due to the high cost of storage—a reality known ( イ ) “stock outs”—meaning it can sometimes take upwards of four hours ( ウ ) life-saving medical supplies to arrive.

Enter Zipline, a California-based logistics company that has been operating a blood delivery service in Rwanda ( エ ) October 2016. It now transports 20% of the nation’s blood supply outside Kigali and announced Thursday plans to expand into Tanzania, where 68% of the country's 55 million-person population resides in rural areas.

When fully ( オ ) place, Zipline will have four distribution centers across Tanzania, offering a range of medical supplies becoming the largest drone delivery system in the world. “There’s a paradigm shift in the thinking that all artificial intelligence will start in rich countries and trickle ( カ ) to poor countries,” Zipline CEO Keller Rinaudo says. “African nations are showing the world how it’s done.”

Expanding beyond blood, Zipline plans to provide other high-priority medical products ( キ ) antivenom and rabies vaccines in Tanzania. Partnering ( ク ) the government of Tanzania, Zipline will use over 100 drones capable ( ケ ) 2,000 daily flights, delivering medical supplies ( コ ) more than 1,000 public health facilities in the country.

出典：Leif Walcutt, “Zipline Is Launching The World’s Largest Drone Delivery Network In Tanzania.” *Forbes*, August 24, 2017.

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|--------|--------|---------|-------|--------|
| ① as   | ② down | ③ for   | ④ how | ⑤ in   |
| ⑥ like | ⑦ of   | ⑧ since | ⑨ to  | ⑩ with |

〔問 5〕 次の和文を英訳しなさい。

ファッションについて考えようとするときに、とっかかりは二つあるとおもう。一つは身体  
の演出という側面であり、もう一つは流行という社会現象としての側面だ。頭のとっぺんか  
ら爪先まで、じぶんの身体をざっと眺めればすぐに気がつくことだが、わたしたちの身体で  
なんの加工もされずにそのままに放置されている部分はほとんどない。

出典：鷺田清一、『ひとはなぜ服を着るのか』筑摩書房、2012年。278頁。

*Windom*