**Foundation Set to Tackle AIDS from allafrica.com**

Lagos, NIGERIA — The Gauranga Foundation, a non-governmental organisation (NGO), is making frantic effort towards tackling AIDS in the country as it prepares to unveil its first shipment of bio-electronic devices from British Columbia, Canada on May 9.

According to a statement signed by founder of the foundation, Bolaji Rosiji, the bio-electronic devices designed to provide assistance to AIDS victims while complementing existing therapies were developed by RLT Technologies Inc.

RLT Technologies, which has been developing the devices for over 11 years, is said to be working with Health Canada and ISO standards.

Rosiji, a former Secretary General of the Nigeria Network of NGOs (NNNGO) saddled with the responsibility of mobilising NGOs around the millennium development goals, said in the statement that "AIDS was one of our priorities. "Particularly as it concerned infants. "Up till now our work has been in advocacy and education. This culminated in the AIDS march we organised a couple of years ago to the Lagos State Government in Alausa. It is now time to do more for those already suffering silently from the dreaded disease."

Rosiji said the foundation would work in collaboration with specialists, AIDS researchers and RLT to begin local test in May so as to verify the efficacy of the technology in a tropical environment, adding that the invention is a melding of two forms of energy, phosphorescence and sonance, to create a signal that controls micro-organisms.

"Having studied numerous reports from the West on the successful arrest of opportunistic infections, I was inspired to closely examine bio-electronic technology in 2001. My first device was donated by Mrs. Amla Ruia in 2002, from when I ran free therapeutic sessions in collaboration with volunteer medical practitioners in Lagos State. This early model was highly technical, delicate and required expert handling."

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**Benin & Nigeria: Learning English to enter sex industry from plusnews.org**

Cotonou, BENIN - Many young people in French-speaking Benin are learning English to adapt to globalization, but some young women have another goal: to enter the thriving sex industry in neighbouring Nigeria, where the market is considered more lucrative.

Jenifer, 20, has been taking a course at a language school in Cotonou, the business capital of Benin. "Well, yes, I'm not learning English just for the sake of learning the language, I have other goals to achieve," she said.

Although it is hard to assess the extent of this clandestine trend, Jean-Paul, who is in the same business English class as Jenifer, is aware of his classmate's objective. "Basically, it's English for sex," he said.

Kadi, 19, who has been learning English for the last four months at a large training centre in Cotonou, admitted to IRIN/PlusNews that she would soon be ready to overcome the last barrier to entering the Nigerian sex trade: language.

"It is the sad truth and it is unfortunate. Sometimes our young girls find themselves in this position without wanting to," said Solange Legonou, President of the Benin network of NGOs for female leadership (ROLF).

"Some of them, for example, go to learn English ... in Nigeria, for further study - not all of them go with the intention of becoming [sex workers], but their circumstances push them into it," said Legonou, who emphasized the need to "concentrate on awareness-raising of young girls", particularly to the risk of HIV.

**Globalization**

Many girls from Benin and other countries in West Africa succumb to the temptation of sex work in Nigeria. "I was told that it was just like the West there," said Aïcha, who studies law by day and is a sex worker by night. "Fellow Beninians in Nigeria, particularly in Abuja [the capital], do very well out of their clients, who come with dollars and euros."

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"Benin & Nigeria: Learning English to enter sex industry" continued, from page 1

Amy, a young sex worker near one of the big hotels in the city, came from Ivory Coast in 2007. She said she made enough money to rent an apartment for US$400 a month in a suburb of Abuja. "The world has changed, we need to get moving and we need to meet others. What is true for business is also true for other areas. Why should we think that sex is not affected by this? We need to find ways to adapt ourselves," she said.

"Most of these people are just adapting to the new world and we cannot criticize them for that," commented Amidou Boubacar, a hotel employee in Lagos, the large port city in the south of Nigeria.

**HIV risk**
Nigeria has 2.6 million people living with HIV - the third highest HIV caseload in the world after India and South Africa – and a prevalence rate of 3.1 percent, compared to 2 percent in Benin, but this does not discourage young people.

"I am well aware that the possibility of catching AIDS is high [but] you don't need to go to Nigeria to be at risk," said Kadi. "I always take precautions."

Marcelline, another student in Cotonou, told IRIN/PlusNews she planned to go to Abuja, "the city of rich men", where some girls had clients who paid around $130 or more for a night.

Some young Beninian students hone their skills in Cotonou while waiting for the big move.

"When I finished my English course I started practicing here because there is a large English-speaking visiting client base in [our] country," admitted Christine, 28. "But my real goal is to one day go to the United Kingdom, America ... or even just to Nigeria."


**Research confirms circumcision in fight against AIDS**
from ugpulse.com

Researchers at the South African Cochrane Centre have announced that male circumcision definitely reduces the risk of HIV infection, thereby giving more confirmation that it is better strategy to use in the fight against HIV/AIDS.

The centre had previously held that there was not enough evidence to recommend circumcision as an intervention.

Lead researcher Nandi Siegfried, also co-director of the centre, which is located at the SA Medical Research Council, says the research on the effectiveness of male circumcision for preventing HIV in heterosexual men is conclusive.

The new clinical trials included in the review took place in South Africa, Uganda and Kenya between 2002 and 2006, and included a total of 11 054 men.

The results show that circumcision in heterosexual men reduced their risk of acquiring HIV by an average 54% over a two year period, compared with uncircumcised men.

Siegfried says that as such no further trials are required to establish that HIV infection rates are reduced in heterosexual men for at least the first two years after circumcision.

She adds that policy makers could now consider using circumcision as an additional tool in HIV prevention programmes. She warned that policy makers also needed to think about the culture and environment in which circumcision was carried out.

The Cochrane Collaboration is a highly-respected international network of researchers that seeks to improve healthcare decision-making through systematic reviews of the effects of healthcare interventions such as circumcision.

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