

# 産業医科大学

平成26年度入学試験問題（一般入試）

## 英 語

### 注 意

1. 問題冊子は、指示があるまで開かないこと。
2. 問題冊子は7ページ、解答紙は2枚である。  
「始め」の合図があったら、それぞれページ数および枚数を確認すること。
3. 解答開始前に、試験監督者の指示に従って、すべての解答紙それぞれ2カ所に受験番号を記入すること。
4. 解答は、黒色鉛筆(シャープペンシルも可)を使用し、すべて所定の欄に記入すること。欄外および裏面には記入しないこと。
5. 試験終了後、監督者の指示に従って、解答紙の順番をそろえること。
6. 下書き等は、問題冊子の余白を利用すること。
7. 解答紙は持ち帰らないこと。

[ 1 ] 次の英文を読んで、文中の( ア )～( コ )に入れるのに最も適当な英語一語をそれぞれ書きなさい。

Not long ago, a large wooden case was brought to the door of my house by the railway delivery service. It was an unusually strong and heavy object, ( ア ) of some kind of dark-red wood. I lifted it with great difficulty on to a table in the garden, and examined it carefully. The writing on one side said that it ( イ ) been shipped from Haifa, a city in Israel,\*<sup>1</sup> on the ship *Waverly Star*, but it didn't give the name or ( ウ ) of the person who had sent it. I tried to remember if I knew someone ( エ ) in Haifa who might want to send me a magnificent present. I could think of no one. I walked slowly to the tool shed,\*<sup>2</sup> still thinking about the matter deeply, and returned with some tools. Then I began to ( オ ) the case gently.

To my surprise, it was full of books! Extraordinary books! One at a time, I lifted them ( カ ) of the case and arranged them in three tall piles on the table. There were 28 volumes altogether, and they were very beautiful indeed. ( キ ) one of them was identically and superbly bound in rich green leather, with the initials "O.H.C." and a Roman numeral\*<sup>3</sup> (I to XXVIII) written in gold on the side.

I ( ク ) up the nearest volume, number XVI, and opened it. The pages were filled with small writing in black ink. On the title page was ( ケ ) "1934". Nothing else. Volume number XXI had the same writing, but on the title page it said "1939". I opened Volume I, hoping to find the author's ( コ ) but, instead, I found an envelope inside the cover. The envelope was addressed to me. I took out the letter it contained and glanced quickly at the signature. *Oswald Hendryks Cornelius*, it said.

It was Uncle Oswald!

[Adapted from *Switch Bitch*, by Roald Dahl, Penguin Books, London, 1974, p. 7]

[注] \* 1 Israel : イスラエル

\* 2 tool shed : 物置小屋

\* 3 Roman numeral : ローマ数字

〔2〕 次の英文を読んで、設問に答えなさい。

Not long after moving to the University of Southampton,<sup>\*1</sup> Dr. Sedikides had lunch with a colleague in the psychology department and described some unusual symptoms he'd been feeling. A few times a week, he was suddenly hit with nostalgia<sup>\*2</sup> for his previous home at the University of North Carolina:<sup>\*3</sup> memories of old friends, university basketball games, his favorite foods, and the sweet smells of autumn in North Carolina.

His colleague, a clinical psychologist, immediately decided what was wrong with Dr. Sedikides. His problem must be depression. Why else would he live in the past?<sup>(1)</sup> Nostalgia had been considered a sickness ever since the 17th century, when a Swiss<sup>\*4</sup> doctor created the word to describe the mental and physical problems that soldiers had when they desired to return home: "nostos", meaning "home" in Greek,<sup>\*5</sup> and "algos", meaning "pain".

But Dr. Sedikides didn't want to return to any home, and he insisted to his colleague that he wasn't in ( 2 ). He insisted that he was mostly interested in the future, but that he couldn't help thinking about the past, and those thoughts were healthy. He said that nostalgia made him feel that his life had roots and that the different parts of his life were connected. It made him feel good about himself and his relationships and gave him strength to move forward.

That lunch in 1999 inspired Dr. Sedikides to pioneer a new field of research that includes dozens of researchers around the world. After more than a decade of study, they have found that nostalgia has more benefits than people previously believed. Nostalgia has been shown to give relief from loneliness, anxiety, and feeling bored. It makes people more generous and kinder to strangers.<sup>(3)</sup> Couples feel closer and look happier when they're sharing nostalgic memories. On cold days, or in cold rooms, people use nostalgia to actually feel warmer. Nostalgia does have some emotionally painful features, but its overall effect is to make life seem more meaningful. Nostalgia can make people feel inspired about the future and have less fear of death.

When psychologists began studying nostalgia, they found it to be common around the world, including in children as young as 7, who have fond memories of birthdays and vacations. The features of nostalgia in England are the same as in Africa and South America. The topics are universal: memories of friends and family members, holidays, weddings, songs, sunsets and nature. The stories tend to feature the self as the main character, surrounded by friends.

Most people report that they experience nostalgia at least once a week, and nearly half of them experience it three or four times a week. It is often caused by negative events and

feelings of loneliness, but people say that nostalgia makes them feel better. The stories they tell themselves aren't all happy, and even the joys are mixed with some sadness, but there are more positive elements than negative elements. Nostalgic stories often start badly, with some kind of problem, but then they end well, thanks to someone close to you. In the end you have a stronger feeling of belonging to a community, and you become more generous to others.

How much we use nostalgia seems to vary with age. Nostalgia levels tend to be high in (4) young adults, lower in middle age, then high again during old age. Nostalgia helps us cope with transitions\*<sup>6</sup> in life. Young adults are just moving away from home, going away to university, or starting their first job, so they comfort themselves with memories of family holidays, pets, and friends in school. For old people, nostalgia can assure them that their life was valuable and had meaning. Research shows that people who regularly engage in nostalgia are better than others at coping with concerns about death.

Dr. Sedikides, now 54 years old, still enjoys nostalgia about his life in North Carolina, but in the past ten years he has expanded his range of nostalgia. His years of research have inspired strategies for increasing nostalgia in his own life. One is to create more moments that will become good memories later. Another strategy is to use his stock of nostalgia when he needs some extra motivation\*<sup>7</sup> or to stimulate himself psychologically. Dr. Sedikides recommends that everyone should find ways to use nostalgia to improve their lives.

[Adapted from "What Is Nostalgia Good For?", by John Tierney, *The New York Times Online*, July 8, 2013]

- 〔注〕 \* 1 Southampton : 英国南部の市      \* 2 nostalgia : 懐旧(の情), ノスタルジー  
\* 3 North Carolina : 米国南東部の州      \* 4 Swiss : スイス人の  
\* 5 Greek : ギリシャ語      \* 6 transition : 移行, 移り変わり  
\* 7 motivation : やる気, 動機

(設 問)

1. 下線部(1)を日本語に訳しなさい。
2. 空所( 2 )に入る最も適当な英語 1 語を, 本文中から抜き出して書きなさい。
3. 下線部(3)のようになる理由を, 本文の内容に沿って日本語で書きなさい。
4. 下線部(4)のように筆者が考える理由を, 本文の内容に沿って 150 字程度の日本語で書きなさい。
5. 本文の内容に関する次の文(1)~(5)を読み, 正しいものには○, 間違っているものには×を, それぞれ記入しなさい。
  - (1) When the word “nostalgia” was created, it referred to a medical condition that was considered to be a problem.
  - (2) It has been found that even young children experience nostalgia.
  - (3) What people feel nostalgia for differs among countries.
  - (4) Nostalgia makes people feel positive only when they remember happy memories.
  - (5) Dr. Sedikides learned how to use nostalgia in a positive way.

[ 3 ] 次の英文を読んで、設問に答えなさい。

In many countries around the world, it is common for the government to ask its citizens if they will volunteer to be organ donors.\*<sup>1</sup> As you know, many people have very strong feelings about the issue of organ donation.\*<sup>2</sup> On the one hand, it's an opportunity to turn one person's loss into something that will save another person's life. On the other hand, many of us are disturbed by the thought of making plans for our organs that don't involve us. It is not surprising, therefore, that different people make different decisions, nor is it surprising that rates of organ donation vary greatly from country to country. It might surprise you to learn, however, how much variation there is among countries.

In a study <sup>(1)</sup> conducted a few years ago, two psychologists found that rates at which citizens agreed to donate their organs varied across different European countries, from as low as 4.25% to as high as 99.98%. What was even more impressive about these differences is that there were only two distinct groups. One group had very high organ donation rates, and the other had very low rates, with almost nothing in between.

What could explain such a large difference? <sup>(2)</sup> That is the question that I asked my class of students at Columbia University\*<sup>3</sup> not long after the study was published. Actually, I asked them to consider two countries that I didn't name but called A and B. In country A, about 12 percent of the citizens agree to be organ donors, while in country B 99.9 percent do. I asked my students what they thought was different about these two countries that could account for the choices made by their citizens. Being smart and creative students, they thought of many possibilities. Perhaps one country was highly religious while the other was not. Perhaps one had a better medical system and better success rates at organ transplants\*<sup>4</sup> than the other. Perhaps the rate of death by accident was higher in one than the other, resulting in more available organs. Perhaps one of the countries had a socialist culture, emphasizing the importance of community, while the other emphasized the rights of individuals.

All of those explanations were good and reasonable, but my students were surprised and confused when I told them the names of the two countries. Country A was, in fact, Germany, and country B was Austria.\*<sup>5</sup> What could be so different about Germany and Austria? But the students didn't give up trying to find the difference. Maybe there was some difference in the legal or educational systems that they didn't know about, or perhaps there had been some important event or media campaign in Austria that had resulted in support for organ donation. Did it have something to do with World War II? Or maybe Austrians and Germans are more different than they seem.

My students didn't know the reason for the difference, but they were sure it was

something big; such extreme differences wouldn't happen by accident. However, you can get differences like that for reasons you would never expect. Despite all their creativity, my students never guessed the real reason, which is actually very simple. In Austria, becoming an organ donor is automatic; people have to make the choice not to be one. In Germany, in contrast, people have to make the decision to be an organ donor. The difference in policies seems to be small and unimportant. It is just a difference between having to send a simple document in the mail and not having to, but that difference is enough to change the rate of donors from 12 percent to 99.9 percent. What was true for Austria and Germany was true for all of Europe. All the countries with high rates of organ donations had a system by which participation was automatic, whereas all the countries with low rates had a system by which citizens had to make a choice, in writing, to volunteer.

It is important to understand the influence of how options are presented to us, because<sup>(3)</sup>our beliefs about what people choose and why they choose it affect all of our explanations of social, economic and political outcomes. In newspapers, on television, in magazines and on the radio, we often hear and read theories about why people choose one thing and not the other. Even if we don't agree with the experts, it is still true that all of us, even ordinary people, have theories about why and how we make choices. Every argument that has important social consequences, whether it is about politics, economics, taxes, education, medicine, or anything else, is really an argument about why people make the choices they make. It is also an argument about how people can be encouraged, educated, legislated,\*<sup>6</sup> or forced into making other choices.

[Adapted from *Everything Is Obvious: How Common Sense Fails*, by Duncan J. Watts, Atlantic Books, London, 2011, pp. 30-32]

- (注) \* 1 donor : 提供者  
\* 2 donation : 提供  
\* 3 Columbia University : 米国ニューヨーク市にある私立大学  
\* 4 transplant : 移植  
\* 5 Austria : オーストリア  
\* 6 to legislate : ~することを法で定める



〔設 問〕

1. 下線部(1)が指す研究で分かったことを、本文の内容に沿って日本語で書きなさい。
2. 下線部(2)が指すことはなぜ生じたのか、本文の内容に沿って日本語で書きなさい。
3. 下線部(3)を日本語に訳しなさい。
4. 本文の内容に関する次の文(1)~(5)を読み、正しいものには○、間違っているものには×を、それぞれ記入しなさい。
  - (1) Some people are not comfortable when they consider giving their organs to other people.
  - (2) There is a wide variety of opinions about organ donation among peoples in the world, depending on their nation's ideas about the issue.
  - (3) The students correctly considered that the difference in statistics between Germany and Austria came from the historical relations between the two nations.
  - (4) There are sometimes simple reasons for extreme differences in behavior.
  - (5) People's choices are based on their individual opinions, not influenced by official policy.

〔 4 〕 (英作文)

もしあなたが教師なら、やる気のない学生に対してどのようにしてやる気を出させようとするか。100語程度の英語で書きなさい。