

FINAL EXAMINATION IPEPERIKSAAN AKHIR **SEMESTER 1 - SESSION 2017 / 2018** PROGRAM KERJASAMA

COU	RSE	COD	E
MOD	WIT	20110	

: ULAB 1042

KOD KURSUS

COURSE NAME NAMA KURSUS

: INTERMEDIATE ACADEMIC ENGLISH

TAHUN / PROGRAM

YEAR / PROGRAMME : 1 / ALL COURSES

DURATION

: 2 HOURS / 2 JAM

TEMPOH

DATE

TARIKH

: OCTOBER / NOVEMBER 2017

INSTRUCTION/ARAHAN

- 1. Answer ALL questions in the spaces provided in this question paper. Jawab SEMUA soalan di ruang yang disediakan di dalam kertas soalan.
- 2. Candidates are required to follow all instructions given by the invigilator. Calon dikehendaki mematuhi semua arahan daripada penyelia peperiksaan.

(You are required to write your name and your lecturer's name on your answer script) (Pelajar dikehendaki tuliskan nama dan nama pensyarah pada skrip jawapan)

STUDENT'S NAME NAMA PELAJAR I.C. NUMBER.	:	
NO. KAD PENGENALAN	:	
YEAR / PROGRAMME TAHUN / PROGRAM	:	
NAME OF COLLEGE NAMA KOLEJ	:	······································
NAME OF LECTURER NAMA PENSYARAH	:	

This examination paper consists of 17 pages including the cover Kertas soalan ini mengandungi 17 mukasurat termasuk kulit hadapan



PUSAT PROGRAM KERJASAMA

PETIKAN DARIPADA PERATURAN AKADEMIK ARAHAN AM - PENYELEWENGAN AKADEMIK

1. SALAH LAKU SEMASA PEPERIKSAAN

- 1.1 Pelajar tidak boleh melakukan mana-mana salah laku peperiksaan seperti berikut :-
 - 1.1.1 memberi dan/atau menerima dan/atau memiliki sebarang maklumat dalam bentuk elektronik, bercetak atau apa jua bentuk lain yang tidak dibenarkan semasa berlangsungnya peperiksaan sama ada di dalam atau di luar Dewan Peperiksaan melainkan dengan kebenaran Ketua Pengawas; atau
 - 1.1.2 menggunakan makluman yang diperolehi seperti di atas bagi tujuan menjawab soalan peperiksaan; atau
 - 1.1.3 menipu atau cuba untuk menipu atau berkelakuan mengikut cara yang boleh ditafsirkan sebagai menipu semasa berlangsungnya peperiksaan; atau
 - 1.1.4 lain-lain salah laku yang ditetapkan oleh Universiti (seperti membuat bising, mengganggu pelajar lain, mengganggu Pengawas menjalankan tugasnya).

2. HUKUMAN SALAH LAKU PEPERIKSAAN

- 2.1 Sekiranya pelajar didapati telah melakukan pelanggaran mana-mana peraturan peperiksaan ini, setelah diperakukan oleh Jawatankuasa Peperiksaan Fakulti dan disabitkan kesalahannya, Senat boleh mengambil tindakan dari mana-mana satu yang berikut :-
 - 2.1.1 memberi markah SIFAR (0) bagi keseluruhan keputusan peperiksaan kursus yang berkenaan (termasuk kerja kursus); atau
 - 2.1.2 memberi markah SIFAR (0) bagi semua kursus yang didaftarkan pada semester tersebut.
- 2.2 Jawatankuasa Akademik Fakulti boleh mencadangkan untuk diambil tindakan tatatertib mengikut peruntukan Akta Universiti dan Kolej Universiti, 1971, Kaedah-kaedah Universiti Teknologi Malaysia (Tatatertib Pelajar-pelajar), 1999 bergantung kepada tahap kesalahan yang dilakukan oleh pelajar.
- 2.3 Pelajar yang didapati melakukan kesalahan kali kedua akan diambil tindakan seperti di perkara 2.1.2 dan dicadang untuk diambil tindakan tatatertib mengikut peruntukan Akta Universiti dan Kolej Universiti, 1971, Kaedah-kaedah Universiti Teknologi Malaysia (Tatatertib Pelajar-pelajar), 1999.

SECTION A: READING (50 marks)
TEXT I (35 marks)

Read the text below and answer all the questions that follow.

- In 1998, Adam Vasser, a 13-year-old teenager who loved playing baseball, was vacationing in Montana with his family when he suddenly came down with what felt like the flu. When he had trouble breathing and his ankles became swollen, his parents took him to the hospital across the street. By the time the family arrived at the hospital, Adam was in complete heart failure. He had to wait for five months in a hospital for a heart transplant, during which time his heart was only able to pump with the assistance of a left-ventricular assist device (LVAD). Adam, who is now 30, underwent a heart transplant that saved his life then.
- But thousands of people are not as lucky. In the United States alone, 21 people die every day waiting for an organ transplant. Although about 45 per cent of American adults are registered organ donors, it varies widely by state. More than 80 per cent of adults in Alaska were registered donors in 2012, compared to only 12.7 per cent in New York, for example. In New York alone, there are more than 10,000 people currently waiting for organ transplants. According to data compiled by the Organ Procurement and Transplantation Network, more than 500 people died in New York last year, waiting for an organ to become available. The same scenario is observed in most Asian countries including Malaysia.
- Given this shortage of organs, why don't more people donate? It is a sensitive question, something non-donors are not keen to answer. But experts say there is a large disparity between the number of people who say that they support organ donation in theory and the number of people who actually register. In the U.K., for example, more than 90 per cent of people say they support organ donation in opinion polls, but less than one-third are registered donors. What keeps well-intentioned people from ultimately donating is something that academics, doctors, and organ-donation activists are trying to figure out.
- In a recent literature review, researchers at the University of Geneva examined several social and psychological reasons why people choose not to donate, either by not registering as an organ donor during their lives, or electing not to donate the organs of their next of kin. The study cites lack of understanding about brain death as one of the major barriers to donation. A 2002 study in Australia, for example, illustrates the controversy surrounding brain death. Some participants indicated that they would not donate the organs of their next of kin if their heart were still beating, even if they were proclaimed brain-dead. In another study of British women who had not signed up to be donors, researchers found that they were uncomfortable talking about death, with one participant saying, "The underlying taboo is that you have to be dead to donate your organs. Nobody really wants to think about that."

- Another main barrier to organ donation is mistrust in the medical field. Studies have shown that the less people trust medical professionals, the less likely they are to donate. The mistrust can come from personal experience one study in New York showed, for example, that next of kin who perceived a lower quality of care during a loved one's final days were less likely to consent to donation or from misconceptions about how the medical community treats registered organ donors. "There are a lot of people who subscribe to the belief that if a doctor knows you are a registered donor, they won't do everything they can to save your life," says Brian Quick, an associate professor of communication at the University of Illinois.
- Another study shows that most people get information regarding organ donation from television shows. This has caused great concern among researchers as how fictional medical dramas can influence our attitudes toward medical professionals. Quick and his colleagues have studied how watching Grey's Anatomy can influence people's attitudes toward the medical community. "We found that heavy viewers of the show saw Grey's Anatomy as realistic, meaning that they felt the images and the stories were realistic. And the more realistic they saw these stories, the more likely they were to mistrust the medical world."
- VII Religion is another factor which hinders organ donation that repeatedly comes up in research. While many religions consider organ donation an act of love, some research has shown that Catholics are less likely to donate than other religious groups, despite the Vatican's official position in favour of it. It seems that this is due to a belief in the afterlife and the concern for maintaining body integrity.
- VIII Another possible reason that people are reluctant to donate their organ could be that they are simply uncomfortable or unwilling to talk about death at all. In a survey of more than 4,000 students and their families from six universities throughout the United States, the majority of them indicated concern that making plans for death would bring it about prematurely.
- And this is where a lot of people think the solution comes in. "What we're trying to do in New York is move the cultural needle on the issue," says Aisha Tator, executive director of the New York Alliance for Donation. "Organised tissue donation should be a cultural norm like we did with bike helmet and seatbelt interventions." Her organisation is not the only one. Throughout the United States there has been a mushrooming of recent educational campaigns and studies on their efficacy. Campaigns have targeted the young, the old, nurses and ethnic minorities who tend to donate less than white Americans or white Britons. "Unfortunately unless you're personally touched by the issue, unless you have a child that gets a virus and suddenly needs a new heart, you don't really think about it," Tator says.

- Another more ambitious strategy is to change from the United States' current opt-in system to an opt-out system, which would mean that everyone would be a donor by default, unless they actively opt out. In a recent study conducted in the U.K., researchers studied the organ-donation systems of 48 countries over 13 years and concluded that Spain, with an opt-out style of consent, had the highest rate of organ donation of the countries studied and represents a successful model to emulate. "The Spanish model is held up as the ideal, and in many ways it is," says Eamonn Ferguson, a professor of health psychology at the University of Nottingham and one of the researchers on the study. "Not only the Spanish have an opt-out system, but they also have a very coordinated, hierarchical, interlinked system of well-trained organ-transplant professionals."
- In Israel, a change of law in 2010 that prioritises patients with a history of donation has incentivised a significant portion of the population to register as donors. The new law, which was coupled with a multimedia campaign called 'Sign and Be Prioritised' and a streamlined registration process, has also changed organ distribution procedures. "More than 35 per cent of organ recipients after the law was passed received the organ because of the prioritising system," says Dr. Jacob Levee, director of the Heart Transplantation Unit at Sheba Medical Center who spearheaded the change and authored the results.
- XII It can be concluded that continuous effort should be taken by all parties to encourage people to pledge in organ donation. It is hoped that more lives would be saved and the number of waiting list be reduced.

Adapted from:
Why Don't More People Want to Donate Their Organs? The Atlantic, November 10, 2014
Retrieved from https://www.theatlantic.com/health/archive/2014/11/why-dont-people-want-to-donate-their-organs/382297/ on 28/7

A I Write the main ideas for paragraphs II, V, VII, X and XI in the space provided.

Paragraph	Main Idea
П	
- III	Disparity between organ donation supporters and registered donors
IV	Lack of understanding about brain death as a barrier to organ donation
V	3
VI	Influence of fictional medical dramas on people's attitude towards organ donation
VII	
VIII	Feeling of discomfort to talk about death
IX	Turning organ tissue donation into a cultural norm
Х	
ΧI	

 $(5 \times 1m = 5marks)$

A II State whether each of the following statements is True (T), False (F) or Not Stated (NS)

1.	Adam has survived for 30 years following his heart transplant.]]
2.	Forty five per cent of Americans in every state are registered organ donors.]]
3.	More people believe in organ donation than actually becoming donors.	[]
4.	According to a survey, the majority of American students and their families refused to talk about death.]]
5.	The 'Sign and Be Prioritised' campaign in Israel has changed the organ recipient procedure.	I]
	/5 v 1m	- E m	>=l<=\

 $5 \times 1 m = 5 \text{ marks}$

A III Choose the correct meaning of the words / phrases highlighted in the following sentences according to the context in which they are used in the text.

- 1. By the time the family arrived at the hospital, Adam was in complete heart failure.
 - A. totally not functioning
 - B. finished job or process
 - C. including all parts or features
- 2. What keeps well-intentioned people from ultimately donating is something that academics, doctors, and organ-donation activists are trying to figure out.
 - A. solve
 - B. work out
 - C. understand
- 3. Another main barrier to organ donation is mistrust in the medical field.
 - A. a subject/area of study or work
 - B. an area affected by a particular force
 - C. a space to type information in a computer programme
- 4. "There are a lot of people who **subscribe** to the belief that if a doctor knows you are a registered donor, they won't do everything they can to save your life," says Brian Quick, an associate professor of communication at the University of Illinois.
 - A. to agree with an idea
 - B. to pay money for a service
 - C. to sign an official document
- 5. The study cites lack of understanding about brain death as one of the major **barriers** to donation.
 - A. bars that stop people from entering a place
 - B. anything that makes it difficult to achieve something
 - C. something that prevents people from communicating

- Another more ambitious strategy is to change from the United States' current opt-in system to an opt-out system, which would mean that everyone would be a donor by default, unless they actively opt out.
 - A. modern
 - B. existing
 - C. contemporary
- 7. In a recent study conducted in the U.K., researchers studied the organ-donation systems of 48 countries over 13 years and concluded that Spain, with an opt-out style of consent, had the highest rate of organ donation of the countries studied and represents a successful model to emulate.
 - A. to be like someone
 - B. to imitate something
 - C. to behave in a similar way
- 8. It can be concluded that continuous effort should be taken by all parties to encourage people to **pledge** in organ donation.
 - A. to vow seriously and publically
 - B. to make a formal promise to tell the truth
 - C. to give something valuable as a guarantee

 $(8 \times 1m = 8 \text{ marks})$

A IV Answer the following questions based on the text.

_		111
		(2 mark
ln į	paragraph II, the author wrote "But thousands of people are not as lucky."	
İ,	Who was the author referring to?	
		(1 mar
ii.	Why were they not lucky?	
		(1 mar
iii.	Give ONE statistical evidence to prove this.	
		(2 mark
	ve TWO reasons for mistrusts in the medical field.	
i.		
		(1 mark)
ii.		
		(1 mark)

	270 100 100 100					
						(2 m
i. What i	s Aisha Tator's	attitude tow	ards making (organ donatio	n a culture	among society
3						(1 m
ii. Quote	a phrase from	the article th	nat supports h	er claim.		
				(6)		
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TEXT II (15 marks)

Read the text carefully and answer the questions that follow.

- The gap between organ supply and demand for transplant is a global concern. As of May 2012, Malaysia has some 15,399 patients awaiting organ transplants, with kidney patients topping the list. Sadly, Malaysia has one of the lowest deceased organ donation rates. In 2010, this rate stood at 0.70 donors per million population, compared to countries like Spain (34.13), the United States (26.27), Australia (12.10), Singapore (5.10), Japan (0.90) and Lebanon (0.50).
- 11 What prevents Malaysians from pledging to donate their organs upon death? A study using a focus group conducted in 2008 identified religio-cultural factors to be the prime reason for Malaysia's low deceased-organ donations. However, studies conducted in the United States, Turkey and Nigeria have shown a positive correlation between educational attainment and awareness of organ donation, hence willingness to become donors. Thus, to assess the views of better-educated Malaysians on their willingness to donate organs, a survey was conducted in the Klang Valley between October and December 2010. Out of the 1,311 respondents, the researchers focused on 688 respondents with tertiary education. Further analyses were carried out on those who said "No" to deceased organ donation. The respondents were provided with two choices under religio-cultural factors: (1) "It is against my religion," and (2) "I want my body to remain intact after death"; and another two choices under structural factors: (1) "I do not have enough access to information", and (2) "I am not convinced that my body parts will be used beneficially". The results of the study showed that 52.5 per cent of these educated respondents were willing to be an organ donor upon death. Further analysis on the prime reasons that influenced those who declined to be a donor is displayed in the table below.

Table 1: Factors Deterring Educated People from Becoming Organ Donors: Oct-Dec 2010

Factor	ltem .	Response	Percentage
Religio- cultural	1.It is against my religion 2. I want my body to remain intact after my death	45 77	9.9 16.9
	TOTAL	122	26.8
Structural	I do not have access to information I am not convinced that my body parts will be used beneficially	133 137	29.2 30.1
	TOTAL	270	59.3
Others		63	13.9
	GRAND TOTAL	455*	100.0
	*Because respondents were allowed to choose more than 1 factor, the tot exceeds the total respondents (327) who refused to donate their organ	al number of re	sponses (455)

- As shown by Table 1, the highest frequency recorded was "I am not convinced that my body parts will be used beneficially" (30.1%). The second highest was "I do not have enough access to information" (29.2%), followed by "I want my body to remain intact after death" (16.1%) and "It is against my religion" (9.9%). The rest (13.9%) gave "Other reason" namely "Family members might get upset" (5%), "Do not really see the urgent need to become a deceased donor" (5%) and "No specific reason" (3.9%).
- Overall, the findings of the 2010 study showed that structural factors were the main contributing factors to the low organ donation rate, thus refuting the claim of the 2008 study. Secondly, the results also confirm the claim of existing studies that better education can encourage organ donations. Thirdly, the results also revealed that contributing factors to the low donation rate in Malaysia are a combination of the public's lack of trust in the state's ability to carry out proper organ procurement and medical procedures, and a lack of medical information on organ donation.
- V In conclusion, to narrow the gap between organ demand and supply in Malaysia, a review of current policies is recommended, whereby the state should play a more-involved role in educating the public on organ donation. Efforts to instil the public confidence in the state's ability to carry out organ procurement should also be intensified. Perhaps the state should not only look at the content of the campaigns, but also the target group, specifically the better educated.

Adapted from: Makmor Tumin et. al (2013). Factors that Hinder organ Donation: Religio-Cultural or Lack of Information and Trust. Experimental and Clinical Transplantation, 3: 207-210. DOI: 10.6002/ect.2012.0194
Retrieved on 26 July 2017

A 1	1	Circle	the		answer
AI	•	Circie	a the	correct	ranswer

1.	In 2010, Malaysia performed	Lebanon in terms of organ donation rate.
	A. similar to	
	B. better than	
	C. worse than	
		(1mark)

2.	What does	deceased	organ	donation	rate	refer	to?
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- A. The number of people waiting for an organ transplant in every million population
- B. The number of people who died while donating their organs in every million population
- C. The number of people whose organs were donated upon death in every million population

(1 mark)

- 3. Which of the following statements is **TRUE** about the study conducted in 2010?
 - A. The aim of the study was to assess the perceptions of Malaysians on organ donation.
 - B. It was a survey study conducted in the last quarter of 2010 involving 1,311 respondents.
 - C. The study utilised a focus group to ascertain the major reasons for Malaysia's low donation rate.

(1mark)

- 4. Based on Table 1, which of the following statements is FALSE?
 - A. The responses to the questions listed in Table 1 were collected from 455 respondents.
 - B. The percentage of responses for "I want my body to become intact after death" is almost twice the percentage of responses for "It is against my religion"
 - C. There is not much difference between the percentages of responses for "I do not have access to information" and "I am not convinced that my body parts will be used beneficially"

(1 mark)

- 5. In paragraph II line 5, the word <u>assess</u> is best replaced by
 - A. judge
 - B. decide
 - C. determine

(1 mark)

A VI Answer the following questions based on the text

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Compare the fi donation rate in		2008 a	and 2010) study	on the	contributi	ng factors	for	the lov
		2008 a	and 2010) study	on the	contributi	ng factors	s for	the lov

3. Secondly, the results also confirm the claim of existing studies that better education can encourage organ donations.

oetween organ demand	4.	Provide TWO recommendations given by the authors to address the gand supply in Malaysia.
		i
		ii.
(2 x 1m = 2 marks)		
ns, but also the target	5.	Perhaps the state should not only look at the content of the campa group, specifically the better educated. (Paragraph V).
		What can be inferred from this statement?
(2 marks)		
(2 marks)		

SECTION B: WRITING (10 marks)

Situation: In addressing its low organ donation rate, one strategy that Malaysia can adopt is to introduce the opt-out system in the country.

Task : Based on Figures 1 and 2 below, write a report of between 200 and 250 words comparing the organ donation rates for countries implementing the opt-in system and those that implement the opt-out system.

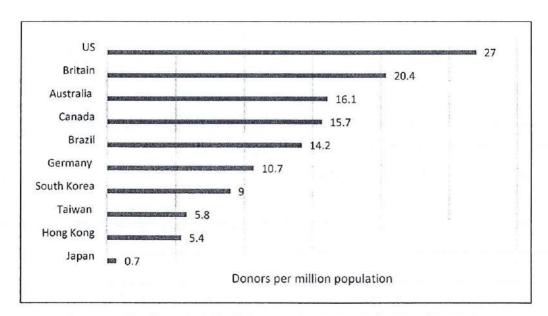


Figure 1: Organ Donation Rates in Countries with Opt-in System in 2014

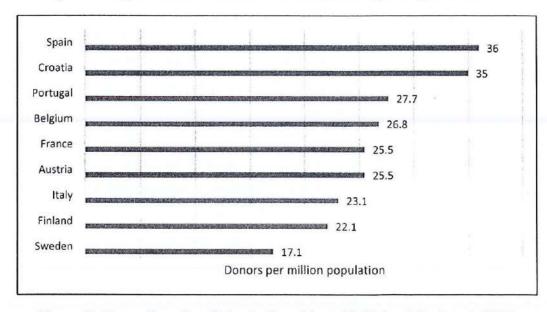


Figure 2: Organ Donation Rates in Countries with Opt-out System in 2014

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