

ENGLISH

Written examination

October 2015

Reading time: 15 minutes

Writing time: 3 hours

TASK BOOK

<i>Section</i>	<i>Number of questions</i>	<i>Number of questions to be answered</i>	<i>Marks</i>
A – Text Response	20	1	20
B – Writing in Context	4	1	20
C – Analysis of language use	1	1	20
			Total 60

- Students are to write in blue or black pen.
- Students are permitted to bring into the examination room: pens, pencils, highlighters, erasers, sharpeners, rulers and an English and/or bilingual printed dictionary.
- Students are **NOT** permitted to bring into the examination room: blank sheets of paper and/or white out liquid/tape.
- No calculator is allowed in this examination.

Materials supplied

- Task book of 14 pages, including **Examination assessment criteria** on page 14.
- One answer book.

Instructions

- Write your **student number and name** on the front cover of the answer book.
- Complete each of the following in the answer book.
 - Section A: Text Response
 - Section B: Writing in Context
 - Section C: Analysis of language use
- Each section should be completed in the correct part of the answer book.
- All written responses must be in English.
- If you write on a multimodal text in Section A, you must not write on a multimodal text in Section B.
- You may ask the supervisor for extra answer books.

At the end of the task

- Enclose any extra answer books inside the front cover of the first answer book.
- You may keep this task book.

Students are NOT permitted to bring mobile phones and/or any other unauthorised electronic devices into the examination room.

SECTION C – Analysis of language use**Instructions for Section C**

Section C requires students to analyse the use of written and visual language.

Read the material on pages 12 and 13 and then complete the task below.

Write your analysis as a coherently structured piece of prose.

Your response will be assessed according to the criteria set out on page 14 of this book.

Section C is worth one-third of the total assessment for the examination.

TASK

In Robin Holford's quarterly review article *and* the following advertisement, how is written and visual language used to persuade readers to share the points of view presented in them?

Background information

The *Good Life Advisory Council* [GLAC] is a community-based organisation, which monitors the 'health' of "three essentials for 'good' living" – clean air, fresh water and a balanced diet. It publishes a quarterly review, "... **and the Good News is...**", and acts as a watch-dog on the activities of the EPA, the State Waters and Rivers Board, and the Quality Assurance Commission, especially the latter's work in the food business. The importance of its role in this area was highlighted earlier this year in the health scare surrounding the import of frozen berries from China. The following article appeared in GLAC's July issue, and focuses on what may be an even greater threat to our health than air pollution, water impurity or food contamination.

IN PURSUIT OF A GOOD LIFE - Robin Holford

[Reproduced from the July edition of "... and the Good News is..."]

The City of Melbourne has once again been recognised by the Economist Intelligence Unit, as the "World's Most Liveable City". This is the fourth year in a row that we have claimed the title, in 2015 beating 140 other cities world-wide.

No one should be surprised by this decision. That we have clean air is indisputable. The EPA keeps a close eye on factory discharges and we keep a close eye on the EPA. It also cheerfully puts off the road any vehicle with an unacceptable level of exhaust emission. We are all invited to 'dob in' any offenders by ringing the 24-hour EPA pollution hotline – **1300 372 842 (1300 EPA VIC)**.

Equally beyond question is the quality of our water. Of the Australian capital cities, only Hobart comes near matching Melbourne in this respect. And we have plenty of it, with the North-South Goulburn River pipe-line and a desalination plant ready to go in an emergency. Los Angeles, on the other hand, is facing the most serious crisis in its history. As lakes dry up and reservoirs drain to little more than a series of muddy pools, the whole state of California is confronted with the very real possibility of having 38.8 million very thirsty people. Not so Melburnians. If they are thirsty, it's not water they're after!

GLAC's third major criterion for a 'good life' is a balanced diet. With one of the major players in the food market proud of its reputation for 'Fresh Food', and a proliferation of local fresh produce markets in the suburbs, Melburnians are assured of a ready supply of all the necessities for a healthy balanced diet.

Thus, it comes somewhat as a shock to discover that The Australian Medical Science Foundation estimates that up to 70% of Australians regularly 'prescribe' medication for themselves and members of their families, many spending up to \$80 a month, and this in a city where the vast majority of its population do not need to complement their diet to achieve a healthy lifestyle. The money involved is enormous: in Australia alone, the complementary medicines industry has grown by 54% in the past five years to be worth \$3.5 billion in revenue a year, part of an estimated \$138 billion annual global market*.

Everywhere we go, we are bombarded by billboards advertising all manner of vitamin supplements, miracle ointments, magical elixirs, wonder-working pills, powders, lotions, available, not merely for hypochondriacs, but for the average health-conscious Australian. The ingredients are often as weird as the claims for their efficacy. Macbeth's witches immediately come to mind with their cauldron full of poisoned entrails; frog toes and baboon's blood. The advertisements claim to be so successful that it's amazing there's a single person in the land with an ailment of any kind at all.

Radio, press and television are similarly overloaded, with many of their suggested treatments and diets outside of conventional medical practices where intensive trials are compulsory. They make all sorts of extravagant claims; promises abound; guarantees are in profusion, but we must treat their offers and claims in much the same way that we discard letters from individuals in some distant African nation, who are just waiting for us to forward to them a 'small' cheque so they can shower us with untold wealth.

When challenged, apologists for the DIY health promoters cite our healthy community as proof-positive of the effectiveness of all these remedies. But isn't that rather like the man who protects his home in East Melbourne from lion attacks by placing diamond-shaped pieces of potato peel on his nature strip? When told that there are no lions in East Melbourne, his only response is, "I know; effective isn't it?"

However, money may not be the only thing we stand to lose: our lives could be at stake. It is an unfortunate fact that people die from the known and proper use of pharmaceuticals; others, however, lose their lives through their own ignorant, albeit well-intentioned, purchase and consumption of medications, all too readily available over the counter or online. Self-medication can lead to allergies, poisoning and interaction with other medicines, drugs and food. *Choice* magazine reported that, in 2014, Australians spent \$629m on over-the-counter pain-killers alone. Such self-medicating can mask symptoms and prevent doctors from correctly diagnosing a condition. In a nutshell, self-medication can be fatal.

The threat to our having a 'good life' does not come from what we haven't got, but rather from what we have got – the means to succumb to the advertising moguls and stuff ourselves so full of chemicals that even the cleanest of air, the freshest of water, the best elements of a balanced diet may not be enough to ensure our survival in the World's Most Liveable City.

* Figures from the *Australian Science & Medicine Foundation*.

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Here are some benefits that users of Trihyxadrin have experienced:

- Weight loss
- Acne relief
- Increase in energy, strength and endurance
- Improved muscle tone
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- Accelerated soft tissue healing
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- Natural anti-depressant effect
- Sleep restoration
- Improved concentration

If symptoms persist, consult your medical professional.



Trihyxadrin is ISMI-approved, and available on-line: novascript@wellbeing.com

Examination Assessment Criteria

The examination will address all the criteria. Student responses will be assessed against the following criteria:

Section A – Text response

- detailed knowledge and understanding of the selected text, demonstrated appropriately in response to the topic
- development in the writing of a coherent and effective discussion in response to the task
- controlled use of expressive and effective language appropriate to the task.

Section B – Writing in Context

- understanding and effective exploration of the ideas, and/or arguments relevant to the prompt/stimulus material
- effective use of detail and ideas drawn from the selected text as appropriate to the task
- development in the writing of a coherent and effective structure in response to the task, showing an understanding of the relationship between purpose, form, language and audience
- controlled use of language appropriate to the purpose, form and audience

Section C – Analysis of language use

- understanding of the ideas and points of view presented
- analysis of ways in which language and visual features are used to present a point of view and to persuade readers
- controlled and effective use of language appropriate to the task