

# Maturprüfung 2024 Englisch

Klasse / Kurs: 4a-4i

**Anzahl Seiten** 

(ohne Deckblatt):

10

Inhalt:

I. LISTENING COMPREHENSION

II. READING COMPREHENSION

III. ESSAY

Anweisungen/

Erläuterungen:

Beachten Sie, dass Sie das Deutsch-Englisch/Englisch-Deutsch Wörterbuch nur für den Essay verwenden dürfen.

Hilfsmittel:

Deutsch-Englisch/Englisch-Deutsch Wörterbuch (für den

Essay)

Bewertung:

siehe erstes Blatt der Prüfung

Bevor Sie mit dem Lösen der Aufgaben beginnen, kontrollieren Sie bitte, ob die Prüfung gemäss obiger Aufstellung vollständig ist. Sollten Sie der Meinung sein, dass etwas fehlt, melden Sie dies bitte **umgehend** der Aufsicht.

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The En	glish Exam consists of three parts:	
I.	LISTENING COMPREHENSION:	Answers on the exam paper according to the instructions given.
		Time allotted: 40 minutes.
11.	READING COMPREHENSION:	Part A: comprehension questions
*		All answers on separate sheets provided by the school according to the instructions given.
8		Part B: vocabulary
		All vocabulary answers to be written on the exam paper.
III.	ESSAY:	Text on separate sheets provided by the school. Please leave a margin on the right hand side of the sheet for correction purposes.
* A		Time allotted for Reading Comprehension and Essay: 3 hours and 20 minutes.

Only after handing in both part I and part II will you be allowed to use your personal dictionary, which you can collect at the desk of the teacher in charge.

Electronic dictionaries are not permitted.

# Assessment grid:

Task		Weight	Score	Grade
I. Listening Comprehension		20%	30	
II. Reading Comprehension	Α	30%	13	
II. Reading Comprehension	В	30 %	15	
III. Essay		50%		*
TOTAL			. P	

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l. Li	stening Comprehension	, I	
Part	1		
C) w	will hear three different extra hich fits best according to w act. You will hear each extra	acts. For questions 1 - 6, choose that you hear. There are two que ct twice.	e the answer (A, B or stions for each
	RACT ONE: You hear a sports petitive.	sman and a businesswoman discus	ssing the issue of bein
<b>1</b> Ho	w does the man feel about the	book he has read on competitiven	ess?
A B C	surprised that it contradicts	a well-established theory of evidence it quotes	
<b>2</b> The	e woman feels that in the busir	ness world, prioritising competitiver	ness leads to
A B C	a demotivating effect on the	workforce. eater productivity.	
	RACT TWO: You hear two frie emory.	nds discussing some research into	the impact of colour
3 The	ey both say that		
A B C	restaurants use clever taction the research methods used the same colours can affect	seem valid.	
4 The	woman feels that the teenage	er's findings	
A B C	could prove significant in the need the backing of the scie confirm initial evidence abou		
	RACT THREE: You hear two pone effect it has on the brain.	eople discussing a television progr	ramme about music
5 Hov	v does the woman feel about t	he programme?	
A B C	surprised by its conclusion confused by the approach it disappointed by the lack of e		
6 Wha	at do they agree about music?		
A B C	It has unexpected benefits. Its effects on intelligence are It's important to study its psy		

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Part	2		
trop	ical island of Réunion to fin complete the sentences with	he journalist Susie Stubbs, wh d about the flavouring called v n a word or a short phrase. You	anilla. For questions 7-
		VANILLA	
7	Susie says that, despite its c	ost, vanilla is the world's most	
	*	spice.	
8		from Mexico, where it depends o	n a local
	-	for its existence.	
9	Susie savs the term		is used to talk about vanill
	plants on the island.		
10	Recently the vanilla harvest h	nas been affected by	
		and this impacts on th	e price.
	*		
11	These days the vanilla plants	are covered by	
		for protection.	
12			in the vanilla seed
	pods to show which farm they	y come from.	
42	The verille nade are are drie	d and the co	
13		d and then	*
	briefly before being packed in	DUXES.	
14	The boxes used to store the p	ode are wrenned in	

to keep the heat in.

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Part 3			
Yolar answ	vill a radio interview in which twida Zouche – are talking about er (A, B, C or D) which fits best ding twice.	their work. For questions 15	5-20, choose the
<b>15</b> In	Yolanda's opinion, what is the mo	est challenging aspect of her id	ob?
A B C D	finding suitable images to accortrying to locate interviewees expressing herself coherently w working to demanding time constitutions.	npany articles	
16 W	nat is it about their work that Angu	is and Yolanda both enjoy?	
A B C D	the variety of projects they get in the challenge of reporting news the opportunity to meet interesti the appeal of searching out info	effectively ng people	
<b>17</b> In <i>i</i>	Angus's opinion, the advantage o	f online newspapers over print	t versions is that they
A B C D	are able to cover a greater range can keep up with events as they allow interaction with readers. reach a far wider public.		
18 Wh	at made getting a job in journalis	m so hard for Angus?	
A B C D	the extent of competition for pos a low level of encouragement fro a lack of previous professional e the difficulty of establishing usef	om others experience	
<b>19</b> Yol	anda believes that the essential r	equirement for a journalist ent	tering the profession is
A B C D	an ability to write persuasively. a clear and logical mind. a resourceful and confident char a mastery of interviewing technic		
<b>20</b> Ang	gus's recommendation for aspiring	g journalists is to	
A B C D	cultivate an interest in a specific seize every opportunity to expre concentrate on developing a dist become a keen observer of life a	ss themselves in writing.	

F disappointed because of a misunderstanding

G puzzled by people's reactions

H envious of the ability of others

29 Speaker 4: \_\_\_\_\_

**30** Speaker 5: \_\_\_\_

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#### II. READING COMPREHENSION

# How much does it hurt?

Consider a doctor who has two patients who are grimacing and using similar words to describe their pain. Can the doctor be sure they are experiencing similar levels of pain? What if one habitually underestimates their suffering? What if one has been in pain for a long time and grown used to it? And what if the doctor has certain prejudices that mean they are more likely to believe one patient than the other? Pain is a difficult beast to grapple with, hard to measure and therefore to treat. Pain can be an important distress signal and failing to investigate it could mean a missed opportunity to save a life – or it may be something much more minor. For such a universal experience, pain remains much of a mystery – especially the task of determining how much pain someone is in. "We understand it so poorly," says Emma Pierson, a computer scientist at Stanford University researching pain. "In particular, the fact that human doctors are frequently left puzzled by why a patient is in pain suggests that our current medical understanding of pain is quite bad."

"Step one in treating pain adequately is measuring it accurately and that's the challenge," says Carl Saab, who leads a pain research team at Cleveland Clinic in Ohio. The gold standard for pain analysis currently relies on patients self-reporting how they feel, relying, in different places, on either a numerical scale (0 as no pain, 10 as worst pain), or a system of smiley faces. These systems can be confusing for patients, he says, and especially problematic when treating children and non-communicative patients.

Then there is the problem about whether the patient's rating is believed. One study found a widespread notion that people tend to exaggerate the level of pain they are in, despite little evidence to suggest such exaggeration is common. Without an objective way to measure pain, there is room for bias to creep into clinicians' decisions. "Pain has a particularly large impact on underserved populations, and their pain is particularly likely to be ignored," says Pierson. Unfortunately, false beliefs about pain are widely held among physicians. In 2016, one study found that 50% of white medical students and residents in the US held very dangerous and false ideas about black people and their experience of pain. Such biases date back to historical attempts to justify slavery, including false claims that black people had thicker skin and different nerve endings. Black patients in the US are 40% less likely to have their pain treated than white patients. Hispanic patients, meanwhile, are 25% less likely than white patients to have their pain treated.

Racial discrimination is not the only form of prejudice that influences pain treatment. Biases around "hysterical women" are still well known in medicine, particularly around pain. A review of 77 separate research studies revealed that terms like "sensitive" and "complaining" are more often applied to women's reports of pain. Another study found that women who came to emergency care due to pain were less likely to receive any pain relief at all, and they had to wait 33% longer than men to be treated. In addition, when men and women reported similar levels of pain, men were given stronger medication to treat it. Social expectations about what is "normal behaviour" for men and women are at the root of these patterns and these biases add up to medically unjustified differences in the way men and women are treated in health care. There are sometimes genuine reasons why men and women might receive different treatment for a particular complaint. Differences associated with hormones and genes should sometimes lead to differences in, for example, pain medication. But all observed differences in the treatment of men and women with pain cannot be explained by biological differences.

Several innovations are being developed to try to plug this gap to provide an objective "readout" of the extent of someone's pain. These technologies rely on finding "biomarkers" for pain – measurable biological variables that correlate with the experience of pain. "Without biomarkers we will not be able

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to properly diagnose – and adequately treat – pain," says Saab. "We will not be able to predict the <u>likelihood</u> of someone with acute back injury to transition to chronic treatment-resistant pain, and we will not be able to objectively monitor response to novel therapies in clinical trials."

There are several candidates for biomarkers. Researchers in Indiana have developed a blood test to identify when a very specific set of genes involved in the body's response to pain is activated. Levels of these biomarkers could indicate not only that someone is in pain, but how severe it is. Brain activity could be another useful biomarker. Researchers have <u>devised</u> an approach which measures the ebb and flow of a type of brain activity known as theta waves. These were found to be elevated during pain and reduced to normal levels after administering pain killers.

However, relying on technology to reduce bias can introduce its own challenges too. For instance, there is the question of bias in the application of technology. Around one-fifth of the general population is affected by moderate to severe pain. Most of them seek medical treatment in primary care. Will all of them get a brain scan pain measurement or will the selection be biased? Research has shown that more men than women get referrals to somatic examinations, more women receive referrals to psychologists. There is a risk of gender bias in who will get an objective pain measurement.

Assessment of pain based on technology should be used as an add-on rather than a replacement to current methods of measuring pain. "We will never be able to know for sure how someone feels, be it pain or another mental state," says Saab. "The verbal report of the patient should always remain as the 'ground truth' for pain. I envision this being used as a complementary diagnostic, especially in cases where the verbal report is unreliable: children, adults with altered mental status, non-communicative patients."

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A)	Comprehension question	s (13 points):	
		s in your own words whenever pos e your answers on a separate shee	_
Par	t A will count as 2/3 of your	overall mark in the Reading Comp	ehension.
1.	From a medical perspective	ve, identify the dangers of misinterpre	ting pain. (2p.)
2.	Outline the causes for rac	cial and gender bias in assessing pain	. (2p.)
3а.	Describe the consequent	ces of gender bias in treating pain. (3	p.)
3b.	In one sentence, state why justified. (1p.)	y different pain treatment for men and	women might be
4.	Identify the two biomarkers obtain them. (4p.)	s mentioned in the text and explain th	e methods applied to
5.	Explain Carl Saab's vision of measuring pain. (1p.)		
		,	
B)	Vocabulary (15 points):		
l.		ve a synonym / antonym of the follo our answers below. (10 points)	owing words as they
1.	habitually (l.2)		
2.	gold standard (I.13)	*	
3.	to creep into (I.20)		
4.	claims (L24)		
5.	patterns (I.35)		
6.	genuine (I.36)		
7.	to plug (l.40)		8
8.	likelihood (LAA)		
9.	devised (I.49)		
10	moderate (L54)		

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II. For questions 11 – 20 read the text. Use the word given in bold to form a grammatically and logically fitting word. Write your answers below. (5 points)

### Pain as a disease: an overview

The attempt to understand pain represents one of the oldest challenges in the history of medicine. Pain has a (00) value role in medical action, as the symptom par excellence and, therefore, as a precious and (11) to mean tool. An important step forward in the scientific characterization of pain has been taken with the Sherrington's definition of the phenomenon as "the psychical adjunct of an imperative, protective reflex" and the description of its neurophysiological aspects. Nevertheless, it is only with the (12) discover of abnormal pains that the phenomenon and its role start to be directly addressed in medicine, that is, when traditional interpretation of pain as a symptom of disease starts to (13) weak. As stated by John J Bonica, the founding father of pain medicine, in 1953, pain "in its late phases, when it becomes intractable, it no longer serves a useful purpose and then becomes, through its mental and physical effects, a (14) destruction force". Thus, in these circumstances, the peculiar nature of pain is revealed in its complexity, particularly because of the double value of the phenomenon, that is, pain is biologically a protective tool, but it can also (15) loss its adaptive function and becomes a pathologic condition severely (16) impact quality of life.

The development of a **(17) universe** accepted definition of pain and related concepts was indicated by John J Bonica as one of the main goals of the then rising International Association for the Study of Pain (IASP). Among the first **(18) propose** of the association there were, indeed, the definition of pain and the classification of chronic pain syndromes. (...)

If there is a general agreement nowadays on the definition of pain, the (19) recognize of pain as a disease remains debated. Based on their duration, different types of pain are currently classified as chronic pain, whose (20) common accepted definition is "that pain which persists past the normal time of healing".

00.	valuable	
11.		16
12.		17
13.		18
14.		19.
15.		20

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## III. ESSAY

Write an essay of at least three body paragraphs on ONE of the following topics. You may or may not refer to the reading comprehension text.

Please give the essay a title of your own and formulate your own thesis statement. Write the number of the chosen topic (1 - 4).

- 1. "In the country of pain, we are each alone." (May Sarton, Belgian-American novelist).
- 2. "One child, one teacher, one book, one pen can change the world." (Malala Yousafzai, b. 1997, Pakistani activist and the world's youngest Nobel Prize Winner).
- 3. The future of travelling.
- 4. Class specific literary essay topic:
  - In dystopian literature, nature often serves as a symbol of the clash between oppressive systems and the human quest for happiness. Discuss this statement in the context of the dystopian literature you have read.
  - "They are a rotten crowd. You're worth the whole damn bunch put together." Discuss this quote from the novel *The Great Gatsby*. What separates Gatsby from the "rotten crowd"?
  - In dystopian literature, nature often serves as a symbol of the clash between oppressive systems and the human quest for happiness. Discuss this statement in the context of the dystopian literature you have read.
  - "Those who surrender freedom for security will not have, nor do they deserve, either one." Discuss this quote by Benjamin Franklin in the context of T.C. Boyle's *Tortilla Curtain*. (Benjamin Franklin was a 18th century writer, philosopher, inventor, and politician, who was one of the Founding Fathers of the United States, a drafter and signer of the "Declaration of Independence.")
  - **4e** Vernon God Little is a critical portrayal of the media. Reflect critically on the role of the media in the novel and in the real world.
  - "A Streetcar Named Desire is a play about the tension between truth and fantasy." How is this tension explored in Tennessee Williams's play?
  - **4g** "*Macbeth* is a play about the triumph of good over evil." What is your response to this statement?
  - "You must understand, sir, that a person is either with this court or he must be counted against it, there be no road between. This is a sharp time, now, a precise time—we live no longer in the dusky afternoon when evil mixed itself with good and befuddled the world." Discuss Judge Danforth's statement in the context of Arthur Miller's play *The Crucible*.
  - 4i Compare Romeo and Juliet to teens today.