

Reading sub-test

Part B – Text booklet

Sample Test

You must record your answers for **Part B** on the **multiple-choice Answer Sheet** using **2B pencil**.

Please print in **BLOCK LETTERS**

Candidate number - -

Family name _____

Other name(s) _____

City _____

Date of test _____

Candidate's signature _____

YOU MUST NOT REMOVE OET MATERIAL FROM THE TEST ROOM

Instructions

TIME LIMIT: 45 MINUTES

There are **TWO** reading texts in Part B. After each of the texts you will find a number of questions or unfinished statements about the text, each with four suggested answers or ways of finishing.

You must choose the **ONE** which you think fits best. For each question, 1-19, indicate on your **Answer Sheet** the letter A, B, C or D against the number of the question.

Answer **ALL** questions. Marks are **NOT** deducted for incorrect answers.

NOTE: You must complete your **Answer Sheet** for Part B within the **45 minutes** allowed for this part of the sub-test.

NOW TURN TO THE NEXT PAGE FOR TEXTS AND QUESTIONS

Euthanasia

Paragraph 1

Over the past few decades, there has been increasing attention paid to medical decisions at the end of life, and euthanasia, or medically-assisted death, has been the subject of much moral, religious, philosophical, legal and human rights debate all over the world. At the core of this debate is how to reconcile the desire of individuals to choose to die with dignity when suffering, and the need, particularly of health professionals, to uphold the inherent right to life of every person. Recent surveys in Australia and elsewhere consistently show that a considerable proportion of health care professionals support euthanasia under certain conditions. A minority of health care professionals also admit to having practised euthanasia.

Paragraph 2

The position of international human rights law with respect to voluntary euthanasia is not explicit or clearly defined. Article 6(1) of the International Covenant on Civil and Political Rights (ICCPR) provides: 'Every human being has the inherent right to life. This right shall be protected by law. No one shall be arbitrarily deprived of his life.' The impact of article 6(1) on voluntary euthanasia raises a number of questions including the scope of the right to life, the interpretation of 'arbitrary' deprivation of life, and the definition of life and in particular when life ends. So far these questions remain largely unanswered.

Paragraph 3

Dealing with death and dying (which includes requests for euthanasia) is an **integral** part of the practice of medicine, and medical practitioners frequently have to make decisions that affect the timing of a patient's death. Determinants of attitudes and practices relating to such decisions include unbearable pain and suffering, the patient's mental competence, that is, the ability to make decisions for one's self or to exercise one's right to give or refuse informed consent, and patient requests for euthanasia. As well as patient factors, there are a number of other considerations that relate to the medical practitioners themselves such as sex, age, religious and personal beliefs, as well as the area of medicine in which they specialise.

Paragraph 4

In one of the most detailed surveys of the practice of euthanasia, researchers in Holland found that in 1.8 per cent of all deaths in that country a lethal drug was administered, at the patient's request, to end life. Also, in 38 per cent of all deaths doctors had taken medical decisions concerning the end of life that may have shortened the patient's life. The researchers concluded that medical decisions concerning the end of life were common in medical practice and should be the subject of increased research, teaching, and public debate.

Paragraph 5

It is still true to say, however, that most doctors are opposed to euthanasia. Several factors may explain this. First, in general, death is viewed as a failure in modern medicine; hence the reluctance of medical professionals to reinforce this perception by accepting euthanasia and physician-assisted suicide. Secondly, various surveys suggest that doctors would prefer to keep the management of death within their professional practice (and out of the hands of government regulators) to allow them the flexibility to respond to the complex realities of differing clinical situations. The regulation of death and dying through a formal legal process could make it difficult for doctors to respond to the individual needs of the patient and could also subject doctors to unreasonable and extended legal scrutiny.

Paragraph 6

The opposition of doctors to euthanasia and physician-assisted suicide may also be related to their 'self-image' and the fact that the contribution of doctors to carrying out requests for euthanasia may have profound effects on their image in the broader society. Doctors see themselves as the bringers of life, hope and healing, not as the bringers of death. More importantly, the legalisation of euthanasia also raises the prospect of a complex moral dilemma for those doctors who may be opposed to it on religious or ethical grounds.

Paragraph 7

The broader community's unease about the legalisation of euthanasia is related to the concerns of some religious and ethnic groups that, besides violating the ultimate human value, the sanctity of life, such legislation may render the less privileged and the poor in the community more vulnerable to unethical practices. However, notwithstanding the concerns of the medical profession and some key groups in society, the debate about the right of an individual to make a decision about his or her own death is not going to disappear. Society will ultimately have to resolve the issue by balancing two central human values: sanctity of life and human dignity.

Part B - Text B1: Questions 1-10

- 1** According to paragraph 1, euthanasia is approved of by
- A most health professionals around the world.
 - B only a few health professionals in certain countries.
 - C mainly Australian health professionals.
 - D many health professionals in particular circumstances.
- 2** According to paragraph 2, Article 6(1) of the ICCPR is
- A ambiguous.
 - B arbitrary.
 - C contradictory.
 - D unconditional.
- 3** The word 'integral' in paragraph 3 means
- A accepted.
 - B central.
 - C regular.
 - D general.
- 4** According to paragraph 3, which one of the following statements is **TRUE**?
- A Medical choices affecting when a patient dies are common.
 - B Doctors can often choose if and when a patient should die.
 - C Euthanasia is an everyday occurrence in modern medicine.
 - D Mental deficiencies can lead patients to request euthanasia.
- 5** According to paragraph 3, medical decisions about the timing of a patient's death may be influenced by the
- A religion of the patient.
 - B gender of the patient.
 - C moral position of the doctor.
 - D prior training of the doctor.

Questions

- 6** According to the survey in paragraph 4, which one of the following statements is **TRUE**?
- A 38% of deaths in Holland were due to euthanasia.
 - B 1.8% of deaths in Holland were drug related.
 - C 38% of doctors have shortened patients' lives.
 - D 1.8% of deaths in Holland were due to euthanasia.
- 7** Which one of the following statements is **NOT** supported by information in paragraph 5?
- A Deaths are perceived by some as failures in the medical process.
 - B Physicians are wary of legal involvement in medical decision-making.
 - C Governments impose restrictive regulations on medical professionals.
 - D Doctors value the freedom to respond to patients' particular needs.
- 8** According to paragraph 5, one reason the medical profession is opposed to pro-euthanasia laws may be that
- A the surveys done of its views are inconclusive.
 - B doctors dislike government and legal scrutiny.
 - C doctors want freedom to act according to each situation.
 - D doctors believe the law will require them to practise euthanasia.
- 9** According to paragraph 6, many doctors
- A are only conscious of their own 'self-image'.
 - B fear a negative perception of their profession.
 - C wish to be seen as creators not enders of life.
 - D are pro-euthanasia for complicated reasons.
- 10** According to paragraph 7, concerns about protecting the poor and vulnerable in society
- A have made some people unsure about supporting euthanasia laws.
 - B have not been considered by some religious and ethnic groups.
 - C have not been raised so far in the euthanasia debate.
 - D will eventually force society to resolve this issue.

END OF PART B – TEXT 1

TURN OVER FOR PART B – TEXT 2

Food additives

Paragraph 1

The use of food additives has increased enormously in the last few decades. As a result, it has been estimated that today about 75% of the Western diet is made up of various **processed** foods, each person consuming an average of 3.5-4.5 kilograms of food additives per year. Adverse effects and conditions which have been attributed to the consumption of food additives include eczema, dermatitis, irritable bowel syndrome, nausea, vomiting, diarrhoea, rhinitis, bronchospasm, migraine, anaphylaxis, hyperactivity and other behavioural disorders.

Paragraph 2

There is also now clear evidence that the health of populations in developed nations has deteriorated considerably during the last few decades. In a recent study which compared the health records of over 5,000 people born in the UK in 1946 with those of their first-born children a generation later, researchers found among the new generation a substantial increase in hospital admissions of children up to the age of four, a tripling of instances of asthma, a six-fold increase in both eczema and juvenile diabetes, as well as a doubling of cases of obesity. The study revealed that the number of children admitted to psychiatric hospitals also rose sharply, an increase of almost 50% in the number of under 10 year-olds seen by psychiatric services and a two-thirds increase for children aged between 10 and 14. Admissions of 15 to 19 year-old juveniles to psychiatric hospitals also increased. Though the increase of 21% was not as sharp, the figures are startling.

Paragraph 3

Crime is presently at the top of the political agenda in many developed nations. When crime statistics rise, governments and the media tend to place the blame on varied sociopolitical influences such as TV and film violence, poverty, lack of parental guidance, child abuse, frustration, the prison system, or the police. In fact, the blame has been attributed to many things, but never to faulty nutrition. Yet, as studies have increasingly shown, inappropriate nutrition can modify brain function in susceptible individuals and cause severe mental dysfunction, including manifestations of criminal and violent behaviour. It should be noted that not all negative behaviour manifestations are nutritional in origin. Sociopolitical influences do of course play a part, most likely a much greater one. However, inadequate nutrition and subclinical malnutrition seem to be two of the contributing factors in numerous physical and mental health problems of today. This could be at least partly rectified by reducing the wide use of non-essential food additives, which in turn would simply restrict the amount of non-nutritious foods presently on sale, resulting in a wider uptake of more nutritionally dense foods.

Paragraph 4

The main argument of food manufacturers and government officials for the importance of the use of preservatives is that without them foods would soon spoil. This argument is indeed quite reasonable. However, it is interesting to note that of the nearly 4,000 different additives currently in use, over 90% are used purely for cosmetic reasons and as colouring agents, with preservatives accounting for less than 2% of all additives, by number or by weight.

Paragraph 5

Another justification for the continued approval of the use of additives is based on the argument that they are present in foods on such a **minute** scale that they must therefore be completely harmless. This argument may be acceptable regarding additives with a reversible toxicological action; however, neither the human nor animal body is able to detoxify additives which have been found to be both mutagenic and carcinogenic. Therefore, even tiny doses of these additives, when consumed continuously, may eventually result in an irreversible toxic burden. This is quite unacceptable, particularly as the majority of these questionable agents belong to the food-colouring group.

Paragraph 6

Those against the use of non-essential food additives have voiced a number of recommendations including the banning of all cosmetic agents such as food colourants; clear labellings and warnings on all foods that include additives with carcinogenic and mutagenic properties; the banning of all food additives from foods which may be consumed by infants and or young children; stricter laws regarding TV advertising which encourages children to buy and eat unhealthy junk food; the re-introduction of free nutritious school meals, preferably using organic food; the inclusion in education curricula of specific lectures stressing the prime importance of good nutrition in both physical and mental health; and a law requiring all foods, drinks or medications currently exempt from declaring additives to be required to do so in future.

Part B - Text B2: Questions 11-19

- 11 The word 'processed' in paragraph 1 means
- A artificial.
 - B unnatural.
 - C unhealthy.
 - D altered.
- 12 According to the UK study in paragraph 2, which one of the following statements is TRUE?
- A Fifty percent of children under 10 have had recent psychiatric treatment.
 - B There has been an increase in psychiatric disorders in children.
 - C 10-14 year-olds are at greater risk of mental illness than other groups.
 - D Twenty-one percent of 15-19 year-olds are in psychiatric hospitals.
- 13 In the UK study, the group with the greatest increase in psychiatric admissions was aged
- A under 10.
 - B 10-14.
 - C 15-19.
 - D over 19.
- 14 Which one of the following statements is supported by information in paragraph 3?
- A Poor diet is most responsible for problem behaviour.
 - B Better nutrition would eliminate most negative behaviours.
 - C Problems in society are both mental and physical in origin.
 - D Social influences probably affect behaviour more than diet.
- 15 According to paragraph 3, food additives are
- A unnecessary.
 - B used unnecessarily.
 - C the main cause of nutritional problems.
 - D not present in nutritionally dense foods.

Questions

16 According to paragraph 4, which one of the following statements is **FALSE**?

- A Only a small percentage of additives are preservatives.
- B Ninety percent of food additives are colouring agents.
- C There are nearly 4,000 additives currently used in food.
- D The majority of food additives are non-essential.

17 The word 'minute' in paragraph 5 refers to

- A the time it takes the body to process additives.
- B the length of time the additives remain active.
- C the amount of additives present in foods.
- D the degree of harm caused by additives.

18 According to paragraph 5,

- A some food additives may have irreversible effects.
- B the body will reject food additives eventually.
- C food colouring presents no danger to the body.
- D there is no safe dosage of any food additives.

19 In paragraph 6, which one of the following is **NOT** recommended?

- A The banning of all food additives.
- B Healthy meals provided free at school.
- C More informative food-labelling.
- D Educating children about good nutrition.

END OF PART B – TEXT 2

END OF READING TEST



Reading sub-test

Part B – Answer key

Euthanasia

Sample Test

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Reading Part B: Text 1

Euthanasia

Answer Key

Total of 10 questions

- 1 D many health professionals in particular circumstances.
- 2 A ambiguous
- 3 B central
- 4 A Medical choices affecting when a patient dies are common.
- 5 C moral position of the doctor.
- 6 D 1.8% of deaths in Holland were due to euthanasia.
- 7 C Governments impose restrictive regulations on medical professionals
- 8 C doctors want freedom to act according to each situation.
- 9 B fear a negative perception of their profession.
- 10 A have made some people unsure about supporting euthanasia laws.

END OF KEY



Reading sub-test

Part B – Answer key

Food Additives

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Reading Part B: Text 2

Food Additives

Answer Key

Total of 9 questions

- 11 D altered.
- 12 B There has been an increase in psychiatric disorders in children.
- 13 B 10-14.
- 14 D Social influences probably affect behaviour more than diet.
- 15 B used unnecessarily.
- 16 B Ninety percent of food additives are colouring agents.
- 17 C the amount of additives present in foods.
- 18 A some food additives may have irreversible effects.
- 19 A The banning of all food additives.

END OF KEY