

THE UNIVERSITY OF SWAZILAND

DEPARTMENT OF ACADEMIC COMMUNICATION SKILLS

FINAL (MAIN) EXAMINATION 2010

TITLE OF PAPER: ACADEMIC COMMUNICATION SKILLS
COURSE CODE: ACS 102
TIME ALLOWED: TWO (2) HOURS
INSTRUCTIONS: WRITE THE NAME OF YOUR FACULTY ON
THE ANSWER SCRIPT
ANSWER ALL QUESTIONS
TOTAL MARKS: 100

This examination paper contains 8 pages including the cover sheet.

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INVIGILATOR

QUESTION 1: READING COMPREHENSION (50 MARKS)

Read the passage below and answer the questions that follow

We're our own worst enemy

Many perceived liabilities can be harnessed to advantage, writes Adrian Gore

1. The world is going through dramatic change, with the balance of economic power shifting from the West to the East.
2. Emerging countries such as the Brics - Brazil, Russia, India and China – are on the ascent, and the financial crisis has accelerated this rate of change. It is imperative South Africa grasps the opportunity and takes a leadership position among these nations.
3. We have the capacity and fundamental capabilities to do so. Our hosting of the World Cup illustrated this. **Paradoxically**, however, South Africans remain remarkably negative and sceptical. We are caught in a “will we/won't we survive?” paradigm, where we are constantly seeking affirmation of inevitable decline.
4. It is my view that South Africa's problems lie in these negative attitudes, not in its fundamentals. Importantly, these attitudes are not always rational – behavioural economics provides some substantiation for this.
5. When it comes to attitude, classical economics is based on the tenet that people act rationally and errors in their decision-making are random. Behavioural economics posits the opposite; that past experiences, prejudices and other factors lead people to behave irrationally and that their errors, driven by bias, are therefore systematic. Behavioural economics demonstrates that people frequently see the world in the way it has been framed for them, even when evidence emerges to the contrary.
6. It is precisely these behavioural forces that drive an irrationally negative perception of South Africa. We are framed in the contest of other poor, and often failing, African states which inextricably links our prospects to theirs. It is almost impossible for our past performance, or the facts, to alter this negative view.
7. Discovery's analysis of a popular international journal's coverage of South Africa over the past three years showed that out of a total of 77 articles, 57 focused on

negative issues like crime, political strife and HIV/Aids. Worse are the images, which typically depict dusty fields, dilapidated houses and decay – and almost devoid of any sign of sophistication. I do not believe this to be the result of malice; it is simply consistent with the way South Africa has always been framed.

8. The effect of this is devastating. It affects investment decisions, shortens horizons and promotes immigration – and, sadly, the cycle is **self-perpetuating**. We see its effects in the healthcare sector, so critical to the future. Our public healthcare is critically under-resourced, yet it has produced more than enough doctors to meet its needs. The sad reality is that more than half the doctors who graduated since 1980 are now working abroad.
9. Yet our potential cannot be questioned – the World Cup is evidence of this. Contrasting the widely held opinions ahead of the tournament against its ultimate success reveals the irrationality of people's views. Research showed that 70%-90% of those who visited South Africa rated us as "excellent" or "very good" across measures from accommodation to safety at the games.
10. Our performance from an infrastructure perspective was even more remarkable. We needed to build six new stadiums, a new airport (and major upgrades on two others), the Gautrain, and other transport infrastructure. Yet we excelled, delivering more than we had committed to in the bid document. We built six stadiums simultaneously in around 30 months and at an average cost of \$250-million. Compared to the Yankee Stadium, Wembley, the Allianz Arena and others, both the time scale and costs of South Africa's projects were significantly lower. The same holds true for the building of King Shaka International Airport and the Gautrain, versus similar projects internationally. Yet few people give South Africa credit for its ability to roll out large infrastructural projects quickly and efficiently.
11. The World Cup can teach us three important lessons in this regard: the need for vision, discipline, and to build "**skyscrapers**". The first two were largely imposed on us by Fifa. We were told "do it, and do it by this date", simple, but powerful. The third lesson, building "skyscrapers", is more subtle: when you build bold stadiums or launch the Gautrain, you invoke in people feeling of hope, inspiration and pride.
12. The question is, can we perform at the same level going forward?

Generally, we are **cynical** in our response. South Africa's intractable problems like crime, unemployment, HIV/Aids, racial intolerance and inequality, and the extent of these challenges makes the possibility of sustained excellence appear unrealistic to most of us. Yet any country has from its perspective, intractable problems. Consider, for example, that:

- Brazil has similar levels of crime to South Africa, and shocking levels of corruption;
 - India has serious infrastructural problems, and 45% of its massive population live on less than \$1.25 a day.
13. It's clear that a country's prospects cannot be defined by its problems alone. One must consider its opportunities too and look at the country's entire "**balance sheet**". This balanced approach is what will yield the attitude and leadership required to unleash a nation's full potential.
 14. If we start with what we have, including a progressive constitution, robust judiciary, strong private sector, a sound economic framework, and a beautiful country with incredible tourism potential, and build from there, much can be achieved.
 15. Many of our perceived liabilities, like our multi-ethnicity, can be harnessed to our advantage.

The US has done so in the guise of the "American way", which requires its people to be American first, regardless of their race or ethnicity. The "American way" liberates a uniquely powerful energy, of which President Obama's rousing "yes we can" is the most recent manifestation.

16. We have the same potential in South Africa with the "rainbow nation", which sets our difficult past of racial disunity against a future that celebrates our similarities. We need to harness these differences, because their power can be nuclear.

Similarly, when it comes to our other liabilities, such as crime, it is important to consider them in context.

17. Like many South Africans, I have been a victim of crime and do not deny its damaging impact. However, Discovery's analysis shows that the mortality and disability risks posed by crime are a fraction of those associated with everyday poor lifestyle choices like smoking, being physically inactive and overweight.
18. We have much to be optimistic about. Things are better than we perceive. Our studies show that in terms of standards of living over the past 15 years, it is far better to have been in South Africa than in any of the four Bric countries.
19. Therefore, our nation's pessimism has little to do with our past or present performance, our capabilities or our net assets. It is more about our fears for where we may be heading, and that's why attitude and leadership matter so much right now. This is a role not just for government, but for business and civil society too:

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1. We need a positive and bold vision for our country. It sets a course for success that is self-perpetuating;
2. We must build upon the "Rainbow Nation", wherein we celebrate our similarities and embrace our differences;
3. We need discipline, and not just in dealing with issues like crime, the symbolism of fixing potholes is important too;
4. Importantly, we need to build more "skyscrapers". We need to make it clear we are on the ascent, things are getting better, and anything is possible. South Africa can and must excel.

Ref. Sunday Times August 29 2010 p.9

Read the following passage carefully and in not more than **200 words** write a summary outlining reasons why economically disadvantaged Americans are more susceptible to cancer. Do not copy sentences from the passage.

NOTE: Marks will be awarded for clarity of expression and orderly presentation of ideas.

Can Poverty Cause Cancer?

Adapted from: Fahey, T.D.; Insel, P.M; Roth, W.T. (2003). **Fit and Well: Core Concepts and Labs in Physical Fitness and Wellness**. Fifth Edition. New York: McGraw-Hill. p. 337.

Americans with low incomes are more susceptible to cancer and are also more likely to die of it, even if their condition and treatment are similar to those of more affluent cancer victims. Why does cancer afflict the economically disadvantaged so disproportionately? A primary factor is lifestyle. People of low socioeconomic status are more likely to smoke, abuse alcohol, and eat high fat foods – all of which are associated with cancer. These unhealthy behaviours usually begin early: One study found that 63% of teenagers of parents with low incomes engage in two or more of five cancer-related behaviours: smoking, inactivity, an inadequate intake of fruits and vegetables, excessive fat consumption, and alcohol use. The rates of these behaviours among adolescents of more affluent parents are significantly lower.

However, lifestyle differences account for only about 13% of the gap in death rates between Americans with high and low incomes. Many of the cancer-related threats that people with low incomes face are difficult or impossible to avoid. They may be forced to live and work in unsafe or unhealthy environments. They may have jobs, for example, in which they come into daily contact with carcinogenic chemicals, and they may not have been trained in handling them properly. They face similar risks in their homes and schools, where they may be exposed to asbestos or other carcinogens every day.

Another reason is lack of information. Studies have found that people with low incomes are less exposed to information about cancer, less aware of its early warning signs, and less likely to seek medical care when they have such symptoms. They may also be less

able to respond to the information they do have: Many low-income people know they should eat nutritious foods and get regular checkups, but they may not be able to afford such foods, and may not have transportation or access to health care facilities. A study comparing low-income Americans and Canadians found that Canadians in the poorest third of the population economically were about 35% more likely to survive cancer than similar Americans. The reason may be Canada's system of universal health care, which ensures access to treatment regardless of income.

But even poor health habits and environmental factors don't completely explain the high cancer mortality rates among the economically disadvantaged. One study of cancer patients found that chemotherapy was less effective on the tumours of the poorer patients. They had a lower rate of cancer remission than wealthier patients, even when the latter had more extensive disease. One possible explanation for these statistics is the high levels of stress associated with poverty. Stress can impair the immune system, the body's first line of defence against cancer. The link between poverty stress, and cancer mortality in humans has not been proven, but studies have shown a link between stress and other illnesses.

What can be done about reducing cancer and the rate of cancer mortality in low income populations? Educating people about prevention is clearly important and elementary schools and high schools are places where people could be reached in time to encourage healthy habits and prevent bad habits before they begin. However, people from lower socioeconomic groups tend to have a high rate of school dropout. Furthermore, most people have a difficult time worrying about a disease they might get in 10 or 20 years when their immediate is survival.

For these reasons, some medical scientists look to policy makers for solutions. They maintain that living and working conditions in the inner cities must be improved and that access to quality health care must be assured for all Americans. Then even without new miracle drugs or medical breakthroughs the United States will see a real decrease in cancer rates in low-income populations.