

Please check the examination details below before entering your candidate information

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Pearson Edexcel International Advanced Level

Time 1 hour 45 minutes

Paper reference **WEN01/01**

English Language

International Advanced Subsidiary

UNIT 1: Language: Context and Identity

You must have:
Source Booklet (enclosed)

Total Marks

Instructions

- Use **black** ink or ball-point pen.
- **Fill in the boxes** at the top of this page with your name, centre number and candidate number.
- Answer **all** questions.
- Answer the questions in the spaces provided
– *there may be more space than you need.*

Information

- The total mark for this paper is 50.
- The marks for **each** question are shown in brackets
– *Question 1 (35), Question 2 (15)*
– *use this as a guide as to how much time to spend on each question.*

Advice

- Read each question carefully before you start to answer it.
- Try to answer both questions.
- Check your answers if you have time at the end.

Turn over ►

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Q:1/1/1/1/1/1




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SECTION A

Read Texts A and B in the Source Booklet before answering Question 1.

Write your answer in the space provided.

1 Text A is an edited written record of a talk delivered at a TEDMED conference in 2016 by Mona Hanna-Attisha, a paediatrician and university professor in Flint, Michigan, USA.

Text B is an edited extract of the personal story of 12-year-old Erika Makalli, who lives in Tanzania, Africa. Her story was published on the *WaterAid* website in 2014.

Analyse and compare how the language of **both** texts conveys personal identity. You should refer to:

- relevant language frameworks
- concepts and issues such as social, cultural and gender factors
- contextual factors such as mode, field, function and audience.

(35)

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(Total for Question 1 = 35 marks)

TOTAL FOR SECTION A = 35 MARKS



SECTION B**Write your answer in the space provided.**

- 2** Write an article for a local school/college website encouraging students to support a campaign for the provision of clean drinking water.

In addition to your own ideas you must refer to material from at least one of the texts in the Source Booklet.

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(Total for Question 2 = 15 marks)

TOTAL FOR SECTION B = 15 MARKS
TOTAL FOR PAPER = 50 MARKS



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Time 1 hour 45 minutes

Paper
reference

WEN01/01

English Language

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UNIT 1: Language: Context and Identity

Source Booklet

Do not return this Source Booklet with the question paper.

Total Marks

Turn over ►

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Text A

This is an edited written record of a talk delivered at the annual TEDMED conference in 2016 by Mona Hanna-Attisha, a paediatrician and university professor in Flint, Michigan, USA. The TEDMED Foundation is the independent health and medicine edition of the TED (Technology, Entertainment, Design) organisation. From 2014 Flint experienced a water crisis after the city sourced its drinking water from a different supplier. Due to insufficient water treatment, lead from water pipes entered the drinking water, exposing more than 100,000 residents to elevated lead levels.

Meet Lily. She's a daughter of Flint. She just came in for her four-year check-up. She can say her name, count to ten, catch a ball. She's gorgeous, strong, smart and brave.

Lily was born into a city that was almost bankrupt; born into a city taken over by state-appointed emergency management and that emergency manager's job was to save money no matter what the cost. They severed a half-a-century relationship with fresh pre-treated Great Lakes water and started drawing water from the local Flint River. Flint River water wasn't being treated properly. It was missing an important ingredient called 'corrosion control'.

The heroic people of Flint raised their voices and our heroic kids raised their voices and they raised their jugs of brown water. Those voices were ignored for 18 months. The people of Flint were told to relax, that nothing was wrong while our children, like Lily, were drinking contaminated water in a city that is literally in the middle of the Great Lakes, the largest source of fresh water in the world.

This corrosive, untreated water created a perfect storm for lead to leach out of our plumbing and into the bodies of our children. We know what lead does. We've known what lead has done for centuries. It impacts cognition and behaviour, how we think and how we act, and we now know that even the smallest dose can cause tremendous damage. There is no safe level of lead and it's not just the Flint problem. Our kids in Flint, our kids in Detroit, our kids in Chicago, our kids in Baltimore, our kids in Philadelphia. Our country's most vulnerable children are already burdened with higher rates of lead exposure and every other toxic stress that threatens their future. It's an environmental and a social injustice.

When we first stood up with proof that this corrosive, untreated water was leaking lead into the bodies of our children, the state of Michigan tried to discredit me. But you don't mess around with kids. And you don't mess around with lead. And you don't mess around with paediatricians. Especially this one.

As physicians we have taken an oath to stand up as the healers and the protectors. We were fighting for our children and this was not a fight we could lose. Not on my watch. We fought back with science, with hard facts and with evidence and finally we proved that lead was increasingly in the bodies of our children. There is no magic pill for lead but we needed to figure out how to best preserve the tomorrows of our children. And this begins our story of hope.



We are working on a new dream to build a model Public Health Program. To surround our kids with every evidence-based intervention to promote their development and to mitigate the impact of this exposure with family support, home visiting, early literacy, universal preschool school health nutrition and health care for all. It is investing in our kids, especially our youngest and our most vulnerable. We know that children are resilient; they are growing and they are moving forward every day but sometimes they need our voice and they need our strength to help make them a better tomorrow. When we look at our kids, our kids like Lily, we see the way forward.

Just a few months ago teachers from a toddler classroom in Flint came to visit me in clinic. They came to bring me a chandelier made out of water bottles. We have a lot of empty water bottles in Flint. It was a gorgeous multi-coloured chandelier and it beautifully swayed in the wind and it captured the light. These kids, these two-year-olds, made beauty out of tragedy. The chandelier now hangs in my clinic. It serves as a daily reminder that our work in Flint is just beginning but like our kids, we are also going to turn a tragedy into something beautiful.

Thank you.

Text B

This is an edited extract from the personal story of Erika Makalli, a 12-year-old girl from Tanzania, Africa. Erika's account is taken from a collection of the personal stories of people whose lives have been improved by access to clean water and sanitation through the provision of communal tapstands. It was published on the *WaterAid* website in 2014. *WaterAid* is an international charity, a non-governmental organisation, focused on water, sanitation and hygiene.

Hello Erika. What was your life like before the village had a tapstand?

"Before we got clean water in the village my life was so very different. I was constantly sick and had horrible, itchy skin because I could never wash properly. I was always suffering with stomach cramps and diarrhoea."

Where did you get your supply of water?

"I had to get up at 4am and walk a long distance to find water. It took two hours and I could only collect a small amount of water to take home. That meant that Mum had to spend most of the day finding water so that we'd have enough to drink and cook with. I used to try and rush to get to school and wouldn't be able to wash or have any breakfast beforehand. Most of the time I missed school altogether because I was sick or just exhausted. There were so many diseases in this village."

What difference has having a steady supply of clean water in your village made to your life?

"I go to get water from the tapstand now. It takes me 15 minutes to go and bring back one 20 litre bucket of water. I usually do this about three times a day. I meet my friends at the tapstand so we get to have a chat. Then I wash and prepare breakfast with the clean water. We always wash our hands now before eating which keeps everything clean and healthy. After breakfast, at about 6 am, I leave for school which is a 15 minute walk. I don't have to take water to school with me as the school has a tapstand."

You said your school also has a tapstand now – how has this changed the school day?

"As I am Prefect, I now check the toilets are clean and that the garden is watered. I start lessons at 7 am. Lunchtime is at noon. We get 1½ hours off so I walk home. When I get home Mum is usually doing the washing so I prepare lunch. By 1.30 pm I leave for school again. Lessons finish at 3.30 pm. We all stay on after school to water the garden and to clean the grounds and toilet block. It's great to have a lovely clean school with flower beds and clean pathways."

So having a tap in the village now means you have time to go to school?

"If I still had dirty water I wouldn't be going to school anymore. I probably wouldn't have had any real education at all. Also, most of my friends would probably also have died from the diseases we used to get. Life would be miserable. I feel I can at last look forward to a brighter future. Perhaps I will be a health and hygiene teacher when I leave school."

Glossary

Tapstand: a public tap that distributes water from one or more taps to many users.

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Sources taken/adapted from:

Text A: Source from: <https://www.youtube.com/watch?v=pJQvNbYeSws>

Text B: © WaterAid

