



General Certificate of Education  
Advanced Level Examination  
June 2012

## General Studies (Specification B)

## GENB3

Unit 3 Power

### Insert

#### SOURCE MATERIAL

These texts are to be read in conjunction with unit GENB3.

The questions arise from the texts.

Use the texts, your own knowledge and examples to answer **both** questions in Section A, and **either** Question 03 **or** Question 04 from Section B.

## Text A

Union for International Cancer Control (UICC)

### THE WORLD CANCER DECLARATION

The Declaration calls on the world to take immediate steps to reduce the global cancer burden by committing to the Declaration targets and providing resources and political backing for the priority actions needed to achieve them.



#### Targets by 2020

- **Sustainable delivery systems** will be in place to ensure that effective cancer control programmes are available in all countries.
- **The measurement of the global cancer burden** and the impact of cancer control interventions will have improved significantly.
- **Global tobacco consumption**, obesity and alcohol intake levels will have fallen significantly.
- **Public attitudes towards cancer** will improve and damaging myths and misconceptions about the disease will be dispelled.
- **Many more** cancers will be diagnosed when still localised through the provision of screening and early detection programmes and high levels of public and professional awareness about important cancer warning signs.
- **Access to accurate cancer diagnosis**, appropriate cancer treatments, supportive care, rehabilitation services and care will have improved for all patients worldwide.
- **Effective pain control measures** will be available universally to all cancer patients in pain.
- **The number of training** opportunities available for health professionals in different aspects of cancer control will have improved significantly.
- **Emigration of health workers** with specialist training in cancer control will have reduced dramatically.
- **There will be major improvements** in cancer survival rates in all countries.

#### Priority Actions: Prevention and early detection

- **Increase efforts** to reduce tobacco consumption by encouraging governments to implement fully and enforce the Framework Convention on Tobacco Control, which sets out proposals for reducing tobacco consumption.
- **Raise awareness** about the need for culturally sensitive cancer risk reduction campaigns, along with public and professional education about cancer warning signs. Push governments to implement policies that will support risk-reducing strategies at a community level and enable individuals to make more informed consumption choices and adopt healthier behaviour.
- **Encourage governments** to implement measures to reduce people's exposure to environmental and occupational causes of cancer.
- **Undertake actions** to ensure that vaccines and other strategies that are shown to prevent cancer-causing infections are made more widely available.
- **Advocate for the provision of** affordable screening programmes for which there is evidence of effectiveness in the population in question.

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## Text B

### World Trade

#### Why do we care about Trade?

Trade generates wealth and links the lives of everyone on the planet. Yet millions of people in poor countries are losing out. Why? Because the rules controlling trade heavily favour the rich nations that set the rules.

#### Why Campaign on Trade?

World trade rules have been developed by the rich and powerful on the basis of their narrow commercial interest. Rich countries and powerful corporations have captured a disproportionate share of the benefits of trade, leaving developing countries and poor people worse off. Instead of robbing half the world of a proper living, trade could help millions of poor farmers and workers in developing countries and change their lives for good. But this will not happen unless countries change the way they operate.

#### Examples of how rich countries protect themselves

##### Example 1



Workers in Mali, Africa, loading cotton onto a truck.

Cotton farmers in the USA are protected by a quota system. The US government tries to ensure that these farmers receive a stable income. If the price of raw cotton in the USA falls below a certain level, then the government will begin to limit the amount of cotton imported into the country.

This makes life difficult for cotton farmers in poorer countries because they are uncertain from year to year how much of their cotton will be bought.

##### Example 2

The European Union pays subsidies to Europe's sugar-beet farmers. This encourages them to produce so much sugar that the EU accounted for 40 per cent of world sugar exports in 2001\*. This means that countries such as Mozambique, which actually produce sugar more cheaply, have trouble selling their sugar.

Source: adapted by the publisher from 'What is free trade?' with permission of Oxfam GB, Oxfam House, John Smith Drive, Cowley, Oxford, OX4 2JY: [www.oxfam.org.uk/education](http://www.oxfam.org.uk/education). Oxfam GB does not necessarily endorse any text or activities that accompany the materials.  
Photo by RHODRI JONES

\* NB However, in 2005 the EU agreed to reduce its subsidies because of complaints from the World Trade Organisation

## Text C

### What is Nationalism?

The concept of nationalism is something which we see examples of all around us, every day of our lives: national flags at sporting events, adverts urging us to choose a particular country for our vacations, comedic representations of foreigners on television. More seriously, we see its effects in wars and terrorist actions across the globe. However, it is an idea that, whilst most would claim to understand, few can actually put into words.

Nationalism is so hard to explain because it cannot be fitted into just one box. It is similar to patriotism, but whilst patriotism could be defined as the love of one's country, nationalism focuses more on what shape that country should take. Because of this, it not only encompasses cultural and emotional aspects, but has political, economic and historical implications also. Nationalism could be described as the support of a nation, but every nationalist movement has different aims and origins, whether they be desires for autonomy, political representation, or self-preservation. Even nationalists cannot agree on exactly what constitutes nationalism, as beyond this shared desire for the success of the nation, they have very little in common.

On the positive side, nationalism is said to be an expression of identity. National identity is based on history, culture and often language. Nationalism can be seen as the defence of this identity; the defence of the right of a nation to remain or become a recognised entity. It can be classed as standing against the forces of oppression and tyranny.

The negative results of nationalism, however, cannot be denied. It can cause division in societies when one nationality classes itself as superior to another. This also generates racism, and can often lead to violent and bloody conflicts. On the personal level, individuals may be persecuted because other individuals or groups believe their nationality to be inferior, or that it poses a threat.

Source: extract from an article by KATY HUGHES, May 2008, published on [www.suite101.com](http://www.suite101.com).

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## Text D

### Causes of health inequalities: Why are they important to our nation?

The relationship between social class and what are now called health inequalities is clear from simple observation. Health inequalities affect not just adults but children too. The reason why they occur merits discussion.

- The question of **post hoc ergo propter hoc** (chicken or the egg) asks if it is the low social class that has led to the poor health or if poor health has led to a deterioration of social status. Studies of patients with schizophrenia showed that they tend to belong to the lower social classes but this is much less marked for their fathers and this suggests that it is the disease that has caused the low social class rather than the low social class that predisposes to the disease.
- The **material explanation** blames poverty, poor housing conditions, lack of resources in health and educational provision as well as higher-risk occupations for the poor health of the lower social classes. Poverty is demonstrably bad for health. Life expectancy is low in poorer, less developed countries, but the diseases that afflict the developed world tend to be related to obesity and tobacco and injudicious consumption of alcohol. Within the wealthy nations we find that these diseases are most prevalent in their poorest regions and the lower social classes.
- The **cultural explanation** suggests that the lower social classes prefer less healthy lifestyles, eat more fatty foods, smoke more and exercise less than the middle and upper classes. They have less money to spend on a healthy diet although this is probably rather less important than a lack of knowledge of what is a healthy diet. People who have been on their feet all day in shops or factories are less likely than office workers to seek activity in the evening although their daily work has not been adequate to exercise the cardio-respiratory system. Despite the phrase *drunk as a lord*, the association between binge drinking and social class has been readily noted and Friedrich Engels wrote that “Drink is the bane of the working classes”. Before the first report on *Smoking and Health* by the Royal College of Physicians there was little difference in the incidence of smoking between social classes. Now there is a distinct gradation across social classes. It may seem reasonable to suggest that, when money is short, the first place for economies should be in the consumption of alcohol and tobacco, but surveys have shown that in times of economic recession there is no decline in demand. There is evidence that risk behaviours are unevenly distributed between the social classes and that this contributes to the health gradient. Health is also better in those of higher intelligence as measured by IQ but this does not account for all of the disparity.

Source: adapted from an article by DR LAURENCE KNOTT, ‘Health and Social Class’  
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