**P310/1**

**LITERATURE**

**IN ENGLISH  
PAPER 1**

**JUNE, 2018**

**3 HOURS**

**SMG SCHOOL**

**Uganda Advanced Certificate of Education**

**LITERATURE IN ENGLISH**

**(PROSE AND POETRY)**

**PAPER 1**

**3 HOURS**

**INSTRUCTIONS TO CANDIDATES:**

* *All sections are to be attempted.*
* *Candidates are advised to spend 70 minutes (1 hour 10 minutes) on section I and 55 minutes on section II and III.*
* *Read section I twice and then answer the questions. There is no need to read the whole paper first.*
* *Do the same for section II and then section III*

**SECTION I**

Let me begin with a **categorical statement** so that those of you who may wish to ruminate on the unsolved problems you left at home, those of you who wish to catch up on your sleep, and those who feel the need of a coffee-break, will all know what I intend to say and will be unencumbered by the arguments pro and con. Initially, any new method of financing medical care is likely to have a negative effect on medical schools. If that statement does not **instruct** you, at least it may shock you. I make this statement in all seriousness because I think the time has come to examine the unique needs of the teaching hospital and to plan for its funding in a fashion which facilitates rather than distorts its purpose.

Medical schools are experiencing a financial crisis today because of inflation and the cutbacks in National Institutes of Health (NIH) support, and they are desperately looking for other means of support. Such a **climate** makes them particularly uncritical of any new source of funding and, if there are any monies available via Medicare, Medicaid, or special programs for community medicine,it is likely to be sought after with little thought given to the long-term impact of the new monies. Perhaps it is important, therefore, to reflect on some of the problems we may be creating for our schools, and important to ask if we have learned anything from our recent experience with the NIH. There is a figure which I return to again and again because it never ceases to amaze me. According to the final Report of the commission on Medical Education, issued in the year 1926-27, the total of the budgets of the 63 medical schools in the United States and Canada was $11,308,800, a figure less than the annual budget of the Harvard Medical School today. Even if one **allows for the decreasing** value of the dollar in the decades since that study was done, it is evident that medical schools are far better funded today, and yet they appear to be in more serious financial trouble than in the 1920’s. Why does this seem to be true? The answer is complicated, but it is not unrelated to the manner in which medical schools and teaching hospitals have been funded by the NIH.

Iam old enough to recall some of the worry expressed about increased funding of research by the NIH. It was thought that government would **ultimately dictate** policy to universities and medical schools once they became dependent on the federal purse. This concern is still expressed, but the fact is that we, the faculties, turned out to be the villains. After all, policies set by study sections and councils of various institutes were largely dictated by faculty members, not by Washington bureaucrats. There is a kind of ironic justice to the fact that in our democracy the ‘’government” we feared turned out to be our own faculty colleagues.

Those who made policy were particularly worried that medical schools and universities would take the money provided by the Federal Government for research, and would fail to give investigators enough time or enough freedom to pursue their investigative work. Therefore, grants were made to individuals or groups of individuals in such a way that it was clear to everyone that investigators were being funded and not the university. Support was extended to subspecialty groups and even departments, but for particular missions having to do with research and research training and not for overall support of department activities.

The kind of thinking which developed from the philosophy of funding is best exemplified by debates about the size of the medical schoolstudent body. Any increase in the number of medical students is hotly debated by nearly everyone. In contrast, the number of graduate students is dictated more by the amount of funding received by a basic science departments than by other considerations, although there is some discussion among the participating departments about numbers. The number of postdoctoral fellows (or clinical fellows) is a decision made by individual investigators or program directors without any outside debate.

Funding directed toward categorical projects and a program encouraged in dependent planning by departments or by sections in departments, and the recruitment of faculty was more closely related to the needs of such programs than the overall needs of the school or the teaching hospital. Only curriculum planning for medical students, consideration or the size of the medical student body, and parking were matters of overall concern; and the ability of the medical schools to plan in a coherent way to meet the total range of its commitments was **sharplycircumscribed.** Certainly**,** the additional faculty recruited did improve the teaching environment, and funding via the NIH enabled medical schools to increase the number of full-time faculty in both preclinical and clinical departments. It is not my **intentto belittle** the very substantial contributions of the NIH, but I do wish to re-emphasize that the pattern of funding and the philosophy of support by the NIH tended to fragment planning and to diminish the sense of responsibility of individual faculty members for the general welfare of the school. It was not uncommon for a faculty member to feel his **primary allegiance** was to the NIH and his secondary allegiance to the university. “After all, the government pays me,and the medical schoolexploitsme, ‘was not an uncommon feeling.

Thus, it was not surprising that the inevitable**day of reckoning** would find medical schools ill prepared to readjust to the cutbacks in funding by the NIH. I say inevitable because it was quite clear that a fifteen percent increase in the NIH budget could not continue indefinitely unless the country was prepared to have the budget for medical research exceed the Gross National Product. As so often happens, however, cutbacks did not occur in response to any prepared plan, but as the result of crisis; and suddenly there was a desperate need to find new sources of funding to support the **jerry-built** medical school structure, which was the heritage of faculties concerned with their own programs first and the fate of the university second.

*From:* ***Journal of Medical Education Volume 45***

**Questions**

1. Suggest a suitable title for the passage and give a reason for your suggestion. (4 marks)
2. Explain the ways of financing medical research described in the passage. (4 marks)
3. What according to the writer are the benefits and loopholes of NIH, directly funding specific projects and programmes rather than funding the Medical School? (8 marks)
4. Explain what the writer means by “ironic justice to the fact that in our democracy the “government” we feared turned out to be our faculty colleagues.” (4 marks)
5. How did the need for finding new sources of funding medical education come about? (4 marks)
6. Explain the meaning of the following words and phrases as used in the passage.
7. categorical statement
8. instruct
9. climate
10. allow for the decreasing
11. ultimately dictate
12. sharply circumscribed
13. intent to belittle
14. primary allegiance
15. day of reckoning
16. jerry-built

**SECTION II**

Several days had elapsed. We no longer thought about the selection. We went to work as usual, loading heavy stones into railway wagons. Rations had become more meager: this was the only change.We had risen before dawn, as on every day. We had received the black coffee, the ration of bread.We were about to set out for the yard as usual. The head of the block arrived, running.

“Silence for a moment. I have a list of numbers here. I’m going to read them to you. Those whose numbers I call won’t be going to work this morning; they’ll stay behind in the camp.”

And, in a soft voice, he read out about ten numbers. We had understood. These were numbers chosen at the selection. Dr. Mengele had not forgotten.

The head of the block went towards his room. Ten prisoners surrounded him, hanging on to his clothes:

“Save us! You promised…! We want to go to the yard. We’re good workers. We can…we will….”

He tried to calm them to reassure them about their fate, to explain to them the fact that they were staying behind in the camp did not mean much, had no tragic significance.

“After all, I stay here myself every day,” he added.

It was a somewhat feeble argument. He realized it, and without another word went and shut himself up in his room.

The bell had just rung.

“Form up!”

It scarcely mattered now that the work was hard. The essential thing was to be as far away as possible from the block, from the crucible of death, from the centre of hell.

I saw my father running towards me. I became frightened all of a sudden.

“What’s the matter?”

Out of breath, he could hardly open his mouth.

“Me, too…me, too…! They told me to stay behind in the camp.”

They had written down his number without his being aware of it.

“What will happen?’’ I asked in anguish.

But it was he who tried to reassure me.

“It isn’t certain yet. There’s still a chance of escape. They’re going to do another selection

today …a decisive selection.”

I was silent.

He felt that his time was short. He spoke quickly. He would have liked to say so many things. His speech grew confused; his voice choked. He knew that I would have togo in a few moments. He would have to stay behind alone, so very alone.

“Look, take this knife,” he said to me. “I don’t need it any longer. It might be useful to you. And take this spoon as well. Don’t sell them. Quickly! Go on. Take what I’m giving you!”

The inheritance.

“Don’t talk like that, father.” (I felt that I would break into sobs.) “I don’t want you to say that. Keep the spoon and knife. You need them as much as I do. We shall see each other again this evening, after work.’’

He looked at me with his tired eyes, veiled with despair. He went on:

“I m asking this of you….Take them. Do as I ask, my son. We have no time….Do as your father asks.”

Our kapo yelled that we should start.

The unit set out toward the camp gate. Left, right! I bit my lips. My father had stayed by the block, leaningagainst the wall. Then he began to run, to catch up with us. Perhaps he had forgotten something he wanted to say to me…. But we were marching too quickly… Left, right!

We were already at the gate. They counted us, to the din of military music. We were outside.

The whole day, I wandered about as if sleep- walking. Now and then Tibi and Yossi would throwme a brotherly word. TheKapo, too, tried to reassure me. He had given meeasier work today. I felt sick at heart. How well they were treating me! Like an orphan! I thought: even now, my father is still helping me.

I did not know myself what I wanted –for the day to pass quickly or not. I was afraid of finding myself alone that night. How good it would be to die here!

At last we began the return journey. How I longed for orders to run!

The military march. The gate.The camp.

I ran to Block 36.

Were there still miracles on this earth? He was alive. He had escaped the second selection. He had been able to prove that he was still useful….I gave him back his knife and spoon.

*(Extracted from* ***Night*** *by Elie Wiesel)*

**Questions**

1. Identify the narrator. (02 marks)
2. Describe the emotional reactions of the different characters in the passage to the implications of the selection. (10 marks)
3. Comment on the effectiveness of the author’s style in the passage. (15 marks)
4. Describe the speaker’s mood in the passage. (06 marks)

**SECTION III**

**Mother to Son** *by* Langston Hughes

Well, son, I’ll tell you:

Life for me ain’t been no crystal stair.

It’s had tacks in it,

And splinters,

And boards torn up.

And places with no carpet on the floor—

Bare.

But all the time

I’se been a-climbin’ on,

And reachin’ landin’s

And turnin’ corners,

And sometimes goin’ in the dark

Where there ain’t been no light.

So boy, don’t you turn back.

Don’t you set down on the steps

‘Cause you finds it’s kinder hard.

Don’t you fall now –

For I’se still goin’,honey,

I’se still climbin’,

And life for me ain’t been no crystal stair.

**Questions**

1. What is the subject matter of the poem? (08 marks)
2. Comment on the poet’s language and style in the poem. (15 marks)
3. What is the speaker’s attitude in the poem? (06 marks)
4. Describe the tone of the speaker in the poem. (04 marks)

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