



**FIJI PUBLIC SERVICE**

**EXAMINATION –S & U**

**30<sup>th</sup> August – 2006**

**PAPER A – COMMUNICATION SKILL**

**Time: 2.5 Hours {9am- 11.40am}  
(10 min. reading time)**

**Total Marks: 100**

**Instructions to Candidates**

1. Ensure that your **index number is written on** the top right hand corner of every sheet of paper you use. Your name **must not** appear anywhere on the answer script.
2. You may use blue or black ink or ballpoint pen. You **must not** use a red pen or pencil and answers written in either of this, the answer script will not be marked.
3. Read each question & instruction very carefully. Note the allocation of marks to each question and distribute your time accordingly.
4. **Ten (10) minutes** is allocated to read the questions, thus, you **must not** start writing until you are told.
5. Use of Mobile phone in the class/ hall is not permitted. It should be switched off before the commencement of the exam.
6. Please note that a candidate will be disqualified from sitting or to continue with the examination if one does not comply with the above and other instructions announced by the invigilator.

**QUESTION 1****COMPREHENSION**

[15 marks]

*Read the passage below and answer the questions that follow:*

**When Talk Isn't Cheap.**

To date HIV/AIDS has claimed an estimated 37 million lives with new infections believed to be around 13,500 each day and deaths from AIDS-related illness are around 8,500 each day. It is estimated that by 2010, 25 million children would have been orphaned by AIDS. AIDS is the world's fourth leading cause of death.

Unlike most epidemics where the mode of transmission is normally through a singular mode, HIV/AIDS has the notoriety of making its way through several channels - blood and blood products, vaginal and seminal fluids, and from mother to child during birth.

HIV cannot be contracted if Universal Precautions are followed. The use of glove when handling bleeding people and using condoms during sexual intercourse including oral sex, is paramount. Normal everyday living such as sharing food, sleeping in the same bed, hugging and sharing the same toilet facilities does not transmit the virus from person to person.

The circumstance under which HIV is transmitted varies. It could be through unprotected (i.e. without condom) oral, anal and vaginal sexual intercourse with an infected person, receiving infected blood or blood products through transfusion, sharing body piercing needles or intravenous injections, through needle stick injury if you pierce yourself with an instrument that already has bloody from an infected person on it, through a drop of blood from an infected person right onto an open cut on your hand and other exposed parts of your body. And because most people don't routinely test themselves for HIV, it is not known to what extent the disease is actually present in any one community.

Once contracted, HIV work at destroying the specialised white blood cells (B-cells and T-cells) that the body needs to stave off infections. HIV survives by hiding inside these cells in the form of the host deoxyribonucleic acid (DNA), the basic constituent of the gene in each cell. It multiplies within these cells killing it in the process.

The hallmark of HIV infection is the progressive loss of a specific type of immune cell called the T-helper or CD4 cells. The replication continues to the point where the once healthy white cells are unable to fight off any infection - even the flu.

HIV/AIDS is not like other sexually transmitted infections (STIs) where within the first few days of encounter, symptoms present themselves. Fortunately, most STIs can be cured or managed with an effective inexpensive drug regime, diet and lifestyle change.

HIV on the other hand can leave a person asymptomatic for between 10 to 12 years and a few much longer. By not presenting any outward signs of infection the person can unwittingly go on infecting others without realising it, the only way to know for certain is to have a blood test done.

HIV, once it enters the bloodstream, takes a few weeks to sero-convert i.e. to change from HIV negative to HIV positive, the sero-conversion period is usually marked by flu-like symptoms a few weeks or months after contracting the virus. During the window period which can take anywhere between six weeks and three months, a person testing for HIV at this time may return a negative test. Not to be lulled, he/she is still infectious.

What sets HIV/AIDS apart from other STIs is that the drugs just for managing the disease can cost as much as USD\$1,500 a month. This is way beyond anything that our health care system can afford. The average wage of FJD\$400 - \$500 a month also places this far out of the reach of the ordinary person who may wish to pay privately for treatment.

Fortunately, Fiji is a beneficiary under the Global Fund for IADS, Tuberculosis, and Malaria (GFATM) through which 13 people living with HIV/AIDS (PLWHAs) are currently undergoing antiretroviral treatment (ART) at no cost. ARTs are toxic and its side effect is not pleasant.

The mutating nature of the virus is one of the reasons why a vaccination has not been developed as yet. It is also the reason why that even if both couples are HIV+ they still need to use condoms during sexual intercourse because of the risk they run in re-infecting each other and creating a more virulent strain of HIV.

HIV/AIDS is also the reason why globally there has been a surgence of tuberculosis (TB) at a time when we thought we had beaten one of the oldest scourges through multi-drug therapy (MDT).

TB is a common OI among PLWHAs. The World Health Organisation (WHO) estimates that there will be a billion new TB infections by 2020 and 35 million deaths from the same. Strains of MDT resistant TB have been discovered because of a new host population made susceptible by HIV/AIDS.

The possibility that other communicable diseases could also mutate in this vulnerable population and become resistant to conventional treatment is worrying and very, very real.

Up until 1 February this year Fiji recorded 205 cases of HIV/AIDS. The number is a cumulative total since the first four cases were recorded in 1989. The cases detected so far shows a prevalence rate of 0.02% of the population (based on an estimate of 880,000 people), which means that the disease is not yet at an epidemic level in Fiji. An epidemic would be declared when prevalence reaches 1% of the population. The conservative estimate used by the WHO is 15 unknown to every known case of HIV/AIDS.

In 2004 and 2005 however, new case maintained a steady 29 respectively. But in the first month of this year, five new cases were detected. Taking that as the monthly average, it could be expected that there will be 60 new cases by the end of the year! However, at the time of writing this article, no other new cases were detected, it is possible that we have achieved that plateau where new cases will begin to decline but on the other hand, it is also possible that it is just a lull before the proverbial storm. Complacency is not an option.

To give us an insight as to how extensive this problem may be, let's look at the average infection rate for the two most common STIs - Syphilis and Gonorrhoea - which has averaged around 1,736 cases per annum in Fiji for the last six years (2000 - 2005). The vulnerability to HIV/AIDS increases if the person already has one of these other STIs. The reverse is also true and there have been instances where known PLWHAs have come back to clinic and tested for one of these STIs afterwards.

By gender, men represent 59% (120 cases) and women, 41% (85). Anecdotal evidence in Fiji shows that men are likely to have a greater number of female partners than vice versa. So where are the women?

One of the reasons why women are not represented in the expected numbers could be that they are showing symptoms of the disease much later than men hence the only time they are likely to be tested is when they go to the ante-natal clinic or when they are really ill, or that a number of these positive men are in fact bisexual.

Ethnically, Fijians represent 83% (170) cases, Indo-Fijians 13% (26) and Others 4% (9) of those who have contracted HIV/AIDS. While this may cause a gross generalisation that HIV/AIDS in Fiji is a largely Fijian disease, we would be making a fatal assumption. Indo-Fijians showed a staggering increase of 300% in the detection of six new cases in 2005 compared to two new cases in 2004 while new cases amongst Fijians decreased by 19% from 27 to 22 for the same period.

Looking at the age spread, the majority of those infected are between the ages of 20 and 39 years (75.6%), followed by those ages 40-49(9.8%), 0-9 years and those ages 50 years and over (4.4 respectively), 10-19 years (2%) with the reaming one per cent being of unknown age.

The 20-49 years olds are our most sexually active, child bearing and economically productive age group. The fact that 85% of those infected lie in this demography followed by the very young (0-9 years) at 4.4% tells us that we have a serious problem facing us in the next two to three decades.

As the main child bearing age group also, it is likely that we will see more and more children being born to HIV positive mother in the coming years. The ART program under the GFATM will only last as long as there are funds to support it.

For now, however, the only sure way of remaining HIV-free is to abstain from sex altogether. For the less jaded, a monogamous sexual relationship with an HIV-free partner is a not just a viable alternative but the only alternative. Of course compliance will not be 100% so the choice then is to use condoms.

But it's not all bad news. Fiji has the potential to reverse the rate of infection because for now our known cases are relatively small, our population is small and access to health services as well as information is far better than in sub-Saharan Africa for instance where civil strife, poverty and a decrepit social sector has created a thriving environment for the virus to multiply. The stark reality that awaits us is far too great for us to just sit back and do nothing.

Source: Excerpts from Living in Fiji, June – August, 2006

- Question 1.** What ranking does AIDS command as the world's leading cause of death?  
a. first                      b. second                      c. third                      d. fourth  
(1 mark)
- Question 2.** In the last six years, which percentage of male gender has tested positive for sexually transmitted infections?  
a. 87%                      b. 59%                      c. 41%                      d. 3.4%  
(1 mark)
- Question 3.** How is the HIV/AIDS mode of transmission unique compared to other epidemics?  
(1 mark)
- Question 4.** The striking feature of the HIV infection is.....  
(1 mark)
- Question 5.** Compared to other STIs, how is HIV/AIDS set apart?  
(1 mark)
- Question 6.** Why hasn't the world found a vaccination for HIV/AIDS?  
(1 mark)
- Question 7.** How does HIV/AIDS help in the increase of other diseases such as tuberculosis?  
(2 marks)
- Question 8.** What two viable solutions does the author suggest to remain HIV-free?  
(2 marks)
- Question 9.** Why is it tempting to label HIV/AIDS in Fiji as a Fijian disease?  
(1 mark)
- Question 10.** What two factors provide hope for Fiji to reverse the rate of infection compared to sub-Saharan Africa?  
(2 marks)
- Question 11.** True or False:  
(i) Antiretroviral treatment (ART) is toxic yet pleasant?  
(ii) 59% of males are HIV/AIDS patients in Fiji  
(2 marks)
- Question 12.** Summary Writing  
Read paragraphs 2 -10 of the comprehension passage and in one paragraph of 120 words summarise the key ideas given.  
(5 marks)

## [I] Grammar and Vocabulary

15 marks

Question 13. Filling in the Gap

The Tour de France is the \_\_\_\_\_ a \_\_\_\_\_ cycle race in the world, a gruelling marathon \_\_\_\_\_ b \_\_\_\_\_ the beautiful French countryside, and culminating in the centre of Paris. The 2005 Tour de France \_\_\_\_\_ c \_\_\_\_\_ in victory for American racer Lance Armstrong, giving him an unprecedented seven consecutive Tour wins. Lending its support to this phenomenal sporting achievement was Japanese cycle parts manufacturer Shimano, Inc.

Shimano was \_\_\_\_\_ d \_\_\_\_\_ in 1921 in Osaka as a company manufacturing bicycle freewheels and has grown to \_\_\_\_\_ e \_\_\_\_\_ one of the world's \_\_\_\_\_ f \_\_\_\_\_ bicycle parts makers. It is known as the Intel of bicycle industry \_\_\_\_\_ g \_\_\_\_\_ like the chip manufacturer its ubiquitous products set the standards throughout the industry - Shimano has been able to reach this status through its ceaseless innovation. The bicycle industry has traditionally been divided into manufacturers of complete bicycles and various parts manufactures each specialising in different parts for the gears, derailleurs, and so on. In 1972 Shimano overturned this accepted wisdom by linking several components of the bicycle \_\_\_\_\_ h \_\_\_\_\_ under its "total system" components concept. This was marketed as the Dura-Ace line of products, which evolved rapidly as successive new developments were made.

A revolutionary development came in 1990 when the gearshift lever, \_\_\_\_\_ i \_\_\_\_\_ had traditionally been on the frame of the bicycle was integrated into the brake lever. This allowed racers to shift gear smoothly without taking their hands from the handlebars, which made a big difference to racers up against the clock in the tough sport of road racing. \_\_\_\_\_ j \_\_\_\_\_ just a few years, Shimano's new system had become the standard that all racers were using on their bicycles.

Source: Asia Pacific Perspectives, March 2006

(5 marks)

Question 14. Sentence Writing

Rewrite these sentences following the instructions given.

- a. The group needs to complete all their reports before the year ends. Then only the board will give a Christmas party. [*combine the two sentences using "unless"*]
- b. Smoking causes lung cancer. It also leads to bronchitis. [*combine the two sentences using "not only...but also"*]
- c. Which we all know contributes to healthy lifestyle. [*Correct this incomplete sentence by adding a main clause*]

[3 marks]

**Question 15. Changing Forms**

In each of the following, change the underlined word into its correct form.

- a. diagnosis procedures
- b. system preparations
- c. a state of delirious
- d. a spread of infectious

[4 marks]

**Question 16. Confusing Pairs - Synonyms**

Match up correctly one of each of the pairs of confusing words with the stated meaning

- |    |                        |                   |
|----|------------------------|-------------------|
| a. | martial / marshal      | warlike           |
| b. | invaluable / valueless | worthless         |
| c. | implicit / explicit    | distinctly stated |

[3 marks]

**(iii) Language Appropriateness**

**Question 17.** Write down the appropriate word that fits the blank provided in the extract below.

Fiji \_\_\_\_\_ a \_\_\_\_\_ blessed with some of the world's best fishing waters. It is a great place for sport fishermen addicted to the thrill of hooking a powerful fish and not knowing what the outcome of the ensuing fight will be, or what will beat the end \_\_\_\_\_ b \_\_\_\_\_ the line when it is eventually hauled out of the water. All the great sport fish are found in Fiji waters. Getting to them generally involves having a boat, as the waters close \_\_\_\_\_ c \_\_\_\_\_ the islands are generally shallow, harbouring mainly smaller fish. Beyond the outer reef is where the water gets deep \_\_\_\_\_ d \_\_\_\_\_ the larger predatory fish such as marlin, yellow-fin tuna, Spanish mackerel (walu), wahoo and lurk. The more traditional method of catching these fish is to tow lures behind \_\_\_\_\_ e \_\_\_\_\_ boat (trolling) on speeds of six to nine knots, depending on the lures and type of fish being targeted. While out in the deep water, the best way of finding fish is to look for birds. They are the best indicators as to where fish might \_\_\_\_\_ f \_\_\_\_\_. Small baitfish, which have been herded to the surface by tuna and other predatory fish attract birds. \_\_\_\_\_ g \_\_\_\_\_ seabirds swoop and plunge into the water to catch the baitfish in a kind of a mutually beneficial partnership where both the birds and the predatory fish benefit. The poor sardines are locked \_\_\_\_\_ h \_\_\_\_\_ between a rock and a hard place. Below them are the walus, oqos, wahoos, and saqas and for good measure, probably a few sharks \_\_\_\_\_ i \_\_\_\_\_ mouth agape, while above them the birds hovering, diving and spearing them. The carnage taking place is \_\_\_\_\_ j \_\_\_\_\_ awesome sight. No matter how time you've seen is before, it never fails to get the heart pumping and the blood racing.

Source: Living in Fiji, August, 2006

(5 marks)

Question 18. Read the extract below, which is part of a summon, and then answer the questions that follow.

5. *Director's powers in respect of public fund, etc.*

The *Chief Executive Officer* may from time to time from public funds -

- a) establish or maintain or make grant - in - aid to, or advance on loan in respect of, schools, school libraries, school staff and school buildings and subject to such conditions and upon such security or otherwise as the Permanent Secretary may consider appropriate;
- b) establish or maintain hostels in connection with schools established or maintained under the provisions of this Act, and make grants or advances in aid of the establishment, maintenance or repair of such hostels;
- c) maintain, or making grants or advances in aid to any person, body of persons, institution or organisation to assist in promoting the education of the people of Fiji or a substantial section thereof;
- d) provide in whole or in part for transporting pupils to and from any Government or aided school, or of, or in connection with, in any activity of educational value;
- e) provide for the compulsory medical inspection of pupils at any school;
- f) make such other provisions for the carrying on of public education as may be consistent with the provisions of this Act.

- a. For whom is this extract intended? (1 mark)
- b. The tone of the extract is \_\_\_\_\_ (1 mark)
- c. Give a reason for your answer in (b) above. (2 marks)
- d. Comment on the sentence structure of clause 5(c). (2 marks)
- e. Why are personal pronouns missing from this sample? (2 marks)
- f. Why are clauses listed? (2 marks)

*All questions in this section are compulsory.*

**Question 19.**                      **Report**    (20 marks)

Recently you have attended a seminar on Public Service Reform, representing your Department. You are required to write a report to your section Head, briefly outlining what you have gained from the seminar.

Write a report providing a brief overview of the Reform process, its effectiveness and how it can improve the overall service delivery at your work place. Also outline some of the difficulties that you think could be faced in adopting Reform.

Write your report under the following headings:

1. Introduction.
2. What is Public Service Reform
3. Current Status of Reform Implementation
4. Benefits
5. Drawbacks
6. Conclusion

**Question 20.**                      **Formal Letter**    (15 marks)

As an Administrative Officer in the Public Service Commission, you have been assigned to coordinate a two-hour Occupation Health and Safety (OHS) awareness workshop for the staff in your section. You are to invite the Director OHS to conduct the workshop.

Write to the: Director OHS  
Ministry of Labour and Industrial Relations,  
Private Mail Bag,  
Suva.

Invite him to conduct the workshop, explain the reason for organising the workshop for your section, and depending on his acceptance, request for a draft outline of his proposed programme.

**Question 21.**                      **Minute**    (10 marks)

You are the Executive Officer in your Department, representing your Department at the Ministry's Christmas Party Organising Committee meeting. Write a minute to your Head of Department outlining the Christmas Party preparations to date, and what is expected of your Department.

**Question 22.**                      **Memorandum**    (5 marks)

As Head of your Department, you have been asked to write an internal memo to your staff reminding them not to attend to Hibiscus Festival at Albert Park [21st - 25 August], during official hours, however, they are free to do so during their lunch hour.

Set your memorandum in the appropriate style and be brief.

---

The End