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BEDOK GREEN SECONDARY SCHOOL

Preliminary Examination 2019

4E
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HUMANITIES (SOCIAL STUDIES)

2272/01
2273/01
2274/01

27 August 2019

1 h 45 min

Candidates answer on the Writing Paper.

READ THESE INSTRUCTIONS FIRST

Write your name, class and register number on all the work you hand in.
Write in dark blue or black pen on both sides of the paper.
You may use a soft pencil for any diagrams or graphs.
Do not use staples, paper clips, highlighters, glue or correction fluid.

Section A

Answer **all** questions.

Section B

Answer **all** questions.

At the end of the examination, fasten all your work securely together.
The number of marks is given in brackets [] at the end of each question or part question.

For Examiner's Use	
A	
B	
Total	

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[Turn Over

SECTION A (Source-Based Case Study)

Question 1 is **compulsory** for all candidates.

1 Living in a Diverse Society

Study the Background Information and the sources carefully, and then answer all the questions.

You may use any of the sources to help you answer the questions, in addition to those sources which you are told to use. In answering the questions, you should use your knowledge of the issue to help you interpret and evaluate the sources.

(a) Study Source A.

Why was this article published? Explain your answer. [5]

(b) Study Sources B and C.

How far does the author of Source B agree with the author of Source C? Explain your answer. [6]

(c) Study Source D.

How far does Source D prove that the Swedish healthcare system is able to meet the needs of its citizens? Explain your answer. [7]

(d) Study Sources E and F.

After reading Source E, are you surprised by Source F? Explain your answer. [7]

(e) 'Sweden's healthcare system benefits its people'.

Using the sources in this case study, explain how far you would agree with this statement. [10]

How effective is Sweden's healthcare system in meeting the needs of its people?

BACKGROUND INFORMATION

Read this carefully. It may help you to answer some of the questions.

Sweden adopts the government-financed approach to healthcare based on the fundamental belief that all citizens should have access to healthcare services regardless of their background or socio-economic status. There is strong intervention by the government to ensure access to healthcare for all. The cost of this approach is sustained through heavy personal taxes on the people. Swedish healthcare is decentralised – responsibility to provide healthcare lies with the county councils while the central government establishes guidelines and set the political agenda for medical care.

The system is often lauded as being excellent for its aims to provide universal coverage for everyone in the country. However, in recent years, there has been some unhappiness over issues of access, quality, efficiency and funding of the Swedish healthcare system. Starting from January 2016, the government closed several hospitals and maternity wards throughout the country in a bid to cut spending, which resulted in tension between the government and the Swedes.

Study the following sources to find out whether Sweden's healthcare system has been effective in meeting the needs of its people.

Source A: *Adapted from an article published in a digital magazine for international parents and kids living in Stockholm, a city in Sweden, 10 August 2017.*

If you're an immigrant and soon-to-be parent living in Sweden I guess you're wondering whether all the chaos about maternity care and maternity ward closures is something to be really worried about.

In the last 10 years, the Swedish government has closed 22 maternity clinics across Sweden. This crisis has been brewing for some time but the outrage took hold when a maternity ward in Sollefteå, in the rural north of Sweden, was closed in 2016.

This forced hundreds of expectant mothers to drive 100-200 km to a different hospital. Women gave birth in cars and taxis. Since then, there have been a flood of reports on thousands of women being turned away from maternity wards and even being flown to Finland to give birth. If we cannot be guaranteed of a safe environment for our babies to be born, perhaps then it is time for us to band together for our future generations.

Source B: *Adapted from a website by Aetna, an international insurance provider, published in 2019.*

The standard of healthcare in Sweden is excellent, being ranked as no. 23 in the world by the World Health Organization. Healthcare is subsidised by the government but is managed at the local level. Certain groups, such as people under 20, get free care.

In comparison with other countries, waiting time targets are very reasonable: same day consultation with a health professional for minor illnesses such as cough or flu. A specialist consultation should take place within 90 days, and no more than 90 days beyond that, for an operation or treatment. There is a private sector, but with the quality of public care available most Swedes don't feel they need to use it. With nearly 4 doctors per 1,000 inhabitants, the country invests a very generous 11.9% of its GDP in health care, and it shows.

Source C: *Adapted from a blog post by Matthias Kamann, a German who has lived in Sweden for 14 years. The post was published on Hej Sweden, a guide to Sweden for those interested in the Swedish country and lifestyle, published on 16 August 2016.*

If you want to become Swedish and consider getting ill once in a while, remember this...

Good news: Swedish healthcare is not expensive.

Bad news: You get what you pay for.

Catching the flu is very common. Many people catch it and so will you. To make the flu go away a bit faster, Swedes believe it might be a good idea to consult a doctor. And it certainly is, considering you only pay 200 SEK (US\$ 21) a visit.

Then, you have a long waiting time which you can share with other coughing patients in the waiting room.

After that, the Swedish healthcare system is so efficient, a nurse with a well-trained forced smile, will welcome you to the examination room. The nurse checks if you're ill enough to talk to the doctor later that day or, in most cases, tomorrow. Or perhaps in a week's time.

Source D: *Excerpt from an online news article, 'What Sweden can tell us about Obamacare', published on The New York Times, 15 June 2013.*

The United States spends more than twice what Sweden spends per year on healthcare. Yet, health outcomes are way better in Sweden. Its infant mortality rate is less than half that of the United States.

When illness strikes, the Swedish model is truly exemplary. In the United States, under our pathetic model, doctors can bolster their incomes by prescribing additional tests and procedures. Most Swedish doctors, as salaried employees, have no comparable incentive. The Swedes provide drugs and treatments only when evidence establishes their effectiveness.

Is there a catch? When I asked my Swedish friends to describe downsides to their system, several mentioned the waiting times for certain non-emergency services. In Sweden, the wait for a hip replacement surgery could be as long as three months. However, they described such waiting times as a positive feature, noting that they allowed facilities to be used at consistently high capacity.

Source E: *Extract from an article posted on The Guardian by a journalist from London, published on 3 October 2006.*

In Sweden, 100% of births are attended by a skilled, trained midwife. Overall, it is the safest place in the world to become a mother.

More than 99% of births in Sweden take place in hospitals. Its maternity service is second-to-none. Antenatal* care in Sweden is free. Mothers in labour are looked after with every high technological advantage possible; the fetal monitoring system here is among the most sensitive in the world.

The impression you get as you chat to mothers in Sweden is that they feel remarkably well cared for and listened to. It is not just about technology and machines. In a confident, well-developed, successful maternity unit such as this one, there is a generosity of resources that makes the mother-to-be feel individually cared for.

**Antenatal care is the care mothers receive from health professionals such as doctors or midwives during their pregnancy.*

Source F: *A photo of a protest against the closing of the maternity ward in Solleftea taken from a Swedish news website, The Local, published in January 2016.*



**The poster states: I was a "roadside" birth. Why put more lives at risk?*

SECTION B (Structured-Response Questions)

Question 2 is **compulsory** for all candidates.

2 Being Part of a Globalised World

Extract 1

The passing of iconic hawkers like Mr Andrew Lim Seng Ann of Ye Lai Xiang Cheng Tng at Bedok Food Center sparked much concern about whether the next generation will take over their parents' famous hawker stalls. Many Singaporeans also lament that traditional kopitiam are making way for upmarket food and beverage outlets.

Extract 2

The unique creation of the McDonald's Nasi Lemak burger, Chendol McFlurry and Bandung McFizz reflects how foreign brands have embraced some aspects local culture. These are examples of how hybridisation is increasingly becoming a reality in a globalised world.

Extract 3

Many people consume foreign culture such as Korean entertainment products. Korean films and food culture have made their presence felt around the world. The foreign preference of Korean food and entertainment has been perceived to have a homogenising effect on local culture.

- (a) Extract 1 illustrates how Singapore traditional food culture face difficulty in ensuring its survival.

In your opinion, how can Singapore's traditional food culture be preserved? Explain your answer using **two** strategies. [7]

- (b) Extract 2 and 3 show how cultural hybridisation and cultural homogenisation are evident in a globalised world.

How far would you agree that cultural homogenisation has a significant impact on local culture compared to cultural hybridisation? Explain your answer. [8]

Copyright Acknowledgements:

Source A	https://littlebearabroad.com/the-maternity-care-crisis-in-sweden/
Source B	https://www.aetnainternational.com/en/about-us/explore/living-abroad/culture-lifestyle/health-care-quality-in-europe-and-scandinavia.html
Source C	https://hejsweden.com/en/swedish-healthcare-system/
Source D	https://www.nytimes.com/2013/06/16/business/what-sweden-can-tell-us-about-obamacare.html
Source E	https://www.theguardian.com/lifeandstyle/2006/oct/03/healthandwellbeing.health
Source F	https://www.thelocal.se/20170130/swedes-set-to-occupy-closing-maternity-ward-which-inspired-car-birth-course