

**PYC2605** ( 476719)  
**RPY2605** ( 476874)

May/June 2017

**HIV/AIDS CARE AND COUNSELLING**

Duration 2 Hours

70 Marks

**EXAMINERS**

FIRST

MRS HC ERASMUS

MRS K SHIRINDA-MTHOMBENI

MR FZ SIMELANE

SECOND

MRS VM NEKHAVHAMBE

Closed book examination

This examination question paper remains the property of the University of South Africa and may not be removed from the examination venue

This paper consists of 20 pages plus instructions for completion of a mark reading sheet.

This examination paper remains the property of the University of South Africa and may not be removed from the examination room

Please complete the attendance register on the back page, tear off and hand to the invigilator.

This paper consists of 70 multiple-choice questions which must be answered on the mark reading sheet

Your mark for this examination will be converted to a mark out of 80 Note that your mark for Assignment 01 and 02 will be converted to your year mark (a mark out of 20) which will be added to the mark you obtain for this examination paper

After completing your answers, you must hand in the following:

- (i) The mark reading sheet
- (ii) This examination paper (All the pages must be handed in )

ENSURE THAT YOU HAVE WRITTEN YOUR STUDENT NUMBER, MODULE CODE AND UNIQUE NUMBER ON THE MARK READING SHEET

- ANSWER THE FOLLOWING SEVENTY MULTIPLE CHOICE QUESTIONS ON THE MARK READING SHEET.
- FOLLOW THE ATTACHED INSTRUCTIONS CAREFULLY
- SUBMIT YOUR COMPLETED MARK READING SHEET TOGETHER WITH THIS EXAMINATION PAPER.

NO STAPLES PLEASE!

**Note: Section A (Question 1 to 60) is compulsory for all students. Students may then choose between Section B (Guidance track) and Section C (Care track)**

## SECTION A

### QUESTION 1

What is currently the most widely accepted scientific theory about the origin of Aids?

- (1) An ancestor of HIV-1 group M virus was transmitted from a chimpanzee to a hunter
- (2) HIV was introduced into the human population by polio vaccines which were produced on monkey kidney cell cultures in the 1950s
- (3) Aids is not a new disease, but has probably been present for many centuries in central Africa
- (4) HIV originated in the white gay communities of America and Europe in the early 1980s

### QUESTION 2

We know how many people are infected with HIV by looking at the HIV incidence and the HIV prevalence. What is the definition of HIV prevalence?

- (1) It is the percentage of people living with HIV (as a proportion of the total population) at a specific time
- (2) It is a 'snapshot' view of the number of people who were infected with HIV in a specific year in the past 5 years
- (3) It is the percentage of new cases of HIV infection in a defined period of time, for example in one year
- (4) It is a percentage which is calculated by dividing the number of new infections by the number of previously uninfected people

### QUESTION 3

How do viruses (including HIV) reproduce?

- (1) Viruses can reproduce in any warm and humid environment, the cells of the virus divide to form new viruses
- (2) Viruses reproduce in the open air, they cannot reproduce in anaerobic conditions
- (3) Viruses 'inject' their genetic material into a living cell and then use the cell to reproduce more viruses
- (4) Viruses first kill cells, then enter them and then use the remains of the cell as 'food' for the new viruses

### QUESTION 4

How do the dendritic cells warn the lymphocytes (B and T cells) that they should mobilise to protect the body against an organic invader such as a virus? The dendritic cells

- (1) swallow the virus and then carry it to the lymphocytes, which then destroy both the dendritic cells and the virus
- (2) surround the virus, grab an antigen from it and display it like a 'banner of war' in order to mobilise the lymphocytes
- (3) surround the virus and render it inactive until the lymphocytes find it and kill it
- (4) swallow the virus and, when the dendritic cells die, the virus dies with them, thus warning lymphocytes about the presence of the foreign antigens in the process

[TURN OVER]

**QUESTION 5**

The defences of the immune system can be divided into two main groups the non-specific defences, for example (a) \_\_\_\_\_, and the specific defences, for example (b)\_\_\_\_\_

- (1) (a) the skin and mucous membranes, (b) plasma proteins
- (2) (a) phagocytes (e.g. macrophages), (b) lymphocytes (e.g. T cells and B cells)
- (3) (a) plasma proteins, (b) phagocytes (e.g. macrophages)
- (4) (a) T lymphocytes (e.g. CD4+T cells), (b) B lymphocytes (e.g. B memory cells)

**QUESTION 6**

HIV is present in many body fluids. The concentration of HIV is particularly high in some body fluids such as (a) \_\_\_\_\_, while it is relatively low in others, such as (b) \_\_\_\_\_

- (1) (a) blood, (b) semen
- (2) (a) saliva, (b) tears
- (3) (a) sweat, (b) vaginal fluids
- (4) (a) vaginal fluids, (b) urine

**QUESTION 7**

An example of a body fluid that requires universal precautions, is (a)\_\_\_\_\_, while (b)\_\_\_\_\_ do/does not require any special precautions

- (1) (a) blood, (b) cerebrospinal (CSF) fluid
- (2) (a) vomit containing visible blood, (b) faeces and urine
- (3) (a) nasal secretions, (b) saliva and tears
- (4) (a) wound secretions, (b) amniotic fluid

**QUESTION 8**

There are various biological, epidemiological and other factors that contribute to or influence the spread of HIV infection. Which of the following conditions contribute to the spread of HIV infection in Africa?

- (a) Socio-economic conditions
- (b) Gender, age and cultural conditions
- (c) Other sexually transmitted infections
- (d) High prevalence of tuberculosis

The correct answer is

- (1) (a), (b) and (c)
- (2) (b), (c) and (d)
- (3) (a), (c) and (d)
- (4) (a), (b) and (d)

**QUESTION 9**

The World Health Organization's recommendations on universal access to safe blood and blood products include that

- (a) no blood should be accepted from homosexual donors
- (b) donated blood should randomly be screened for HIV, hepatitis B and syphilis
- (c) donors should be voluntary and not be paid for donating blood
- (d) clinical transfusion practices should be safe and of good standard

[TURN OVER]

The correct answer is

- (1) (a) and (b)
- (2) (b) and (c)
- (3) (a) and (c)
- (4) (c) and (d)

#### QUESTION 10

Beatrix is a young married woman who looks after her HIV positive brother, who also has tuberculosis. Her husband is a truck driver who sometimes has unprotected sex with other women at truck stops. Beatrix and her husband occasionally have problems with sexually transmitted diseases. Beatrix's risk of HIV infection is increased by the fact that

- (a) she is living in the same house as her brother who is HIV positive
- (b) she is often infected with other sexually transmitted diseases
- (c) her husband has frequent unprotected sex with women at rest stops
- (d) she is in constant contact with tuberculosis in the home

The correct answer is

- (1) (a) and (c)
- (2) (b) and (c)
- (3) (b) and (d)
- (4) (c) and (d)

#### QUESTION 11

The health status of the immune system of an HIV infected person can be more accurately predicted by

- (1) doing a CD4+T cell count. The lower the CD4+T cell count, the sicker the person will be and the higher the possibility of opportunistic infections
- (2) measuring the viral load in the person's blood. The lower the viral count, the sicker the person will be
- (3) counting the number of opportunistic infections the person had over the last four weeks. More opportunistic infections are an indication of an inadequately functioning immune system
- (4) the patient's adherence to the prescribed drug regime as well as how well the patient takes care of him-/herself in terms of diet and exercise

#### QUESTION 12

A doctor performed a viral test on her HIV positive patient and said to him 'The viral load in your blood is undetectable at this stage' What does it mean?

- (1) There are no more HI viruses in the blood, and the person is no longer infected with HIV
- (2) HI viruses in the blood could not be detected because the patient is still in the window period
- (3) The person is infected with HIV, but the viral levels are too low for the test to detect them
- (4) The person is infected with HIV, but the viral load test cannot detect counts below 350 cells

#### QUESTION 13

Opportunistic infections and diseases, such as tuberculosis, often attack people with Aids. An opportunistic infection

- (a) is caused by pathogens which usually do not attack a healthy immune system
- (b) is always characterised by fever, weight loss and diarrhoea
- (c) is characterised by both a high viral count and a high CD4+T cell count
- (d) takes the 'opportunity' to attack a deteriorated immune system

[TURN OVER]

The correct answer is

- (1) (b) and (c)
- (2) (a) and (d)
- (3) (a), (c) and (d)
- (4) (a), (b), (c) and (d)

**QUESTION 14**

Clinical stage 3 of HIV is characterised by

- (1) persistent generalised lymphadenopathy and mild fever
- (2) unexplained chronic diarrhoea, oral hairy leukoplakia and pulmonary TB
- (3) a CD4+T count between 350 and 499 cells / mm<sup>3</sup>
- (4) moderate unexplained weight loss, and recurrent respiratory tract infections

**QUESTION 15**

Which combination of symptoms is an indication that a person has tuberculosis?

- (1) Fever with chills, swollen glands, diarrhoea and oral thrush
- (2) Coughing, enlarged liver, weight loss and shingles
- (3) Anaemia, shingles, malaise and persistent fever
- (4) Fever, night sweats, a current cough and weight loss

**QUESTION 16**

The two factors that determine the accuracy of a blood test are sensitivity and specificity. The sensitivity of a test is its ability to pick up very low levels of antibodies. The specificity of an HIV antibody test refers to its ability to

- (1) ignore the presence of antibodies that are not specific to HIV
- (2) detect HIV positivity and not give false negative results
- (3) recognise cross-reacting non-specific antibodies
- (4) pick up very high levels of antibodies not to give false positive results

**QUESTION 17**

What is meant by the 'window period' within the HIV testing environment?

- (1) The person still tests HIV negative and cannot, therefore, transmit the virus to another person
- (2) The person already tests HIV positive, but is not yet infectious to others
- (3) The person received a false positive result and may be infectious to others
- (4) The person may be infected with the HI virus, but antibodies are not yet detectable

**QUESTION 18**

The dried blood spot test is a convenient way to test for HIV infection in young babies because it reacts to the (a) in the baby's blood and is (b)

- (1) (a) infection (b) laboratory based
- (2) (a) p24 antigens (b) inexpensive and easy to use
- (3) (a) p24 antigens (b) more sensitive than other tests
- (4) (a) antibodies (b) less invasive to use

[TURN OVER]

**QUESTION 19**

Which test do we prefer to use to exclude existing HIV infection in rape survivors before starting ARVs?

- (1) Rapid HIV antibody test
- (2) HIV p24 antigen test
- (3) ELISA antibody test
- (4) DNA PCR test

**QUESTION 20**

Why do we use a combination of three antiretroviral drugs (also called 'triple-therapy' or HAART) instead of only one drug (or single-drug regimes)?

- (a) It increases the number of drug regimes available to patients
- (b) It is most effective in reducing viral loads
- (c) It decreases the chances of the virus becoming drug resistant
- (d) Combination therapy aggressively attacks the virus on a single level

The correct answer is

- (1) (a) and (b)
- (2) (a) and (d)
- (3) (b) and (d)
- (4) (b) and (c)

**QUESTION 21**

Under ideal conditions, how does anti-retroviral medication (ART) work to prevent HIV infection after needle-stick injuries?

- (1) ART interferes with the integrase enzyme and prevents the viral RNA from integrating with the cell's DNA
- (2) ART 'seals' the entry point of injury and prevents viruses getting past the first line of defence, namely the skin or mucose membranes
- (3) ART interferes with the replication mechanisms of HIV and prevents the virus from attacking the CD4+T cells and thus from reproducing
- (4) ART kills all the CD4+T cells in the vicinity of the HI viruses before the viruses have a chance to attack the CD4+T cells

**QUESTION 22**

It is widely accepted in the scientific community that an adherence level of (a)\_\_\_\_ % is necessary to suppress the virus sufficiently to avoid the risk of (b)\_\_\_\_ and to prevent (c)\_\_\_\_

- (1) (a) at least 90%, (b) mutation, (c) development of drug-resistant strains
- (2) (a) 100%, (b) drug failure, (c) opportunistic infections
- (3) (a) 95%, (b) opportunistic infections, (c) development of drug-resistant strains
- (4) (a) at least 90%, (b) wild-type viruses gaining fitness, (c) drug failure

[TURN OVER]

**QUESTION 23**

There are many reasons why people do not adhere to their antiretroviral medication. Which of the following reasons are medication-related problems or barriers?

- (a) difficult treatment regime,
- (b) not enough stock,
- (c) bad tasting medication,
- (d) use traditional medicine,
- (e) pills too big to swallow,
- (f) side-effects

The correct answer is

- (1) (a), (b) and (e)
- (2) (a), (e) and (f)
- (3) (c), (b) and (f)
- (4) (a), (c) and (f)

**QUESTION 24**

The most common immune reconstitution inflammatory syndrome (or IRIS) in South Africa is (a)\_\_\_\_\_ which occurs in about (b)\_\_\_\_\_ of patients starting antiretroviral therapy when on treatment for this disease

- (1) (a) herpes zoster, (b) 10%
- (2) (a) cryptococcal meningitis, (b) a third
- (3) (a) hepatitis B, (b) 10%
- (4) (a) tuberculosis, (b) a third

**QUESTION 25**

One of the main reasons why people do not change their behaviour is because of obstacles that hinder change. Which one of the following is an obstacle that often hinders people from changing their sexual behaviour?

- (1) Society's tolerance and encouragement of certain unsafe sex practices makes it difficult for people to change their behaviour, because 'if society approves, why change'?
- (2) High self-efficacy and an external locus of control often make it difficult for people to change their sexual behaviour
- (3) If condoms are not available and accessible it is often difficult to ask for condoms over the counter, it is also difficult for young people to buy condoms if they do not have money
- (4) Some people have a fatalistic attitude which makes it difficult for them to ask their sex partners to change their behaviour, even though they believe in it themselves

**QUESTION 26**

Which one of the following people is in the preparation phase of behaviour change according to the Transtheoretical Model?

- (1) Maboe knows about the dangers of Aids, but he believes that it will never happen to him
- (2) Puleng has decided to use condoms every time she has sex. She is very proud of herself because she consistently used condoms now for the past six months
- (3) John is seriously thinking of changing his behaviour and to be faithful to his girlfriend. He even said no to sex with random women on a couple of occasions now
- (4) Lebo is considering the advantages and the disadvantages of using condoms, but she is not sure yet if it is worth the trouble to use condoms

[TURN OVER]

**QUESTION 27**

The following intervention could empower women and young girls and reduce their HIV risk

- (1) Asking the partners on behalf of these women to start using condoms
- (2) Teaching women to use less alcohol as part of a reproductive programme
- (3) Enforcing legal policies prohibiting violence against women
- (4) Create structural change to narrow the gap in access to education

**QUESTION 28**

You want to powerfully promote an HIV related policy Which one of the following theories could be followed to mobilise individuals and communities to exert pressure on government?

- (1) The empowerment model
- (2) Diffusion of innovation theory
- (3) Media advocacy
- (4) Social network theory

**QUESTION 29**

It takes a lot of work to develop HIV prevention programmes What are the basic principles and practical aspects that should be taken into consideration when developing such programmes?

- (1) Involving only people living with HIV to avoid stigmatization
- (2) Holistic approach, cultural sensitivity and assertiveness
- (3) Negotiation skills, life skills and communication skills
- (4) National support, peer support and partnership

**QUESTION 30**

Which method of teaching is a learning experience that challenges the stereotypes and prejudices of learners?

- (1) Discussion in character
- (2) Guest speakers
- (3) Roleplay and simulation
- (4) Interviews with HIV-infected people

**QUESTION 31**

Rinse your mouth with (a)\_\_\_\_\_ if it has come into contact with semen and (b)\_\_\_\_\_ immediately afterwards

- (1) (a) warm water, (b) brush your teeth
- (2) (a) a strong mouthwash, (b) do not brush your teeth
- (3) (a) cold water, (b) do not brush your teeth
- (4) (a) hot water, (b) use a strong mouthwash

[TURN OVER]



**QUESTION 32**

Sexual behaviours can be placed on a continuum ranging from no risk to high risk sexual behaviour. Which one of the following answers represents a continuum of sexual behaviour ranging from (a) no risk to (b) low risk to (c) some risk to (d) high risk?

- (1) (a) masturbation, (b) fellatio with a condom, (c) sharing uncovered sex toys, (d) contact with menstrual blood
- (2) (a) thigh sex, (b) swallowing semen, (c) anal sex with a condom, (d) oral sex without a condom
- (3) (a) personal sex toys, (b) cunnilingus with a latex barrier, (c) oral sex without a condom, (d) vaginal penetrative sex with a condom using Vaseline as lubricant
- (4) (a) sexual fantasies, (b) kissing, (c) vaginal penetrative sex with a condom, (d) oral sex without a condom

**QUESTION 33**

In African societies, death can be seen as either natural or as a punishment. When is death seen as punishment in Africa?

- (1) When the queue of dying is jumped
- (2) When an elderly person dies
- (3) Death after a sin was committed
- (4) Death due to illness

**QUESTION 34**

According to Sow, traditional African beliefs are based on principles such as

- (1) independence
- (2) the interest of the individual
- (3) union with nature
- (4) the survival of the fittest

**QUESTION 35**

Cultural beliefs and customs should be respected by Aids educators who work in Africa. The following cultural practices practised by some traditional Africans are, however, dangerous and should be changed

- (a) dry sex,
- (b) prostitution,
- (c) widow cleansing,
- (d) offerings to ancestors,
- (e) swallowing semen

The correct answer is

- (1) (b) and (e)
- (2) (a) and (c)
- (3) (c) and (e)
- (4) (a) and (d)

[TURN OVER]

**QUESTION 36**

The aim of counselling or helping an HIV infected client is to

- (1) allow the client to tell his or her story so that the counsellor, as an effective listener and Aids expert, develop a plan of action to help the client face his or her difficulties
- (2) facilitate the process of change and help the client to face and concentrate on the constraints of the disease without the help of a support system
- (3) improve the client's quality of life by helping him or her to manage problems and to become effective self-helpers in coping with problems
- (4) do crisis counselling to establish the specific needs of the client, and then to refer him or her to a professional person who can better help the client

**QUESTION 37**

When you counsel someone who has a different view of the world from yours, it is important to

- (1) make sure that the client understood your values
- (2) show respect for your client's ideas
- (3) ensure that you and your client share the same views or ideas
- (4) allow the client to 'see the world through your eyes'

**QUESTION 38**

The counselling process usually consists of four phases defining the relationship, obtaining information, describing the problem and making interventions. Which one of the following statements in relation to this view is correct?

- (1) In each interview or counselling session with a client, all four of these phases will feature
- (2) The order of the four phases will differ, depending on the model the counsellor uses
- (3) Each of the four phases is separate from the others, and there is no overlapping between them
- (4) The framework provided by these four phases should be strictly adhered to by the counsellor

**QUESTION 39**

The aim of the first phase of counselling (relationship building) is to establish an open relationship in which the client will feel safe enough to address personal issues and to disclose information to the counsellor. In which of the following statements is the counsellor seen to achieve this goal?

- (a) Hello, do have a seat, can I offer you a cup of tea? I'm sure you will find tea welcome on a day as cold as this. Hasn't the weather been terrible lately?
- (b) Hi, my name is Jill and I am the counsellor at this clinic. The aim of our counselling sessions is to provide a safe space in which to discuss any issues or concerns that you may have.
- (c) I would like to reassure you that anything you say to me during these meetings will be treated with complete confidentiality, and will not leave this room.
- (d) I can understand that your partner's rejection must have hurt very much, and I don't think he/she was being fair or gentle in making that response.

The correct answer is

- (1) (a) and (b)
- (2) (b) and (d)
- (3) (b) and (c)
- (4) (c) and (d)

[TURN OVER]

**QUESTION 40**

During the counselling session, your client discloses to you that he is HIV positive and explains that the reason for not telling you before was because he was afraid of your response. According to Egan, in which one of the following responses listed below would you, as the counsellor, demonstrate basic empathy?

- (1) You felt afraid to tell me that you are HIV positive, because you feared that I would reject you
- (2) I know how you feel. I have experienced exactly the same a couple of years ago
- (3) Do I understand you correctly if I say that you are HIV positive and that you did not want to tell me because you were afraid of my response?
- (4) You felt afraid to tell me that you are HIV positive. I wonder if you maybe experience counsellors as judgemental figures?

**QUESTION 41**

Language barriers between counsellors and clients often pose problems, especially in South Africa with its 11 official languages. The following points should be kept in mind when using the services of an interpreter or translator:

- (a) Be sensitive to age and class differences between the client and the translator
- (b) Make sure rapport does not develop between the client and the translator, as it may jeopardise your relationship with the client
- (c) Communicate directly with the client to reinforce interest in the client, even if the client does not understand you and has to listen to the translator asking the question
- (d) Interrupt the translator if you get the feeling that the discussion is not going the way that you intended

The correct answer is

- (1) (a) and (b)
- (2) (b) and (c)
- (3) (a) and (c)
- (4) (b) and (d)

**QUESTION 42**

The following cultural differences should be kept in mind in cross-cultural counselling in Africa:

- (1) Clients should be prepared to make decisions in the counselling session without discussing it with their family first
- (2) Group-orientated cultures often find it difficult to talk about personal feelings or emotions, and may regard it as a symptom of individualism
- (3) Most African cultures find it disrespectful if the counsellor does not make eye contact with them
- (4) The directive, advice-giving approach should not be used in traditional African counselling contexts

**QUESTION 43**

If an illiterate person wishes to give signed consent to HIV testing:

- (1) the person should be advised to rather give verbal consent
- (2) the right hand thumbprint can be used in place of a signature
- (3) a cross can be made instead of a signature
- (4) the person should be informed that the law does not make provision for illiterate people to sign consent forms

[TURN OVER]

**QUESTION 44**

Pre-HIV test counselling include exploring together with clients the possible advantages and disadvantages of testing Which one of the following is a disadvantage?

- (1) An inability to plan for the future when the results are positive
- (2) Knowing the result may increase the stress associated with uncertainty
- (3) Starting ARV-treatment which could have severe side-effects
- (4) Emotional problems and a disintegration of the individual's life,

**QUESTION 45**

To tell a client that he or she is HIV positive is one of the most difficult things that a counsellor can do Although there are no hard and fast rules when sharing the news, which of the following issues below is/are important?

- (1) Tell the client openly, directly and without beating around the bush that he or she is HIV positive
- (2) Tell the client as soon as he or she enters your office that you have very bad news and that he or she had better sit down Give the bad news as soon as the client is seated comfortably
- (3) It helps people to cope and take their mind off things if they are inundated with new information Give the client as much information as possible after giving the results
- (4) Take control over the situation and do not allow the client's needs to lead your counselling as this may have devastating effects that you might not be able to contain

**QUESTION 46**

Complete the following definition of crisis intervention

Crisis intervention is a (a)\_\_\_ designed to (b)\_\_\_ Crisis intervention is (c)\_\_\_ and occurs shortly after a crisis has happened

- (1) (a) short-term helping process, (b) provide immediate relief, (c) active, direct and brief
- (2) (a) form of emotional 'first aid', (b) support and assist the client, (c) passive, non-directive and empathic
- (3) (a) long-term helping process, (b) ensure ongoing therapy, (c) attentive, non-directive and respectful
- (4) (a) way of preventing suicide, (b) refer the client to an emergency service, (c) prescriptive, supportive and passive

**QUESTION 47**

Which of the following statements about stress research is true?

- (a) Chronic stress was found to create greater susceptibility to many diseases such as flu, dermatitis and the recurrence of herpes symptoms
- (b) Self-efficacy was associated with a slower deterioration of the immune system in HIV-infected individuals
- (c) Research has found that psychological factors such as emotional inhibition, a negative self-concept and a lack of social support, did not contribute to a more rapid disease progression
- (d) Looking after a partner with dementia, especially without social support, as well as the loss of a partner, significantly weakened the immune system of the affected other

The correct answer is

- (1) (a), (b) and (c)
- (2) (b), (c) and (d)
- (3) (a), (b) and (d)
- (4) (a), (c) and (d)

[TURN OVER]

**QUESTION 48**

The symptoms of depression can be categorised as affective, physiological, cognitive and behavioural. Affective symptoms of depression include (a)\_\_\_\_, while cognitive symptoms of depression include (b)\_\_\_\_.

- (1) (a) pessimistic beliefs about the future, suicidal thoughts, negative thinking and concentration problems, (b) sadness, unhappiness, worthlessness, anxiety and apathy
- (2) (a) neglect of personal appearance, crying, social withdrawal and slow or reduced speech, (b) pessimistic beliefs about the future, suicidal thoughts, negative thinking and concentration problems
- (3) (a) loss of appetite and weight, sleep disturbance, loss of libido, disrupted menstrual cycle in women and constipation, (b) neglect of personal appearance, crying, social withdrawal and slow or reduced speech
- (4) (a) sadness, unhappiness, worthlessness, anxiety and apathy, (b) pessimistic beliefs about the future, suicidal thoughts, negative thinking and concentration problems

**QUESTION 49**

Which of the following statements about ethical concerns in counselling research is true?

- (1) A counsellor should take the side of his/her client when dealing with family issues
- (2) A counsellor should avoid stereotyping as it may hamper the counselling process
- (3) Note keeping is essential to the counselling process and should be done at all times
- (4) Confidentiality is non-negotiable and may never be broken by the counsellor

**QUESTION 50**

What advice would you give an HIV positive person, to keep her immune system as healthy as possible?

- (1) She must take pain medication regularly to feel that she is in control of her life
- (2) She must eat defensively and avoid raw or undercooked meat, fish or eggs
- (3) She must understand the relationship between too much sleep and rest and depression
- (4) She must practice alternative therapies such as psychoneuroimmunology (PNI)

**QUESTION 51**

The process of bereavement

- (1) is triggered only after the actual loss of something dear to you
- (2) is defined as a process that is triggered by the actual loss of another human being
- (3) can also be triggered by the anticipated loss of something dear to you
- (4) can be understood in terms of stages, which follow each other in a fixed sequence

**QUESTION 52**

The term 'stages' of bereavement should be avoided in favour of the term 'tasks' of bereavement. The reason for this is to

- (1) emphasise the active nature of bereavement rather than imply a passive process 'flowing over' the grieved person
- (2) avoid the idea that the loss was punishment for a sin
- (3) convey the idea that working hard on the tasks of mourning may speed up the process significantly
- (4) keep the person busy with all kinds of tasks to limit his or her time to think about the loss

[TURN OVER]

**QUESTION 53**

Terry, whose partner died from an Aids related illness, shows signs of withdrawing her emotional energy when she

- (1) accepts that her partner was the love of her life and that she will never love anyone else in the same way again
- (2) is able to accept her 'death-in-life', in that, while she may not be physically dead, the loss has resulted in her own emotional and spiritual death
- (3) lets go of the hope that her partner will miraculously re-appear
- (4) is able to reckon with the devastating reality that her life has prematurely stopped

**QUESTION 54**

Men and women often differ in the ways they grieve. Therefore counsellors should concentrate on (a) activities when working with women and (b) activities when working with men

- (1) (a) loss-orientated (b) restoration-orientated
- (2) (a) group-based (b) individually focussed
- (3) (a) emotion-orientated (b) physiological-orientated
- (4) (a) feminist-based (b) patriarchal-orientated

**QUESTION 55**

Occupational stress can have a negative impact on our lives, our work and our relationships and it can lead to burnout if not addressed appropriately. Burnout can be defined as

- (1) a syndrome of physical and emotional exhaustion, involving the development of a negative self-concept, negative job attitudes and loss of concern or feelings for clients
- (2) the perception of being unable to cope with an internal or external expectation or demand in the workplace
- (3) feelings of sadness and unhappiness due to an unbearable demanding workload resulting in excessive stress
- (4) a syndrome of behavioural and physiological symptoms such as lack of energy, neglect of personal appearance and a loss of appetite

**QUESTION 56**

Which one of the following nurses finds it difficult to set professional boundaries between themselves and their patients?

- (1) Nurse A cannot 'get the patients out of her head'. She thinks of them all night at home and she cries about their problems
- (2) Nurse B feels frustrated with her patients who do not follow her advice and who keep on drinking and smoking
- (3) Nurse C is profoundly touched by the negative effects of stigmatisation on her patients' lives but also by the secondary stigmatisation on her own life
- (4) Nurse D is overwhelmed by the Aids statistics and she wonders how the country will cope with the Aids crisis in the future

[TURN OVER]

**QUESTION 57**

Prison A refuses to provide medical treatment for inmates who are HIV positive, while Prison B refuses to provide information on HIV and to distribute condoms. Which basic human rights applying to all citizens are infringed upon by Prison A and Prison B?

- (1) Prison A the right not to be unfairly discriminated against, Prison B the right to bodily, psychological and educational integrity
- (2) Prison A the right of access to healthcare services, Prison B the right to information and safer sex
- (3) Prison A the right to bodily and psychological integrity, Prison B the right not to be unfairly discriminated against
- (4) Prison A the right to healthcare and support services, Prison B the right to bodily and psychological integrity

**QUESTION 58**

When are employers entitled to insist that their employees must be tested for HIV infection?

- (1) Never
- (2) When the person is so sick that he or she cannot continue doing his or her job
- (3) If the employer thinks that the person may endanger the lives of other employees or customers
- (4) When employers think it is justifiable, and have received permission from the labour court to do so

**QUESTION 59**

According to The Choice on Termination of Pregnancy Act, can a seventeen year old girl consent to termination of pregnancy?

- (1) Yes, but the doctor or midwife must advise her to speak to her parents or other family members before having the abortion. As soon as the girl has spoken to someone in her family about the abortion, it can be done
- (2) No, a woman may not request an abortion without the knowledge and consent of the baby's father – even if she is unmarried and only seventeen years old
- (3) Yes, but the doctor or midwife must advise her to speak to her parents or other family members before having the abortion. However, the girl does not have to follow this advice
- (4) No, a girl should be at least eighteen years old before she can consent to the termination of her pregnancy without her parents' approval

**QUESTION 60**

The Aids epidemic has had a profound impact on employees' and employers' organisational and economic lives. Which option reflects these effects?

- (1) burnout, organisational stress, increased sick leave
- (2) discrimination, and time loss to counselling and testing during work hours
- (3) termination of employment, occupational confidentiality and health and safety issues
- (4) low staff morale, and increased absenteeism and labour turnover

**NOTE** If you have chosen the **GUIDANCE TRACK**, do Section B, Questions 61 to 70. If you have chosen the **CARE TRACK**, go to Section C on page 18 and answer Questions 61 to 70.

**Please note** You do not have to indicate your choice between Section B or Section C because the correct alternatives are the same for equivalent questions.

[TURN OVER]

**SECTION B. GUIDANCE TRACK****QUESTION 61**

Thandiwe's eldest daughter is 10 years old and attending a school where Aids education is offered to them. Which of the following meet the basic requirements for successful Aids education?

- (a) Her school has appointed a special teacher who is very knowledgeable about HIV and Aids and gives Aids education only to all the senior children in the school (b)
- (b) Aids education in her school starts in Grade 1, because the school principle argued that children at this age are very receptive towards accepting a healthy life style
- (c) The Aids education forms part of a larger lifeskills education programme that is presented to the whole school once a week in the school hall
- (d) The programme was devised in cooperation with the community and includes the input from parents, the community- and spiritual leaders

The correct answer is

- (1) (b), (c) and (d)
- (2) (a) and (d)
- (3) (a), (b) and (d)
- (4) (b) and (d)

**QUESTION 62**

In which school phase will Aids education deal primarily with fear and re-assurances that children do not easily contract Aids, while giving only very basic information about HIV and Aids??

- (1) Foundation school phase (Grades 1 to 3)
- (2) Intermediate school phase (Grades 4 to 6)
- (3) Senior school phase (Grades 7 to 9)
- (4) Further education and training (Grades 10 to 12)

**QUESTION 63**

The reason why children in the intermediate school phase (Grades 4 to 6) are prone to acquire myths is because

- (1) group pressure will never be more important than at this stage, causing children to believe what their peers believe without questioning the validity of these beliefs
- (2) their awakening sexual feelings are confusing to them and cause them to entertain many irrational fears, making it easy to believe myths about the things they fear
- (3) children at this age are not yet fully capable of hierarchical classification and are therefore not able to classify things into 'cause' and 'non-cause' (i.e. to distinguish between fact and fantasy)
- (4) children at this age like storytelling, and this lends itself to the acquisition of myths

**QUESTION 64**

When do children begin to understand the concept of a syndrome for the first time, and do they realise that illness is not merely a collection of symptoms without any causative link between them?

- (1) Grades 1 to 3 (Foundation phase)
- (2) Grades 7 to 9 (Senior phase)
- (3) Grades 10 to 12 (Further education phase)
- (4) Grades 4 to 6 (Intermediate phase)

[TURN OVER]



**QUESTION 65**

Jacob is eighteen years old and in Grade 12. He received limited Aids education at school, and the teacher made crucial mistakes in his approach. Which of the following are MISTAKES?

- (a) Assuming that all children abstain from sexual intercourse
- (b) Telling the learners that they have the right to postpone sexual activity
- (c) Focusing on healthy behaviours and the ability to plan ahead
- (d) Frightening the children by explaining the horror of HIV and Aids

Which combination correctly identifies the mistakes?

- (1) (b) and (c)
- (2) (b) and (d)
- (3) (a) and (d)
- (4) (a)

**QUESTION 66**

Deeply rooted negative attitudes towards sexuality in general are often found among the members of religious communities. These negative attitudes

- (1) are basic to most religions, because they emphasise the spiritual as opposed to the matters of the 'flesh'
- (2) have no real connection with general religious principles and contradicts the religious emphasis on compassion and acceptance
- (3) are an important way in which religion should express its condemnation of sinful behaviour
- (4) contradict the emphasis in most religions on free love

**QUESTION 67**

According to Pargament's research, religious factors can

- (1) provide a framework of meaning to a patient, which can facilitate the understanding and integration of problematic life experiences
- (2) be more of a hindrance than a help when dealing with life-threatening diseases
- (3) complicate the health of patients, because they mostly encourage feelings of guilt
- (4) have a positive effect on the health of patients, not only as coping mechanisms, but also by opening up the possibility of a miracle

**QUESTION 68**

The Convention on the Rights of the Child is a legal document that sets minimum acceptable standards for the well-being of all children. Which basic right of a street child is violated when the child is deprived of shelter and primary healthcare?

- (1) Survival
- (2) Protection
- (3) Development
- (4) Participation

**QUESTION 69**

One of the fundamental needs of every child is the need to believe that they are part of something bigger than themselves and that the world is more than a physical reality. This is the need for

- (1) protection
- (2) participation
- (3) identity
- (4) transcendence

[TURN OVER]

**QUESTION 70**

Which one of the following is an example of a pseudo-satisfier of children's needs?

- (1) An orphanage where the child can stay safely
- (2) A soup kitchen where the child gets food once a day
- (3) The city with its bright lights and promises of a better life
- (4) A loving home which provides for most of the child's needs

**NOTE: If you have chosen the CARE TRACK, do Section C, Questions 61 to 70**

**Please note You do not have to indicate your choice between Section B or Section C because the correct alternatives are the same for equivalent questions**

**SECTION C: CARE TRACK****QUESTION 61**

Patients with Aids often suffer from respiratory problems such as difficulty in breathing, shortness of breath and infections. Advise home-based caregivers to seek professional help if the patient in their care develops any of the following symptoms

- (a) high fever
- (b) discoloured sputum
- (c) severe pain in the chest
- (d) a cough that lasts for more than 3 weeks

The correct answer is

- (1) (c)
- (2) (b) and (d)
- (3) (a), (c) and (d)
- (4) (a), (b) (c) and (d)

**QUESTION 62**

One of Sibongile's home-based care patients has genital herpes. What advice could Sibongile give her patient on how to care for his herpes at home?

- (1) Sit in a bath or a basin every three hours and bath your genital area with a solution of 1 teaspoon of table salt in half a liter of clean water. Keep the area dry between bathing.
- (2) Go to the clinic as soon as possible to get treatment as home-remedies will not help. You need to get an injection and a prescription for penicillin. Only antibiotics can treat and cure genital herpes.
- (3) Drink lots of fluids and eat bland, pureed foods. Stay away from heavily spiced foods.
- (4) Wash the genital area every two hours with a strong lemon juice solution to eliminate the fungus growth, and give pain medication when necessary.

[TURN OVER]

**QUESTION 63**

The prevention of constipation in an HIV positive person should involve the following measures

- (a) The intake of fluids, such as water and fruit juices, as well as an increase in fresh fruits and vegetables
- (b) The intake of a low-fibre diet, rich in nutrients, should be increased if tolerated well by the patient
- (c) Certain medications that can cause constipation (e.g. codeine) should be avoided
- (d) The patient should get involved in exercise at frequent intervals

The correct answer is

- (1) (a) and (c)
- (2) (a) and (b)
- (3) (a), (c) and (d)
- (4) (b) and (d)

**QUESTION 64**

Peter has oral thrush and his mouth and throat are very painful. Owing to this he has difficulty eating and swallowing. To alleviate his discomfort, his mother could

- (a) give him bland pureed foods to eat and make sure that he drinks enough fluids
- (b) prepare a warm salt water solution to rinse his mouth with after meals
- (c) give him lemon juice once a day as the acid will slow down the fungal growth
- (d) help him to brush his teeth and tongue three times a day with a soft brush

The correct answer is

- (1) (b) and (d)
- (2) (a), (b) and (d)
- (3) (a) and (c)
- (4) (b), (c) and (d)

**QUESTION 65**

The purpose of palliative care is to

- (1) alleviate a patient's suffering by terminating all medical treatment to bring death and thus relief to the patient as soon as possible
- (2) take care of the physical needs of the patient, because the patient is too sick to care about psychological or spiritual needs
- (3) provide relief from pain and other distressing symptoms, without hastening or postponing death
- (4) do anything in one's power to preserve life and therefore to try new anti-retroviral medications and other therapies to try and save the patient's life

**QUESTION 66**

The objective/s of HIV infection control in hospitals, clinics and in the home is/are to

- (a) protect the patient against opportunistic infections
- (b) keep hospitals, clinics and homes sterile and to kill absolutely all germs
- (c) prevent transmission of infection from one person to another

The correct answer is

- (1) (c)
- (2) (a) and (c)
- (3) (b)
- (4) (a), (b) and (c)

[TURN OVER]

**QUESTION 67**

HIV can enter the bloodstream through broken skin. How can a health care worker protect her or his skin?

- (a) Use hand lotion to prevent skin cracking
- (b) Apply lotion right after washing your hands with an antimicrobial solution
- (c) Cover skin lesions on your hands with waterproof dressings
- (d) Refrain from direct patient care if you have an oozing skin lesion

The correct answer is

- (1) (a), (c) and (d)
- (2) (a) and (d)
- (3) (b) and (c)
- (4) (a), (b), (c) and (d)

**QUESTION 68**

The community and home based care (CHBC) can be described as comprehensive health and social services offered by primary and community caregivers. The primary caregivers are

- (1) family and friends
- (2) trained counsellors
- (3) primary care nurses
- (4) trained community caregivers

**QUESTION 69**

Home-based care is often the best way to look after someone with Aids. Which one or more of the following, however, highlight(s) the potential problems associated with home-based care?

- (1) Many home-based caregivers do not care for their patients and do it only for the money
- (2) Owing to all the unknown home-based caregivers in the home, the patient has no privacy
- (3) Patients often do not take their medication correctly, because they become used to the home-based caregivers and do not listen to them
- (4) Families often do not want home-based caregivers in their homes because of stigma, ignorance and superstition

**QUESTION 70**

The use of volunteers in home-based care programs can be successful if

- (1) they are not chosen by the community where the service is rendered because confidentiality might be a problem for the patients
- (2) they do not have to be involved in decision making processes since they are already inundated with caring responsibilities
- (3) they are properly trained in basic home care
- (4) all of the above conditions are met

ARE YOUR STUDENT NUMBER, UNIQUE NUMBER AND MODULE CODE FILLED IN ON THE MARK READING SHEET?
---

**PART 1 (GENERAL/ALGEMEEN) DEEL 1**

STUDY UNIT e.g. PSY100 X  
STUDIE EENHEID by PSY100-X

--	--	--	--	--	--	--	--	--	--

PAPER NUMBER  
VRAESTELNOMMER

--	--	--	--	--

STUDENT NUMBER  
STUDENTENOMMER

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

(0)	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(0)
(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(0)	(1)
(3)	(4)	(5)	(6)	(7)	(8)	(9)	(0)	(1)	(2)
(4)	(5)	(6)	(7)	(8)	(9)	(0)	(1)	(2)	(3)
(5)	(6)	(7)	(8)	(9)	(0)	(1)	(2)	(3)	(4)
(6)	(7)	(8)	(9)	(0)	(1)	(2)	(3)	(4)	(5)
(7)	(8)	(9)	(0)	(1)	(2)	(3)	(4)	(5)	(6)
(8)	(9)	(0)	(1)	(2)	(3)	(4)	(5)	(6)	(7)
(9)	(0)	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
(0)	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)

INITIALS AND SURNAME  
VOORLETTERS EN VAN

DATE OF EXAMINATION  
DATUM VAN EKSAMEN

EXAMINATION CENTRE (E.G. PRETORIA)  
EKSAMENSENTRUM (BY PRETORIA)

UNIQUE PAPER NO  
UNIEKE VRAESTEL NR

--	--	--	--	--	--	--	--	--	--

(0)	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(0)
(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(0)	(1)
(3)	(4)	(5)	(6)	(7)	(8)	(9)	(0)	(1)	(2)
(4)	(5)	(6)	(7)	(8)	(9)	(0)	(1)	(2)	(3)
(5)	(6)	(7)	(8)	(9)	(0)	(1)	(2)	(3)	(4)
(6)	(7)	(8)	(9)	(0)	(1)	(2)	(3)	(4)	(5)
(7)	(8)	(9)	(0)	(1)	(2)	(3)	(4)	(5)	(6)
(8)	(9)	(0)	(1)	(2)	(3)	(4)	(5)	(6)	(7)
(9)	(0)	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
(0)	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)

For use by examination invigilator  
Vir gebruik deur eksamenopsiener

◆

- IMPORTANT**
- USE ONLY AN HB PENCIL TO COMPLETE THIS SHEET
  - MARK LIKE THIS
  - CHECK THAT YOUR INITIALS AND SURNAME HAS BEEN FILLED IN CORRECTLY
  - ENTER YOUR STUDENT NUMBER FROM LEFT TO RIGHT
  - CHECK THAT YOUR STUDENT NUMBER HAS BEEN FILLED IN CORRECTLY
  - CHECK THAT THE UNIQUE NUMBER HAS BEEN FILLED IN CORRECTLY
  - CHECK THAT ONLY ONE ANSWER PER QUESTION HAS BEEN MARKED
  - DO NOT FOLD
- BELANGRIK**
- GEBRUIK SLEGS 'N HB POTLOOD OM HIERDIE BLAD TE VOLTOOI
  - MERK AS VOLG
  - KONTROLEER DAT U VOORLETTERS EN VAN REG INGEVUL IS
  - VUL U STUDENTENOMMER VAN LINKS NA REGS IN
  - KONTROLEER DAT U DIT KORREKTE STUDENTENOMMER VERSTRYK HET
  - KONTROLEER DAT DIE UNIEKE NOMMER REG INGEVUL IS
  - MAAK SEKER DAT NET EEN ALTERNATIEF PER VRAAG GEMERK IS
  - MOENIE VOU NIE

**PART 2 (ANSWERS/ANTWOORDE) DEEL 2**

1 (1) (2) (3) (4) (5)	36 (1) (2) (3) (4) (5)	71 (1) (2) (3) (4) (5)	106 (1) (2) (3) (4) (5)
2 (1) (2) (3) (4) (5)	37 (1) (2) (3) (4) (5)	72 (1) (2) (3) (4) (5)	107 (1) (2) (3) (4) (5)
3 (1) (2) (3) (4) (5)	38 (1) (2) (3) (4) (5)	73 (1) (2) (3) (4) (5)	108 (1) (2) (3) (4) (5)
4 (1) (2) (3) (4) (5)	39 (1) (2) (3) (4) (5)	74 (1) (2) (3) (4) (5)	109 (1) (2) (3) (4) (5)
5 (1) (2) (3) (4) (5)	40 (1) (2) (3) (4) (5)	75 (1) (2) (3) (4) (5)	110 (1) (2) (3) (4) (5)
6 (1) (2) (3) (4) (5)	41 (1) (2) (3) (4) (5)	76 (1) (2) (3) (4) (5)	111 (1) (2) (3) (4) (5)
7 (1) (2) (3) (4) (5)	42 (1) (2) (3) (4) (5)	77 (1) (2) (3) (4) (5)	112 (1) (2) (3) (4) (5)
8 (1) (2) (3) (4) (5)	43 (1) (2) (3) (4) (5)	78 (1) (2) (3) (4) (5)	113 (1) (2) (3) (4) (5)
9 (1) (2) (3) (4) (5)	44 (1) (2) (3) (4) (5)	79 (1) (2) (3) (4) (5)	114 (1) (2) (3) (4) (5)
10 (1) (2) (3) (4) (5)	45 (1) (2) (3) (4) (5)	80 (1) (2) (3) (4) (5)	115 (1) (2) (3) (4) (5)
11 (1) (2) (3) (4) (5)	46 (1) (2) (3) (4) (5)	81 (1) (2) (3) (4) (5)	116 (1) (2) (3) (4) (5)
12 (1) (2) (3) (4) (5)	47 (1) (2) (3) (4) (5)	82 (1) (2) (3) (4) (5)	117 (1) (2) (3) (4) (5)
13 (1) (2) (3) (4) (5)	48 (1) (2) (3) (4) (5)	83 (1) (2) (3) (4) (5)	118 (1) (2) (3) (4) (5)
14 (1) (2) (3) (4) (5)	49 (1) (2) (3) (4) (5)	84 (1) (2) (3) (4) (5)	119 (1) (2) (3) (4) (5)
15 (1) (2) (3) (4) (5)	50 (1) (2) (3) (4) (5)	85 (1) (2) (3) (4) (5)	120 (1) (2) (3) (4) (5)
16 (1) (2) (3) (4) (5)	51 (1) (2) (3) (4) (5)	86 (1) (2) (3) (4) (5)	121 (1) (2) (3) (4) (5)
17 (1) (2) (3) (4) (5)	52 (1) (2) (3) (4) (5)	87 (1) (2) (3) (4) (5)	122 (1) (2) (3) (4) (5)
18 (1) (2) (3) (4) (5)	53 (1) (2) (3) (4) (5)	88 (1) (2) (3) (4) (5)	123 (1) (2) (3) (4) (5)
19 (1) (2) (3) (4) (5)	54 (1) (2) (3) (4) (5)	89 (1) (2) (3) (4) (5)	124 (1) (2) (3) (4) (5)
20 (1) (2) (3) (4) (5)	55 (1) (2) (3) (4) (5)	90 (1) (2) (3) (4) (5)	125 (1) (2) (3) (4) (5)
21 (1) (2) (3) (4) (5)	56 (1) (2) (3) (4) (5)	91 (1) (2) (3) (4) (5)	126 (1) (2) (3) (4) (5)
22 (1) (2) (3) (4) (5)	57 (1) (2) (3) (4) (5)	92 (1) (2) (3) (4) (5)	127 (1) (2) (3) (4) (5)
23 (1) (2) (3) (4) (5)	58 (1) (2) (3) (4) (5)	93 (1) (2) (3) (4) (5)	128 (1) (2) (3) (4) (5)
24 (1) (2) (3) (4) (5)	59 (1) (2) (3) (4) (5)	94 (1) (2) (3) (4) (5)	129 (1) (2) (3) (4) (5)
25 (1) (2) (3) (4) (5)	60 (1) (2) (3) (4) (5)	95 (1) (2) (3) (4) (5)	130 (1) (2) (3) (4) (5)
26 (1) (2) (3) (4) (5)	61 (1) (2) (3) (4) (5)	96 (1) (2) (3) (4) (5)	131 (1) (2) (3) (4) (5)
27 (1) (2) (3) (4) (5)	62 (1) (2) (3) (4) (5)	97 (1) (2) (3) (4) (5)	132 (1) (2) (3) (4) (5)
28 (1) (2) (3) (4) (5)	63 (1) (2) (3) (4) (5)	98 (1) (2) (3) (4) (5)	133 (1) (2) (3) (4) (5)
29 (1) (2) (3) (4) (5)	64 (1) (2) (3) (4) (5)	99 (1) (2) (3) (4) (5)	134 (1) (2) (3) (4) (5)
30 (1) (2) (3) (4) (5)	65 (1) (2) (3) (4) (5)	100 (1) (2) (3) (4) (5)	135 (1) (2) (3) (4) (5)
31 (1) (2) (3) (4) (5)	66 (1) (2) (3) (4) (5)	101 (1) (2) (3) (4) (5)	136 (1) (2) (3) (4) (5)
32 (1) (2) (3) (4) (5)	67 (1) (2) (3) (4) (5)	102 (1) (2) (3) (4) (5)	137 (1) (2) (3) (4) (5)
33 (1) (2) (3) (4) (5)	68 (1) (2) (3) (4) (5)	103 (1) (2) (3) (4) (5)	138 (1) (2) (3) (4) (5)
34 (1) (2) (3) (4) (5)	69 (1) (2) (3) (4) (5)	104 (1) (2) (3) (4) (5)	139 (1) (2) (3) (4) (5)
35 (1) (2) (3) (4) (5)	70 (1) (2) (3) (4) (5)	105 (1) (2) (3) (4) (5)	140 (1) (2) (3) (4) (5)

Specimen only

## MARK READING SHEET INSTRUCTIONS

Your mark reading sheet is marked by computer and should therefore be filled in thoroughly and correctly

**USE ONLY AN HB PENCIL TO COMPLETE YOUR MARK READING SHEET**

*PLEASE DO NOT FOLD OR DAMAGE YOUR MARK READING SHEET*

Consult the illustration of a mark reading sheet on the reverse of this page and follow the instructions step by step when working on your sheet

Instruction numbers ① to ⑩ refer to spaces on your mark reading sheet which you should fill in as follows

- ① Write your paper code in these eight squares, for instance

P	S	Y	1	0	0	-	X
---	---	---	---	---	---	---	---

- ② The paper number pertains only to first-level courses consisting of two papers

WRITE 

0	1
---	---

 for the first paper and 

0	2
---	---

 for the second. If only one paper, then leave blank

- ③ Fill in your initials and surname
- ④ Fill in the date of the examination
- ⑤ Fill in the name of the examination centre
- ⑥ WRITE the digits of your student number HORIZONTALLY (from left to right). Begin by filling in the first digit of your student number in the first square on the left, then fill in the other digits, each one in a separate square
- ⑦ In each vertical column mark the digit that corresponds to the digit in your student number as follows [-]
- ⑧ WRITE your unique paper number HORIZONTALLY  
NB Your unique paper number appears at the top of your examination paper and consists only of digits (e.g. 403326)
- ⑨ In each vertical column mark the digit that corresponds to the digit number in your unique paper number as follows [-]
- ⑩ Question numbers 1 to 140 indicate corresponding question numbers in your examination paper. The five spaces with digits 1 to 5 next to each question number indicate an alternative answer to each question. The spaces of which the number correspond to the answer you have chosen for each question and should be marked as follows [-]
- ◆ For official use by the invigilator. Do not fill in any information here

Tear

attendance register UNISA  
(university copy)

Fill-in/MCQ



Examination period

Student number

Surname

First Names

Subject

Code of paper

Number of paper

Centre

Date

This is to certify that I have read the rules governing the examinations as set out on the inside cover of this examination answer book and in the examination instructions

That the information supplied by me in this answer book is correct and valid

I undertake to adhere to the procedures rules and regulations of the University of South Africa as published in the official brochures

Signature of candidate

Batch No  
28092015MCQ

ID Number

Signature of invigilator

UNISA invigilator's personnel number

NOTE Not a valid document if not completed by the Invigilator

Tear

attendance register UNISA  
(student copy)

Fill-in/MCQ



Examination period

Student number

Surname

First Names

Subject

Code of paper

Number of paper

Centre

Date

This is to certify that I have read the rules governing the examinations as set out on the inside cover of this examination answer book and in the examination instructions

That the information supplied by me in this answer book is correct and valid

I undertake to adhere to the procedures rules and regulations of the University of South Africa as published in the official brochures

Signature of candidate

Batch No  
28092015MCQ

ID Number

Signature of invigilator

UNISA invigilator's personnel number

NOTE Not a valid document if not completed by the Invigilator