Please check the examination details below before entering your candidate information

Candidate surname	Other names

Centre Number | Candidate Number

Pearson Edexcel International Advanced Level

Monday 12 May 2025

Morning (Time: 1 hour 45 minutes)

Paper reference **WEN01/01**

English Language

International Advanced Subsidiary

UNIT 1: Language: Context and Identity

You must have:
Source Booklet (enclosed)

Total Marks

Instructions

- Use **black** ink or ball-point pen.
- **Fill in the boxes** at the top of this page with your name, centre number and candidate number.
- Answer **BOTH** questions.
- Answer the questions in the spaces provided – *there may be more space than you need.*
- Plan your answers in the spaces provided. Plans will not be marked unless no other response is provided.

Information

- The total mark for this paper is 50.
- The marks for **each** question are shown in brackets – *use this as a guide as to how much time to spend on each question.*

Advice

- Read each question carefully before you start to answer it.
- Check your answers if you have time at the end.

Turn over ▶

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SECTION A

Read Texts A and B in the Source Booklet before answering Question 1.
Write your answer in the space provided.

1 Text A is the personal story of Oluwamayowa Salu (Mayowa), who organises malaria prevention and education programmes in Nigeria. His story was posted on *Malaria No More*, a charity website, in 2023.

Text B is an extract from an interview with Dr Akpaka Kalu about the role of science and research in the battle against malaria. The interview was posted on the *News Medical* website in October 2021.

Analyse and compare how the language of both texts conveys personal identity.

You should refer to:

- relevant language frameworks and levels
- concepts and issues such as social, cultural and gender factors
- contextual factors such as mode, field, function and audience.

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(Total for Question 1 = 35 marks)

SECTION B

Write your answer in the space provided.

2 Write the text for an article to be published on your school/college website to encourage students to raise funds to support research into the treatment and prevention of malaria in Africa.

In addition to your own ideas, you must refer to material from at least one of the texts in the Source Booklet.

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(Total for Question 2 = 15 marks)

TOTAL FOR PAPER = 50 MARKS

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GradeMax

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Source Booklet

Do not return this Booklet with the question paper.

Turn over ▶

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Text A

Text A is the personal story of Oluwamayowa Salu, also known as Mayowa. He founded the Iba Eradication Foundation and organises malaria prevention and education efforts in Nigeria. 'Ibà' is the Yoruba (the language used in Southwestern and Central Nigeria) word for 'malaria'. His story was posted in 2023 on the website of Malaria No More, a charity based in the UK that works to combat malaria in Africa.

MAYOWA'S STORY

How many times have I had malaria? It is uncountable. That's what an African will tell you. Malaria is a part of our lives. I've spent three decades of my life in Africa so there's no way I could estimate it! It is a terrible disease. It affected me all through my life, my education, my development…

Aside from the personal trauma for me it also affected my mum psychologically. She didn't have the opportunity to go to school so she didn't understand what it was at that time – until I grew up and went to university and learned about malaria. She suffered from that period of not knowing what was wrong with her child. It also affected our income because we had to spend the little we had on attending to my frequent sickness.

I'm one of those who was lucky to survive the disease. There are lots of people – young people – who didn't make it after primary school. They didn't know what to do, or didn't have access to treatment even if they did know what to do. Malaria doesn't discriminate when it comes to age, sex, tribe, religion – it affects everyone in Africa. I may not be able to estimate the damage it has made – or continues to make – in Africa.

The worst part of having malaria is when you become a burden to almost everybody around you, and you're useless for the time being. Although this happens with all sicknesses, with malaria it is something that you fear will happen again. So – the feeling of becoming a burden to everyone and the feeling of the repetition, the possibility of it happening again makes you feel so horrible.

Of course I didn't like to miss my primary school education, and I'm lucky that I didn't lose my life, but each time you find someone who has malaria you see that regret on their face – like 'why am I a burden to everybody? Is this thing going to ever stop?'

I grew up in a very rural area so when the sickness was too much a family friend took me to the city to be assessed at the clinic. When I gained admission into first the polytechnic, and then university I started to learn about malaria on the internet, I listened to my friends' experiences and started to know the number of cases we had in our university clinic. So my interest came from my own experiences first, and then to what I read on the internet and other people's stories.

I founded the Ibà Foundation in 2012, as a non-profit organisation to cater to malaria issues in Nigeria – especially in rural areas, and for mothers and children under five. We advocate for behavioural change while also enabling people to live a healthier life. We make existing tools available to them, while also innovating to adapt to specific situations in Africa.

Without malaria my life would have been different in many ways. First the economic angle to it – perhaps we could have used that money to do important things like buy household items or eat good food. From the psychological angle – I still remember the worries my mum went through, putting me on her lap, midnight tears, the torture she had to go through. It would have given her peace of mind if there had been no malaria.

Also we could have been generating income for the household, instead of attending to me every time I fell sick. And obviously I would have had the opportunity to study better, because I would have attended school more. I lost about two years of my education to malaria.

Africans think that malaria has come to be part of us. Perhaps if it had been eliminated before now we would have been able to believe that the disease is not something we have to live with. It's created a generation of people who think that malaria is part of the African world.

Text B

Text B is an extract from the written record of an interview with Dr Akpaka Kalu, the World Health Organization's (WHO) team leader for malaria in Africa, about the role of science in the battle against malaria. The interview, conducted by Emily Henderson, was posted to *News Medical*, an online hub based in the UK and Australia, where scientific and medical experts produce and share the latest information to all, including non-specialist, readers. It was published in October 2021. Bold type indicates words spoken by Emily Henderson.

Malaria: An Interview with the World Health Organization

Interview conducted by Emily Henderson, B.Sc. Oct 28 2021

The WHO has an incredibly important role in communicating scientific information and advice to the public. How important do you think science communication is and how does this make a difference in terms of malaria?

We always say let science lead. Everything we do in public health must be based on evidence and this evidence comes from laboratories, institutions, and researchers.

In the case of malaria, anybody who knows a little bit of the history of the disease knows that the name itself is called malaria, 'bad air'. This is to say, initially, it was taught that malaria was caused by bad air. It was then science that showed that it is caused by a parasite. That's the power of science. Science has been the center of malaria control, especially in Africa.

Can you give an overview of malaria and why this deadly disease mainly kills babies and infants?

We call malaria or the mosquitoes small, but mighty. A little insect causes so much silent devastation. For instance, last Monday I was in the hospital and was tested for malaria. I tested positive and was put on anti-malaria treatment. Can you imagine malaria fighting back against the team leader of malaria in Africa? That is real. I am trying to bring out the devastation that malaria causes. I was traveling in Abuja, Nigeria when I came down with the disease.

In Africa every year nearly 400,000 people die of malaria. It is a silent epidemic and the worst part of it is that people regard it as okay. That it is okay that someone had malaria, and it is okay that someone died of malaria. No child should die of malaria… nobody should die of malaria.

Why? Malaria is preventable and malaria is treatable. So, the death of hundreds of thousands of children and pregnant women from malaria every year in Africa is an indictment of our health systems.

The deaths reflect our failure to prevent malaria and our failure to treat malaria effectively. Moving forward, everybody must commit to zero malaria which is why the theme of the antimalaria campaign globally is 'Zero Malaria Starts with Me'. Why? Because I have to do my bit, and part of my bit is talking to you and spreading the information. You also have to do your bit.

Malaria is preventable and malaria is treatable. When we deploy the vaccine, it is because we know that malaria can be prevented through vaccination. Malaria can also be prevented by spraying homes with insecticides, sleeping under insecticide-treated nets, and taking some medicine as prevention. That is the message, and it is based on science.

Malaria has had a hold on humanity for years, especially in Africa where 94% of cases are found, but researchers have struggled to develop a vaccine. Why is this?

Malaria is a very complex disease. For instance, the malaria parasite at various stages of its development finds home in both mosquitoes and humans. So if you are developing a treatment, you face the challenge of deciding whether your treatment will target the mosquito or humans carrying the parasite. In the mosquito, the malaria parasite has different stages in different parts of the mosquito. In humans, the malaria parasite also has different stages in different parts of the body including the liver and the blood. The organism is very sophisticated.

The fact that we have a vaccine that has been proven to be effective for us, is a game-changer. We need to ensure that these vaccines are given to children in all moderate to high transmission areas of Africa, of course, subject to availability of supplies. That is the next stage of the work, we need to deploy the vaccine.

Do you believe that a world without malaria is possible in our future and what further research is critical to making this happen?

A malaria-free future is possible. We know this because between the years 2000 and 2019 we had over a 60% reduction in malaria deaths, thanks to the interventions. What we need now is perhaps new interventions that will drive down our curve further because we know that between 2016 and 2020, the curve flattened, the rate of reduction of malaria cases flattened out. Therefore, we believe that we need to work differently to have a different result and achieve the 2030 targets.

Everybody has a role to play, especially people in malaria-endemic countries. We are asking for a comprehensive, whole society approach. Malaria is not just a medical problem, it is a socio-economic development challenge. Malaria causes stunting among those who suffer it at a young age. Malaria also causes poor progress in education. Of course, it also leads to death. So we need to work together.

Glossary

indictment: strong criticism

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Source information:

Text A: https://malarianomore.org.uk/mayowas-story

Text B: www.news-medical.net/news/20211028/Malaria-An-Interview-with-the-World-Health-Organization.aspx