BEYOND THE PROBLEM

PROBLEM – BASED LEARNING
GUIDE TO DEVELOP ACTIVE ENGLISH CLASSES

Compiled and Authorized by
Ana Vera de la Torre
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ANA JAZMINA VERA DE LA TORRE
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This material has been created to help English teachers to develop interesting and enjoyable activities. This guide is a compilation of different documents. Through these activities, English students will be able to interact and communicate in the target language.

This guide was created after an investigation where the author realized that the most difficult skill to develop for most of the English students is speaking. Especially if the student is shy or lacks of motivation.
DEDICATION

To my father who taught me how to deal with problems in my life and to solve them in a calm manner. To my daughter, the person who is always giving me a reason to do the things in a better way.
ACKNOWLEDGEMENT

Thanks to my family and friends who help me to achieve my goals. To all the authors of some books which I took as reference to create this book.
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Teachers must consider what students really need to learn according to their reality and the environment in which they live and learn. Teachers must think about how to present material with the purpose of students not only learn English, but also become self-directed learners. When students develop problem-solving skills they can apply them in future courses and in their careers.

In problem-based learning courses, students work in groups and use the target language to interact to solve complex and authentic problems which help develop knowledge as well as problem-solving techniques as: reasoning, self-assessment and communication skills. When people talk about problems it is always a very interesting topic. Who did not like to try to solve a problem or give an advice? We always try to become heart doctors trying to solve the world’s problems. Problems help to maintain students’ interest in course material because students realize that they are learning the target language and they are developing the necessary skills to be successful in reaching their goals.

The problem-based learning is considered by student-centered approach, the teacher is a facilitator, a guide or helper. It helps to develop students’ intrinsic and extrinsic interest in the target language and its culture. It promotes group work and helps students to become self-directed learners.

Learning is student-centered because students have the freedom to organize their group, learning process and their way to reach the goal. Students should identify their learning strategies, their leaning needs, lead their learning and assess their own work as a group and individually too. “Students develop a
deeper awareness and ownership of important concepts in the course by working on activities, a basic tenet of the constructive approach to learning” (Seltzer et al., 1996, p. 86) This means that students take the process of learning seriously, because they know they are developing important skills to improve their learning.

The PBL helps students learning by doing. The students need to be metacognitive conscious of what information they already know and what information they need to know in order to solve the problem. They learn to be good problem-solvers, so that in the future they are going to be part of the solution not part of the problem. To become a problem solver teacher must train students to develop some skills like become self-directed learners and insert them into the classroom dialog so that students will be able to communicate fluently and efficiently in the target language.

This problem-based guide is an additional material to help students to acquire the language using the four skills. Group work is essential now days. People need to work in groups to have a good result in real life. Group work help students to develop learning communities, students enjoy interacting with new ideas because they become actively involved in the work.

The interaction must be free and spontaneous in order to have a fluid and efficient communication to find the solution to the problem. The problem-based learning helps students to learn in a free environment respecting others opinions.
"The measure of success is not whether you have a tough problem to deal with, but whether it is the same problem you had last year."

— John Foster Dulles
Former Secretary of State

"The majority see the obstacles; the few see the objectives; history records the successes of the latter, while oblivion is the reward of the former."

— Alfred Armand Montap
BACKGROUND

Problem-based Learning (PBL) is a student-centered approach in which the students construct their knowledge solving different kinds of problems. Students apply thinking strategies to find out the solution for the problem. The PBL was originated long time ago in the medical school. In a Problem- Based Learning class students engage complex, challenging problems and collaboratively work toward their resolution. PBL originated from a curriculum reform by medical faculty at Case Western Reserve University in the late 1960s. In different programs continued to evolve the practice of PBL.

It was proposed by medical faculty at MCMaster University in Canada. They considered that the programs they used to have in the past were so exhausting that became so ineffective and dehumanizing way to prepare future doctors. Through time to time and taken into consideration the great changes in technology and science they looked for a new mode and strategy of learning. The new method of learning was developed that would better prepare students for professional practice. The new method was rapidly spread for all over the country and other medical schools, including other professional fields like law, architecture, and mechanical engineering. It was applied to in MBA programs and it was included in some curriculum.

Most of the time, the traditional education practices result boring and lack of motivation for students in all levels of education. Students have to face a lot of things to memorize. The majority of the information they receive is not relevant. When the students finish the basic education process and finish the high school often forget mucho of what they learned.
Different studies in education had found that the traditional educational approaches are not effective. Most material learned through lectures is soon forgotten. “Studies have shown that in 90 days students forget 90% of everything they have been told” (Smilovitz, 1996)

On the other hand, when the PBL is applied, students enjoy the process of learning and they construct their knowledge in different steps, where they do not just learn the language, they learn other more important things like respect others opinions, turn talk taking, and collaborative work.

Problem- based learning (PBL) is a method of learning and teaching which allows students to focus on how and what they will learn. It is based on a problem which is set by the teacher. The students are required to determine for themselves how they will go about solving the problem.
"One thing is sure. We have to do something. We have to do the best we know how at the moment . . . ; If it doesn't turn out right, we can modify it as we go along."

— Franklin D. Roosevelt

"You don't drown by falling in the water; you drown by staying there."

— Edwin Louis Col
Problem-based learning is student-centered. PBL makes a fundamental approach from a focus on teaching to a focus on learning. The process aim is to use the power of authentic problem solving to make students to construct their learning and motivation. There are several aspects that define the PBL approach:
Learning takes place within the contexts of authentic tasks, issues, and problems—that are aligned with real-world concerns. So, the use of real case problems are essential in this approach.

In a PBL course, students and the instructor become co-learners, co-planners, co-producers, and co-evaluators as they design, implement, and continually refine their curricula in order to find out the final product effective.

The PBL method is developed in solid academic research on learning and on the best practices that promote it. This method stimulates students to take responsibility for their own learning, since it is not based on traditional education through lectures and teacher teaching grammar or structures about the language.
PBL is exceptional in that it promotes collaboration among students, reinforces the development of problem solving skills within the context of active practice, and encourages effective reasoning and self-directed learning. Motivation for life-long learning is the basic idea promoted in this approach.

Problem-based learning begins with the introduction of an ill-structured problem on which all learning is centered. The problem is one that MBA students are likely to face as future professionals. Expertise is developed by engaging in progressive problem solving. Thus, problems drive the organization and dynamics of the course. MBA students, individually and collectively, assume major
responsibility for their own learning and instruction. Most of the learning occurs in small groups rather than in lectures. As teacher, the role changes from "sage on stage" to a "guide by the side." The teacher’s role is more like that of a facilitator and coach of student learning, acting at times as a resource person, rather than as knowledge-holder and disseminator. Similarly, your role, as a student, is more active, as you are engaged as a problem-solver, decision-maker, and meaning-maker, rather than being merely a passive listener and note-taker.
CHAPTER 3

HEALTH PROBLEMS

“Poor health is not caused by something you don’t have; it’s caused by disturbing something that you already have. Healthy is not something that you need to get, it’s something you have already if you don’t disturb it.”

~Dean Orni
PROBLEM 1

HOW MUCH DO YOU KNOW ABOUT HEALTH PROBLEMS?

OBJECTIVE:

To identify the specific health problem and discuss about the probable solutions to solve it. Work in groups and find out the best solution for this health problem.

What do you call a pain in the head?

a) Headache.
b) Bad head.
c) Hitch

HEADACHE:

It is a pain in the head, with the pain being above the eyes or the ears. It is located behind the head (occipital), or in the back of the upper neck. Headache, like chest pain or back ache, has many causes.

ORAL INTERACTION

Discuss the possible causes of having a headache. Choose the ten more common causes and make a list.

1. __________________________  5. __________________________
2. __________________________  6. __________________________
3. __________________________  7. __________________________
4. __________________________  8. __________________________
9. __________________________  10. _________________________
After identifying the most common causes for getting a headache. Students present a Role play representing one cause of a headache. After each presentation the class work in groups and give the most appropriate solution for each cause presentation.

WRITTEN REACTION

1. Students rewrite a definition of headache using their own words.

________________________________________________________________________
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________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

2. Look at the representations in class and write the solution for the one you like the most.

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
3. What do you do when you have a headache?

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

REMEDIES

1. _____________________
2. _____________________
3. _____________________
4. _____________________

*http://www.goggleimages.com
PROBLEM 2

HOW MUCH DO YOU KNOW ABOUT THIS HEALTh PROBLEM?
OBJECTIVE: Students have to make the best decision to help a person who is sick.

If you have chills, fever, muscle pains, you probably have …

a) a cold.
b) a flu.
c) constipation

THE FLU:
The flue is caused by viruses that infect the respiratory tract. Some people develop serious and potentially life-threatening medical complications, such as pneumonia.

ORAL INTERACTION
What are the Flu Symptoms? Circle the possible symptoms when a person has the Flu.

• Fever
• Hunger
• Cold
• Chills
• Cough
• Happiness
• Peace
• Muscle aches
• Fatigue
• Energy
WRITTEN REACTION

Choose six symptoms and discuss about the things that you do to feel better.

1. ______________________  4. ______________________
2. ______________________  5. ______________________
3. ______________________  6. ______________________

Write a recommendation to overcome each symptom:
1.
__________________________________________________________________
__________________________________________________________________
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ºhttp://www.googleimages.com
PROBLEM 3
HIV TEST

OBJECTIVE: To talk about the HIV test and find out different options to have a good lifestyle for a person who has this disease.

1 December is World Aids Day and we decided to send one of our own at Health24 to get tested. Seeing as our intern Kyle hadn’t had the test before, he bravely volunteered.

Last year Clicks Pharmacy was giving free nationwide HIV screening tests. The service is still available but no longer free of charge. It is highly recommended that each and every person get tested every three months.

THE EXPERIENCE

Waking up on the morning I had to get tested, I felt nervous, though I wasn’t sure why. I’ve never been promiscuous, never done drugs (not that I would start in the first place), and I’m cautious and well-informed about protecting myself from various diseases, including, well, HIV/Aids.

So, off I go to Clicks Pharmacy, sitting in the taxi reaching panic boiling point, already thinking my life is over before I’ve even taken the test. Typical, I was battling a potential nervous breakdown in an over-crowded taxi.

Eventually I got to the pharmacy and entered the nurses’ office where the tests are done. The whole testing process takes about 45 minutes.

Sister Glynnis Kolzing was in charge of giving me my HIV test. She was also responsible for the mandatory pre-and-post counseling that goes with having an HIV test. She asked me a stream of questions to test my knowledge of HIV and, to my surprise, there were things about HIV/ Aids I hadn’t even heard of.
The whole counseling session calmed me down, but the trepidation and longing to get the test over and done with were still very much with me. I had my blood pressure checked; sugar levels checked and even had a test done before we got to the actual HIV test.

THE TEST

And then it was time for the HIV test. I saw the HIV test apparatus and thought to myself: “It looks like a pregnancy test…” That tiny 8-10cm object was going to bring me either the best or worst news that this 21-year-old body could hear.

Oh, and the test is a just a finger-prick test - nothing too bloody and no long needles. I kept repeating to myself “thank god for that”.

Kolzing explained to me how the device works and how long it would take.

It takes about 10 minutes to see the results. The little pregnancy-look-a-like part of the HIV test kit has three indicator lines. Two of the lines indicate one of two HIV strands, and the other is a control line.

If a line appears on either the first or second HIV strand lines and on the control line, you have tested positive for the screening test. Note that it is just a screening test, not a 100% positive. If there are no lines on the HIV indicators and only a line on the control, then you are negative.

However the test will have to be re-taken if no line appears on the control line.

As I awaited my result of the test, I tried to calm myself down and spoke with Sister Kolzing some more about HIV, and other diseases. I have to admit I did also try to peek at my HIV test which was on the other side of the room. I couldn’t see anything and because of that I was starting to freak out. (Deep breaths, stuttering and sweating like a pig are my personal “freak out” symptoms.)
During the counseling session, Kolzing explained that even if you test positive for HIV you can have a full life by keeping fit, eating properly and taking your medication, which is not too different to what all of us should be doing anyway.

She also told me about a cocktail of drugs called post-exposure prophylaxis (PEP). This medication can help prevent the spread of HIV in a person that has contracted the disease, in the first 72 hours after their exposure to the virus.

This is one of several reasons that healthcare workers urge rape victims to go immediately to the police and to the hospital. PEP can save your life.

**SO BACK TO MY RESULTS**

After my internal nervous breakdown “patiently” awaiting my results, the time finally came – so far it had felt like the longest ten minutes of my life.

“Congratulations, you are negative,” said Kolzing. I kid you not, Queen’s *We are the Champions* was playing over and over in my head after I got the news.

“It’s so nice to give people good news,” she added.

Kolzing recommends that people go for an HIV test every 6 months, just to be on the safe side.

After the test I realized quite how much I had over-reacted to everything. It really wasn’t that bad. I’d had no good reason to worry and even if that had been the case, HIV/Aids can be managed well with correct medical care and attention to a healthy lifestyle.

I would definitely urge people to go get tested: there’s a sense of relief in knowing your status, whatever it may be. Armed with knowledge, you are then in a position to take the next step in caring for your health and others’.
It is also important to remember that you must make an appointment before you go for the test, no test will be done without an appointment.


**ORAL INTERACTION:**

Divide the students in groups to discuss what they know about HIV. They have to complete the chart with four ideas. Students write the most relevant information about this disease.
WRITTEN REACTION

Students can create a list of causes for this disease.

1. ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________
2. ________________________________________________________________
   ________________________________________________________________
3. ________________________________________________________________
   ________________________________________________________________
After setting the main causes to get HIV the students discuss in groups how they can prevent this disease. They create a poster to explain to the class.

OBJECTIVE: Find out some activities to help a friend who has breast cancer

Living with breast cancer

October is Breast Cancer Awareness Month. Did you know that one in eight women will develop breast cancer in her lifetime?

According to the Cancer Association of South Africa (Cansa) breast cancer is the leading female cancer in South Africa. Cancer of the breast, however, is not just a female problem and more and more often there are reports of male breast cancer too.

Even though currently breast cancer cannot be prevented, it can be diagnosed much earlier than before. Early detection of breast cancer is therefore really important. It is imperative to do a breast self-examination at least once a month.
Early diagnosis of breast cancer is also possible with routine mammography and early biopsies of suspicious lesions.

Breast cancer can affect anyone. If you have not been diagnosed with breast cancer yourself at some time in your life, the chances are good that you have a friend or relative affected by this disease.

A BREAST CANCER STORY:

Colette Dick: "In 1998 I was diagnose with breast cancer in my right breast. I had six chemotherapy sessions, follow by lumpectomy and six weeks radiation. Cancer came back after five years 2003, had mastectomy on my right breast. Cancer came back 2009 under my right armpit although glands were removed in 1998. Had operation, cancer was removed, had another six months chemotherapy session. Ever since, I’m clean. In 2011, I had breast reduction on my left breast due to heaviness (breast was too big) and had effect on my back… And it makes me a survivor of 14 years."
Verusha Singh: "Hi, my mum was diagnosed with breast cancer at the first stage. She has been for chemo and has removed one of her breast. For her safety she also removed her womb. My mum is now healthy and free of it. Thanks to the Lord above!"

ORAL INTERACTION

Students work in groups to discuss about the symptoms of breast cancer.

Check ✔️ the statement that you think corresponds to a breast cancer symptom.

- A breast lump or thickening that feels different from the surrounding tissue
- Fever
- Cold
- Bloody discharge from the nipple
- Change in the size or shape of a breast
- Headache
- Changes to the skin over the breast, such as dimpling
- Inverted nipple
- Peeling, scaling or flaking of the nipple or breast skin
- Redness or pitting of the skin over your breast, like the skin of an orange
WRITTEN REACTION

Students discuss about the following words and find out a definition for each one then write the definition using their own words.

✓ Lumps:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

✓ Nipple changes:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

✓ Cysts:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

✓ Breast pain:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
ANSWER THE FOLLOWING QUESTIONS:

1. What would you do if your best friend discovers that has breast cancer?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

2. How can you give her/him support?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

3. If you discover that your fiancé has breast cancer would you married him / her anyway? Why? Why not?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

4. What would you do if a doctor tells you that you have breast cancer and you have just one year of life?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
5. You have breast cancer you have a family your spouse and two children. Would you tell them about your problem immediately or would wait for a while to tell them about it?

______________________________________________________
______________________________________________________
______________________________________________________
______________________________________________________
PROBLEM 5

FOOD POISONING
If you eat contaminated food, you’re suffering from…

a) Fatigue.
b) Diarrhea.
c) Food poisoning

FOOD POISONING:

Food poisoning, also called food-borne illness, is illness caused by eating contaminated food. Infectious organisms — including various bacteria, viruses and parasites — or their toxins are the most common causes of food poisoning.

Infectious organisms or their toxins can contaminate food at any point during its processing or production. Contamination can also occur at home if food is incorrectly handled or cooked.

Food poisoning symptoms often include nausea, vomiting or diarrhea, which can start just hours after eating contaminated food. Most often, food poisoning is mild and resolves without treatment. But some cases are severe, requiring hospitalization.

OBJECTIVE

Classify the different kinds of symptoms and find out the best remedies to overcome this discomfort.
ORAL INTERACTION

Discuss in groups about ways you can get food poisoning. Make a list of them.

1.______________________________________________________________
2.______________________________________________________________
3.______________________________________________________________
4.______________________________________________________________
5.______________________________________________________________

Possible remedies for this problem

1.______________________________________________________________
2.______________________________________________________________
3.______________________________________________________________
4.______________________________________________________________
5.______________________________________________________________
“A problem is only a problem if you refuse to look for a solution. If you don’t take action to fix it then it will remain a problem.”

DCatherine Pulcifier
PROBLEM 6

A LIFE- OR- DEATH SITUATION

OBJECTIVE:

Analyze the situation and give the most suitable solution.

If Margaret Pabst Battin hadn’t had a cold that day, she would have joined her husband, Brooke Hopkins, on his bike ride. Instead Peggy (as just about everyone calls her) went to two lectures at the University of Utah, where she teaches philosophy and writes about end-of-life bioethics. That is the reason why she wasn’t with Brooke the moment everything changed.

ORAL INTERACTION

1. What do you think of this part of the story? Do you consider Peggy was related with the words below? Which one? Why?

- Luck
- Fate
- Coincidence
- Destiny
Do you believe in luck? Why? Why not?

![Good Luck Charm](http://www.goggleimages.com)

2. Do you believe in Fate?

![Fate Destiny Life](http://www.goggleimages.com)

3. Do you think that everything is predicted in our lives? Why? Why not?

![Psychic Reading](http://www.goggleimages.com)
4. Do you think that some situations in our lives are mere coincidence? Why? Why not?

STEP 1

Brooke was cycling down a hill in City Creek Canyon in Salt Lake City when he collided with an oncoming bicycle around a blind curve, catapulting him onto the mountain path. His helmet cracked just above the left temple, meaning Brooke fell directly on his head, and his body followed in a grotesque somersault that broke his neck at the top of the spine. He stopped breathing, turned purple and might have died if a flight-rescue nurse didn’t happen to jog by. The jogger resuscitated and stabilized him, and someone raced to the bottom of the canyon to call 911.
ORAL INTERACTION SECOND PART

1. Discuss about the accident. What would you have done, if you had been in that situation?

![Bike accident image](http://www.googleimages.com)

WRITTEN REACTION

If you rode a bike what kind of accidents could you have? Make a list.

1. __________________________________________________________
2. __________________________________________________________
3. __________________________________________________________
4. __________________________________________________________
5. __________________________________________________________

Describe a bike accident you have had. (100 words)

__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
Read your paragraph in the group and choose the best story.

http://www.goggleimages.com

STEP 2

If Peggy had been there and known the extent of Brooke’s injury, she might have urged the rescuers not to revive him. Brooke updated a living will the previous year, specifying that should he suffer a grievous illness or injury leading to a terminal condition or vegetative state, he wanted no procedures done that “would serve only to unnaturally prolong the moment of my death and to unnaturally postpone or prolong the dying process.” But Peggy wasn’t there, and Brooke, who had recently retired as an English professor at the University of Utah, was kept breathing with a hand-pumped air bag during the ambulance ride to University Hospital, three miles away. As soon as he got there, he was attached to a ventilator.
ORAL INTERATION

If the person in the accident was your father, or brother or son, and he would stay in a vegetative condition, would you think about the euthanasia idea? Why? or Why not? Discuss in groups.

Do you think euthanasia should be legalized? Why? Why not? Discuss in groups.
WRITTEN REACTION

Create a graph with advantages and disadvantages of Euthanasia.

EUTHANASIA

<table>
<thead>
<tr>
<th>ADVANTAGES</th>
<th>DISADVANTAGES</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>


STEP 3

By the time Peggy arrived and saw her husband ensnared in the life-sustaining machinery he hoped to avoid, decisions about intervention already had been made. It was Nov. 14, 2008, late afternoon. She didn’t know yet that Brooke would end up a quadriplegic, paralyzed from the shoulders down.

Suffering, suicide, euthanasia, a dignified death — these were subjects she had thought and written about for years, and now, suddenly, they turned unbearably personal. Alongside her physically ravaged husband, she would watch lofty ideas be trumped by reality — and would discover just how messy, raw and muddled the end of life can be.
ORAL INTERACTION

If this had been your case, what would you like people do for you?

[Image of Euthanasia - Murder or Saviour?]

WRITTEN REACTION

Write a paragraph about your previous decision.

__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________

STEP 4

In the weeks after the accident, Peggy found herself thinking about the title character in Tolstoy’s “Death of Ivan Ilyich,” who wondered, “What if my whole life has been wrong?” Her whole life had involved writing “wheelbarrows full” of books and articles championing self-determination in dying. And now here was her husband, a plugged-in mannequin in the I.C.U., the very embodiment of a right-to-die case study.
An international leader in bioethics, Peggy explored the right to a good and easeful death by their own hand, if need be, for people who were terminally ill, as well as for those whose lives had become intolerable because of chronic illness, serious injury or extreme old age. She didn’t shy away from contentious words like “euthanasia.” Nor did she run from fringe groups like NuTech, which is devoted to finding more-efficient methods of what it calls self-deliverance, or Soars (Society for Old Age Rational Suicide), which defends the right of the “very elderly” to choose death as a way to pre-empt old-age catastrophes. She also found common purpose with more-mainstream groups, like Compassion and Choices, that push for legislation or ballot initiatives to allow doctors to help “hasten death” in the terminally ill (which is now permitted, with restrictions, in Oregon, Washington, Montana and Vermont). And she testified in trials on behalf of individuals seeking permission to end their lives legally with the help of a doctor or a loved one.
ORAL INTERACTION

If you had had the right to take the decision to end your life legally with the help of a doctor or a loved one would you do it? Why? Why not?

STEP 5

At the heart of her argument was her belief in autonomy. “The competent patient can, and ought to be accorded the right to, determine what is to be done to him or her, even if . . . it means he or she will die,” she wrote in 1994 in “The Least Worst Death,” the third of her seven books about how we die.

Peggy traces her interest in death to her mother’s difficult one, from liver cancer, when Peggy was 21. Only later, when she started to write fiction in an M.F.A. program at the University of California, Irvine, (which she completed while getting her doctorate in philosophy and raising two young children) did she realize how much that event had shaped her thinking. Her short stories “all looked like bioethics problems,” she says, wrestling with topics like aging, mental competence, medical research, suicide — moral quandaries she would be mining for the rest of her life.
ORAL INTERACTION

What would you do if a relative of yours asked you to practice euthanasia?

STEP 6

Fiction allowed her to riff on scenarios more freely than philosophy did, so she sometimes used it in her scholarly writing. In “Ending Life: Ethics and the Way We Die,” published in 2005, she included two short stories: a fictional account of an aged couple planning a tandem suicide to make way for the younger generation, until one of them has a change of heart; and a story based on an actual experience in grad school, when Peggy had to help a scientist kill the dogs in his psych experiment.

The point of including the second story, she wrote in the book’s introduction, was to ground her philosophical arguments in something more elemental, “the unsettling, stomach-disturbing, conscience-trying unease” of being involved in any death, whether through action, as happened in that laboratory, or acquiescence.
ORAL INTERACTION

How did you feel when you practiced a dissection?

Have you ever seen somebody killing an animal? If yes how did you feel? Or what did you do?
STEP 7

When Peggy finished her doctorate in 1976, the right-to-die debate was dominated by the media spectacle around Karen Ann Quinlan, a comatose young woman whose parents went to the New Jersey Supreme Court for permission to withdraw her from life support. It helped Peggy clarify her thoughts about death with dignity and shaped her belief in self-determination as a basic human right. “A person should be accorded the right to live his or her life as they see fit (provided, of course, that this does not significantly harm others), and that includes the very end of their life,” she wrote in one of her nearly 40 journal articles on this subject. “That’s just the way I see it.”

ORAL INTERACTION

If somebody is in coma for many years, will you take the decision for that person?
What do you think about the cartoon above? Can you have fun about that situation? Why? Why not?

STEP 8

That’s the way she saw it after Brooke’s accident too, but with a new spiky awareness of what it means to choose death. Scholarly thought experiments were one thing, but this was a man she adored — a man with whom she shared a rich and passionate life for more than 30 years — who was now physically devastated but still free, as she knew he had to be, to make a choice that would cause her anguish.

ORAL INTERACTION

What was the decision that she had to take?
“It is not just about terminally ill people in general in a kind of abstract way now,” she wrote after the accident; “it’s also about my husband, Brooke. I still love him, that’s a simple fact. What if he wanted to die? Can I imagine standing by while his ventilator was switched off?”

**WRITTEN REACTION**

Make a list of feelings imagining the wife switching off her loved husband ventilator.

1. __________________________

2. __________________________

3. __________________________

4. __________________________

5. __________________________

6. __________________________

7. __________________________

8. __________________________

9. __________________________

10. _________________________

How can a person overcome those feelings? Make a list of tips to overcome them.

1. ____________________________________________________________________

2. ____________________________________________________________________

3. ____________________________________________________________________

4. ____________________________________________________________________

5. ____________________________________________________________________

6. ____________________________________________________________________

7. ____________________________________________________________________

8. ____________________________________________________________________

9. ____________________________________________________________________

10. ____________________________________________________________________
STEP 9

Before the collision, Brooke was known for his gusto. “At parties he was the one who ate the most, drank the most, talked the loudest, danced the longest,” one friend recalls. A striking 6-foot-5, he had a winning smile and a mess of steely gray hair and was often off on some adventure with friends.

He went on expeditions to the Himalayas, Argentina, Chile, China, Venezuela and more; closer to home, he often cycled, hiked or backcountry skied in the mountains around Salt Lake City.

In addition, Brooke, who had a bachelor’s degree and a doctorate from Harvard, was a popular English professor who taught British and American literature with a special fondness for the poetry of Wordsworth, Shelley, Byron and Keats.
ORAL INTERACTION

Do you think that Brooke has enjoyed his life? Why? Why not? Complete the chart with 4 things you think Brook did to enjoy life. Discuss in groups and make a consensus.

STEP 10

All that energy went absolutely still at the moment of his collision. When Brooke woke up in the I.C.U., his stepson, Mike, was at the bedside and had to tell Brooke that he might never again walk, turn over or breathe on his own. Brooke remained silent — he was made mute by the ventilation tube down his throat — but he thought of Keats:

*The feel of not to feel it,*

*When there is none to heal it*

*Nor numbed sense to steel it.*

“Those words, ‘the feel of not to feel it,’ suddenly meant something to me in ways that they never had before,” he wrote later on a blog his stepdaughter, Sara, started to keep people apprised of his progress. “My suffering was going to be a drop in the bucket compared to all the human suffering experienced by people throughout human history, but still, it was going to be a suffering nevertheless.”

**ORAL INTERACTION**

**Discuss in the group an report to the class what you understand by this phrase: “The feel of not to feel it”**
WRITTEN REACTION

Write the different situation when you feel of not to feel it.

1. ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________

2. ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________

3. ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________

4. ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________

5. ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________

STEP 11

Brooke took some solace in Buddhism, which he began exploring when he was in his 40s. A few weeks after the accident, a local Buddhist teacher, Lama Thupten Dorje Gyaltsen, came to his hospital room. “The body is ephemeral,” Lama Thupten declared, gesturing at his own body under his maroon-and-saffron robe. He urged Brooke to focus on his mind. At the time, it was a comfort to think that his mind, which seemed intact, was all that mattered. It meant he could still be
the same man he always was even if he never moved again. But as much as he yearned to believe it, Brooke’s subsequent experiences — spasms, pain, catheterizations, bouts of pneumonia, infected abscesses in his groin — have made him wary of platitudes. He still wants to believe the mind is everything. But he has learned that no mind can fly free of a useless body’s incessant neediness.

ORAL INTERACTION

What is your opinion about the bold phrase? How can he be the same?

STEP 12

One gray morning in February, more than four years after the accident, I met Brooke and Peggy at their home in the Salt Lake City neighborhood known as the Avenues. Brooke rolled into the living room in his motorized wheelchair. It was a month before his 71st birthday, and his handsome face was animated by intense, shiny brown eyes, deep-set under a bristly awning of brow.
He was dressed as usual: a pullover, polyester pants that snap open all the way down each leg, a diaper and green Crocs. A friend was reading on a couch nearby, a caregiver was doing her schoolwork in the kitchen and Peggy had retreated upstairs to her office amid towers of papers, books and magazines. She had finally gained some momentum on a project that was slowed by Brooke’s accident: a compendium of philosophical writings about suicide, dating as far back as Aristotle.

Peggy, who is 72, still works full time. This lets her hold on to the university’s excellent health insurance, which covers a large portion of Brooke’s inpatient care and doctor bills, with Medicare paying most of the rest of them. But even with this double coverage; Peggy spends a lot of time arguing with insurance companies that balk at expenditures like his $45,000 wheelchair. And she still pays a huge amount of the cost, including nearly $250,000 a year to Brooke’s caregivers, 12 mostly young and devoted health care workers who come in shifts so there’s always at least one on duty.

Peggy says she and Brooke were lucky to have had a healthy retirement fund at the time of the accident, but she doesn’t know how many more years they will be able to sustain this level of high-quality 24-hour care.

*http://www.goggletmages.com*
ORAL INTERACTION

What would you do if you have had a very sick relative and you do not have enough money to take care of him or her?

WRITTEN INTERACTION

Create a poster which describes your feelings and emotions thinking about taking care of a sick relative and not having money.
WRITTEN REACTION

Write ten options that a person should have in this situation.

1. ______________________________________________________________
   ______________________________________________________________
   ______________________________________________________________

2. ______________________________________________________________
   ______________________________________________________________
   ______________________________________________________________

3. ______________________________________________________________
   ______________________________________________________________
   ______________________________________________________________

4. ______________________________________________________________
   ______________________________________________________________
   ______________________________________________________________

5. ______________________________________________________________
   ______________________________________________________________
   ______________________________________________________________

6. ______________________________________________________________
   ______________________________________________________________
   ______________________________________________________________

7. ______________________________________________________________
   ______________________________________________________________
   ______________________________________________________________

8. ______________________________________________________________
   ______________________________________________________________
Scattered around the living room were counter-height stools that Peggy picked up at yard sales. She urges visitors to pull them up to Brooke’s wheelchair, because he’s tall and the stools bring most people to eye level.

About two years ago, Brooke used a ventilator only when he slept, but following a series of infections and other setbacks, he was now on the ventilator many of his waking hours, too, along with a diaphragmatic pacer that kept his breathing regular. Earlier that morning his caregiver adjusted the ventilator so he and I could
BEYOND THE PROBLEM

talk, deflating the cuff around his tracheostomy tube to allow air to pass over his larynx. This let him speak the way everyone does, vocalizing as he exhaled. It seemed to tire him, though; his pauses became longer as our conversation went on. But whenever I suggested that we stop for a while so he could rest, Brooke insisted that he wanted to keep talking.

What he wanted to talk about was how depressed he was. He recognized the feeling, having struggled with bipolar disorder since adolescence. “It takes a long time to get ready for anything,” he said about his life now. “To get up in the morning, which I kind of hate, to have every day be more or less the same as every other day . . . and then to spend so much time going to bed. Day after day, day after day, day after day.”

Brooke has good days and bad days. When friends are around playing blues harmonica or reading aloud to him, when his mind is clear and his body is not in pain — that’s a good day. On a good day, he said, he feels even more creative than he was in his able-bodied life, and his relationships with Peggy, his two stepchildren and his many friends are richer and more intimate than before; he has no time or patience for small talk and neither do they. Every so often he’ll turn to Peggy and announce, “I love my life.”

*http://www.goggleimages.com*
ORAL INTERACTION

What do you think about his optimism although he is in a vegetative state?

Would you have the same reaction if you were in a vegetative state? Why? Why not?
WRITTEN REACTION

Discuss about Brook’s optimisms. What positive things a person in a vegetative state should have in his or her life? Make a list.

1. ___________________________________________________________
2. ___________________________________________________________
3. ___________________________________________________________
4. ___________________________________________________________
5. ___________________________________________________________
6. ___________________________________________________________
7. ___________________________________________________________
8. ___________________________________________________________
9. ___________________________________________________________
10. ___________________________________________________________

STEP 14

On a good day, Brooke’s voice is strong, which lets him keep up with reading and writing with voice-recognition software. A caregiver arranges a Bluetooth microphone on his head, and he dictates e-mail and races through books by calling out, “Page down,” when he reaches the bottom of a screen.

On a good day, he also might get outside for a while. “I like to take long walks, quote unquote, in the park,” he told me. “There’s a graveyard somewhat lugubriously next to us that I like to go through,” pushed in his wheelchair by a
caregiver with Peggy alongside. A couple of years ago, he and Peggy bought two plots there; they get a kick out of visiting their burial sites and taking in the view.

WRITTEN REACTION

Which other technology gadgets you can mention for people who have any kind of sickness? Make a list of ten things.

1. ____________________  
2. ____________________  
3. ____________________  
4. ____________________  
5. ____________________  
6. ____________________  
7. ____________________  
8. ____________________  
9. ____________________  
10. ____________________
STEP 15

But on bad days these pleasures fade, and everything about his current life seems bleak. These are days when physical problems — latent infections, low oxygen levels, drug interactions or, in a cruel paradox of paralysis, severe pain in his motionless limbs — can lead to exhaustion, depression, confusion and even hallucinations. As Brooke described these darker times, Peggy came down from her office and sat nearby, half-listening. She has bright blue eyes and a pretty, freckled face fringed by blond-white hair. Most days she wears jeans and running shoes and a slightly distracted expression. She takes long hikes almost daily, and once a week tries to squeeze in a Pilates session to help treat her scoliosis. Each body harbors its own form of decay, and this is Peggy’s; the scoliosis is getting worse as she ages.

She walked over to us, bent crookedly at the waist, and gently kissed Brooke’s forehead. “Depression is not uncommon in winter,” she said in the soft voice she almost always uses with him. “It’s important to think positive thoughts.”

“Basically I dislike being dependent, that’s all,” he said, looking hard into her eyes. He spit some excess saliva into a cup.

“It’s something you never complain about,” she said. “You’re not a big complainer.”

“One thing I don’t like is people speaking for me, though.”

Peggy looked a bit stung. “And that includes me?” she asked.

“Yes,” he said, still looking into her eyes. “I don’t like that.”

She made an effort not to get defensive. “Well, sometimes that has to happen, for me to speak for you,” she began. “But . . . but not always. I try not to.”
Brooke seemed sorry to have spoken up; it was clear he didn’t want to hurt her. “I’m trying to be as frank as possible,” he said.

“No, it’s good,” she assured him, her protective instincts clicking in. “It helps me for you to say that, to tell me what you would have wanted to say instead.”

All Brooke could muster was a raspy, “Yep.”

“The most important thing is to not speak for someone else,” Peggy insisted.

“Yes,” Brooke repeated. “What I want to do most right now is be quiet and read.” So Peggy and I left him in the living room, where the big-screen monitor was queued up to Chapter 46 of “Moby-Dick.” “Page down,” he called out, forced to keep repeating it like a mantra because his speech was croaky and the software had trouble recognizing the phrase. “Page down, Page down.”

Why do you think Brook does not like someone else speaks for him? Write three reasons.
STEP 16

For Brooke, what elevates his life beyond the day-to-day slog of maintaining it — the vast team effort required to keep his inert sack of a body fed and dressed and clean and functioning — is his continuing ability to teach part time through the University of Utah’s adult-education program. During my February visit, I sat in on one of his classes, which he teaches with Michael Rudick, another retired English professor from the university. Some two dozen students, most over 60, crammed into Brooke’s living room for a discussion of “Moby-Dick.” Conversation turned to the mind-body problem. “Melville is making fun here of Descartes, as though you could exist as a mind without a body,” said Howard Horwitz, who teaches in the English department and was helping out that day.

Brooke seemed exhausted and sat quietly, impassive as Buddha as his ventilator sighed. At one point a student called out to ask what Brooke thought about a particular passage. He responded with an oblique, “I’d much rather hear what you think,” and was silent for the rest of the class. The discussion continued with the two other professors taking charge. There was an almost forced animation, as if the students had tacitly agreed to cover for a man they loved, admired and were worried about.
When Peggy arrived late — she was at a meeting on campus — Brooke flashed her one of his dazzling smiles. His eyes stayed on her as she positioned herself near an old baby grand that hugs a corner of the living room, a memento from Brooke’s parents’ house in Baltimore. Above the piano is a huge painting that Peggy got years ago, a serial self-portrait of a dark-haired figure with a mustache — six full-body images of the same man in various stages of disappearing.

“He’s never looked this bad,” Peggy whispered to me during the break as students milled around. She went to Brooke and kissed his forehead. “Are you O.K.?” she asked softly.

“I’m fine,” he said. “Don’t worry.”

They have this exchange a lot: Peggy leaning in to ask if he’s O.K., Brooke telling her not to worry, Peggy worrying anyway. Quietly, so the students wouldn’t hear, she asked the respiratory therapist on duty, Jaycee Carter, when Brooke last had his CoughAssist therapy, a method that forces out mucus that can clog his lungs.

“Three hours ago,” Jaycee said. But Brooke said he didn’t want it while the class was there: it’s noisy, and it brings up a lot of unsightly phlegm.

As students started to head back to their seats, Peggy lit on a more discreet alternative: a spritz of albuterol, used in asthma inhalers to relax the airways, into his track tube. Jaycee stood by awaiting instructions, Brooke kept shaking his head — no albuterol, not now, no — and Peggy kept insisting. At last, annoyance prickling his expressive eyebrows, he gave in, and Jaycee did as she was told. But the albuterol didn’t help.

Peggy retreated to the piano as the class resumed, her eyes brimming. “This is bad,” she murmured. “This is really bad.” Underlying her anxiety was a frightening possibility: that Brooke’s inability to teach that day was the start of a progressive decline. Up until then, his occasional mental fogginess was always
explained by something transient, like an infection. But if he were to lose his intellectual functioning, he would be robbed of all the things that still give his life meaning: teaching, writing and interacting with the people he loves. If that day ever came, it would provoke a grim reckoning, forcing Brooke to rethink — provided he was still capable of thinking — whether this is a life worth holding onto.

**ORAL INTERACTION**

Why Brook could not teach that day?

![Image of a yellow smiley face with a tongue sticking out](http://www.googleimages.com)

**WRITTEN REACTION**

Write four reasons:

1. ______________________________________________________________
   ______________________________________________________________
   ______________________________________________________________

2. ______________________________________________________________
   ______________________________________________________________
   ______________________________________________________________
STEP 17

After class, Jaycee wheeled Brooke to the dining area so he could sit with Peggy and me as we ate dinner. Brooke doesn’t eat anymore. Last August he had a feeding tube inserted as a way to avoid the dangerous infections and inflammations that were constantly sending him to the hospital. If he doesn’t chew, drink or swallow, there’s less chance that food or fluid will end up in his lungs and cause aspiration pneumonia.

In his prior life, Brooke couldn’t have imagined tolerating a feeding tube; he loved eating too much. In fact, when he updated his living will in 2007, he specifically noted his wish to avoid “administration of sustenance and hydration.” But the document had a caveat found in most advance directives, one that has proved critical in negotiating his care since the accident: “I reserve the right to give current medical directions to physicians and other providers of medical services so long as I am able,” even if they conflict with the living will.

Thus a man who had always taken great joy in preparing, sharing and savoring food decided to give up his final sensory pleasure in order to go on living. He swears he doesn’t miss it. He had already been limited to soft, easy-to-swallow foods with no seeds or crunchiness — runny eggs, yogurt, mashed avocado. And as much as he loved the social aspects of eating, the long conversations over the last of the wine, he managed, with some gentle prodding from Peggy, to think of the feeding tube as a kind of liberation. After all, as she explained on the family
blog, Brooke could still do “almost all the important things that are part of the enjoyment of food” — he could still smell its aroma, admire its presentation, join in on the mealtime chatter, even sample a morsel the way a wine taster might, chewing it and then discreetly spitting it out. Maybe, she wrote, “being liberated from the crass bodily necessity of eating brings you a step closer to some sort of nirvana.”

ORAL INTERACTION

Imagine the sensation of smelling but do not eating because of your sickness, discuss in the group and find our six feelings and three solutions.
WRITTEN REACTION

FEELINGS:

1. ________________________  4. ________________________
2. ________________________  5. ________________________
3. ________________________  6. ________________________

SOLUTIONS:

1. __________________________________________________________________________
2. __________________________________________________________________________
3. __________________________________________________________________________

Or as Brooke put it to me in his unvarnished way: “You can get used to anything.”

ORAL INTERACTION

What do you think about the quote: “You can get used to anything” True or False Why?
Discuss in groups and find out four things people can get used to and write the most relevant ideas.

1. _______________________________________________________________________
   _______________________________________________________________________
   _______________________________________________________________________

2. _______________________________________________________________________
   _______________________________________________________________________
   _______________________________________________________________________

3. _______________________________________________________________________
   _______________________________________________________________________
   _______________________________________________________________________

4. _______________________________________________________________________
   _______________________________________________________________________
   _______________________________________________________________________

STEP 18

Brooke kept nodding off as he sat watching us eat — the class had really drained him — but Peggy kept him up until 9 o’clock, when his hour-long bedtime ritual begins. After Jaycee brought him to his room, she and the night-shift caregiver hoisted him from his wheelchair and into the bed using an elaborate system of ceiling tracks, slings and motorized lifts; changed him into a hospital gown; washed his face and brushed his teeth; emptied his bladder with a catheter; strapped on booties and finger splints to position his extremities; hooked him up to the ventilator; and set up four cans of Replete Fiber to slowly drip into his feeding tube as he slept. The ritual ended with what Brooke and Peggy think of as the most important part of the day, when Brooke finally is settled into bed and Peggy takes off her shoes and climbs in, too, keeping him company until he gets sleepy. (Peggy sleeps in a new bedroom she had built upstairs.) There they lie,
side by side in his double-wide hospital bed, their heads close on the pillow, talking in the low, private rumbles of any intimate marriage.

ORAL INTERACTION

What do you think is the motor to a person take care of another person like Peggy does with Brook? Discuss, make a consensus and write the three main reasons.

WRITTEN INTERACTION

1. ______________________________________________________________
   ______________________________________________________________
   ______________________________________________________________

2. ______________________________________________________________
   ______________________________________________________________
   ______________________________________________________________

3. ______________________________________________________________
   ______________________________________________________________
“The problem is not that there are problems. The problem is expecting otherwise and thinking that having problems is a problem”

Albert Einstein
PROBLEM 7

A GOOD SECRETARY

For a boss, it is imperative to choose a good secretary. An effective secretary helps the boss to do his or her work well. Every administrative expects a secretary to type well, to take dictation, to screen the daily correspondence, to keep an appointment calendar, to maintain a good filing system, to know how to use the technology, to manage with Word, Excel and to do various other related duties.

Mr. Smith is an executive in an international public relations firm, and he needs to hire a new secretary. The secretary must have the following qualifications:

- Good typing and know how to use an Ipad very well.
- Be active and fast thinker
- Pleasant manner with people

Knowledge of Languages
Which person do you think is the best qualified to be Mr. Smith’s secretary?

<table>
<thead>
<tr>
<th></th>
<th>GREER</th>
<th>ELIZABETH</th>
<th>ANNE</th>
<th>JANE</th>
</tr>
</thead>
<tbody>
<tr>
<td>BLACK</td>
<td>60 wpm</td>
<td>80 wpm</td>
<td>90 wpm</td>
<td>50 wpm</td>
</tr>
<tr>
<td>I PAD</td>
<td>yes</td>
<td>no</td>
<td>yes</td>
<td>no</td>
</tr>
<tr>
<td>OTHER SKILLS</td>
<td>Operates: Calculator</td>
<td>Operates: Computer</td>
<td>Operates: Calculator</td>
<td>Operates: Computer</td>
</tr>
<tr>
<td>LANGUAGES</td>
<td>English</td>
<td>English and French</td>
<td>English and Spanish</td>
<td>English, Spanish, and French</td>
</tr>
<tr>
<td>APPEARANCE</td>
<td>Neatly and simply dressed</td>
<td>Well-dressed; well groomed</td>
<td>Well-groomed; natural with no make up</td>
<td>Sexy; wears a lot of make up</td>
</tr>
<tr>
<td>MANNER</td>
<td>Mature and businesslike telephone manner; literated and independent; desk always clean, keeps nothing on it.</td>
<td>Pleasant telephone voice; makes a lot of personal telephone calls; desk always spotless</td>
<td>Helpful telephone manner but high voice, moody; cluttered desk</td>
<td>Warm and helpful telephone manner; spends a lot of time talking to other workers; desk not very neat</td>
</tr>
<tr>
<td>COMMENTS</td>
<td>Did not get along with coworkers</td>
<td>Did not know many of his coworkers but always polite</td>
<td>Had some difficulty with female coworkers</td>
<td>Always caught the eye of the men in the office</td>
</tr>
<tr>
<td>AGE</td>
<td>24</td>
<td>29</td>
<td>41</td>
<td>32</td>
</tr>
<tr>
<td>MARITAL STATUS</td>
<td>Single</td>
<td>Single</td>
<td>Divorce: one child</td>
<td>Single</td>
</tr>
</tbody>
</table>
ORAL INTERACTION
1. Which candidate do you think is the best qualified for the job?
2. Which candidate would you hire if you were Mr. Smith
3. Do you agree or disagree with the following statements? Explain your reasons.
   a. A secretary should be a woman.
   b. A secretary should be sexy and attractive.
c. A secretary should be young and enthusiastic.

d. A secretary should be mature and experienced.
A secretary should be independent and make decisions on his or her own.

e. A secretary should always ask for his or her boss’s permission before acting.
f. A secretary should be loyal to his or her boss.

Below you have a list of duties that most secretaries know. Which duties do you think are professional and which are personal? Explain your reasons.

a. Making coffee  
b. Planning luncheons for the office  
c. Keeping the office neat  
d. Taking telephone messages  
e. Staying overtime when there is a lot of work  
f. Getting along with clients  
g. Maintaining accurate files  
h. Remembering the boss’s birthday  
i. Making excuses for the boss on the telephone when he or she does not want to talk.  
j. To make reservations for a business trip.
WRITTEN REACTION

Below is a list of characteristics of each secretary. Without looking back at the original text, match the secretary’s name with these characteristics.

<table>
<thead>
<tr>
<th>GREER</th>
<th>ELIZABETH</th>
<th>ANNE</th>
<th>JANE</th>
</tr>
</thead>
<tbody>
<tr>
<td>a.</td>
<td>_________</td>
<td>_______</td>
<td>_______</td>
</tr>
<tr>
<td>b.</td>
<td>_________</td>
<td>_______</td>
<td>_______</td>
</tr>
<tr>
<td>c.</td>
<td>_________</td>
<td>_______</td>
<td>_______</td>
</tr>
<tr>
<td>d.</td>
<td>_________</td>
<td>_______</td>
<td>_______</td>
</tr>
<tr>
<td>e.</td>
<td>_________</td>
<td>_______</td>
<td>_______</td>
</tr>
<tr>
<td>f.</td>
<td>_________</td>
<td>_______</td>
<td>_______</td>
</tr>
<tr>
<td>g.</td>
<td>_________</td>
<td>_______</td>
<td>_______</td>
</tr>
<tr>
<td>h.</td>
<td>_________</td>
<td>_______</td>
<td>_______</td>
</tr>
<tr>
<td>i.</td>
<td>_________</td>
<td>_______</td>
<td>_______</td>
</tr>
<tr>
<td>j.</td>
<td>_________</td>
<td>_______</td>
<td>_______</td>
</tr>
</tbody>
</table>

a. ____________________ liberated
b. ____________________ sexy
c. ____________________ around forty
d. ____________________ unpleasant voice
e. ____________________ speaks only English
f. ____________________ popular with male coworkers
g. ____________________ moody
h. ____________________ uses the telephone a lot
i. ____________________ best typist
j. ____________________ Knows the most languages

Based on your understanding of the characteristics of a good secretary, complete the sentences in the following paragraph.

A good secretary should be mature and _____________________. She or he should also have good ____________________ and ____________________ skills. A good secretary should be able to ____________________ at least ____________________ words per minute and to take ____________________ at around ____________________ words per minute.

Write about the things secretaries do. Are they professional or unprofessional?

a. Taking shorthand

________________________________________________________
________________________________________________________
Making coffee

b. Keeping the office neat

c. Maintaining accurate files

d. Remembering the boss’s birthday

e. Typing business letters

Write a sentence about each secretary. Follow the example.

Greer was the secretary who was liberated, was neatly dressed, and had trouble with coworkers.

a. Elizabeth

b. Anne
c. Jane

Write a short letter of reference for one of the secretaries. Use the letter below as a model.

Month, day, year

To Whom It May Concern:

Ms. Greer Black worked as a secretary in this office for the past three years. While she worked here, she was a good secretary. On the telephone she was always mature and businesslike. Her office skills were above average. She typed 60 words per minute and use the computer. She knew how to operate the calculator.

Ms. Black was an independent worker who always kept her area neat. Ms. Black only weakness in this job was that she did not get along well with her coworkers.

Sincerely yours,

Name

Title of signer.
PROBLEM 8
THE GOLD YEARS

OBJECTIVE

Read de situation and help Cesar and Martha to decide what to do. Where do you think they should go? Why?

DIFFERENT PLACES

Retirement has its advantages: not having to go to work every day, not thinking of work pressures, being free to travel, reading and thinking as much as one wants, and having a lot of time for hobbies.

Some older people, on the other hand, see disadvantages in retirement. They find themselves with little to do in their free time, with a general feeling of uselessness.

Cesar and Martha are a couple nearing retirement. They have brought up two children, who are now married with their own children. They all live in Palm Spring near Cesar and Martha. Cesar and Martha have a lot of energy left, and they wish to continue enjoying themselves on their modest pension. Most of all, they want to continue being productive. They have carefully thought about their retirement plans, and they have narrowed their possibilities to the three choices below.

<table>
<thead>
<tr>
<th></th>
<th>TROPICAL SAND</th>
<th>EXOTIC HIGHLAND</th>
<th>HOMETOWN (PALM SPRING)</th>
</tr>
</thead>
<tbody>
<tr>
<td>CLIMATE</td>
<td>Humid, sunny, hot year-round</td>
<td>Dry, sunny, two seasons</td>
<td>Hot summers, cold winter, four seasons</td>
</tr>
<tr>
<td>ENVIRONMENT</td>
<td>Many well-to-do</td>
<td>Same American Friends</td>
<td>and</td>
</tr>
</tbody>
</table>
## BEYOND THE PROBLEM

### ACTIVITIES
- **pensioners; active night life; large city**
- **pensioners in a family live there; country where small town; people do not interesting, know English; friendly folk. medium-sized city.**
- **Sea, swimming, beach, gambling**
- **Swimming pool, skiing, mountain climbing**
- **Very few social activities; can continue working**

### ECONOMY
- **Expensive, requiring them to use their savings as well as their pension; special services for retirees**
- **Cheap, could afford servants on their pension;**
- **Moderately expensive, can’t afford servants**

### HEALTH CONDITIONS
- **No food precautions necessary; medicine and doctors plentiful**
- **Health precautions must be taken with food and water; one English-speaking doctor**
- **No food precautions necessary; doctors and medicine nearby**

### HOUSING
- **High -rise apartment; limited space for children to visit**
- **Large house and patio with garden and pool; plenty of room for children; very far away**
- **Have their own house that is too large for the two of them**

---

*Elaborated by: Vera. A (2015)*
ORAL INTERACTION

Why do you think Cesar and Martha

a. Move to Tropical Sand?
b. Move to Exotic Highland?
c. Stay in Palm Spring?

Imagine that you are one of the children of Cesar and Martha. What would you advise them to do about their retirement?

What do you think are the needs of retired people? Decide what the best is for them in each of the following areas:

a. CLIMATE dry hot sunny cold humid
b. ENVIRONMENT large city small town middle-sized city
c. ACTIVITIES gambling swimming skiing dancing
d. HOUSING nursing home high-rise-apartment private home

Decide what the worst is for retired people in each of the following areas:

a. Climate
b. Environment
c. Activities
d. Housing

What are your feelings about retirement?

a. At what age should people retire?
b. Should the government force people to retire?
c. Should retirees live in special communities or nursing homes?
d. Should retirees remain with their children?

WRITTEN REACTION

Write three disadvantages of retiring in Tropical Sand.

a. The climate is humid
b. ________________________________________________________________
   ________________________________________________________________
c. ________________________________________________________________
   ________________________________________________________________
d. ________________________________________________________________
   ________________________________________________________________

Write three disadvantages of retiring in Exotic Highland

a. The residents there do not know English
b. ________________________________________________________________
   ________________________________________________________________
c. ________________________________________________________________
   ________________________________________________________________
d. ________________________________________________________________
   ________________________________________________________________
In your opinion, what is the major disadvantage of retiring in Palm Springs? Discuss in groups and answer:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

What is the major advantage? Discuss in groups and answer.

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
PROBLEM 9

THE ADVERTISEMENT

LOOKING FOR
Adult who was an orphaned child desires information about an adopted baby girl born twenty-five years ago at the Central Hospital in Amherst, Massachusetts. Mother’s name: Rose; Father’s name: Unknown. Please help me find my origins. Write: Ms. Chris North

Box 452
Springfield, Virginia

OBJECTIVE: Help the person to find her parents. Discuss and decide
ORAL INTERACTION

- Who was the child born twenty-five years ago in Amherst, Massachusetts?
- Rose North’s real mother allowed her baby to be adopted. What do you think her reasons were?
- Rose North plans to get married soon and she hopes to have a family of her own. What do you think she wants to find out about her origins?
- How do you think Rose’s adopted parents feel about her efforts to find her biological parents?
- Adoption and birth records of orphans are closed according to the law, in some areas. Rose is not able to look at her own records because of this law. What do you think of that law?
- Do you agree or disagree with the following statements:

1. The “real” parents are the people who raise and love a child
2. Adoption records should be opened to orphaned children
3. Orphaned adults do not have a right to know their origins, neither the names of their biological parents.
4. Adopted children should be told early that they are adopted
5. Orphaned adults should not investigate their origins because they might be hurt by what they could find out.
6. A gay couple should be allowed to adopt a child
7. A single man or woman should be allowed to adopt a child

- At the present time there are many children without parents. What do you think can be done to help them?
WRITTEN REACTION

Can you think of any reasons Rose’s real mother might have allowed Rose to be adopted? Discuss in groups and write the reasons.

1. ______________________________________________________________
   ______________________________________________________________
   ______________________________________________________________

2. ______________________________________________________________
   ______________________________________________________________
   ______________________________________________________________

3. ______________________________________________________________
   ______________________________________________________________
   ______________________________________________________________
   ______________________________________________________________

Which of these reasons you think are acceptable to do that?

❖ Be unmarried
❖ Be very poor
❖ Be too young
❖ Have HIV
❖ Want to void the responsibilities of motherhood.
❖ Want the baby to have a good home

Write a one-paragraph story about Rose North. Answer the following questions in order to create your paragraph

• Where was Rose North born? How long ago?
• What were her parents’ names?
• What happened to her?
• What does she want to find out?
• Why does she want to find this out?
PARAGRAPH:

______________________________
______________________________
______________________________
______________________________
______________________________
______________________________
______________________________
______________________________

ºhttp://www.goggleimages.com
CHAPTER 6

A BIT OF EVERYTHING

“Problems are to the mind what exercise is to the muscles, they toughen and make strong.”

Norman Vincent Peale
DIFFERENT PROBLEMS AND SITUATIONS

OBJECTIVE

Interaction: Students compare and discuss the different situations give reasons for your answers

1. If you could improve one thing about your personal appearance, what would it be?

2. If you went to a deserted island
   Which book would you take with you?
   Which person would you like to go with?
   Which fruit would you like to find there?
3. What is the most important characteristic of a good teacher?

![Image of a teacher with characteristics on a blackboard](http://www.googleimages.com)

4. What is the most important characteristic of a parent?

![Image of a woman and child](Taken by: Vera. A (2012))
5. What is the most important characteristic of a good brother or sister?

6. What is the most important characteristic of a good friend?
7. What kind of person would you like to marry with?

8. What kind of person would you like your son or daughter to marry with?

9. If you could improve one thing about your personality, what would it be?
10. What in your opinion is the most serious problem in the world today?

![Image of Earth being held in hands]

11. In your opinion what is the most significant invention in the history of the world?

![Image of book cover titled "The Story of Inventions"]
12. What is the most important discovery in the world?

[Image: http://www.goggleimages.com]

13. As you grow older, what is your most serious concern?

[Image: http://www.goggleimages.com]
14. How would you prefer spending a free afternoon?

15. What would you do if you suddenly inherited a million dollars?
16. What is the most beautiful sight that you have ever seen?

http://www.goggleimages.com

17. What is something that you are particularly proud of?

http://www.goggleimages.com
18. What is your worst habit?

![Stop sign with bad habits message]

19. Name a skill that you would like to learn before you die.

![Charlie Brown building a card tower]

*http://www.googleimages.com
20. What is your secret of happiness?

![Image](http://www.goggleimages.com)

21. What is your most important possession?

![Image](http://www.goggleimages.com)
22. Are you superstitious? What is your superstition about?

23. What is the funniest experience in your life?
24. What would you do if you had only one year to live?

![Image of a person with a quote]

One year of life is worth more than twenty years of hibernation.

(Anthony de Mello)

25. What is your pet peeve?

![Image of a frustrated person]

26. After your death, what would you like people to say about you?

![Image of a gravestone]

*http://www.goggleimages.com
27. What is the worst characteristic of the young generation?

28. What is the worst characteristic of the old generation?
29. When would you like to stop working or retire?

![Image](http://www.goggleimages.com)

30. What would you like to do when you get retired?

![Image](http://www.goggleimages.com)
31. What thing you do well?

32. What characteristics your best friend should have?
33. What is your favorite song? What kind of song is it?

![Image](http://www.gogletimages.com)

34. What is your favorite book? What kind of book is it?

*Photo by: Vera. A. (2014)*
35. What would you do if you see your boyfriend or girlfriend kissing another person?

36. Name something that you have to do regularly but you really dislike.
37. What would you do if you lost everything you have?

38. What would you do if the person you love madly and deeply does not love you?
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