**ĐÁP ÁN**

**I. LISTENING (5.0 points)**

1. F 2. M 3. M 4. F 5. B

6. E 7. G 8. C 9. A 10. H

11. C 12. B 13. C 14. A 15. B

16. SOMETHING DRAMATIC

17. GROWING QUICKLY

18. (FAMILY) DYNAMICS

19. IN AFRICA

20. DECLINING

21. DECLINING POPULATION

22. 2.1

23. LIVING COST

24. 200.000

25. GEN ZS AND MILLENNIALS

**II. READING (8.0 points)**

**II.1. LANGUAGE IN USE (3.0 points)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 26. C | 27. A | 28. A | 29. D | 30. A |
| 31. B | 32. B | 33. D | 34. B | 35. C |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 36. apprehension | 37. outnumbering | 38. disquiet | 39. unwieldy | 40. expertise |

**PART 3.**

Such far all attempts relating the bird’s navigational ability to electric forces and magnetic activity failed. Magnets, and minute radio transmitters, attaching to the bird’s body, do not interrupt or influence migration. Radar beams bombarding the bird visible have no known effect. Rotation of migrants in covered cages during transport by car or plane does not confuse them on release. One look on the celestial clues, their sky compass, and the really expert long-distance birds are away in the correct direction. Birds are not proved to carry a magnetic compass.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 0. So | 41. to relate | 42. have failed | 43. attached | 44. invisibly | 45. at |

**II.2. READING COMPREHENSION (5.0 points)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 46. wolf | 47. were | 48. use | 49. otherwise/or | 50. last |
| 51. so | 52. case | 53. sooner | 54. There | 55. condition |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 56. NG  | 57. T  | 58. T | 59. F  | 60. T  | 61. NG  | 62. NG  |

|  |  |  |
| --- | --- | --- |
| 63. apothecary practice | 64. (possible) toxic effects | 65. molecular evidence |
| 66. no peer-reviewed study | 67. ambiguous guessing game  | 68. the placebo effect |

69. F 70. G 71. E 72. D 73. H 74. A 75. B

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 76. B | 77. C | 78. B | 79. A | 80. C |
| 81. D | 82. D | 83. B | 84. B | 85. B |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 86. B | 87. E | 88. C | 89. B | 90. F | 91. C | 92. D | 93. A | 94. E | 95. D |

**III. WRITING (5.0 points)**

**PART 1**

**- Contents (1.0 point)**

**+ The report MUST cover the following points:**

Introduce the chart / table (**2 points**) and state the striking features (**2 points**)

Summarise the main features with relevant data from the chart and the table and make relevant comparisons (**6 points**)

+ The report **MUST NOT** contain personal opinions. (A penalty of 1 point to 2 points will be given to personal opinions found in the answer).

**- Language use (1.0 point)**

**The report should:**

+ demonstrate a wide variety of lexical and grammatical structures,
+ have correct use of words (verb tenses, word forms, voice,…); and mechanics (spelling, punctuation,...),
+ maintain coherence, cohesion, and unity throughout (by means of linkers and transitional devices).

**Penalties**

A penalty of 1 point will be given to any summary that is much longer than or shorter than the word limit.

SAMPLE

The dual pie charts present a comparative analysis of the relative contributions of various food groups to the total energy intake derived from highly processed foods among a representative sample of 388 Japanese individuals. Two distinct classification approaches are employed: dish-level, where composite foods are evaluated as single units, and food-level, which involves the disaggregation of such dishes into their constituent ingredients.

A cursory glance reveals that cereals and starchy foods constitute the most significant source of energy intake across both classifications, though notable shifts are observed in other categories depending on the analytical method adopted. The discrepancies underscore the influence of classification methodology on nutritional data interpretation.

In the dish-level classification, cereals and starchy foods dominate with 27.8%, followed by meat, fish, and eggs at 16.2%, and confectionery at 12.8%. Alcoholic beverages and fats and oils also contribute markedly, at 9.7% and 10.6% respectively. Conversely, the least energy contributions come from non-alcoholic beverages (2.2%), dairy products (3.7%), and prepared foods (4.4%).

The food-level classification, by contrast, reveals a substantial increase in the energy share of confectionery, which rises to 18.7%, and alcoholic beverages, which jump to 14.3%. The share of meat, fish, and eggs declines significantly to 9.0%, likely due to the ingredient-level breakdown of composite dishes. Other minor shifts include a drop in fats and oils to 9.9% and a marginal decrease in vegetables, fruits, and pulses to 2.5%.

In summary, while cereals and starchy foods remain the primary contributors to energy intake from highly processed foods regardless of classification, the redistribution of proportions across other food groups following disaggregation highlights the nuanced complexities inherent in dietary data interpretation.

**PART 2**

**- Task achievement: (10 points)**

 + ALL requirements of the task are sufficiently addressed.

+ Ideas are adequately supported and elaborated with relevant and reliable explanations, examples, evidence, personal experience, etc.

**- Organization: (10 points)**

+ Ideas are well organized and presented with coherence, cohesion, and unity.

+ The essay is well-structured:

+ Introduction is presented with clear thesis statement.

+ Body paragraphs are written with unity, coherence, and cohesion. Each body paragraph must have a topic sentence and supporting details and examples when necessary.

+ Conclusion summarises the main points and personal opinions (prediction, recommendation, consideration,…) on the issue.

**- Language use: (10 points)**

+ Demonstration of a variety of topic-related vocabulary

+ Excellent use and control of grammatical structures

+ Correct punctuation and no spelling mistakes

+ Legible handwriting

SAMPLE

In an increasingly demanding and fast-paced world, the pursuit of peace of mind has become a topic of profound significance. While some individuals equate success with financial stability and career advancement, others argue that inner tranquility surpasses all material achievements in value. This essay will explore both perspectives before presenting a substantiated personal stance.

Proponents of material success contend that financial security is a prerequisite for a peaceful life. In a society driven by consumption and economic competition, income determines access to healthcare, education, and even leisure. A successful career often brings not only wealth but also social recognition, which can alleviate anxiety about the future. For many, the lack of money is a source of chronic stress, making it difficult to achieve inner peace without first fulfilling material needs. From this perspective, peace of mind is seen not as a cause, but as a consequence of financial prosperity.

On the other hand, advocates of inner peace argue that mental well-being is independent of external circumstances. Numerous examples, from Buddhist monks to minimalist thinkers, illustrate how one can lead a content and purposeful life without wealth or professional acclaim. In fact, the relentless chase for status and possessions often breeds discontent, anxiety, and burnout. Inner peace, they assert, stems from self-awareness, emotional balance, and a sense of meaning—qualities that no bank account can purchase. Furthermore, peace of mind enables individuals to make wiser decisions, maintain healthier relationships, and cope with life’s inevitable hardships with resilience.

In my opinion, while financial security can ease certain pressures, it should not be mistaken for the ultimate goal. Peace of mind is both the foundation and the culmination of a fulfilling life. Without it, even the most successful individuals may find themselves plagued by dissatisfaction. True well-being arises not from accumulating assets but from cultivating a calm, purposeful, and grateful mindset.

In conclusion, although material success can contribute to comfort and stability, it is peace of mind that grants life its depth and quality. In a world obsessed with achievement, the ability to remain inwardly serene is perhaps the highest success of all.

**TRANSCRIPT**

**PART 1**

<https://www.youtube.com/watch?v=p-N3-Q8WyfU>

Speaker 1: And Sophia, you've not just been looking at how our vocabulary has changed, but it's the way we say things as well. And this notion of uptalk, particularly sort of rising at the end of a sentence. I'm from New Zealand. I mean, we all speak like that at home and in the antipodes. I also wondered if it's not just social media that's influencing the way that we speak. It's maybe years of everyone watching neighbors.

Speaker 2: We have always used uptalk. I mean, it's most characteristic, I think, for asking questions. I just did it there, asking questions. That would be uptalk with this rising intonation at the end of the phrase. When it comes to social media and using uptalk, something that I've written about in the past is how asking, is there a Tik Tok voice or accent? Is there a way that I speak that I adopt when I'm making a Tik Tok video? The idea is that when we make video content, we use a lot of rising intonation, possibly to relate to our audience.

Speaker 1: It's more engaging.

Speaker 2: It's more engaging. Another theory is that I'm keeping you listening. The rising intonation suggests there's more to come.

Speaker 1: You're hooking people.

Speaker 2: Hooking people in. When it comes to social media video, if I can complete a video retaining someone's attention, it's more likely to perform better on the algorithm. So actually what's possibly happening is creators are furthering linguistic innovation based on algorithmic direction, which is fascinating.

Speaker 1: Neil, speaking of intonation, what about the change to pronunciation? Are we seeing some British words change and they're now said in a much more American way?

Speaker 3: There used to be a much greater distinction between the way Americans would say or pronounce a word and the way that British people would. And now that's more fluid and we're not able to say with such certainty that that's American English and that's British English. So let's have an example of the word which I say as schedule. Younger members of BBC Learning English say schedule and schedule is what we used to say was the American pronunciation.

Speaker 1: What about grammar then, Neil? Are we seeing those changes? And they must surely be slower.

Speaker 3: Grammar really does change slowly. You can look at, for example, you could pick up a copy of Frankenstein, which was written 200 years ago and absolutely understand it completely. There's nothing in the grammatical structures which will confuse you. But something that has happened and has happened more quickly recently because probably of social media is something known as verbing, which is turning nouns into verbs. And the most obvious.

Speaker 1: I love doing this.

Speaker 3: The most obvious one is Google to Google. Uh, or to friend.

Speaker 1: We are podcasting.

Speaker 3: And so that is actually a grammatical change which we have seen um accelerate recently.

Speaker 1: Sophia, is language change picking up momentum? Is it getting faster?

Speaker 2: As media will change, linguistic innovation will change. So it's already so hyper fast and powerful in the current vertical video climate that we're in and the amount of language we are exposed to. It's hard to imagine how that can get even sort of more hyperactive, but I I'm quite confident it will.

Speaker 1: And Neil, in terms of your job, do you love all these changes to the language or are you slightly horrified sometimes?

Speaker 3: I'm not horrified in the slightest. And I know lots of people are and they think that it's wrong and that mistakes are being made. But language is dynamic. No one here is sitting talking like Chaucer. You know, language changes and I think it's exciting and we need to embrace it. And at BBC Learning English, we try to describe language as it is rather than prescribe the way it ought to be.

Speaker 1: What about the future of language? If we could look ahead, Sophia, what do you think's going to happen in the next 20, 30 years?

Speaker 2: I think a lot of the future is predictable in that when I am in my 40s, 50s, 60s, I'm probably going to start thinking, why are my kids or the kids around me saying all these bizarre words that I've sort of never heard of.

Speaker 1: And what do you think, Neil? Do you think the other thing that might happen is that we'll see some language sadly die out, some languages because of the prevalence of English, the prevalence of what we what what people are consuming online is going to really influence what's spoken in the home.

Speaker 3: Yeah, unfortunately that is a reality. I mean, languages are dying all the time. Um, and one of the features of language in the social media age is homogenization.

Speaker 2: Linguicide is such an urgent and pressing issue because it's believed by the end of the century that we are in, half of the world's languages will disappear.

Speaker 1: I have a positive story to tell from New Zealand about that, about how much more Maori is spoken in New Zealand than when I was young. And when we talk about how quickly things change, when I go back home, I can't believe how much more Maori is just spoken in everyday life among people just casually. It's amazing.

**PART 2**

<https://www.youtube.com/watch?v=1hIq_FSdyyE>

The history of medicine began years ago with the healing and treatments of disease. It has always been a mainstay of human life. Since the earliest humans, medicine has constantly evolved, shaped by technological breakthroughs, scientific discoveries, and cultural changes. We can preemptorily state that humanity has only been able to evolve thanks to medicine and its ability to combat disease and illness. The earliest documents on medical practices are more than 4,000 years old, with evidence found at archaeological sites in Egypt and Mesopotamia. Aspiring physicians used plants, minerals, and other materials to treat illness and injury, often using religious rituals in their treatments. Among the earliest known medical texts are the Edwin Smith Papyrus from the 17th century BC, and the Ebers Papyrus from the 16th century BC, describing multiple diseases in their treatments. The texts were found in excavations in ancient Egypt, and named after the researchers. Edwin Smith was an American antiquities dealer and collector, George Ebers, a German Egyptologist and novelist. Ancient Greece had a lasting impact on the history of medicine. A Greek named Hippocrates, often known as the father of medicine, was born on the island of Cos in 460 BC. He believed that diseases had natural causes, and that physicians should understand environmental conditions and lifestyles as factors. The medical writings of Hippocrates, known as the Corpus Hippocraticum, are the bedrock of modern medicine. Among them is the world's famous Hippocratic oath, a solemn oath that physicians traditionally take when they complete their higher medical training. This includes several promises, among them the protection of human life, the preservation of medical confidentiality, the intent to never intentionally harm patients, and a commitment to education and continuous improvement in their medical practice. Ancient Rome also had a considerable influence on the history of medicine. Galen, a Greek physician who lived in Rome, was an advocate of observation and experimentation. He performed dissections on animals and established an advanced understanding of human anatomy. His works profoundly influenced medical practice in the Western and Eastern world. In the Middle Ages, medicine was often practiced by monks and priests, who commonly treated illnesses with prayer and religious rituals. But developments in these areas, such as pharmacology, surgery, and anatomy kept occurring. The Persian physician Avicenna wrote the Canon of Medicine in the 11th century, one of the most influential medical texts in history. Medical knowledge from the Middle Ages was also preserved and developed by Islamic scholars, who translated ancient texts and carried out research in fields such as plastic surgery and ophthalmology. The Renaissance period renewed interest in medicine and science. Physicians, such as Andreas Vesalius, performed dissections on humans, finding accurate information on the human body's anatomy. William Harvey discovered blood circulation in 1628. There were also significant breakthroughs in pharmacology, discovering new drugs and chemicals to treat diseases. The 19th century was a period of great leaps forward in medicine, with many new treatments and technologies. In 1847, Ignaz Semmelweis discovered that hand washing could prevent disease transmission, a significant breakthrough in preventing hospital infections. Louis Pasteur discovered the existence of microbes and the relationship between these organisms and pathologies, helping to lay the foundation for microbiology and immunology. Anesthesia also made it possible to perform more complex surgeries and significantly reduce the associated pain and suffering. In the 20th century, medicine underwent major transformations in many areas, including genetics, pharmacology, surgery, and medical technology. Alexander Fleming's discovery of penicillin in 1928 began a new era in the fight against infectious diseases, saving millions of lives. Imaging techniques, such as computerized tomography and magnetic resonance imaging, made it possible to see inside the human body, helping to diagnose diseases and injuries. Gene therapy, with modification to individual's DNA to treat genetic diseases, also began to be developed in the late 20th century. In the 21st century, medicine has continued to evolve rapidly, with strides in such areas such as nanotechnology, artificial intelligence, and biotechnology. New treatments for diseases, such as cancer and autoimmune diseases are being developed. Personalized medicine, which considers individual differences in genes, environment, and lifestyle, is increasingly common. The recent global health crisis in 2020 stressed the ongoing importance of medical research and innovation. Scientists and doctors have worked tirelessly to develop effective vaccines and treatments for disease. The history of medicine is made up of discoveries, innovations, and meaningful progress that has shaped the way we treat and prevent disease. From the earliest methods in ancient times, to the technological and medical breakthroughs of today, medicine has constantly evolved, saving and improving the quality of life for millions of people around the world.

**PART 3**

<https://www.youtube.com/watch?v=ELBrybrYrGo>

Script

So if you ever go diving on the reef, you'll notice that there's so many different varieties and shapes, but colors of corals. It's an incredibly beautiful ecosystem down there. And a lot of that is thanks to what's inside the corals themselves. So inside each of the bodies of the coral are these special type of algae called Zuanthale. They have a symbiotic relationship with the coral in that they get a safe space to live, but the algae is a plant and it has photosynthetic cells inside of it. And so they're able to convert the sun's energy into sugars that they can then feed the corals. These algae are incredibly colorful, and that's what gives corals that beautiful color.

What happens when conditions get really adverse, like there's a mass increase in water temperatures, those who are in, they will actually leave the coral cells or the coral bodies. And so that then causes the loss of color and a bleaching impact.

Adult corals can pick up algae again, and a bleached coral is not a dead coral. But when we continue the conditions and when there's a continuation of those warm water conditions that are really uncomfortable for those algae, they will not return to the coral. That means that over time, the coral will lose most of their nutrition that comes from that algae that they've become dependent on through this symbiotic relationship. So over time, a bleached coral will eventually die if it continues to have these warmer ocean impact events. And that's what we see with a mass bleaching event when we have just continued warmer temperatures. A bleached coral can recover if we're able to arrest those warmer ocean temperatures and get conditions back to a comfortable space for both the coral and the algae that live inside them.

There's a whole ecosystem, one of the most beautiful complex ecosystems on the planet. Reefs take up just 1% of the earth's surface, but they support a quarter of all marine life. When we think about coral reefs under threat, we're looking at a quarter of all marine life also being under threat. So places like the Great Barrier Reef, yes, they're an icon, they have incredible economic value, but just the biodiversity value as well of supporting life for thousands and thousands of marine species. That's what's at stake. We want the reef to be here as healthy and as strong and as fit and as full of marine life as it possibly can be. We know that water temperatures are accelerating at an incredibly fast rate. And so corals cannot adapt fast enough to that change. So that's why it's important that while we also restore the reef, we restore and help the reef adapt. We restore with more resilient corals that can face off against what is coming in terms of these slow increase and compounding effects of ocean water temperature increase.

**PART 4**

Script

Speaker 1: that from a long term.

Speaker 1: With me today is the BBC's population correspondent, Stephanie Hegarty. Hi, Stephanie.

Speaker 2: Hi. Thanks for having me.

Speaker 1: You've been studying population trends for a long time now. Have you ever seen a shift like this?

Speaker 2: The interesting thing about population is we focus on it when something seems dramatic, but actually the changes are quite incremental.

Speaker 2: We have been seeing this serious acceleration in growth, um, and infertility rates and everything. And now we're just that's starting to slow down. So we are in a time of great change. But it's interesting because we report these things and this is our business, right? News, we report things when there there is change. But what I've always found fascinating about fertility is and and population is it it is kind of slow. You know, it is it is incremental in the grand scheme of things.

Speaker 1: But we are talking about a decline in fertility rates in this episode, but actually, the global population itself is growing and it's growing quickly. So can you put that into context?

Speaker 2: So I was thinking about this the other day and I I think one of the maybe the easiest ways to describe it is my family, right? My mom had four kids and each of us has had fewer than that. My brothers had three, I have one, my other brother has one, my sister has none. So each of us have had fewer children than my mom, but there's still five grandchildren in our family. So our family is growing and the dynamics on a global level are similar. But there's also some another dynamic that's going on, which is in certain countries, you have the dynamic like my family. And then in others, fertility rates aren't declining as dramatically. So there's a handful of countries where the population is still growing quite rapidly.

Speaker 1: Is this Africa and Asia?

Speaker 2: Most of them are in Africa. Yeah, and big countries like Nigeria, Ethiopia, um, Egypt, but then also Pakistan, the Philippines. Uh, and they're going to contribute hugely to the growth in global population. But they are the minority. So by 2050, I think three quarters of the countries in the world will have a declining population and then some will still be growing. Nigeria is one of the fastest growing countries in the world, but its fertility rate, so the number of children each woman is having, is declining. So it was six in the 50s, it's around five now. So all over the world, this generation is having fewer children than their than our parents.

Speaker 1: So can we say that by the end of the century, is this fair that the overwhelming majority of countries actually are not going to be able to sustain their populations?

Speaker 2: Absolutely. And the global population by the end of this century will also be declining. Between 2060 and 2080, it's predicted that the global population will top out at about nine or 10 billion and start declining then.

Speaker 1: And then more specifically, Stephanie, what do we know about fertility rates in areas where the population is growing fastest?

Speaker 2: So they're still declining, they but just not as fast. So in Europe, you had an average of about four children in the middle of the century, now it's gone down to well below two. And this magic number is 2.1. So if each couple has 2.1 children on average, um, kind of hard to have 0.1 of a child, but then the population will sustain itself. So you need to produce that number to replace your yourselves in the world. And countries that are still on this trajectory of growth, they have a lot more than 2.1.

Speaker 1: So Stephanie, I think everyone knows that it's been a year of elections almost or round 70 we've had in 2024 and surely in most countries one of the biggest issues has been the cost of living and that is surely a factor when people are making decisions around whether or not to have a child.

Speaker 2: Absolutely. I think it's it's the factor when it comes to um, especially in places where populations are is already declining, it comes up again and again. I've spoken to countless people in um, Japan or South Korea and they talk about things like housing, the cost of education. In the UK now it costs about 200,000 over a child's lifetime. That's the cost of.

Speaker 1: I was horrified when I saw that.

Speaker 2: And it's incredible that anyone can can afford that. Research came out earlier this year that uh it's surveys where they speak to young people, Gen Zs and millennials about their fertility intentions. So they ask, do you intend to have children? If so, how many? The responses were quite shocking. Almost half of the people who've never have had children said they had no plans to and that was profoundly linked to financial insecurity. So where people felt they were financially insecure, where they felt they were less well off than their parents or their parents' generation, they were much more likely not to want a child or to think it was unlikely for them to have a child. And the researchers I spoke to who've been working on these surveys said it's not that surprising in this country where you have uh the age where you get your first mortgage is creeping right up into the late 30s, child care is famously unaffordable and I'm sure um people all around the world will uh will understand uh the the impact that that has in your decision whether or not to have a child. And um housing, we're seeing housing crisis not just here in the UK, but any country that's experiencing mass urbanization, we have this problem with with housing. And in some of the countries that are most profoundly affected,