MESTRADO PROFISSIONAL EM SAÚDE PÚBLICA

Prova de Inglês

Sexta-feira, dia 04 de setembro de 2015
09h00 - 12h00
Q1. According to the subtitle of the article, 
A. the Brazilian health sector has not promptly responded to emerging demands  
B. the Brazilian population is shifting to other countries 
C. the Brazilian health sector has never before collaborated so much internationally 
D. the Brazilian health sector has been overwhelmed by international health problems 

Q2. Which of the following changes in the field of health is specifically mentioned in Paragraph 1? 
A. Reduced infant mortality  
B. New cures for chronic degenerative diseases  
C. Rapid demographic growth  
D. Increased control of communicable diseases 

Q3. According to Paragraph 1, chronic degenerative diseases 
A. need to be treated quickly and are expensive to treat  
B. cannot be treated like cancer or diabetes  
C. have always been the biggest healthcare problem facing the country  
D. are very stressful for the patients who are afflicted by them 

Q4. The word 'those' in Paragraph 2 refers to which of the following? 
A. Brazil's health needs  
B. International collaborations  
C. More developed countries  
D. Transmittable diseases 

Q5. The phrase 'comes to term with' in Paragraph 2 could be replaced by which of the following without significantly altering the meaning?  
A. fails to confront  
B. puts an end to  
C. adapts to  
D. signs international treaties on 

Q6. Which of the following statements is NOT true according to Paragraph 3? 
A. The collaboration between the Fiocruz Foundation and the Pasteur Foundation concentrates on three key issues  
B. The Fiocruz Foundation is modeled on France's Pasteur Foundation  
C. The Fiocruz Foundation is not equipped to tackle issues of an international nature  
D. The Fiocruz Foundation plays a crucial role in ensuring that all Brazilians are vaccinated and in combating HIV/AIDS.
Q7. According to Paragraph 4,
A. epidemic surveillance does not require an international association of health institutes
B. influenza has symptoms similar to Ebola
C. Fiocruz is a branch of the WHO
D. influenza is a disease that necessarily requires international collaboration

Q8. According to Paulo Gadelha in Paragraph 5,
A. innovation is impossible without a network of international co-operation
B. not all of Brazil's unequal population is yet covered by the public health system
C. Fiocruz has only recently forged links with international organizations
D. other countries do not understand Brazil's complex health problems

Q9. According to Paulo Gadelha in Paragraph 6,
A. it is difficult to use information to create innovation
B. Brazil needs to step up its production of scientific knowledge
C. Fiocruz operates more like a public institution than a think-tank
D. technology is not part of Fiocruz's core strategy

Q10. The word 'we' in Paragraph 6 refers to
A. the Brazilian people
B. people in general
C. journalists
D. Fiocruz
Brazil's health sector reaches out to the world

The new demands of a shifting population and strategic planning for future health trends are prompting the Brazilian health sector to embark on an unprecedented wave of international collaboration

The Guardian
http://www.theguardian.com/thereportcompany/2015/may/18/

1. Brazilian health requirements have shifted dramatically over the last half century. Transmittable diseases have been brought under control and life expectancy has risen substantially, but this in itself brings new challenges. Today, the biggest strains on the health system come from chronic degenerative diseases like cancer and diabetes, which require swift, efficient treatment – and greater resources.

2. As Brazil's health needs become more akin to those of the UK and North America, increased international collaboration is being sought to help fight disease. Sao Paulo's Hospital Sirio- Libanes, world-renowned for its cancer treatment, operates a residency exchange with New York's Sloan-Kettering Centre that also plays an important consultancy and second-opinion role as Brazil's health sector comes to terms with its new reality.

3. In a broader sense, the government-run Fiocruz foundation has become a major health thinktank and research centre, fundamental to the national immunisation programme and central to the country's fight against AIDS. Created in the image of France's Pasteur Foundation, it is dedicated to tackling global issues as well as Brazil's own changing disease burden, and the two are creating an international network of laboratories and research exchanges. Focussing on the Amazon, neuroscience and bio-information, it is a potent coupling of two of the world's most important institutions of their kind.

4. Furthermore, diseases like Ebola and influenza inevitably require the kind of multilateral support that Fiocruz is pursuing with the World Health Organisation for the creation of an influenza collaboration centre. The foundation has already been behind the creation of an international association of health institutes to consolidate its work in research, training and epidemic surveillance, underlining its growing global importance in the field.

Q&A: Paulo Gadelha, President of Fiocruz

How important is international collaboration to Fiocruz?

5. Health is an especially complex challenge in Brazil because we have a very large, socially unequal population and universal public health. Fiocruz was born in an international context and since the beginning it has prompted exchanges. We have always worked for the country, but we have always been part of the international context, in both science and health. It is impossible to think about scientific and technological development, health and the production base to support it without working in conjunction with other countries. No one ever considers innovating in isolation.

How is Fiocruz helping Brazil advance in health?

6. The search for excellence in the interface between science, technology and health is at the core of what we do, and at an international level, Fiocruz needs to be associated with what's new in Brazil. Brazil produces a significant level of knowledge today, but we are well aware of how hard it is to convert this knowledge into innovation. Fiocruz behaves like a strategic institution of the Brazilian state, like a think-tank for the health field.
PART 2

Please answer questions 11 to 20 with reference to Text 2. There is one and only one correct answer to each question.

Q11. The words 'unveils' and 'curb' in the title could be replaced by which of the following without significantly altering the meaning?
A. 'reveals' and 'restrain'
B. 'cuts' and 'pave'
C. 'scales back' and 'promote'
D. 'conceals' and 'outlaw'

Q12. Why does the word 'epidemic' appear in inverted commas in the title of the article?
A. To emphasize the importance of the word
B. Because 'epidemic' is a technical word
C. Because the author of the article strongly disagrees with the view that the large number of Caesarean births is a problem in Brazil
D. Because it is quoting a word used by Arthur Chioro

Q13. The phrase 'aimed at stemming' in Paragraph 1 could be replaced by which of the following without significantly altering the meaning?
A. Required to introduce
B. Viewed as establishing
C. Intended to curtail
D. Suggesting an increase in

Q14. The tone of the word 'obsession' in Paragraph 2 is
A. neutral
B. positive
C. negative
D. jocular

Q15. According to Paragraph 3, what will be the penalty in future for health insurance companies that do not promptly provide clients with information on the percentage of Caesareans performed by individual doctors and hospitals?
A. They will be closed down for fifteen days
B. Their CEOs will face jail terms
C. They will be fined heavily
D. No penalty has yet been established

Q16. Which of the following charts best illustrates the percentage of Caesarean births performed in the US and Brazilian public and private hospitals respectively?

A. [Chart A]
B. [Chart B]
C. [Chart C]
D. [Chart D]
Q17. Which of the following statements are true according to Paragraph 6?
A. Three times more women than infants die as a result of Caesarean section
B. 120% of infants born by Caesarean section develop respiratory disorders
C. Caesarean births increase the risk of a woman dying in childbirth threefold
D. Caesarean birth decreases the risk of Sudden Infant Death Syndrome

Q18. Which of the following is NOT mentioned in Paragraph 7 as a reason for Brazilians favoring Caesarean birth?
A. It reduces mothers' discomfort during childbirth
B. It makes it easier for hospitals to schedule deliveries
C. It does less harm to mothers' bodies
D. It reduces the length of time newborns need to spend in hospital

Q19. The term 'buying power' in Paragraph 8 refers to
A. the ability of wealthier mothers to pay for a Caesarean birth
B. the tendency for hospitals to invest in high-tech equipment
C. surrogate motherhood
D. corruption in the Brazilian health service

Q20. When, approximately, are the new rules that are the subject of the article envisaged to come into effect?
A. December 2015
B. July 2016
C. July 2015
D. January 2015.
Brazil unveils new rules to curb country's caesarean 'epidemic'

Health insurance companies in Brazil will now be required to provide clients with information about percentage of caesarean births performed in the country

Associated Press in Rio de Janeiro Wednesday 7 January 2015

1. Brazil has unveiled new rules aimed at stemming its “epidemic of caesareans”, and promoting natural births among private healthcare providers.

2. The health minister, Arthur Chioro, called Brazil’s obsession with cesareans, which account for more than eight out of 10 births handled by private health providers, a “public health problem”.

3. Under the requirements announced on Tuesday, health insurance companies will have to provide users with information about the percentage of caesareans performed by individual doctors and hospitals. Failure to provide the statistics in 15 days will result in hefty fines.

4. Currently, 84% of births covered by private health plans are caesareans, compared with 40% of total births in Brazil’s public hospitals, according to the statement. In the United States, just over 32% of all births are caesareans, according to the Centers for Disease Control.

5. “The epidemic of caesareans we see today in this country is unacceptable and there is no other way to treat it than as a public health problem.” The statement quoted Chioro as saying, “What's normal are normal births.”

6. The statement said caesareans multiply the risk of respiratory illnesses by 120% among infants, and triple the risk of maternal mortality during childbirth.

7. Still, despite the risks, caesareans are widely seen in Brazil’s body-conscious culture as easier, more comfortable and less detrimental to mothers’ bodies. Physicians often favour them for their predictability and ease of scheduling.

8. Chioro denounced that logic, saying, “We cannot accept that caesareans be performed as a result of buying power or convenience.”

9. The new rules, which take force in six months, will affect the nearly 24 million Brazilian women who have private health plans that cover obstetric services.
Nome do candidato: _________________________________________

RG do candidato: ____________________________________________

CPF do candidato: ___________________________________________

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