

Please check the examination details below before entering your candidate information

Candidate surname

Other names

Centre Number

Candidate Number

Pearson Edexcel International GCSE (9–1)

Monday 5 June 2023

Morning (Time: 2 hours 15 minutes)

Paper
reference

4EA1/01

English Language A

PAPER 1: Non-fiction Texts and Transactional Writing

You must have:

Source Booklet (enclosed)

Total Marks

Instructions

- Use **black** ink or ball-point pen.
- **Fill in the boxes** at the top of this page with your name, centre number and candidate number.
- Answer **ALL** questions in Section A and **ONE** question from Section B.
- Answer the questions in the spaces provided
– *there may be more space than you need.*

Information

- The total mark for this paper is 90.
- The marks for **each** question are shown in brackets
– *use this as a guide as to how much time to spend on each question.*
- Quality of written communication, including vocabulary, spelling, punctuation and grammar, will be taken into account in your response to Section B.
- Copies of the *Pearson Edexcel International GCSE English Anthology* may **not** be brought into the examination.
- Dictionaries may **not** be used in this examination.

Advice

- Read each question carefully before you start to answer it.
- Check your answers if you have time at the end.
- You are reminded of the importance of clear English and careful presentation in your answers.

Turn over ►

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SECTION A

Reading

Answer ALL questions in this section.

You should spend about 1 hour and 30 minutes on this section.

The following questions are based on Text One and Text Two in the Source Booklet.

Text One: *War Doctor*

- 1** From lines 3–5, select **two** words or phrases that explain why David Nott works in war zones.

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(Total for Question 1 = 2 marks)

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Text Two: From *A Passage to Africa*

Remind yourself of the extract from *A Passage to Africa* (Text Two in the Source Booklet).

4 How does the writer, George Alagiah, use language and structure in **Text Two** to shock the reader?

You should support your answer with close reference to the extract, including **brief** quotations.

(12)

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(Total for Question 4 = 12 marks)



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(Total for Question 5 = 22 marks)

TOTAL FOR SECTION A = 45 MARKS



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SECTION B

Transactional Writing

Answer ONE question in this section.

You should spend about 45 minutes on your chosen question.

Begin your answer on page 15.

EITHER

6 'By helping others, we can also help ourselves and our communities.'

Write a guide for young people suggesting ways in which they might help other people.

Your guide may include:

- suggestions as to who might be helped and how
- ways in which helping others can help us and our communities
- any other points you wish to make.

Your response will be marked for the accurate and appropriate use of vocabulary, spelling, punctuation and grammar.

(Total for Question 6 = 45 marks)

OR

7 A magazine is inviting readers to send in an article about the people, places or things that they will never forget.

Write the article that you would submit to the magazine.

Your article may include:

- a description of the people, places or things that you will never forget
- an explanation of why these are so memorable
- any other points you wish to make.

Your response will be marked for the accurate and appropriate use of vocabulary, spelling, punctuation and grammar.

(Total for Question 7 = 45 marks)

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Indicate which question you are answering by marking a cross . If you change your mind, put a line through the box and then indicate your new question with a cross .

Chosen question number: **Question 6** **Question 7**

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TOTAL FOR SECTION B = 45 MARKS
TOTAL FOR PAPER = 90 MARKS



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English Language A

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Do not return this Booklet with the question paper.

Turn over ►

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SECTION A

READING

Read the following extracts carefully and then answer Section A in the Question Paper.

Text One: *War Doctor*

In this extract, the writer, David Nott, describes his experiences as a doctor in Gaza during a time of war.



I have travelled the world in search of trouble. It is a kind of addiction, a pull I find hard to resist.

It stems partly from the desire to use my knowledge as a surgeon to help people and partly from the thrill of just being in those terrible places, of living in a zone where most people have neither been nor want to go.

5

In July 2014, the Israel-Gaza war began. It was a dire situation for the civilians on both sides. I wanted to be immersed in what was going on. A week after the war started, my mobile rang. It was the International Committee of the Red Cross: would I go to Gaza City? It was a no-brainer. That same day, I was on a plane to Tel Aviv.

I was embedded in the Shifa hospital in Gaza City, and quickly got down to work. It was pure, hardcore war-trauma surgery, mostly dealing with the effects of bomb-blast injuries. There was a mass-casualty event most days, and it became quite normal to receive something like 60 or 70 patients.

10

One night I was woken at about one in the morning when my bed bounced off the floor. There had been an enormous explosion only metres away. The hospital the next morning was chaos.

15

As I walked around assessing the injuries, I came across a girl who looked about seven years old. She was lying on her own in the corner. She looked grey, and, to be honest, I thought she was dead. I checked her vital signs: her airway was clear but her breathing



was very shallow. She had a wound to her left arm, which was bandaged, but that wasn't all: her small bowel was hanging outside her body. This little girl was dying, and needed to go to theatre immediately. 20

The Red Cross anaesthetist was an excellent Italian fellow called Mauro Torre. He and I pushed the girl into the operating theatre ourselves and got her ready. I watched her being put to sleep and then went to scrub up. 25

Suddenly, the door of the operating theatre flew open. It was the hospital security manager.

'We've got intel that says the hospital's going to be attacked by shelling in five minutes. Everyone out.'

Everybody else in the room began making a beeline for the door, joining the rest of the staff heading out of the hospital as fast as they could. 30

By this time, the little girl was asleep, and on the ventilator. She was a pitiful sight. The time she had left to live could be counted in minutes, not hours, whether there was an airstrike or not.

Lots of things went through my mind. The most burning thought was that I could not leave this little girl to die on her own. She was an innocent child and did not deserve such a fate. I had thought I might die during the shell attack on the safe house the previous evening. But maybe *this* was the moment it ended. And if it was, did I need to save myself? The answer, of course, was no. 35

I was on my own in the world, with no parents, no siblings, no wife, no children. I made a conscious decision to stay. 40

I turned to Mauro and said, 'You can go, you don't need to stay.'

'No, David, I will stay with you.'

Our eyes locked. It was a look that conveyed so much: part fear, part trepidation; a mixture of regret, respect and farewell. 45

He, too, was a veteran of many missions, also unmarried with no dependants. I suppose we had both been thinking the same thing.

So we stayed with the little girl, waiting for the bomb to drop or the missile to strike. I calmly prepared the girl's abdomen with iodine, picked up the green drapes and clipped them into position. There was no rush; we took our time. 50

The familiar process took my mind off the situation we were in, and by the time I'd removed her spleen Mauro told me twenty minutes had passed. Still no attack. There was nothing to do but carry on. We completed the operation, repairing the holes in her small bowel, and making her abdomen look normal again. I then turned my attention to her left arm. 55

Two hours later, the theatre was still deserted. We decided to wake her up. As we were doing this, people started to drift back in, amazed to see us still there. Clearly, there was to be no attack.

I am not sure where the information had come from but I was told that it was a credible source and that's why everybody had panicked and left. I only knew that our little girl was alive. 60



I went to see her every day after that, and got to know her family well. Her name is Aysha and the photograph I have of me standing by her hospital bed, both of us smiling, says it all.

Perhaps it had been irresponsible of Mauro and me to stay, but I felt in that moment that the girl's welfare took priority. It wasn't a logical decision, it was based purely on emotion – compassion for her, and anger at the forces of war ranged against her. I was so sick of seeing badly injured children that I could not bear to see another one and stand idly by. Staying with her was a pointless act of defiance against the warmongers, but it would have been impossible to do otherwise. I was prepared to die, and I would rather have died than lived with myself knowing I'd left her alone.

65

70



Text Two: From A Passage to Africa

In this extract, the writer, George Alagiah, describes his thoughts about what he witnessed as a television reporter in war-torn Somalia.

I saw a thousand hungry, lean, scared and betrayed faces as I criss-crossed Somalia between the end of 1991 and December 1992, but there is one I will never forget.

I was in a little hamlet just outside Gufgaduud, a village in the back of beyond, a place the aid agencies had yet to reach. In my notebook I had jotted down instructions on how to get there. 'Take the Badale Road for a few kilometres till the end of the tarmac, turn right on to a dirt track, stay on it for about forty-five minutes — Gufgaduud. Go another fifteen minutes approx. — like a ghost village.' ...

In the ghoulish manner of journalists on the hunt for the most striking pictures, my cameraman ... and I tramped from one hut to another. What might have appalled us when we'd started our trip just a few days before no longer impressed us much. The search for the shocking is like the craving for a drug: you require heavier and more frequent doses the longer you're at it. Pictures that stun the editors one day are written off as the same old stuff the next. This sounds callous, but it is just a fact of life. It's how we collect and compile the images that so move people in the comfort of their sitting rooms back home.

There was Amina Abdirahman, who had gone out that morning in search of wild, edible roots, leaving her two young girls lying on the dirt floor of their hut. They had been sick for days, and were reaching the final, enervating stages of terminal hunger. Habiba was ten years old and her sister, Ayaan, was nine. By the time Amina returned, she had only one daughter. Habiba had died. No rage, no whimpering, just a passing away — that simple, frictionless, motionless deliverance from a state of half-life to death itself. It was, as I said at the time in my dispatch, a vision of 'famine away from the headlines, a famine of quiet suffering and lonely death'.

There was the old woman who lay in her hut, abandoned by relations who were too weak to carry her on their journey to find food. It was the smell that drew me to her doorway: the smell of decaying flesh. Where her shinbone should have been there was a festering wound the size of my hand. She'd been shot in the leg as the retreating army of the deposed dictator ... took revenge on whoever it found in its way. The shattered leg had fused into the gentle V-shape of a boomerang. It was rotting; she was rotting. You could see it in her sick, yellow eyes and smell it in the putrid air she recycled with every struggling breath she took.

And then there was the face I will never forget.

My reaction to everyone else I met that day was a mixture of pity and revulsion¹. Yes, revulsion. The degeneration of the human body, sucked of its natural vitality by the twin evils of hunger and disease, is a disgusting thing. We never say so in our TV reports. It's a taboo that has yet to be breached. To be in a feeding centre is to hear and smell the excretion of fluids by people who are beyond controlling their bodily functions. To be in a feeding centre is surreptitiously² to wipe your hands on the back of your trousers after you've held the clammy palm of a mother who has just cleaned vomit from her child's mouth.

There's pity, too, because even in this state of utter despair they aspire to a dignity that is almost impossible to achieve. An old woman will cover her shrivelled body with a soiled cloth as your gaze turns towards her. Or the old and dying man who keeps his hoe next to the mat with which, one day soon, they will shroud his corpse, as if he means to go out and till the soil once all this is over.

I saw that face for only a few seconds, a fleeting meeting of eyes before the face turned away, as its owner retreated into the darkness of another hut. In those brief moments there had been a smile, not from me, but from the face. It was not a smile of greeting, it was not a smile of joy — how could it be? — but it was a smile nonetheless. It touched me in a way I could not explain. It moved me in a way that went beyond pity or revulsion. 45

What was it about that smile? I had to find out. I urged my translator to ask the man why he had smiled. He came back with an answer. 'It's just that he was embarrassed to be found in this condition,' the translator explained. And then it clicked. That's what the smile had been about. It was the feeble smile that goes with apology, the kind of smile you might give if you felt you had done something wrong. 50

Normally inured³ to stories of suffering, accustomed to the evidence of deprivation, I was unsettled by this one smile in a way I had never been before. There is an unwritten code between the journalist and his subjects in these situations. The journalist observes, the subject is observed. The journalist is active, the subject is passive. But this smile had turned the tables on that tacit agreement. Without uttering a single word, the man had posed a question that cut to the heart of the relationship between me and him, between us and them, between the rich world and the poor world. If he was embarrassed to be found weakened by hunger and ground down by conflict, how should I feel to be standing there so strong and confident? 55 60

I resolved there and then that I would write the story of Gufgaduud with all the power and purpose I could muster. It seemed at the time, and still does, the only adequate answer a reporter can give to the man's question. 65

I have one regret about that brief encounter in Gufgaduud. Having searched through my notes and studied the dispatch that the BBC broadcast, I see that I never found out what the man's name was. Yet meeting him was a seminal moment in the gradual collection of experiences we call context. Facts and figures are the easy part of journalism. Knowing where they sit in the great scheme of things is much harder. So, my nameless friend, if you are still alive, I owe you one. 70

¹ *revulsion*: disgust

² *surreptitiously*: secretly

³ *inured*: hardened



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Source Information:

Text One adapted from *War Doctor*, David Nott, Picador.

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Text Two adapted from *A Passage to Africa*, George Alagiah. Reproduced by permission of Little, Brown Book Group Limited and the author c/o The Hanbury Agency Ltd. All Rights Reserved.

