EEP 260: Study Guide for Exam II-2010


Source of Questions: Questions will be based on the readings/study questions and lectures.

Structure of the Exam
1. Multiple Choice (48%)
   Sixteen questions from each topic (1 point for each question), drawn primarily from the readings (study questions), but also from the lectures.

2. Identify Countries in Latin America/Caribbean on a Blank Map (5%)
   Study a map of Central and South America, so you know the location of Argentina, Bolivia, Brazil, Chile, Colombia, Costa Rica, Ecuador, Guatemala, Honduras, Nicaragua, Paraguay, Peru, Uruguay, and Venezuela. I will select 5 of these countries and ask you to identify them on a map.

3. Short Answer (18%)
   You must answer 6 short-answer questions related to material covered under each of the 3 topics covered since the last exam (total of 18 questions). For each topic, you will have a choice of answering 6 of 9 questions. Each question/answer will be worth 1 point. The short answer questions will be drawn from the key words/concepts listed below:

   “Can the Population Explosion be Controlled? ”
   what different (population) scenarios assume, rise of shortgevity, replacement fertility level, zero population growth, population momentum, 3 key determinants of population growth, total fertility rate, demographic transition model, why death rate fell in DCs/LDCs, cause of the population explosion, a LDCs where the TFR has declined greatly since 1965, year the world population growth rate peaked, two stories of population growth, population myth, population implosion, doubling time, population growth paradox, 5 countries that account for 48% of the world’s population, region whose population share will greatly increase/decrease by 2050, why the shape of the population pyramid differ between DCs & LDCs, consequences of age distribution for LDCs/ DCs, where most of the world’s population growth will occur in 21st century, growing problems (3 examples) common to all LDC’s mega-cities, what Malthus didn’t foresee, current view on the impact of population growth, why DCs have a greater impact on the environment than LDCs, direct/indirect determinants (2 examples of each) of the TFR, why (3 reasons) fertility rates are high in some LDCs, why (2 examples) development reduces fertility, how governments/NGOs are promoting family planning (3 examples), new evidence of declining TFRs, why there’s a great unmet demand (for family planning), what factors (2 examples) has contributed to this success (i.e., declining TFR), why development = the best contraceptive

   “How Can LDCs Improve Health & Nutrition? ”
   key indicators (3 examples) of global health trends, national & international efforts (2 examples) that have contributed to the steady improvement in life expectancy, regions with the highest/lowest life expectancy, what (2 factors) the huge life expectancy differences between the least/most developed countries is largely due to, regions where infant mortality has declined, child mortality rate in high vs. low income countries, leading causes (top 3) of child deaths, factor associated with 53% of child deaths, LDC’s share (%) of maternal mortality deaths, contributing factors (2 examples) to maternal mortality in LDCs, leading cause (top 3) of death in poor/richest countries, gobsesity, examples (3) of health successes (diseases eradicated or greatly reduced), interrelated mix of contributing factors (2 examples) responsible for the reemergence of infectious diseases, an epidemic vs. a pandemic, an example of a water/food-
borne, air-borne, and a vector-borne disease, biggest danger to you (your health) if you visit a developing country, region with the most malaria deaths, who malaria mostly affects, contributing causes (3 examples) of the resurgence of malaria, ways (2 examples) to prevent/treat malaria, countries (top 2) with most HIV cases, groups (2 examples) in Africa (shifts in cases) increasingly affected by HIV/AIDS, impacts (3 examples of the direct or indirect) of HIV/AIDS, factors (3 examples) contributing to the rapid spread of HIV/AIDS in Africa, prevention & treatment of HIV/AIDS (3 examples of initiatives), successful initiative (2 examples) to prevent the spread of HIV/AIDS via behavioral modification, initiatives (2 examples) to increase access to (HIV/AIDS) treatment, diseases (2 examples) that account for 50% of childhood deaths, ways (2 examples) to prevent/treat childhood diseases, ways (2 examples) to prevent maternal mortality, ways (2 examples) to prevent/treat TB, what the WHO treaty for tobacco control does, what an NGO did to reduce deaths from landmines, leading cause of death in Latin America among people 15-45 years, ways (2 examples) to prevent water/food-borne diseases, what making the home as the 1st hospital emphasizes, national/NGO-bases/local initiatives (2 examples) to improve health, why health threats can't be solved solely by health interventions


basic human rights (3 examples) identified as long term goals in the UDHR, a strength/weakness of the UDHR, organizations/groups (3 examples) that monitor human rights abuses, what international NGOs (grassroots organizations) do to promote human rights, human rights-focus of US foreign policy in the 1960s vs. today, push vs. pull strategy (for promoting human rights), controversial issues--2 reasons why it's difficult to get agreement on human rights standards, indicators of neglect/discrimination against women (3 examples), concerns raised by human rights advocates (5 examples) that affect women, factors (2 examples) that contribute to a lack of opportunity for women, strategies for meeting the needs of women--3 examples of what local activists/NGOs in LDCs are working to do, disadvantaged groups (3 examples, other than women & children), concerns raised by human rights advocates (3 examples) that affect disadvantaged groups, strategies (2 examples) for meeting the needs of disadvantaged groups, concerns (3 examples) raised by human rights advocates that affect children, factors (3 examples) that contribute to a lack of opportunity for children, strategies (3 examples) that LDCs (can pursue) for meeting the needs of children, challenges facing DCs (2 examples) in increasing access to human rights and opportunity (in developing countries)

4. Essays (30%)

Answer any 2 of the following 3 essay questions. Each essay is worth 15 points. Your answer the question should be no longer than 2 typewritten pages (1.5 line spacing, 12 point font, 1" margins). Begin each essay on a new page. Type your name and seat number at the top of each page. On the next line, type the title of your essay (e.g., “How Can the Population Explosion Be Controlled?”). Each essay has 3 parts. Write each part of your essay as a separate paragraph, using complete sentences. Label each paragraph (a, b, c) and begin the paragraph with a topic sentence, followed by supporting discussion/evidence. You may refer to your lecture notes and study questions to answer the essay questions, but you may not consult with fellow students. You must turn in your essay at the beginning of class on Tuesday (before the exam).

How Can the Population Explosion be Controlled?

a) As Director of the Population Council in a poor LDC, you submitted a report to the President in which you say that during the past 20 year the country’s fertility rate has declined from 6.1 to 2.7--a real success story! When the President read your report, she was very happy, but also confused--since she just received another report from the UN which projected that the country's total population would increase by 30% over the next 10 years! Use concepts discussed in the course to explain why both reports could be correct.
b) Assume that you are in charge of planning a campaign to promote family planning in a poor LDC that has a high fertility rate and a large rural/agricultural population. Discuss 3 strategies that you would implement (e.g., things you would do) as a part of your campaign to reduce the fertility rate.

c) Identify 3 factors/problems/obstacles that might threaten the success of your campaign and discuss why/how each might threaten the success of your proposed campaign.

**How Can Countries Improve Health & Nutrition?**

a) Assume that you are the Minister of Health in a Sub-Saharan African country, where malaria had not been a problem in recent years. However, today a doctor on your staff reports that during the past year the country has experienced a sharp increase in the number of malaria cases. Describe 3 factors that may have contributed to the reemergence of malaria and then discuss 3 actions that the government might take to combat the new malaria threat.

b) Assume that you are in charge of planning a campaign to combat HIV/AIDS in an African country, where HIV/AIDS is a growing problem. Discuss 3 strategies that you would implement (i.e., things you would do) as part of your campaign to slow the spread of HIV/AIDS.

c) Identify 3 factors/problems/obstacles that might threaten the success of your campaign and discuss why/how each might threaten the success of your proposed campaign.

**How Can Access to Human Rights and Opportunity Be Expanded?**

a) Discuss why is it difficult to get universal agreement, especially between developed & developing countries, regarding what all countries should recognize and guarantee as basic human rights. Despite disagreement regarding what should be considered as basic human rights, much progress has been made during the past 50 years. Identify 2 agencies/groups that have helped to promote greater access to human rights & opportunity during the past 50 years and discuss each agency's/group's contribution.

b) Assume that you are a human rights activist in a LDC. Identify 1 custom/law/practice that you believe limits the human rights of women and needs to be changed and discuss 3 strategies that you would implement (i.e., things you would do) as part of your campaign to change this custom/law/practice.

c) Identify 3 factors/problems/obstacles that might threaten the success of your campaign and discuss why/how each might threaten the success of your proposed campaign.