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**KIRIRI WOMENS' UNIVERSITY OF SCIENCE AND TECHNOLOGY**  
**UNIVERSITY EXAMINATIONS 2021**

**COURSE TITLE: COMMUNICATION SKILLS**

**COURSE CODE: CHR 101, CBM 012, CPS 012**

**Time: Two Hours**

**INSTRUCTIONS:**

**There are two sections in this paper. Section A is COMPULSORY and includes Reading and Writing Skills. In Section B, the student is required to answer any TWO questions.**

**SECTION A**

**Part I: READING SKILLS (15 MARKS)**

**Question One: Read the passage below and answer the questions that follow.**

In the late spring of 1949, the local newspaper in San Angelo, Texas, reported that a child had been rushed to the hospital with a fever, aching joints, and mild paralysis of the legs—the telltale signs of polio. A city of 50,000, dotted with oil rigs and cattle ranches, San Angelo was no stranger to the disease. Each year following World War II, polio would arrive like clockwork as summer approached, striking down a child or two before burning itself out. Within days that spring, however, the hospital's ICU was overflowing with children, most in critical condition, and mild concern turned to panic. "Polio Takes Seventh Life," screamed the banner headline. "San Angelo Pastors Appeal for Divine Help in Plague."

Prayer proved insufficient. For the first time in anyone's memory, social distancing took hold. The city council voted to close theaters, bars, bowling alleys, and the municipal swimming pool. Tanker trucks sprayed DDT, singling out the open pit toilets on the "Negro" and "Mexican" side of town. Tourist traffic disappeared. The locals stopped handling money, and some refused to speak on the telephone, believing that germs traveled through the transmission lines. Known for its neighborliness, San Angelo quickly ditched the niceties that it once took for granted. "We got to the point that nobody could comprehend," a pediatrician recalled, "when people would not even shake hands."

Although polio is only a memory in the United States, the current pandemic is stirring up feelings analogous to when this insidiouscrippler terrified a nation. Like the Great Influenza of 1918, polio offers historical perspective. Both the poliovirus and the coronavirus rely on "silent

carriers”—those showing no immediate symptoms—to spread the disease, inciting a fearful sense of uncertainty. Both target specific, if dramatically different, age groups: COVID-19 seems especially lethal for the elderly, polio for the young.

The epidemic lasted until early fall, when the cool winds of October helped extinguish its destructive reach. In 1949, the United States reported about 40,000 polio cases, one for every 3,775 people. San Angelo, meanwhile, reported 420 cases, one for every 124 people. Eighty-four of the city’s children would be permanently paralyzed, and 28 would die. The San Angelo polio outbreak would stack up, percentage-wise, as one of the most destructive ever recorded anywhere in the world.

Numbers aside, its patterns were all too familiar. The epidemic preyed on children, doing its worst damage in the summer months. It appeared to hit the tidy, stable neighborhoods of San Angelo far harder than those marked by poverty and squalor, a reversal of the belief that filth triggers disease. Much remains unknown about polio because the development of two effective vaccines in the 1950s and early ’60s made further research moot. Why did it strike almost exclusively in warm weather? Why did most of its victims appear to come from middle-class surroundings? And why was *epidemic* polio primarily a disease of the 20th century that struck the world’s more developed nations, especially the United States?

There are no certain answers. Some believe that polio, a virus transmitted primarily through oral-fecal contact, not airborne droplets as with the coronavirus, is uniquely suited to warm-weather transmission. Others see polio’s dramatic spread in the 1940s and ’50s in terms of cleanliness. As Americans grew more germ-conscious and sanitary-minded, there was less chance that they would encounter poliovirus very early in life, when the disease is milder and maternal antibodies provide temporary protection.

“Do you want to spend the rest of your life in an iron lung?” Children heard these words when they begged to go swimming or play outside, when they jumped through a puddle or licked a friend’s ice-cream cone, when they refused to take a nap or balked at the daily home polio test (“Chin to chest, touch your toes”). Hitting with full force at the very height of the Baby Boom era, a time of unprecedented prosperity and population growth, polio became the crack in the middle-class picture window, a summer plague dotted with visual reminders: wheelchairs, crutches, leg braces, breathing devices, withered limbs.

The great polio epidemic struck at a time when the federal government wasn’t much involved in the medical problems of the citizenry. The National Institutes of Health had a small budget, the Centers for Disease Control and Prevention was barely up and running, and the Cabinet-level Department of Health, Education, and Welfare wouldn’t be created until 1953. (President Dwight Eisenhower could barely remember its name, calling it “Health, Welfare, and Whatnot.”) Virtually all of the research, publicity, and patient support surrounding polio was accomplished by a single private charity, the March of Dimes, which raised hundreds of millions of dollars with its promise to end the scourge in a single generation.

(a). State two tellable signs of polio according to the writer.  
(2mks)

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(b). In note form, what are the four precautionary measures that the San Angelo community applied to help prevent the spread of polio (4mks)

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( c)Highlight two similarities between polio and the coronavirus pandemic according to the passage. (2mks)

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(d) List two beliefs that existed in the 20<sup>th</sup> century regarding the cause and spread of polio (2mks)

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(e ) Identify three challenges that were faced by the US Federal government when polio struck the country? (3mks)

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(f). What do you think is the motive of the writer in this passage? (2mks)

## **PART II: WRITING SKILLS**

In three paragraphs, write an essay explaining three purposes of communication (15mks)

### **QUESTION TWO (20 MARKS)**

- a. State five ways in which a manager may reduce organizational barriers in an institution (10 Marks)
- b. Examinations are an integral part of learning at any level. Discuss the most effective ways of preparing for an exam (10 Marks)

### **QUESTION THREE (20 MARKS)**

- a) Write an essay of about 250 words on: The Benefits of Using E-Mail as a Means of Communicating in an Organization (12Marks)
- b) Discuss the following channels of communication in an organization (8 Marks)
  - Upward
  - Downward
  - Grapevine
  - Horizontal

### **QUESTION FOUR (20 MARKS)**

- a. There are numerous reasons why students prefer group study to self-study. Discuss five such reasons. (10 Marks)
- b. Libraries are the cornerstone of any learning institution. Explain five functions of a library in a university (10 Marks)

### **QUESTION FIVE (20 MARKS)**

- a. Highlight five reasons why it is advisable for a student to take notes when reading (10 Marks)

b. State five reasons why it is important to carry out audience analysis before communicating

(10 Marks)