

TASK 2: INTERACTION

CANDIDATE A/B

Preparation time: **2 minutes**

Speaking time: **4-5 minutes**

TOPIC: ALCOHOL IN SOCIETY

You and the other candidate are taking part in a **health lifestyle** conference which looks at the role alcohol plays in our society. You are remembering contributions made at a round table discussion. Examine each one and then decide which one of the contributions should lead the paper that will be developed after this conference has taken place.

1. Go through each topic one by one making sure you both speak about it.

React to what your partner says and actively seek out interaction while trying to avoid repetition. Remember:

- set the **context**, try to make it as real as possible
- go **idea by idea**, don't rush through the three of them
- in the real exam **think to yourself**: if I had to sum up this statement in 4/5 words what would it be and how would I entitle it? Look at the tips contained after each statement in the following page
- identify the **principal idea** of each "statement" try to avoid using the word "statement"
- **reaction** (rhetorical questions?)
- **engaging** (opinion questions? Beyond... what do you think?)
- **making it real** (use each others names, giving real life examples)

2. Debate which of the three should be the focus of the paper to emerge from the health congress

- **mark** the second part of the interaction by using discourse strategies we have employed in class
- use this part to **compare**
- decide which one you will go for but you do not have to agree

- **Binge Drinking:** According to the WHO, there is no safe level for drinking alcohol. The HSE refers to weekly low risk alcohol intake as being less than 11 standard drinks for women and 17 for men. It recommends to avoid binge drinking (more than 6 standard drinks in one period) and to have 2-3 alcohol free days per week. A standard drink of wine is a small glass, not a goblet (125ml,ABV 12%). Weight, gender, age, food eaten and medications all impact the effects of alcohol **(Tip: Drinking to excess constantly is the topic and the idea centers on how dangerous it is)**
- **Grey Area:** Grey area drinking is another emerging term for when the criteria for dependence is not met, but there is preoccupation with alcohol and a struggle to give it up. On a spectrum from now and again moderate drinking to full blown dependency, it lies in the middle. People in this category are at risk of physical and mental health problems and can slide easily. The person may quit for periods, like dry January, but then resets. On the surface, it looks like the person is functioning. Our society has normalised problem drinking. We need innovative and creative ways to intervene. There are new perspectives, new understandings and individualised interventions emerging. **(Tip: Risky drinking is the topic and the idea centers on how easy these people can fall)**
- **Sober Curious:** There are more and more people giving up alcohol because they 'want' to, not because they 'have' to. Being "sober curious" is becoming more widespread globally. I find more conversations have arisen with friends about this. People in this category report no "rock bottoms" and not being at the extreme end of the scale, but question their habit. It is an alternative approach that involves reflecting on drinking and moving towards moderation or sobriety. **(Tip: Voluntary abstinence is the topic and the idea centers on how people are opting out of alcohol)**

Remember you must talk about all three texts.

You needn't come to an agreement, but you should support your opinions with arguments.