



CONCOURS ARTS ET MÉTIERS ParisTech - ESTP - POLYTECH

Épreuve de Langue Vivante MP - PC - PSI

Durée 3 h

Si, au cours de l'épreuve, un candidat repère ce qui lui semble être une erreur d'énoncé, d'une part il le signale au chef de salle, d'autre part il le signale sur sa copie et poursuit sa composition en indiquant les raisons des initiatives qu'il est amené à prendre.

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Pour cette épreuve, l'usage des machines (calculatrices, traductrices,...) et de dictionnaires est interdit.

Les différents sujets sous forme d'un fascicule sont présentés de la manière suivante :

Pages 2 à 4	Allemand
Pages 5 à 7	Anglais
Pages 8 à 10	Arabe
Pages 11 à 13	Espagnol
Pages 14 à 16	Italien
Pages 17 à 19	Portugais

Vous rédigerez dans la langue choisie et en 400 mots une synthèse des documents proposés. Vous indiquerez avec précision à la fin de votre synthèse le nombre de mots qu'elle comporte. Un écart de 10% en plus ou en moins sera accepté. Votre synthèse comportera un titre comptabilisé dans le nombre de mots.

Le candidat a obligation de traiter le sujet dans la langue qu'il a choisie au moment de son inscription au concours.

Tournez la page S.V.P.

Il est interdit aux candidats de signer leur composition ou d'y mettre un signe quelconque pouvant indiquer sa provenance.

ANGLAIS

Vous rédigerez en anglais et en 400 mots une synthèse des documents proposés. Vous indiquerez avec précision à la fin de votre synthèse le nombre de mots qu'elle comporte. Un écart de 10% en plus ou en moins sera accepté. Votre synthèse comportera un titre comptabilisé dans le nombre de mots.

DOCUMENT 1

Students abusing drugs to improve performance

One in 12 university students misuse prescription stimulants such as Ritalin to try to get better grades, a study has found.

Researchers said the misuse of pharmaceutical stimulants such as methylphenidate (sold as Ritalin), dexamphetamine (Adderall) and modafinil (Provigil) was especially high among law and medical students. The students took the psychostimulants because they believed they would enhance focus, memory and concentration. The survey on four campuses in 2011-12 drew responses from more than 2,000 students.

The lead researcher, performance psychologist Jason Mazanov of the University of New South Wales [NSW], said it was clear that "Australian university students are using substances to increase their performance at university".

But the findings needed to be interpreted with caution because it was possible the survey attracted a higher proportion of users than non-users, he said. "We need to make a decision about whether it's a problem and whether we want to regulate it," Dr Mazanov said.

"Darren", a final-year law student at the University of Sydney who wished to remain anonymous, recently gave up dealing in Ritalin because he "got a real job".

But he said it was "very easy to get" because many students who had been prescribed Ritalin for ADHD [attention deficit hyperactivity disorder] as children were tired of taking the pills.

"There were enough people who were prescribed them and who were happy to either give them to me or sell them to me very cheaply."

The going rate was about \$2.50 for a 10 milligram tablet, he said. "I mostly did it for fun. I didn't make any money. I got to meet people and go out to parties where I would not otherwise get to be."

There was "zero evidence" that the drugs actually improved users' academic performance or their job prospects, Dr Mazanov said.

"Darren" said it was much more common to use the drugs for play than work. "People say it is a focus drug but it doesn't make you necessarily focus on study," he said. "It is just whatever is in front of you... If the phone rings you are likely to just get sidetracked and go off and do something else."

The University of Queensland's Jayne Lucke said findings on their effectiveness for study were mixed and depended on what drugs and which person.

For example, it appeared "people who start with a lower level of memory ability have a greater improvement than people who are already high-performing", but the improvement was "very small".

Professor Lucke, who has an Australian Research Council grant to delve further into why and how students use pharmaceutical stimulants, said US research suggested typical users were struggling with middling grades - "the fraternity type who is also using lots of alcohol and illicit drugs, someone who wants to party" - rather than high-performing students trying to get to the top of the class.

Despite anecdotal evidence, "there is no hard data" for increasing use of prescription stimulants for study purposes, said Dr Sharlene Kaye, of the National Drug and Alcohol Research Centre at the University of NSW.

Catherine Armitage
Sydney Morning Herald, March 2013

DOCUMENT 2

The competition drug

This is America's college town par excellence. Kids from all over the world flock to Boston to learn. I have a son who is a freshman here. Last autumn, as he entered school, I listened to warnings about the dangers of binge drinking. I think they missed the point.

The real epidemic involves so-called smart drugs, particularly Adderall, an amphetamine prescribed for attention deficit hyperactivity disorder (A.D.H.D.) but so freely available as to be the pill to take whenever academic pressure requires pulling an all-nighter with zero procrastination to get a paper done.

"Just popped an Addie, so I'm good to go" — this sort of pretest attitude has become pervasive. Conversations with several students suggested Adderall was always available, costing from \$2 to \$5 a pill. Adderall has become to college what steroids are to baseball: an illicit performance enhancer for a fiercely competitive environment.

What to say to doctors to get a prescription is now so widely known among students — "It's like my thoughts are channel-surfing and I can't stop" — as to have become a kind of joke.

"If there are no A.D.H.D. symptoms prior to college I have a very hard time writing a prescription," Jill Kasper, a pediatrician, told me. "But if somebody wants a prescription for Adderall, they can find someone to give it to them."

The problem is that Adderall is dangerous, a Class 2 controlled substance like cocaine. While it has helped countless A.D.H.D. sufferers, it can also lead down a dark road of dependency, ever higher doses, fight-or-flight anxiety levels, sleeplessness and depression.

Here, in his own words, is the Adderall story of Steven Roderick, 24, a smart, soft-spoken, lost senior studying health science at the University of Massachusetts Boston:

"I started taking it my first year in college. My performance had always fluctuated a lot. It was hard to pay attention, even in classes I was interested in. I was getting D's. I felt something had to change. Adderall flies around campus. The first time I took it I wrote a paper for an astronomy class that was out of this world. I could not believe it — I was so inspired it made me want to be a doctor!

"I thought — oh my God! — this is the whole problem. You have the ability. You are intelligent. You just don't have the link between intelligence and the capacity to be productive. The pill is the link. I felt literally unstoppable.

"I went to the doctor, said I'd like to give Adderall a try. There were no diagnostic procedures. Doctors give in too easily. I did not think there could be a risk later on. I started on 20 milligrams. I went from D's and F's to straight A's. But your brain adapts, you have to increase the dose, and by 2011 I was up to 45 milligrams.

[...]

"Adderall suddenly turned its back on me. It enabled me to focus, got me to a higher place academically. But then I could no longer rely on it. I was on my own. And although I have less than three credits to go, I may have to withdraw from school because I have not been able to make it to enough classes.

"Look, I am in a culture that constantly justifies the means to an end. So how do we persuade people not to take it? All you hear is how impossible it will be to get a job when you get out, and you are going more and more into debt, and you think without this I won't be top of the class. With other drugs you know you are ruining your life. But Adderall manipulates you into thinking you are doing what is needed to have a great life."

Roger Cohen
The New York Times, March 2013

DOCUMENT 3

Students could be tested for performance-enhancing drugs

Discussions are taking place about how to detect students who are using drugs that give them an advantage by helping them remain alert and focus their mind on work, Prof Barbara Sahakian of Cambridge University said.

Although there is no formal move by the university to introduce drug testing, Prof Sahakian said a screening process could become necessary at exam time if use of performance-boosting drugs becomes a problem.

Modafinil and Ritalin, the attention deficit-hyperactivity disorder (ADHD) drug, are among a group of medicines which are becoming increasingly popular not among those they were designed to treat, but healthy people looking for an extra edge.

Ritalin can improve short-term memory in healthy people as well as those with ADHD, while Modafinil has been shown to improve planning in healthy volunteers, and reduces impulsive behaviour among sleep-deprived people.

One survey of Cambridge students found that 10 per cent admit to using cognitive enhancers to help with their work, while a study of American students put the figure at 16 per cent.

A 2008 report by the Academy of Medical Sciences suggested that just a 10 per cent improvement in memory could raise students one grade band at A-levels or into a different degree class.

Prof Sahakian said: "This is one of the issues that students frequently bring up. They feel it is cheating or it is unfair on them, they feel coercion to use these drugs because other students are using them.

"I know within some of the colleges for instance at Cambridge, people have started to think about whether under certain circumstances which are competitive, we should be looking at this type of [drug testing] procedure... but I don't think it's been discussed enough yet as to what to do about it."

Prof Sahakian was speaking at the launch of a new joint report by the Academy of Medical Sciences, British Academy, Royal Academy of Engineering and Royal Society on how "human enhancement" technology could dramatically change working conditions in Britain.

Within a decade a wide range of cognitive enhancing drugs could be widely available to healthy people, alongside physical technologies such as hypersensitive hearing aids, the report claimed.

Retinal implants or special goggles may soon be used to give soldiers and nightwatchmen enhanced night vision, or even allow them to see ultraviolet light in the same way as animals like bees.

Although the emerging technologies could dramatically expand the range of human capabilities and open up wider job opportunities for the disabled and elderly, widespread use by healthy people could also cause major concern.

Mechanical limbs, for example, could improve disabled people's movement but may also be used by healthy people to improve their strength or endurance.

Employees may find themselves coerced to take performance-enhancing drugs or risk falling behind colleagues, while people who are able to afford the technologies could use their wealth to gain an unfair advantage.

Prof Genevra Richardson, who chaired the report, said: "We're not talking science fiction here. These technologies could influence our ability to learn or perform tasks, they could influence our motivation, they could enable us to work in more extreme conditions or in old age, or they could facilitate our return to work after illness or disability.

"The report recognises that although human enhancement technologies may benefit society in very important ways, their use at work also raises serious ethical, political and economic questions that demand further broad consideration."

Nick Collins
The Daily Telegraph, November 2012